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Good morning, everyone. 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. And apologies for those technical difficulties at the beginning of this session.

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 and Coordination. FEMA's ODIC, Office of Disability Integration Coordination, covers 10 regions, the same 10 regions of the ADA National Network does, with regional disability integration specialists. More information about FEMA can be found at www.fema.gov, and then type ODIC into the FEMA website search. I just entered that in the chat window.

The ADA National Network is made up of centers federally funded to provide training, technical assistance and other information as needed on the Americans with Disabilities Act. You can reach your regional ADA Center by dialing 1-800-949-4232. I put that in the chat window for you.

This webinar series will share issues and promising practices in emergency management inclusive of persons 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 ADA National Network Learning Session 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 www.adapresentations.org/schedule.php. These monthly webinars occur on the second Thursday of the month at 2:30 eastern, 1:30 central, 12:30 mountain and 11:30 pacific. 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 the registration.

For those of you who are new to the webinar series and the software, we will now review quickly some of the features of the webinar platform before we begin our session today.

In this session only the speakers will have audio. Audio for today’s webinar is being broadcast through your computer. Make sure your speakers are turned on or your head phones are plugged in. You can adjust the sound by sliding the sound bar left or right in the Audio & Video panel. If you are having sound quality problems, go through the Audio Wizard accessed by selecting the microphone icon with the red gear on it in the Audio & Video panel. If you do not have sound capabilities on your computer or prefer to listen by phone, you can dial 1-805-309-2350 with the pass code of 555-2153. Please note this is not a toll-free number. You can find the local number that would be toll-free for you at the link shown on the screen.

Please note that the webinars are being recorded -- this webinar is being recorded and can be accessed on the www.adapresentations.org website at the archives.php address at that site within about three days after the conclusion of the session.
You can follow along with the slides on the platform. If you're not using the webinar platform, you can download a copy of today's PowerPoint presentation at [http://adapresentations.org/schedule.php](http://adapresentations.org/schedule.php).

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The white board where these presentation slides are shown can also be resized smaller or larger by choosing from the dropdown menu located above and to the left of the white board. The default is Fit Page. You can also resize and reposition the chat, participant, captioning and Audio & Video panels by detaching and positioning the mouse to position or stretch or shrink. Each panel may be detached using the icon which looks like several lines with a little arrow in it in the upper right-hand corner of each panel.

At the conclusion of today's presentation there will be an opportunity for everyone to ask questions. You may submit your questions using the chat area within the webinar platform. And then the speakers and I will address them at the end of the session. So feel free to submit them as they come to your mind during the presentation. To do that, you can submit the questions in the chat area in the text box. You can also press control M and enter the text in the chat area.

If you're listening by phone and not logged into the webinar, you can ask questions by e-mailing them to adatech@adapacific.org.

If you have any difficulty technically during the webinar, send a private chat message to me by double clicking the Pacific ADA Center in the participant list and that tab will appear in your chat panel, type your comment in the text box and enter. You can also use your keyboards by doing F6, arrow up and down to locate the Pacific ADA Center name and select that to send the message. You
can also e-mail to our address adatech@adapacific.org or you can call us at 1-510-285-5600.

Today's “FEMA Promising Practices: Closing Gaps in Local Emergency Plans and Grassroots Emergency Planning." This presentation will share two practices that brought people together to bring about increased knowledge and action on emergency preparedness. First we will hear about lessons learned from the Massachusetts Active Planning project which brought together local disability community members with their localities to work collaboratively, share resources and expertise about emergency preparedness and response for and with people with disabilities, ultimately enhancing resilience for the whole community. Our speakers will focus on collaborative, inclusive Community Stakeholder Meeting, gap analysis process to address issues of community wide concern such as needs assessment, participation in local emergency planning, risk communication, public preparedness education, and creative use of community resources –

[Muffled audio].

… train for the emergency preparedness and response initiative since 2011. She was project coordinator for active planning for care sheltering and evacuation of people with disabilities, serving as an expert, trainer and facilitator. She also teaches a course in disability and the law at the University of Massachusetts Lowell.

Sue Wolf-Fordham directs the emergency preparedness and response initiative including active planning for mass care sheltering and evacuation of people with disabilities, acting as lead developer, subject matter expert, and trainer. She currently manages a project to develop an online scenario-based simulation course to teach Emergency Medical Service, personnel equitable efficient response for and with individuals with disabilities. A parent emergency planning toolkit she developed is currently in translation for implementation throughout Japan.
Nancy and Sue, I'm going to turn it over to you.

Sue Wolf-Fordham: Thank you, Lewis and good afternoon from Boston. Nancy and I are delighted to be here today to share with you all information about the Massachusetts Active Planning project and related project we call closing the gap. If you take away nothing else from our presentation, here is our big takeaway message. It's all about getting the right people to the table. That's it. Very simple but important message.

Before Nancy starts talking about the project I just wanted to say a word about the Shriver Center where we work. We're part of the University of Massachusetts Medical School and we've been a national and international disability research center for about 40 years. We've had an emergency preparedness and response initiative since approximately 2005 and we have two main groups of stakeholders: disability community members such as people with disabilities, their families, support networks, and service providers and responders including public safety responders like police, fire and EMS, public health personnel, emergency planners and managers, and volunteer responders like START and MRC. Vis-a-vis the disability community we focus on access and equity, vis-a-vis responders we focus on response efficiency, and, of course, resilience for the whole community.

Before I turn it over to Nancy, I just wanted to share with you one small point. As you know, we in Massachusetts sometimes like to do things differently than the rest of the country. In our state, much emergency planning and response is by city and town with one county being the exception. And while we're moving to a more regional system kind of slowly, I wanted to let you know that our project took place in the cities, towns, and the one county but we feel that when we bring it national it will be appropriate for counties as well as cities and towns.

Nancy?
Nancy Shea: Thank you, Sue. The promising practice that we'd like to share with you today is called the Active Planning project. The three objectives of the project were to hold a responder training, which is a three-hour, in-person course geared to first responders and planners. Second, to follow that training with a Community Stakeholder Meeting which is our name for an Inclusive Local Planning meeting to review the local emergency plan for gaps related to people with disabilities, and the third objective was to increase disability community awareness of the importance of self-preparedness and awareness of the idea that people with disabilities could and should participate in community planning.

The project had three phases. The first two were in person. The first was grant funded. And the second was paid for directly by cities and towns. The third is an online training that is based on our Active Planning project. We gave this project a new name. It's called Closing the Gap. And you'll hear more about it later from Sue.

So the Active Planning project is geared, as I said, for emergency responders and the disability community. Those are the two main groups. It was created with strong stakeholder involvement. That's something we believe in very strongly here at the Shriver Center. We had an Advisory Committee of responders such as firefighters, police officers, public health officials and leaders from the disability community. The curriculum was reviewed by an expert with a disability and a local emergency manager.

We also had a field test and a feedback session in the town of Lexington, Massachusetts, with town officials and local disability leaders, and we made revisions based on their feedback.

We held the training in 29 different localities throughout the Commonwealth of Massachusetts and we held Community Stakeholder Meetings in 21 different towns. Over 1,000 people participated in Massachusetts.
Our university requires that we get approval when we might be doing something that could be called human search religion and the IRB did make a determination that this was not human subject research. We just wanted to let you know that.

This slide is taken directly from our training. It illustrates one of the key points that we make in our training. And that is that what it's all about is equity and efficiency; equity from, perhaps you'd say, a person with a disability's perspective and efficiency from a responder or planner's perspective although everyone is concerned with both.

So just directing your attention to the photo in the middle, this is a picture of Sue Wolf-Fordham and Patrick Gleason in front of the tent in the town in Massachusetts. And you can see in this picture that there they are just feet in front of the tent. In this drill the established protocol was to have people in wheelchairs go up to a staging area to be put on a stretcher in preparation to go through the decontent.

The picture at your left shows Patrick after he was taken out of his wheelchair and put on the stretcher in this area. Now, what you can't see in this picture is that in order to do this Patrick had to wheel himself up a very steep hill and be put on the stretcher. And then it took at least six firefighters to wheel him back down the hill on the stretcher. In the process of doing this, they almost lost control of the stretcher and Patrick almost had a good ride down the hill.

Fortunately that was avoided but after we explained this and showed this slide to our participants in our training, we asked the responders: Is this equitable? Is this efficient? The responders, of course, are thinking about in the moment and are not as concerned with what is equitable as how can I do my job quickly. So that is why we stress the efficiency.

So the point is, Patrick really needed help. As you can see in the photo on the right, just getting out of his wheelchair and getting into the tent, the whole
second step was absolutely unnecessary. And the only reason that they did it, that was their protocol. That's what they always do.

So our point is you may have to be flexible. You may have to think outside the box. But the truth is, small and simple changes cannot only provide greater equity but will be more efficient. So if you think about it, if it had been a real emergency, those six firefighters could have been doing something a lot more productive than trying to wheel Patrick down the hill.

So this slide gives you an idea of the content of our responder training. We cover things like demographics or the percentage of people with various disabilities of the general population. We talk a bit about disaster experiences in the past for people with disabilities such as Hurricane Katrina and Sandy when people were denied admission to shelters or separated from their family in regular support systems, taking away all of their independence.

We then move into what we call the OARS framework. This is about one-on-one interactions with people with disabilities. OARS stands for observe, assess, respond, and verify success. We developed it here at Shriver to help responders, as I said, in the moment interact with people with disabilities. We don't say that people are going to become experts in the various disabilities but we say that they're going to have a fairly good idea what to do, how to communicate with someone with the different disabilities in an emergency.

We divided up disabilities into five areas: mobility, vision, hearing, autism and mental illness.

We then move into a more broad outlook and talk about functional and access needs including the framework. This is a framework that is broader and would include someone who has English as a second language or even someone who has a broken leg. But those people are going to need extra attention in an emergency. We then move into a discussion of Americans with Disabilities Act
issues such as sheltering, transportation, and evacuation. We give examples of reasonable modifications.

And finally, we discuss the process of holding a Community Stakeholder Meeting using our Active Planning Workbook.

I'm just going to tell you a bit now about the Community Stakeholder Meeting. The purpose of this meeting is to review the local emergency plan and current response practices in a given community. We identify the gaps in the plan related to people with disabilities by going through the work book with the participants of the meeting. Then we establish priorities and areas that the town feels, town or city feels, they need to focus on. We try to make it a democratic process.

The last step in the meeting is to create an action plan for improvement by identifying specific steps that will be taken next. So we always say a good community stakeholder meeting is one where there's lively discussion. Disagreement is often a very good thing because we've seen many times disagreement result in problem solving on the spot. That's when people come up with great ideas during these meetings.

So here are a few tips for successful meetings:

It must be tailored to the local community. Every single meeting we had was totally unique and had the personality of the town that we were holding it in.

Participant selection, as Sue said earlier, is perhaps the most important thing. Broad diversity is very helpful. You want a lot of different points of view and perspectives.

Then you have to think, too, ahead of time about the roles that are required in the meeting. We always suggest that there be a community facilitator
just to keep the meeting going. It's a very important -- it's very important to have someone who is an expert in the local emergency plan.

A timekeeper is essential. These meetings can get quite involved and go on and on. And a recorder is important because there are so many good ideas that come out of the meeting that you want to make sure you capture them all.

We've also found that it's very helpful to define critical issues ahead of time. This helps you know who should be at the meeting.

Here is a sample of the Active Planning Workbook. Actually, the next slide is a sample but this is a little preview of the workbook. This is what guides the Community Stakeholder Meeting.

There are three tools in the workbook that takes you through three steps. The first tool is the needs assessment or gap analysis. That helps you answer the question where are we now. The second is the priority setting form which helps you answer the question where do we want to be. And the third is the action plan form which is a place to record strategies and the timeline which answers how you will get to where you want to be.

And this is just a screenshot of the cover of the workbook showing the three steps and the three tools that I just described.

Now what I'm going to do is give you a little more in-depth look at the workbook. This is a sample of the first tool. As I said, it's the needs assessment and gap analysis tool. This is the part of the workbook -- this takes up probably 75% to 80% of the workbook. So it's an extensive topical checklist. We always tell people don't get overwhelmed by the fact that it's so long. We try to include as much as we could. There are certain parts that may not be appropriate for your community. But this particular page shows you a sample of the shelter setup.
So if you're evaluating the shelter site, some of the things that you want to look at are parking areas. Are the parking areas suitable for people with disabilities? Are there accessible restrooms? Showers? Are the sidewalks and the exterior walkways clear and accessible by people with disabilities? Do the public telephones have TTY? Are there drinking fountains that are accessible?

So it's that sort of thing that you'll see in this workbook. And as I say, some will be applicable to your communities and others may not but this is just a nice tool for you to use and to guide your meeting.

The second tool is the priority setting tool. So this answers the question where do we want to be. So by the time you get to this part of the workbook you're going to have a pretty good sense of where the big gaps are in your community and what you're going to need the most.

Basically, what you do, is you go back through the sections of the workbook. You look at spaces where you did not have a checkmark. And any of the sections where you have a lot of gaps, that's going to tell you that those are your areas of greatest need.

Sometimes you can look for areas of quick and inexpensive solutions. We saw a lot of towns do that. That's a nice way to start out. Oftentimes the solutions cost nothing.

The last slide that I'm going to talk about is the third tool or the action plan. And this answers the question how do we get there. What we do is just list the gap, name the person who is going to be responsible for closing that gap, and pick a reasonable timeline that we think this can be done in. So at the end of the meeting you will have a nice little record of where you're going next.

So just before I close I'd like to say that we found the process of facilitating these community stakeholder meetings very enlightening and really a lot of fun. We got to know the communities, got to know their personalities, and
we learned a lot from them. It was really the transition from the research that we do to hands-on application.

Now Sue is going to tell you about the outcomes of these Community Stakeholder Meetings which we think is one of the most interesting parts.

Sue Wolf-Fordham: Thanks, Nancy.

One thing I wanted to say is that the solutions developed by the CSM or Community Stakeholder Meeting, participants were all the results of discussion right at the meeting itself. One area that came up a lot was understanding disability community needs. People from the town, responders work say to us: We need to get a better picture of the folks who live in our town. Some of the strategies developed were meeting with provider agencies to learn more about the people they serve, getting data from the U.S. census, the American Community Survey, which for county and communities of a certain size has what we in the disability community would call functional information, sharing aggregate local data.

We had a meeting where we were going through the checklist. One of the questions is: Does the community, in its community programs, keep information about participant disability issues? Someone at the table said yes. Someone next to them said no. When we stopped laughing, we all started talking and it turned out that some town agencies kept this kind of information and it was decided to share the information in the aggregate without people's names, without private information just to understand about needs.

Inclusive drills, another way for the disability community and the locality to get together. And then there was always a lot of talk about PAS, personal assistant services or PCAs, personal care assistants. While required under the ADA, remember I said a lot of our communities do planning and response by town. That's a very small unit, maybe with only a couple of thousand residents so they have a small budget. They were very worried about budget busting.
One of the discussions we had -- actually, we had this discussion many times -- was do you make outreach to personal care assistants in your community. Do you make outreach to the agencies? Where do they work? Do you make outreach to people with disabilities? Do you say PCAs are welcome in our shelters? And if a PCA needs to bring one of their own family members so that they know their family is safe and they want to continue caring for the person who is their client, that's ok with us, too.

In other words, another very practical way to make outreach to try and encourage PCAs to come with their clients if possible to the shelter, thus cutting down the number of PCAs who would have to be hired.

Additionally, one community decided that MRC and CERT members were going to be trained to be substitute PCAs. Again, great solutions.

Sharing resources was another big issue. We had one meeting where someone got very upset and worried because they thought they would need to be buying Hoyer lifts. The second time someone mentioned this, someone said, "What's the big deal? I'm from the local public school down the road from where the building the shelter will be in. We have a Hoyer lift, we'll loan it to you and in fact we'll bring it you during an emergency." Problem solved. Another community identified a need for extra wheelchairs. The person at the table from the Council on aging said, “We'll loan them to you; we've got a closet full.” Another community wanted to focus on sign language interpreters. They had very, very strategically invited the emergency manager from the local hospital. He offered to loan ASL interpreters. And in another community they decided to borrow CCTV, video magnifiers, from the local library. Again, problem solved. Sharing resources and next to no cost.

We also had some issues related to sharing expertise. In one community they were very worried because the local website goes down during emergencies. Well, it turned out a technology company in the community had
gone to the community and said we want to be good corporate citizens, we want to help. The community said, well, we don't know how you could help and sort of sent the company away. The result of this meeting was they called the technology company back and said now we can tell you how to help.

In another community in the city, Disability Commission volunteers volunteered to help the city put emergency information for people with disabilities on the website. And in still another community, first responders at the table with teachers from a local Special Ed school got together during the meeting and decided to have a visit by the first responders so that the children at the school or kids on the autism spectrum could become more familiar with uniforms and uniformed officials so that the first responders could begin to learn more about those kids in their community.

Some more secrets to success. Identifying a champion. This was most often a public health person in Massachusetts. Having worker bees at the meeting. This is not the meeting where someone who had a 50-year gripe against the city should come and discuss this gripe. We've got a workbook to go through.

Addressing potential barriers, scheduling was far and away the biggest barrier for us because getting all of these folks from the city and towns together in the same place at the same time was tough. And, of course, there was some dealing with local politics. Developing an elevator story for the champion to use for buy-in was also helpful.

We're pleased to share our results. The training increased responder knowledge and self-confidence. 100% of the communities participating in this CSM identified at least five gaps. 100% found gap closing strategies. 95% of disability community participants reported increased motivation to prepare. And our proudest result, long after we were gone eight communities reported continuing to revise their emergency plans based on this project. Every community that we worked with found some area related to communications as a
gap. Other common gaps were needs assessment and inadequate resources and services.

Now we'd like to take the Active Planning project national. We are currently developing a pilot course Closing the Gap. This is going to be a how-to online. Because we want to make then gauging, there's an ongoing storyline.

There's interactive role -- story line, interactive role play as part of it. It will be accessible. We hope to start pilot testing late this spring.

Our first learners will be local emergency planners regardless of official title. Anyone who participates in the developing of the local planned city, county or town local plan is welcome to apply to be a field tester. And field testers will receive the Active Planning Workbook and a resource list as our thanks.

So now I need to ask all of you: If you're interested in applying to field tests, if you know someone who is interested, please send an e-mail to shriver.recruit@umassmed.edu. We're hoping to get a robust response. We have to initially pick a limited number of field testers. And then we're going to open it up to a larger number.

And now I have to acknowledge the hard welcome of my colleagues on these two projects and also to say thank you to FEMA through the Massachusetts Executive Office of Public Safety and Security. FEMA funded the first phase of the Active Planning project. And Closing the Gap is being funded by our colleagues at UMASS Medical School's Commonwealth Medicine.

If you would like more information about our project, you can visit our website or you can e-mail me at susan.wolf-fordham@umassmed.edu.

Lewis, I'm going to send it back to you. We would be happy to answer questions.
Lewis Kraus: Great. Thank you so much, Nancy and Sue. That was really very interesting. I do want to cover a couple of things and then I think maybe we'll defer most of the questions until after our next presentation.

First of all, Nancy, during your session, you referred to OARS. Can you repeat for people what OARS stood for?

Nancy Shea: Yes. Observe, assess, respond, and verify success.

Lewis Kraus: Great. Ok. That's great. Thanks.

The other question that I think people would want to know is, is the workbook available or is the only way for somebody to get involved to join up as a test site in this next round?

Nancy Shea: For now the only way to get the workbook is to be a field tester. But the field tested -- we're trying to make it a bit fun. For the future, I'd like to have the workbook available separately but for now we have to assess feasibility of the workbook and our training about how to have a Community Stakeholder Meeting. So to assess that feasibility, we have to have the two of them together.

Lewis Kraus: Ok. That's great. Thank you.

All right. We're going to defer questions. People, as you think about this, if you have any more questions, please go ahead and send them in and we will deal with them at the end of the session so we can move on and make sure our next speakers have enough time.

Our next speakers here are Tammy VanOverbekeis and Ted Stamp. Tammy is a life-long resident of Lyon County, Minnesota, Certified Emergency Manager through the Minnesota Department of Homeland Security and Emergency Management. She works as an Emergency Medical Technician for Marshall Ambulance and North Medical Transportation and has been the
Emergency Management Director for Lyon County since February 1991. She's responded to plans for many disasters including tornadoes, floods, train derailments, a bus/car crash, large fires, blizzards, ice storms, hazardous material releases, search and rescues, and others. She's also worked in many jurisdictions outside of Lyon County on disaster response and responded to Hurricane Andrew in 1992. She was recognized for her work by President Clinton in response to the flooding in 1993.

Ted Stamp has worked as an Independent Living Advocate for the Southwestern Center for Independent Living since 2006. His advocacy on behalf of people with disabilities primarily includes communicating with state and federal legislators about a number of disability policy issues addressing local accessibility concerns like building entrance and sidewalks, writing articles for the agency newsletter, participating on local and regional transportation committees, and reaching out to local and regional emergency preparedness staff, and making presentations related thereto.

For their work this year on emergency preparedness outreach, in September Ted and Tammy were awarded the 2014 Preparedness Award by the Association of Minnesota Emergency Managers.

Tammy and Ted, over to you.

Ted Stamp: Thanks, Lewis.

Tammy VanOverbekeis: Thank you, Lewis.

Ted Stamp: We are going to go about this a little differently. Just because of the nature of how we usually do things when we make presentations, we bounce back and forth quite a bit. The nature of our PowerPoint is that because of the time, being short and because we have such a diversion audience, we're not sure who knows what. There's people from every -- I don't know where you work
and what you do but we're basically going to present what we have and we'll go through it pretty quickly. It's all kind of building up.

If you can just keep in mind if you have questions along the way, just write them down for the Q&A. And then after 3/4 through the PowerPoint that's when we get to the bulk of kind of what we did and what our purpose here is in these things we've been doing for outreach. So everything leading up to that is just basically backdrop.

So on the second slide, I'm just going to start with some of our basic goals in going out -- Tammy, like we said, an emergency manager. I do basically advocacy work for the center here. And a number of years ago somehow Tammy and I just happened to end up working together. I don't know if it was seeing one another in the community or just -- we keep in contact somehow and talked about doing some things. What was it, March 2014, that we prepared the event for this conference we put on. And that was kind of the kickoff for all of this. Basically we just wanted to encourage people to just make these general preparations so that people come to your door, you're going to be evacuated, trying to get individuals to make those basic preparations. That really is how it started off.

Then on the second point there, not just getting individuals to prepare and making them more aware but having emergency responders and individuals who are making basic preparations, communicating with each other. We thought what about an idea where we had this community event, open to the public. You have representatives from different disability communities, disability or functional access needs communities, and just discussing with one another face-to-face the kind of things they have in mind as far as here's what you ought to know about me. So not just the people that are being evacuated but the people that are doing the evacuations. They each have a two-way communication there rather than just one way.

The third point there is encouraging local businesses and organizations to continue maintaining and improving upon their individual plan if they have any. In
some cases they don't have any to get going on them. And if they do have some, just to start addressing, improving them.

Tammy VanOverbekeis: Our basic goals, we're encouraging city leaders, businesses and organizations to communicate with one another to figure out the best practices and address possible overlaps in their respective plans.

Being an emergency manager since the beginning of time, I have kind of learned that I think one of the big tricks to all of this is having people take personal responsibility. And that's one of the goals with this. If people can take personal responsibility, we have a resilient community. So that's one of the things with this.

Let's make sure that we're all on the same page that we're not all planning on evacuating to the same place type of thing. We work with our businesses and organizations to gather periodically with our emergency manager and responders to discuss how their plans dovetail with the community plans as well as how the organizations can contribute its personnel and resources in the event of an emergency scenario.

We have a lot of people out there that are willing and able to help out in an emergency. They just need some guidance on what they need to do. So we're trying to develop these teams that can go around and do different things.

Going back a little bit to what Ted was talking about, when we got together in emergency response personnel and our folks with functional and access needs, their expectations were completely off the wall. Until we sat down and talked with each other they had no idea what the expectations and the roles and responsibilities of each other were. So until we made the basic steps, we had nothing until we sat down and started doing this.

Ted Stamp: For those of you who are not aware, this list of just functional access needs is just a basic list. It's a few things to keep in mind in this area.
Anybody that might be in an institutional setting of some kind, people with limited English. You know, in our community we have quite a few that fit that category. People that work in different plants in town. Cultural needs, you know, if you're going to be doing evacuation and people are going to have dietary needs that are different. Sometimes that's based on cultural. Whether they're Eastern or maybe Muslim or whatever they are, sometimes there are only certain things they can eat, be served. Elderly, children, homeless, illiterate, with hearing loss or vision loss, mobility, speech, cognitive disabilities, mental and behavioral health -- we did do our conference. That was one that was really, really -- people really had an interest in that. It was on almost every feedback form we saw, that they wanted to see more about that. I think it's just getting to be more and more issues in that area. And then transportation is always just an entity in itself. There's so many transportation needs that people have.

*Tammy VanOverbekeis:* What are we up against? People in general are unprepared for an emergency evacuation. They don't even want to think about it. Everybody has this it's not going to happen to me idea.

Emergency preparedness and evacuation planning for people with disabilities and other access and functional needs often requires more in-depth consideration. This has been on the mind of emergency managers forever and ever. It's just something that I always put on the back burner because, frankly, it was like the elephant. How do you begin to deal with this? And it was basically we had to break it down.

Lyon County is home to Southwest Minnesota State University. It is known as the best university in the state of Minnesota for folks with functional and access needs. It is extremely accessible. So we have a lot of people in Lyon County, specifically in the city of Marshall that have functional and access needs. So it's a double-edged sword. We have lots of people in the population but we have more resources. So that was one of the reasons behind getting on top of this. We have an age population. We have a lot of people who are getting --
we're getting more Alzheimer's and dementia units. That adds a special twist to our whole emergency plan.

The cultural thing that Ted brought up, the last time we opened a shelter we had a large group of people, along with shelter and transportation, that will not be because of their religion and culture in the same area as dogs. It makes it very interesting for people that think that their pets are very, very important to them and think that their pets need to be with them in a shelter. There's all kinds of interesting things like that.

There's many disconnect and understanding and communication exists between those being evacuated and the ones responsible for evacuating them. Everybody's busy so it's challenging to collaborate and get together.

Funding for resources, putting on local events is harder than ever to come by. And even after individuals have been informed of how to make basic preparations, they simply don't do it.

Ted Stamp: That's part of why -- you know, after this conference we'll talk about -- we really decided -- it's one thing to suggest it and to continue -- you tell someone -- you almost have to put the bag in their hand and even beyond that they're going to have to go home and then decide what am I going to do with this. Am I going to even do it?

What we're discovering, it seems, is it's a repetitive thing. It's got to be year by year. It really has to be something that is more than encouragement. You have to -- exposure over and over again.

Tammy VanOverbekeis: We get in their face. [Laughter]

Ted Stamp: So these cartoon characters are a lighter side of these things but they really do in some ways address how crazy it can be just addressing people, trying to encourage them to do something. They really don't know oftentimes.
That's all of us, I think. We always have something that we can plan. We've got better things to do with our time. We've always got plenty of stuff to do.

That first one in the upper left says, "What do you mean I can't add this thing to my 72-hour kit? I've never gone three days without playing my game console before." So people are going to expect that they can just be able to take anything when an emergency manager comes, emergency responder. And to bring them out of their home if there's a fire or something. We'll get to these things.

The one in the upper right talks about the emergency contacts. Who would you? Who are you going to look to? Are you prepared beforehand? Someone putting down ambulance, police, and hospital, it is kind of funny but -- anyway.

And then the following, the bottom one, the disaster recovery plan, just screaming help. It gets to be almost that ridiculous where we just don't have any plans in place usually unless we're absolutely pressed to do it.

*Tammy VanOverbekeis:* What does it take to address these issues? Emergency planners and responders need to be informed about the various needs of people with disabilities and other access and functional needs and where they are in your community. Where they are is kind of a tricky thing in its own. We've reached out to the university. We've gone through home healthcare agencies, parish nurses, public health. We've gone through all kinds of different ways how to figure out where these people are. We spread the word through community, throughout the community, through every means available, newspaper, newsletters, radio, TV, internet, social media, presentations. You can put inserts in with your local utilities. You can put inserts in with your church bull continues. People with functional and access needs do a lot of stuff with the internet and social media. You can use those different media things to get through to give information out to different people. We will take, borrow or steal any way we possibly can to do education to the community.
Ted Stamp: And then there's commitment of family members, friends and caregivers. Anybody that's close to you. We're trying to encourage people -- we were just discussing this morning about if you are working with people, presenting it like I'm a person with disabilities so I get caregivers that come into my place. We have an agency that serves us. And for me, I'm able to do -- make those preparations on my own or with the help of someone that can help me physically where I can't do things. But there are some that can't do any of that and they're going to need -- we were talking about making presentations to the facilities where the caregivers can be informed of the kind of things they can keep in mind to help. The people that they serve be prepared for any kind of evacuation potentially.

The second bullet, just keeping the family communication plan and go-kit current. You have things sitting in there that it's like putting things in a drawer and a year later you look back at what you put in there and you have no idea why you put it there. These kits, that's the trick, too. You can set some things in there but there are some things, too, that you live your life and you have to keep these things updated.

This would be a part two for all of us. Last one is just saying for each community partner to decide how are you going to contribute to the overall community emergency plan.

Tammy does her emergency preparedness stuff. I do advocacy at the center. In different ways we serve in completely different capacities, usually. But we found ways to come together, which is what we're getting to, and deciding what can we do in our community. You have your community and what you do in particular.

This is just a quote from an article which you could look at if you can find it online. You can find any number of things. This just struck me as I read it. Just
speaking of responsibility and accountability and particularly peer pressure. What motivates people? It's true.

But that's kind of where we have gone since this conference last year, just to be making people feel the responsibility. Nobody is going to help you prepare unless do it for yourself. Well, maybe they will. That's our encouragement, is to try to help people come together for those who can't do it but to feel responsibility and accountability. We are sort of the peer pressure. We're saying it's up to you. You need to make changes. You need to help the person that you're close to, that you love, family or friend, to be prepared this way. This was the beginning of what we did in our communities with respect to all that's gone before.

This conference we decided -- we worked with a college. We went out here Southwest Minnesota State University. There are over 100 kids in chairs out there, students. There are others with disabilities as well. We just decided that would be a good place to kick this off. We had the public safety director out there who helped work with us. We decided it's going to be something that's going to be informative, it's going to encourage individuals with functional access needs to get in and make these preparations on their own, hopefully put a fire under their butt, you know, get them going thinking about these things. And then also bringing in emergency responders and different personnel from the community so they can discuss with people, so they can -- face-to-face we can ask questions to each other. You know, what's your perspective like up there?

What we did, there's a regional conference, a little over 80 that came. They came from over 20 counties, which really surprised us. Even some came down from North Dakota. We had a four person panel up front. And basically the four people represented different functional and access needs communities. This is just something that you could really do whatever you want, wherever you are. This is just an idea to be replicated in whatever way -- you could do it in a lot of different ways. We just picked four areas or three areas. We had three areas of questions. Then we had four people up there representing four areas. So you might have one person representing people with physical and access needs,
physical, getting in places, wheelchairs. You have another person that might represent mental health community. We had someone else who represented the blind community. And I'm not sure what the other one was.

*Tammy VanOverbekeis:* Vision, I believe. We had somebody that was visually impaired.

*Ted Stamp:* Cultural might have been one.

We had a moderator. And then we had these categories here, the third bullet there. Notification and warning, transportation and evacuation, and sheltering and personal preparedness.

We basically just went through each person. The moderator would go down the line and ask questions like this. Under notification warning, he'd say, you know: What should emergency responders know that is unique to this special needs community that you represent? So the person from the cultural representative would just give their answer.

You know, you're speaking pretty generally, but what kind of things should emergency managers know? You could have emergency managers up there saying here's what they should know. Here's what everyone up here should know about the fact that when we come to your apartment building, here's what you should expect.

One example I like to give -- I'm a wheelchair user. I wear a couple of seat belts on my body. I have a seat belt that goes around my waist. I've got a seat belt that goes around my feet. And normally if you looked at me from the outside, even if you look at that picture in front of the PowerPoint, you'll see that you basically can't see that. You can't see those things. Well, if somebody came in my home and said there's a fire in the building, you need to leave, we need to get you out, it's one thing about taking your stuff with you but -- I'm on the third floor. If I'm not able to get down the elevators, they're going to have to take me out of
my chair. If they pick me up and grab me without asking questions, I've got two seat belts on my body that they can't see.

So I'm fortunate that I'm in the position of being able to tell them, yes, I've got two seat belts on that need to be taken off. But what about the person that doesn't have that ability? What about the person that comes in and someone just comes in and starts yanking?

You have the issue, too, of once I get downstairs, where am I going? Am I going on the floor? Are they going to put me on a couch? Are they going to bring my wheelchair downstairs, carry that 300-pound thing down?

I live in a building that has about 20 wheelchairs in it. These kinds of things, this is the kind of talk we're trying to bring to the table, get people discussing from each of their perspectives saying here's my perspective, here's your perspective.

The last bullet point on this slide is that we followed that up. Afterward we just said let's take this momentum and let's follow up in your community. Let's reach out to them, let's make some presentations. Assisted living communities, places where there's lots of people with either disabilities or they're elderly. That's basically what we focused on, some elderly places, elderly and aging communities. But we've also gone to places like adult education, second language, and make presentations to those classes. We hand out bags. These go bags. We'll get to that.

Tammy VanOverbekeis: Our hopeful beginning in our community. In September of 2014 we were recognized for our outreach efforts to the Association of Minnesota Emergency Managers. We have had our successes publicized locally and even more broadly. We have had further opportunities for spreading the word through all of this. And we were able to do a presentation at the Governor's Conference on Homeland Security and Emergency Management in February.
What we're trying to do is help people help themselves, help emergency managers go forth and put together something in their communities. What we do doesn't cost a lot of money. It doesn't take a whole lot of time. We think it's very effective.

_Ted Stamp_: The point, too, of saying these things on this slide is not to pat ourselves on the back at all. It's to say that when you do these things, there is recognition. People start writing articles about them. There's interest generated.

All of these things, at every event you're sending information. Just like this today. There are up yards of 80 to 90 people on the line. We've got all of you from your different communities. You're going to take whatever you can get from either of these presentations and put it to use in your particular area in your particular community.

That's the hope. That's what we're really looking at. Take every opportunity. Because at the end of the day we can take the information and learn but even when we're going year after year and time after time to these facilities we're finding that still people don't prepare. I think it's human nature. We're all guilty in some ways until we sit down and really do it.

Continuing, what do these presentations entail? Well, you've got as part of your handouts if you want to look at it more closely, these are just thumbnails but basically we hand out these couple of forms. We just go through a battery of questions.

So if we go to a local facility here that's got a group of aging folks, we reach out, first of all, to them. We call them and ask them if we can set up a time to come whenever it's convenient for them. We just do a basic preparation. We have a number of these things called go bags which you're probably familiar with.

_Tammy VanOverbekeis_: Really, really, really nice canvas bags.
Ted Stamp: Got them from the Minnesota Council on State Disabilities. They would just provide them by the boxful. They had some things in them that had like a flashlight or whistle on them or just information. We're starting to put Ziploc bags in them so that people can put -- if they want to put hearing aids in there, if they want to put that little personal information form you see on the right. It's just a very generic one that I found online.

And even the checklist on the left, "Would you be ready?" It's a checklist of basic things that we go through. And we just say, you know: What are you planning for transportation? Do you have your own car? If you don't have your own car, are you waiting until the last minute to call a taxi? Do you know what the taxi's number is?

For a building like myself, that I live in, I just live in a regular apartment building but it happens to be a very accessible apartment building. You've got upwards of 15 people in chairs. Well, half of those people have vehicles. For myself if I don't have someone to drive the vehicle, I'm not going anywhere. So unless I have a plan as a backup, I'm still in trouble. And then for those who don't have that, you are still relying on the local transit. They're already going to be busy as it is. Before an event. They keep busy -- there are days I'm at work and call for a ride and I can't get a ride at certain times. Just in general they're very busy.

So you just go down this checklist and we just try to put in people's minds here's some things to keep in mind. What medical supplies or medication are you going to need? Do you know your bank account numbers right off hand? Are you going to remember them? Do you have a list of phone numbers? You don't count on your phone. Your phone could die. The service could go out. So what are you doing? Do you have something in this, a printout, something that has the people you need to call? The numbers you need for a blue cross, blue shield whatever that you may need. Are you prepared?
If you have a service animal, do you know what you're going to do with the service animal? These are all the things we're trying to get them not only to think about but we can present on this stuff but at the end of the day it's going to. It comes down to whether they do it. They're going to go back to their apartment, put the thing down and it may sit there.

We were just talking about it, the fact that we're coming to one of these places that we just presented at last year. It's already coming up on a year. And the first question I think we're going to ask him is, ok, now, those of you who were here last year, how far have you gotten in one year. Have you done anything? How much have you done? Have you even thought about it?

_Tammy VanOverbekeis_: We're asking them to throw things like umbrellas in the bag. It's a good-sized bag. An extra pair of shoes. We give them a little key ring. Put your extra car keys and apartment key on that. Put that right on the handle of the bag. Have the bag close to your door so you can grab it on the way out. Throw an extra spare pair of glasses in that baggy.

Your cell phones, you don't know what anybody's phone numbers are anymore because they're all on your cell phone. Write them down. Quick little tip from an emergency manager. Cell phones go out very quickly during an emergency so texting goes through. Text a short message to whoever you want to get it to and leave it alone. It will stay in queue but it will eventually go through. Repeated attempts on a cell phone continues to tie up the system. So don't even go there. Send it a text and be done.

_Ted Stamp_: Finishing up, getting toward the end here.

_Tammy VanOverbekeis_: The lives and general well-being of everyone in the community including people with access and functional needs with or without disabilities are at stake. The livelihood and reputation of our communities, the reputations of the businesses, agencies, facilities, the emergency planner and responders, potential litigation which is becoming to be kind of a big deal -- it was
a big deal in New York after the hurricanes -- and potential loss of federal and state mitigation funding are all up for grabs if you don't do this planning correctly.

Another thing when we bring in this big red canvas bag, the first thing I tell them, it is not a grocery bag. It is your emergency bag. And we get pretty in their face about this is what you use it for. It's not for anything else. And when we're going back the second time, I think we might even ask for a couple of volunteers that will let us go in their apartments and look at their bags. I don't know if we'll get any takers. I hope we don't get arrested. But we're going to start being pretty strong but we're cute and likeable and hopefully we'll get by with just letting people know that we care about them.

Ted Stamp: And then a potential loss of trust as well for the community. The impact of the disaster getting worse because there's people that aren't prepared, even individuals or responders that are responsible for coming and getting people out which makes it -- the third point, taking the longer and going to take longer to recover. So the whole community.

And then just the media focus is often what goes wrong rather than what grows right.

Tammy VanOverbekeis: Our local media, we make very well aware of our efforts. So hopefully our local media will not throw us under the bus if something happens. Certainly can't say the same for CNN and the large FOX networks that live to throw anybody under the bus on something like this. The media, we hope, will be our friend; at least our local ones during an event.

What are you going to do? How can you get involved in your community? Situational is a big one. You have to know the hazards and risks in your particular community. Here we talk a lot about large ethanol factory ADM. They are a large hazardous materials facility. We let people know that they are here and what their risks are with that. We also have the Bakken or shale oil
transported throughout our entire county. We talk about that. We also have the natural disasters of the tornadoes and the flooding and all of those good things.

How would evacuation and transportation work? We have numerous discussions on this. Sharing, you know, if one of you in this apartment building that Ted lives in, if you have a van and you could put two or three of you in chairs in it, let's talk about that ahead of time and have those things planned for.

And then long-term versus short-term evacuation. We don't have a lot of long-term evacuations here. And if we do, because we're in the Upper Midwest, a lot of us know each other. We end up going and spending time with friends and family. More and more it's getting that we are a community of immigrants and we don't have that. So our long-term sometimes is more requiring shelters than it used to be.

We have all of those possibilities out there. They need to be discussed ahead of time.

*Ted Stamp:* Finishing up, we've said these already but just look at your local resources, what's available in your community and just deciding what are you going to do, who are you going to partner with.

The city has been really good, actually, the city and the local emergency responders have come together. It hasn't just been since the event we put on. There was some before that. But ever since that event and afterwards, they're meeting on a regular basis, maybe every other month. People are coming together and going through what might happen. You know, where are the gaps in the plan in our community plan?

And then lastly -- sorry to rush all of this. There's just so much stuff here. This is the last piece. This is just -- our agency ended up putting together this Memorandum of Understanding which is kind of what it is. It's basically, once we started doing this stuff, making these presentations, we just wanted to have a
document that in case anybody comes to us and says, you know, we hear you're involved in emergency preparedness. In the event of -- let's just say there's a community disaster and they're saying what role do you have to play, we have a document that we can give to anybody that would ask, proactive in giving it to law enforcement saying here's what we do and what we can do.

So for our particular agency if you look at the middle of that document on the left, blown up on the right here, right above that -- I didn't show what's right above it. It should be available for download. It just has this one sentence that says our agency is not organized to respond directly to or handle any type of community-wide emergency situation. That's not our job. That's for the emergency responders, the law enforcement. As far as this goes, we'll provide information and referral. We can provide some service as it relates to general information, representing local, regional or statewide resources. So we can get you the documentation. We could have individuals come and help people make their own emergency preparedness plan.

Also, at the bottom bullet it says SWCIL may be able to assist in the transition planning of persons with disabilities who want to move back to their community after being displaced. So within the counties served, we might be able to help transition back.

*Lewis Kraus:* Ted and Tammy, thank you so much. I'm sorry I have to break in here. We only have about five minutes left for people to be able to ask questions.

I do want to let people know that these documents that Ted is referring to are there on the website that you checked in on at [www.adapresentations.org](http://www.adapresentations.org) under schedule. Right now it will be under the archive in the next three minutes -- three days. I wish three minutes.

Anyway. I want to now quickly get to some questions if you have questions. Please go ahead and write them in for either presentation but for Ted
and Tammy's right now. And in the meantime, we'll go back and answer some questions that people had for Nancy and Sue.

If you guys are still there, there was a question for you about -- that you mentioned that a hospital loaned interpreters for emergencies. How did they do that? And are there interpreters on staff at the hospital?

_Sue Wolf-Fordham_: I would be happy to answer that. What ended up happening with that, the hospital and the community -- it was Lynn, Massachusetts I believe developed an MOU. I was there for the part where they agreed to do this. I don't know since then how this has played out in practice. So I don't know if they have folks on staff or if they used some kind of agency to get this.

Certainly if the person asking the question sends me an e-mail, I would be more than happy to contact the public health preparedness planner in that area and ask.

_Lewis Kraus_: Ok. That's great.

And there was a second question for you guys to describe your field test a little bit. Is that possible in this timeframe?

_Nancy Shea_: I'll give it a quick try. We identified a particular community that we thought had a pretty good emergency preparedness department and we held a mock meeting. So a mock training followed by a mock Community Stakeholder Meeting. As I said, it was quite realistic and we got a lot of excellent feedback. Does that answer the question?

_Lewis Kraus_: We'll find out if the person writes back. [Laughter]

All right. Anybody else who has questions, please go ahead and send them in the chat room. Go ahead and enter your information in the chat room and send it there. I will read them off.
In the meanwhile, I wanted to point out that Ted and Tammy’s contact information is there on your screen right now. You can contact them directly either by e-mail or by phone. Both of those are available for them.

Ted and Tammy, do you want -- maybe in the last moments here you can describe a little bit more about what maybe the take-home message might be for people from your practice.

**Ted Stamp:** I guess our take-home is always any individual that needs to make those personal preparations to really -- no matter what you’re doing, finding your place in the community as an organization, business, individual, and just doing it actually. That's the main thing. It wasn't that we did anything real special but we made the efforts. We didn't just sit on our Laurels after the conference. We took the momentum from it. We just did the little we can.

So we work together. We make the presentations. We're trying to do this as often as we can. But trying to make it into an annual thing. The hope is that the people really will prepare. And as much as we can get people to the table, discuss their differences, their expectational differences. The people that are being evacuated, the people that are doing the evacuating so that when the time comes, and it happens, you’re going to have less things to deal with than on the spot and as though you never thought about it before.

**Tammy VanOverbekeis:** Think out of the box. As an emergency manager I do a couple of presentations a year to boy scouts, girl scouts, those types of people. The last presentation I did to boy scouts I brought along a bunch of functional access need bags, showed the guys what was in them, asked them all if they knew somebody that would be able to use this, a neighbor, relative. They all knew somebody. I went through a little ceremony with them and dubbed them all emergency management ninjas, gave them the bag, and told them to go out and spread the word. They were thrilled to death about it.
I now have them volunteering to help with shelters, to help set up cots. I've got all of these boy scouts now that want to help out with different things with emergency planning. They're all excited about it. Totally untapped resource from the past. I think it's going to help make better citizens in the future.

So think out of the box with stuff.

Lewis Kraus: Ok. That's so great. Thank you so much, Tammy.

I also want to remind everybody that this is really a kind of a demonstration that both FEMA and the ADA National Network are interested in, and that is the coordination in these emergency management and planning efforts of emergency managers and disability organizations in a local area. So that's a great demonstration.

For all of you who are still on the phone or on the session, a reminder that if you have any other questions or you think of them afterwards and you want to ask them, contact your regional ADA center at 1-800-949-4232 or you can contact FEMA, ODIC, at www.fema.gov and do a search on ODIC within FEMA's website and get to their page.

You will receive an e-mail with a link to an online session evaluation. Please complete that evaluation for today's program. We really value your input and want to improve our sessions to make it even more important for you and relevant for you. So please do that. And also for us to be able to demonstrate to our funder, the impact of what we've been doing.

I want to thank both Nancy and Sue as well as Tammy and Ted for sharing their time and knowledge with us. That was a really great presentation.

I remind everybody that today's session was recorded. It will be available let's say Monday at www.adapresentations.org/archives.php. You can also get an
archive of the webinar by going to www.fema.gov and entering ODIC in your search box. It's available on their website as well.

Thank you for attending today's session. We look forward to seeing you on June 11 for our next webinar which will be an "ADA National Network Learning Session: Memorandums of Understanding with the City of New York Regarding Shelter, Communications, Canvassing, High Rise Evacuation, and Power Outages."

Thank you so much for attending today, everyone. Have a great rest of your day.

Bye-bye.