

PACIFIC ADA CENTER PRESENTS

ADA NATIONAL NETWORK/FEMA WEBINAR SERIES:
EMERGENCY MANAGEMENT AND PREPAREDNESS-INCLUSION OF
PERSONS WITH DISABILITIES

FEMA PROMISING PRACTICES

“OVERNIGHT SHELTER EXPERIENCES PLANNING”

Thursday, July 9, 2015

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>> **Lewis Kraus**: Welcome to the Emergency Management and Preparedness Inclusion of Persons with Disabilities Webinar Series. I am Lewis Kraus from the Pacific ADA Center, your moderator for this series. 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 or ODIC. FEMA's ODIC covers 10 regions with regional disability integration specialists. More information about FEMA's ODIC can be found at www.fema.gov and then type ODIC into the FEMA website search.

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 on the Americans with Disabilities Act. You can reach your regional ADA Center by dialing 1-800-949-4232.

This webinar series will share issues and promising practices in emergency management inclusive of people with disabilities and others with access and functional needs. The webinars provide an opportunity for emergency managers, people with disabilities, and others with access and functional needs, first responders, planners, community organization and other community partners to exchange knowledge and information on promising practices in an 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 alternates monthly between ADA National Network Learning Sessions and FEMA Promising Practices.

We encourage you to review the series website and familiarize yourself with a full array of sessions available in the series at 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 a.m. Pacific time. By being here you are on the list to receive notices for future webinars in the series. The notices go out two to three weeks before the webinar and open that webinar to registration.

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

In this session only the speakers will have audio. The audio for today's webinar is being broadcast through your computer. Make sure your computers are turned on -- speakers are turned on or your headphones are plugged in. You can adjust the sound by sliding the sound bar left or right in the audio panel. It's depicted on your screen. If you are having sound quality problems, go through the audio wizard, which is accessed by selecting the microphone icon with the red gear symbol 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 and enter the pass code 5552153. This is not a toll-free number. If you would like, local numbers can be found at the address on the screen which is www.adapresentations.org/local_numbers.php.

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You can also re-size the chat window, the participate window, the captioning window, the audio/video panels by detaching and using the mouse to reposition or stretch, shrink. Each panel may be detached using the icon with the several lines and the small arrow pointing down 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 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.

If you are listening by phone and not logged into the webinar, you may ask your questions by e-mailing them to adatech@adapacific.org. If you experience any technical difficulties during the webinar, send a chat message to me or the host in the participate list. A tab titled Pacific ADA Center will appear in your chat panel. Type your comment in the text box and enter. You can on keyboard, F6, arrow up or down to locate the Pacific ADA Center and select to send your message or you can e-mail adatech@adapacific.org or call us at 510-285, 5600.

Today's Promising Practices is entitled "Overnight Shelter Experiences." There are many reasons to undertake an exercise such as the overnight shelter exercise with the disability community such as the lack of appropriate and accessible services in shelters, being in violation of civil rights law, but more importantly one in five people encountered during any disaster will have a disability. About 56.7 million people or approximately 19% of the population had a disability in 2010.

Many first responders lack familiarity and working knowledge required to successfully integrate all members of the community in all aspects of work they do. The shelter exercise we will hear about today was an opportunity to fully exercise all aspects of evacuation in realtime with community participants and gain needed capacity and competency were also learning lessons in identifying gaps in the process.

The information presented in this webinar is intended solely as the informational guidance and is neither a determination of legal rights or responsibilities by FEMA or NIDILRR.

Our first speakers today are Carole Tonks and Luke Koppisch. Carole has over 25 years of experience in the disabilities field. The past eight years she has served as Executive Director at the Alliance Center for Independence. Carole has an adult son who has autism and understands the challenges faced by people with disabilities during disasters. Luke Koppisch, the Deputy Director at the Alliance Center for Independence has a Master's in Education and over 20 years of experience in the disability field. Luke has helped, trained, and given presentations to people with disabilities in preparing for disasters.

I'm now going to turn it over to Carole and Luke. You guys can take it away.

>> **Carole Tonks:** Thank you, Lewis. Thank you, everyone, for signing on today. We appreciate the opportunity to present the webinar on the overnight shelter experience.

Before we get into the presentation, I would like to give you a little background on the Alliance Center for Independence or ACI. ACI recognizes disability as a natural and beautiful part of human diversity. We are a 501(c)(3) community-based, grassroots organization that supports and promotes independent living for people with disabilities in Middlesex, Somerset and Union Counties in New Jersey which is central New Jersey. We are one of 11 centers

in independent living throughout the state. And ACI provides information and referral services and develops and implements educational programs and innovative activities that promote activism, peer support, health and wellness, employment being and independent living skills. ACI supports the philosophy of independent living for all persons with disabilities.

Established in 1986, ACI has numerous years of experience in disaster preparedness training. We've trained over 250 individuals with disabilities on emergency disaster preparedness. Through the Hurricane Sandy New Jersey Relief Fund ACI helped make homes accessible by providing equipment and funding towards lifts.

>> *Luke Koppisch*: ACI also distributed over 200 go bags, first aid kits, and NOAA radios. As a NOAA weather, we continuously update our social media sites with preparedness tips, weather reports, and any pertinent information that may be needed during a storm. Some of our staff are state of New Jersey essential personnel. Therefore, we are able to assist during emergencies. Several staff are also certified in CPR and shelter management through the American Red Cross.

I want to go into some of the learning objectives for the webinar today. In 2014, ACI organized an overnight shelter exercise for people with disabilities. We have heard of similar exercises in Alaska and Japan. So as part of our commitment to emergency preparedness, we decided to organize in New Jersey. The learning objectives for this webinar are the following:

Participants will learn thousand plan an overnight exercise with the disability community.

Participants will hear about the challenges encountered in the process and learn how to overcome them.

Participants will come away with the tools necessary to replicate this activity in their local community.

>> **Carole Tonks:** Why should you organize an overnight shelter in your community? Lewis touched on some of this in his introduction but I'll go over it again.

One in five people encountered during any disaster will have a disability. 56.7 million people, approximately 19% of the population, were reported as having a disability in 2010. Now, if you include individuals with access and functional needs, this brings that number closer to 50%. And to give you some additional statistics, 51% of people with disabilities have not made plans to quickly and safely evacuate their homes and only 24% of people with disabilities have made emergency plan preparations specific to their disability. So this shows we still have a long way to go and a lot of work to do.

>> **Luke Koppisch:** First responders see a need to increase familiarity and the working understanding they require to successfully integrate all members of the community in all aspects of the work they do.

>> **Carole Tonks:** The shelter exercises an opportunity to fully engage all aspects of evacuation with community participants and gain needed capacity and competency while also learning lessons and identifying gaps in the process.

Working together and exercising capacity and resources ultimately saves lives, which is the most important thing. And many people with disabilities and access and functional needs can be accommodated during a disaster in a general population shelter versus a more costly and segregated medical shelter or even hospitals. So the importance of emergency and disaster preparedness, particularly with people with disabilities, can't be overstated. People with disabilities have often been an afterthought during a disaster. We really need to, I think, all commit to stopping that and being a part of the planning process.

>> **Luke Koppisch:** So, the Americans with Disabilities Act, this is the 25th anniversary of the signing of the civil rights law but what does the ADA say about emergency and disaster-related programs?

State and local governments must comply with Title II of the ADA in emergency and disaster-related programs, services, and activities. This includes emergency shelters. This requirement applies to programs, services, and activities provided directly by state and local governments, and that would include current governments as well. It also includes those services, activities, and programs provided by third parties such as the American Red Cross, private nonprofit organizations, Salvation Army.

Under Title II of the ADA, emergency programs, services, activities and facilities must be accessible to people with disabilities and generally may not use eligibility criteria that seek to screen out or tend to screen out people with disabilities. The ADA also requires making reasonable modifications to policies, practices and procedures necessary to allow a person with a disability to receive services, partake in activities, and use the facilities. State and local governments must take the necessary steps to ensure effective communication with people with disabilities.

So, for example, they must provide picture boards for people to communicate who have hearing impairments. They must allow service animals into their facilities if it's a facilities converted into an emergency shelter. So these are two examples of how participants can be modified to meet the needs of people with disabilities.

>> **Carole Tonks:** And my son -- Lewis mentioned earlier -- he's 30 years old, he has autism. He does not speak. He doesn't have language. So in his go bag that we have packed in the event we ever have to evacuate is a very simple picture board that you could find online if you do a search for it. So those are things that would be great just to have in all the shelters to accommodate people.

>> **Luke Koppisch:** So what does the ADA not require? State and local emergency management programs that are not required to take actions that would fundamentally alter the nature of the program, service or activity or impose an undue financial or administrative burden to the facility.

For instance, just a couple of examples, if there's a long-term shelter, the facility may be an undue financial hardship for a facility to pay for a sign language interpreter for the entire time the shelter is open. Ok? There may be other less expensive means to communicate.

>> **Carole Tonks:** As long as they have an accommodation; so whether that be through a laptop or writing things down, if you're held up in a shelter for two days, it could be a burden on the facility to have sign language 24/7.

>> **Luke Koppisch:** A family with a child of autism who insists on sleeping in a private room may not -- may be a burden, may be an administrative burden or it could change the nature of the program, which is more of a [Inaudible] situation. It's sort of done on a case-by-case basis. You just have to be aware of what the ADA does not require.

Why we did this. During Sandy, we were called to action to provide guidance, assistance, and assistance to survivors with disabilities in our own catchment area of Middlesex, Somerset and Union Counties which is central New Jersey. There was tremendous confusion on what to do, where to go, and how to evacuate in the initial hours of the storm. After the storm there was tremendous need for information sharing, access to electricity, transportation, debris removal, and simply ensuring the safety, well-being of constituents. There is also a need to help individuals fill out application for assistance.

>> **Carole Tonks:** After Sandy, our office was open. We came in and we called 2,000-plus of our members to see how everyone was doing. All the staff were on the phone. We heard a lot of the issues and the problems that were going on. As Luke just read, there was a lot of confusion and there was a lot of fear of

evacuating. We also found that people were not prepared to shelter in place. So all of this kind of started getting us thinking about how can we do this better next time.

>> **Luke Koppisch:** Just to summarize, we found there was a need for transportation. There was a need to ensure the safety and well-being of individuals. There were people who were isolated who just needed to be sure things were going to be ok, they had connections. There was a need for information sharing, sharing resources. Obviously, this was very important for people. And, again, access to electricity. We actually provided -- our center actually provided a place where people could power up their cell phones or get relief. Because we did have power here.

>> **Carole Tonks:** So historically, individuals with disabilities and access and functional needs experience disasters more dramatically than the general population. Along with the disabled individuals, oftentimes are not taken into consideration and the planning work that is done on the local municipal county and state levels. As we tried to create the platform for whole community involvement at every level of disaster planning, it's imperative to encourage inclusiveness at all levels.

New Jersey specifically has experienced a number of devastating disasters over the past number of years. New Jersey also has a very diverse disability population and the highest rate of autism in the nation. So there needs to be a new approach to emergency planning which is inclusive and reflecting of the vast diversity.

ACI sees the overnight simulation as a vehicle to bring together particularly divergent communities to dispel false impressions, lack of knowledge and contrived ideas about one another. Emergency manager and others working in the emergency field may not have the opportunity to work one-on-one with individuals with disabilities. It's also true that people with disabilities may not have the opportunity to engage with emergency management professionals. So

by bringing both of these groups to the table, it creates a better understanding of each other's needs and creates mutual respect and understanding to make the necessary changes.

>> *Luke Koppisch*: So we have an idea. Ok? We're going to establish evidence-based policies, programs, and practices across the life cycle of disasters. We also wanted to create a model of people with disabilities and emergency managers and responders which is observable, actionable, and replicable.

To give you an idea of our August 2014 overnight simulation, we have a three-minute video that we will show you that was produced by FEMA.

Individuals with disabilities are members of our community. They are participants in our community. So a whole community response is what we need in time of disaster. A response that's inclusive of the whole community including individuals with disabilities and --

Not everybody in the emergency response community deals with a variety of disabilities. They may not have a lot of experience in working with the elderly, people with various disabilities, people with access and functional needs. And this is a good opportunity where it's not a crisis situation. They can network with these people. They can get the opportunity to really understand the needs and also the members of the community who are going to be participating as a shelter resident tonight to hopefully get a better understanding of what the first responder community, people like CERT, the EMTs, the fire departments, rescue squads, police departments do and how they operate.

We found out after Sandy that a lot of people with disabilities were sent to medical shelters, were sent to hospitals all because they used a wheelchair or because they said I have a disability, people assumed that they did not belong in a general population shelter.

I had a very bad experience as a person with a disability in the Sandy storm. So I volunteered so that I could learn something so that I could help the people that I know who are disabled so that we can survive through the next one.

And to make sure other people don't have those kinds of experiences. When my sister and I talk afterwards, she said, "You know, the fact is, you don't fit the mold." And that's how she capsulized what happened. I don't think there should be a mold. So I want to make sure that the powers at be understand that and kind of expand their view.

We as people with disabilities have a responsibility to help people help us. So if you get asked by staff how you should be assisted, you need to be able to communicate that information back. I think that's the important thing.

We're going to be looking for a number of different things about how they were received during the exercise, how their transportation was during the exercise, and how their accommodations were during the exercise. So we'll really be able to gauge and make this a positive experience. I think we'll learn a lot.

It's been a long haul. We're going to make mistakes. We know that. But that is the point. We don't want this set up so perfectly that we walk out and say: Hey, everything's fine. We want to fall flat on our face in certain areas so we can say --

>> **Carole Tonks**: Lewis, I'm not sure if everyone was able to hear that.

>> **Lewis Kraus**: Let's wait one moment here.

Ok. The audio, if you did not hear it, you can find it in the CC transcript there. You can go back and see and the transcript will be available on the website.

Now we'll return to the PowerPoint.

>> **Carole Tonks:** Thank you, Lewis.

>> **Luke Koppisch:** We wanted to do this again. This time through a generous grant from the public service electricity and gas, the electricity company here in central Jersey. We're planning a second overnight exercise for September.

>> **Carole Tonks:** And what you saw there at the video, and I'm hoping people were able to hear it but that was the early on in the exercise. People were just starting to come in. We were just starting to get set up. Actually, we had a lot of media that also came out that day and covered the whole story. It's good, again, to bring awareness to the fact that there are some issues and we do need to be a part of the planning process and do better.

So that brings me into planning, planning, planning. And the planning started up. We had to identify who the local partners were and then bring them all together. This started first and foremost with the disability community rallying around the idea and recognizing that we all needed to be better prepared for the next emergency. So that was the first thing. Many people with disabilities could be housed in general population shelters with minimum supports. We saw that through the exercise.

The planning started. We began to bring the partners together in what would be a joint effort of nonprofit community-based resources with local, governmental and state entities.

One of the first people onboard was our local Office of Emergency Management. I have to say, they were supportive right from the very beginning. We could not have even pulled this off if I don't think it was for their support and their collaboration. So kudos to them for being so very open to doing this exercise.

We also needed to have a site where we were going to have the exercise. That was a big discussion. We wanted the site to be one which had been and would be used as a general population shelter. We were fortunate enough that the State University, Rutgers, came onboard and provided us the site for the exercise. And it was a general population shelter that had been used in previous disasters.

>> **Luke Koppisch:** So who should be involved? Obviously the first people who should be involved are people with disabilities. Ok? Other local disability organizations such as the county Office of Aging and Disability Services, the New Jersey Division of Disability Services was also involved. As Carole mentioned, our Office of Emergency Management. We also had the American Red Cross involved. And then our suggestion is that you approach your FEMA disability integration specialist to get involved.

Other stakeholders included the [Inaudible] Reserve Corps. We also had four local CERT teams involved in this project. The Middlesex County Health Services, the Salvation Army, as we mentioned before and the county Sheriff's Department.

This is what we -- this is what worked to our county, our exercise. You had your own resources that you could bring to the table.

>> **Carole Tonks:** So monthly meetings. What we started out is with monthly meetings. What we actually did, to back up a little bit, is we had met with some of these groups one-on-one before we did this to talk about what we wanted to do and what the idea was. So we did have meetings with the Office of Emergency Management. We did request a meeting and have a meeting with the American Red Cross. So there was a lot of kind of footwork before we got to the point where we were ready to bring everybody together.

Once we did start a meeting, some advice is to allow the time you need to address all the concerns. And there will be a lot. Leave any preconceived

notions at the door. A successful overnight exercise relies on careful planning, delegation, and organization. And this cannot be accomplished successfully on the fly. So you really have to put the time and effort into it. We allowed five months of planning and coordination. And we answered all the who, what, where, why, how questions. Also, we went monthly for five months but as we got closer to the date of our exercise, we started meeting on a weekly basis, probably about a month or a month and a half in advance. So we really had it well organized in what everybody's roles were.

>> **Luke Koppisch:** And actually, the closer we got to the event, more people, more organizations decided this would be important and they got onboard. They were involved. So that's all good. It all worked out well.

The why. We wanted the disability community to experience a general population shelter in a non-threatening time. This was very important. This was really the most important part about this exercise.

We also anticipated two things: either participants would come away with a sense the shelter was not as bad as they thought or they would be proactive in creating their own evacuation plan or plan to shelter in place.

>> **Carole Tonks:** The overnight simulation fulfilled many objectives, not least of which is getting to know each other and building trust. Individuals oftentimes do not evacuate in a timely manner and may wish to shelter in place even after the situation becomes dangerous. So by bringing the disability community together to exercise a full-scale shelter experience, the idea is that it will better prepare them for an evacuation to shelter.

Our goal for the emergency managers and volunteers was to increase their knowledge of the accommodations that people with disabilities need in the general emergency shelter.

>> **Luke Koppisch:** We wanted individuals to exercise the skills and confidence needed to appropriately assist individuals. This was supposed to be a learning tool for them. We wanted them to learn from the variety of disabilities in shelter and use that experience in actual emergencies.

>> **Carole Tonks:** We had a lot of support from the community. We had a lot of people volunteering to work the shelter that night. People were taking online courses through the American Red Cross and through FEMA and really preparing to be a part of this.

As we wanted to see, we had some struggles. We had some issues that happened during the overnight. And one example is there was a young man there with his family who had autism. And as the night went on, he was just kind of walking around the auditorium. He was making some noise. I didn't see -- obviously I was sitting with his family. We didn't see this to be an issue. One of the volunteers there apparently went up and led the young man into a private room, into a quiet room. The family didn't realize this happened. You know a few minutes later they realized their son wasn't there. When they went to go get him, they were told he was brought into the private room. When they went to get him, there was nobody in the room with him, no one stayed with him. He have walked out.

We did find him, so nothing happened but this was a great example of somebody who really had good intentions, thought they were doing something good but was not educated enough to know that, number one, you ask the family if there's an issue and enough about autism to know that he really was not -- he was just being himself. So that was one issue that arose.

Some of the other things, you know, they were small things. We knew that the Salvation Army -- they were nice enough to provide a canteen but we also knew they were not going to have straws available for people who had a lack of fine motor skills. So we made sure that we had straws packed with us. But, again, you know, personal responsibility. If you're a person with a disability and

you know you need a straw or you may need adaptive utensils -- you know, in a perfect world it would be wonderful for the shelters to each have a box of these items available but the reality is right now is they probably don't. So it's your personal responsibility if you know there's something that you're going to need to make sure it's in your go bag and pack it.

>> **Luke Koppisch:** The other issue we found was the meals ready to eat were not accessible for people with disabilities. People who had trouble use of their hands could not open their packages and required assistance to open these packages so they could enjoy their meal. So that's something that is important when you do plan to serve meals to make sure that people with disabilities are able to access the meals independently. Sure, there's staff there but the idea is to have people make use of, again, the facilities, the services independently as much as possible.

>> **Carole Tonks:** And make sure, you know, that the accommodations, again, are reasonable. If you're a vegetarian, remember, you're in the middle of a disaster. So accommodations may not be that I want a vegetarian meal. If you have a medical reason or diabetes or something different, that's a different situation. But this is in the middle of a disaster. So everybody needs to tough it out.

>> **Luke Koppisch:** Again, we would like to emphasize it's important that people with disabilities practice personal responsibility. Pack personal items in your go bag. Medications that you need that are specific to you need to pack and should not expect the shelter to have this. Things that you need for yourself should be your responsibility to bring them. Have them available for your use.

So the what. Think about some of these questions as you proceed in your planning. What are your goals and objectives when you do the exercise? What do you want to exercise? What are your strengths? What are your weaknesses? What is the timeline?

We also want to consider the who. Who is your audience? Who is this geared to? Ok? Who are the organizations you want to participate? We gave you a list of organizations that we had at the table for us. Obviously your organizations are going to be a lot different. Who takes the lead?

>> **Carole Tonks**: That's important. You don't want too many cooks in the kitchen.

>> **Luke Koppisch**: And who takes the responsibility for the insurance? That's an important thing when you have a shelter. You need to get insurance coverage.

>> **Carole Tonks**: In our situation, we were fortunate that the county assumed the liability.

>> **Luke Koppisch**: Money, these things take money to put on. Man power, woman power, is there enough volunteers to man the tables, to greet people? Security, infrastructure, this is very important. A shelter needs to be on a paratransit route. It needs to be close to a train station. It needs to be accessible. It needs to be accessible for people with disabilities. Many people with disabilities don't drive and rely on public transportation or paratransit services. So what needs to be done in order to find out the location that meets those needs.

>> **Carole Tonks**: And when. The when is the best time to hold your exercise. Obviously that's up to you but remember to give yourself enough time to plan an outreach to the community. We held ours in August. We were fortunate that there actually was air-conditioning in the auditorium because sometimes heat could be an issue for people. But, again, if it's a realistic scenario, you know, we have to go through this sometimes. We did have EMTs in the area.

And where? Where will the exercise be held? Again, transportation is a consideration. Can people get to you? Is there physical accessibility? There is a good ADA checklist for emergency shelters that's at ADA.gov.

We struggled a little bit when we were putting this presentation together for everyone because while we say we want the shelters to be accessible, and obviously that is what we're aiming for. When we organize -- and we're on our second one now -- you don't want everything to be perfect. You know, obviously people need to get in the door and you need to have restrooms accessible but we didn't want to -- we struggled a little bit with this in our meetings about how pre-planned does this exercise need to be. And from our standpoint we felt that we didn't want it to be. We wanted this to be as realistic as it can be. And as I had said in the video, hopefully you all heard, is that we wanted to have some failures at this because that was the way we were going to learn. We didn't want it perfect. We didn't want a location that was absolutely accessible and there was no changes needed. We wanted it to be real enough to know what had to be changed.

>> **Luke Koppisch:** And the volunteers and the first responders, people like that will have ways of working with people with disabilities. But I think they learned a lot from that overnight experience. I think that's part of learning from each other.

>> **Carole Tonks:** So where do you find participants both from the disability community and the emergency management community? Now, on our end, we outreach to local disabilities organizations, we had it in our newsletter, we had it on our social media site. So use your local Centers for Independent Living. Get them involved in the process. Emergency managers, we really asked our local OEM to help us, we asked American Red Cross, we reached out to long-term recovery groups in the area. Anybody we could think of who would be able to get people out and interested in joining us we reached out to.

>> **Luke Koppisch:** And remember, this is not too long after Hurricane Sandy. So emergency preparedness was really on people's minds. I think it was a -- we

talked about timing before. I think the timing of this was important. People were real -- people said we need to do better jobs for people with disabilities in disasters. And people with disabilities realized that they need to be prepared themselves.

So the how. Questions to consider. Once your planning group is in place, it will be different in each county, in each area, in each entity that you're working with. How do you get buy-in? How do you convince people this is something important to work on? How do you create operational cohesion? How do you assign roles? Very important. Ok? How do you coordinate activities? And this all comes down to the leader, who is assigning activities, who is coordinating everything. How do you make this a priority for all involved? How do you keep the momentum going after the exercise? How do you validate the results? How do you inform others about the project and make it replicable?

These are some considerations. You may have more that you want to think about when you plan your exercise.

>> **Carole Tonks:** These are some of the questions that we had asked that we discussed when we were in the planning meetings.

>> **Luke Koppisch:** So I'm sure you want to know what lessons we learned from this. First of all, we want to say that everyone made it through the night. Ok? Everyone was fine. We had no doubt that that was going to be the case. But we did have the exit interview and survey which revealed a number of things including a sense that evacuation to the shelter was not as bad as the participants had anticipated, ok, and suggestions on easy improvements that would result in a smoother sheltering experience. So they gave us feedback. We had a post survey for emergency managers and volunteers and a separate one for participants.

>> **Carole Tonks:** I think what we will be doing for the second sheltering simulation is we'll probably do a pre and post survey. I think we did the post, as

Luke said -- we had two different surveys for participants and emergency managers but I think it would have been helpful to have a pre survey on what people knew going in. So we'll probably do that the second time around.

>> **Luke Koppisch:** That is important, what they learn after the night.

Also, network building fosters communication, coordination, cooperation, collaboration with and among the disability communities' advocates, service organizations, and emergency shelters. Extremely important. Extremely important. Can't emphasize that enough.

>> **Carole Tonks:** Have to keep the momentum going so you don't lose these contacts with each other and that the collaboration with each other. So we recently formed a Core Advisory Group. This was through FEMA. It's called CAG. That's to continue to work towards making effective changes and how emergency services are provided to people with disabilities in the event of a disaster. So these meetings are monthly. We'll be holding our second one, I believe it's next week. And the meetings are people with disabilities and emergency managers. So again, we're continuing this dialogue on, you know, building -- establishing better relationships with each other, understanding each other's needs a little more, and coming up with solutions to things that we feel need to be changed.

>> **Luke Koppisch:** Continuing with lessons learned, Middlesex county bolstered its resources really before this to include accessible cots as well as a number of bariatric cots for we will with disabilities.

The county also designated and purchased accessible buses with a 12 wheelchair capacity and each with two lifts.

>> **Carole Tonks:** And that was very -- these buses were very cool because they do hold 12 wheelchairs, as Luke said. But what we also use these buses for was to pick people up from the train station and bring them over to the shelter.

>> **Luke Koppisch:** We were able to have the buses and provide transportation back and forth. Very valuable.

What we need discuss are some of the challenges. Ok? Really, the challenges of getting people with disabilities to the location and agreeing to stay overnight.

>> **Carole Tonks:** That was a little bit difficult. We didn't think it was going to be. In the beginning when we first put outreach out, we had over 50 people sign up and say they were going to stay overnight. We were almost a little worried. We wanted to cap it at 50. We didn't want to go beyond that. We were really getting a good response to it. Considering, you know, it's probably not the most fun thing to do to stay on a cot overnight and be put out but what happens is we ended up with about 25 people with disabilities. So that was a little bit of a challenge. We're working on our second time around on what might be a better way of getting people out. So that's one thing you may want to face, in thinking about the people who sign up, following up and making sure they will be coming.

>> **Luke Koppisch:** Some people did leave. They would stay for a couple of hours, check it out, and then they left.

>> **Carole Tonks:** Some people came later. That was fine. But what had happened was why this became a challenge, 25 people would have been fine if we had, you know, 25 emergency managers there but we had 75 emergency managers volunteers, and CERT teams and everybody else. So we had people walking around -- we could have utilized it more if we had more people together. We wanted everybody to take a role in this.

A finding and accessible location that can accommodate a large group. We had about 100 people total. So make sure, you know, find a number that you want to work with and then make sure you could find a location.

Again, this was a little difficult because you want to find a location that probably was used as a shelter or will be used as a shelter but also, again, can't stress the importance of the transportation line for people. You have to get -- people have to be able to get to the shelter in order to evacuate.

Feeding people. Think about your budgets. We were fortunate first time around to have some MREs, the Salvation Army provided a canteen. This time around we're going to be responsible for the food. So think about your budgets and the costs that will be involved for feeding people dinner, snacks, breakfasts.

>> **Luke Koppisch**: We want to make sure that all volunteers have a role. I think Carole touched on that before. We had a lot of people wanting to volunteer, wanting to contribute, wanting to be part of this event. All of them did not have a role to do. So it was a challenge to find a role for them.

We want to make sure that emergency personnel and people with disabilities talk and learn from each other. There's a gentleman who uses a wheelchair who demonstrated to a Red Cross volunteer the proper way to transfer. It was really a good, teachable moment. I think that volunteer, that Red Cross volunteer, learned and took a lot from that and will be able to help other people in similar situations later on.

>> **Carole Tonks**: This was a great opportunity. You have everybody together in the same room overnight. Take advantage of this. Make sure everybody talks to each other and learns from each other. You may not have this opportunity again to be together all of those hours.

>> **Luke Koppisch**: And we can't emphasize how important it is that people with disabilities can be in the role of teaching other people how to do things, how to transfer, for instance.

>> **Carole Tonks**: They know best.

>> **Luke Koppisch:** They know best. You know, what accommodations they need.

We also -- as Carole mentioned before, we want to keep the momentum going after the exercise is over. It's very important.

>> **Carole Tonks:** We did meet after the exercise was over and we did go over what worked, what we felt we could improve on and all of that. That was a good meeting. But, again, keeping it going, not losing touch with each other.

>> **Luke Koppisch:** And the surveys were shared with everyone who was at the table, everyone who helped organize.

>> **Carole Tonks:** Shared with everyone.

>> **Luke Koppisch:** Exactly. An important point to consider, we want this to be sort of a template on how to do things in the future when faced with emergencies. And, again, we're not looking at special population shelters. We're looking at general population shelters that include people with disabilities. Be prepared for anything. This is a learning exercise but keep in mind when you do your planning, a simulation is not designed to be perfect, as Carole mentioned before, but realistic. You're preparing for a real-life emergency disaster situation.

>> **Carole Tonks:** That's very, very important. It's probably human nature to want to have it run as smooth as possible and be successful. So it's almost difficult to pull yourself back and say, no, this is how it would be in real life. We don't want this to be staged. We want this to be real. And we're doing to learn from each other. As I said, that's a really -- really, please, keep that in mind. It's really important.

>> **Luke Koppisch:** So just do it. Recruiting contracting, and including qualified representatives of organizations from a diverse access and functional needs populations to participate in emergency planning efforts as staff, advisors,

trainers, contractors and consultants. Obviously you want to include people with disabilities in that.

>> **Carole Tonks:** First and foremost.

So our advice to you. People with disabilities and access and functional needs need to be a part of the planning process. Without a doubt, without any question they need to be a part of the planning process. It should not take a disaster to bring about efforts to plan and work together inclusively to prepare for positive community outcomes.

And that is our Ralph Waldo Emerson quote.

We'd like to thank everybody for having us here today, for being on this webinar. Our contact information is up on your screen. We are also here to assist anybody if anybody wants to call us, talk to us. If you're planning one of these in your community, which I hope you will, please contact either Luke or myself. And certainly, if you have any questions, we will try and answer them.

>> **Lewis Kraus:** Ok, Carole and Luke. Thank you so much. That was a wonderful presentation. All of you out there, please remember to submit your questions in the chat window and we'll get to those as we get them.

So there are a few already ready to go here for you, Carole and Luke. Here's the first question.

Do you have functional assessment service teams, FAST teams, to support your shelters?

>> **Carole Tonks:** I wish I could say for sure that I know the answer to that question but not that I am aware of.

>> **Lewis Kraus**: Ok. How long was the shelter event? What was the timeframe?

>> **Carole Tonks**: We started meeting at 5:30, 6:00 at night. I believe we finished up at 7:00 in the morning.

>> **Luke Koppisch**: 7:00 in the morning.

>> **Carole Tonks**: Yeah. Everyone had breakfast and then we started letting out.

>> **Luke Koppisch**: Yeah. We decided not to have a full day shelter, you know, 24-hour shelter. We started to have an overnight, evening, overnight, morning.

>> **Carole Tonks**: Through some of our surveys, though, interestingly enough, we did have people that suggested that it actually be longer. We'll look at that for the second time around. We had someone suggest that it be two days. So it really gave a more realistic feel to it. So we're considering doing it a little longer for the one in September this year.

>> **Lewis Kraus**: Ok. Next question. Do your faith-based organizations support your shelters?

>> **Luke Koppisch**: Yes. We did have faith-based representation at the shelter. They contributed a lot to our goal, our mission. I think there were some who really wanted to participate but maybe for some other reason they couldn't. We're going to reach out to them for our next event.

>> **Carole Tonks**: We're going to reach out to them to be more in the planning process and not just at the exercise itself.

>> **Luke Koppisch**: Right. I think that's important. There's a lot that they can bring to the table.

>> **Lewis Kraus**: Ok. Next question. Did anyone of those staying at the shelter arrange their own transportation to the shelter or was a central meeting location used for everyone?

>> **Carole Tonks**: No. They were able to get there. It was on a paratransit -- right? On the bus route? Close enough. Close enough. They were able to use the university shuttle over. And then we did have the shuttle back and forth from the train station to get people over. Certainly people who drove or got rides did go on their own. We really didn't have a centrally located meeting place for people other than the train station for shuttle buses.

>> **Luke Koppisch**: And you know what? A typical shelter will have people coming by with transportation, coming by their own, families, wherever. Again, we try to make it as realistic as possible. People came to us by different ways, which was ok.

>> **Lewis Kraus**: Ok. Great. Were those who have disabilities who participated ones who were already tied in to emergency preparedness in some way that you were working on or did you have some who participated who were on the periphery?

>> **Carole Tonks**: We actually -- we had people with disabilities who were CERT team members. We had people with disabilities who were working the registration table as people came in. So we had certainly -- what better -- you know, people to be involved in volunteering at a shelter than people with disabilities who understand some of the accommodations that were requested.

>> **Luke Koppisch**: We do have a lot of people who are experienced in emergency preparedness, not so much organizing shelters but know what to bring, know about go bags, know how to prepare themselves, what to do in a disaster. So we were fortunate enough to have their expertise as part of our exercise. As I said, these were people with disabilities providing expertise,

providing the know-how. We were grateful for their involvement. So yeah. 14 hours but it took a lot of effort, it took a lot of expertise, a lot of people to be involved to make it as successful learning experience for everyone. That's a very good question.

>> **Lewis Kraus:** Ok. The next one I think is probably on everyone's mind. How is this funded? Do you know if there are grant funds available for this type of exercise?

>> **Carole Tonks:** We were very fortunate the first time around where so many things were donated to us. The meals were donated. The buses were donated. Honestly, we lucked out the first time around. It was kind of a minimal cost on our budget being so much with in kind and donations for us. This time around it's a little bit of a different situation and we did put out there, we did write some grants and we're very, very fortunate. We've been working with our local power company, PSE&G for quite a while now on doing emergency preparedness. We have had grants from them in the past. And they have graciously given us money to host the second one.

>> **Luke Koppisch:** And I think it's important to point out that our Office of Emergency Management in the county knew that this was important, knew that this was something that they wanted to be involved in and participate in. So we didn't have to have a tough time to get them involved. Their expertise, their ability to have us use buses was really something that they wanted to show off and provide for our people.

>> **Carole Tonks:** We were also really fortunate that Rutgers agreed to let us use their facility. There was no cost involved there yet they had costs themselves as far as security overnight, different costs that they incurred. As I said, a lot of the costs first time around were really in kind and donated.

>> **Luke Koppisch:** We didn't have to convince people that this was important for them to be involved. It's unusual to have this buy-in from the variety of people

that we got. We're grateful for everyone who was involved to make this successful.

>> **Lewis Kraus**: Ok. Great. Some people were asking for your contact information so I put that slide back up. So if people want the contact information, it's there.

We also have some information here from somebody in New Jersey. It says it's FAST does not currently exist in New Jersey but the concept is being considered. So that's sort of an answer to previous question.

>> **Carole Tonks**: Thank you.

>> **Luke Koppisch**: Thank you.

>> **Carole Tonks**: I wasn't sure about that.

>> **Lewis Kraus**: Ok. Here's a good question for you. Did anyone sleep during the night?

>> **Carole Tonks**: [Laughter]

>> **Luke Koppisch**: Yes, they did actually.

>> **Carole Tonks**: One of the gentlemen who works in our office has a wheelchair that reclines. He never left his wheelchair. He went out like a light and never woke up for the rest of the night. We had to wake him up in the morning. A good number of us were up all night, though.

>> **Luke Koppisch**: He is in the video as well as a couple of a few gentlemen in the video, too, who use wheelchairs. They didn't need cots. They just slept, reclined back in their wheelchair and used the wheelchair as a bed.

>> **Carole Tonks:** We did have a quiet room. We had that set up. I wished we had two because we had it set up where volunteers were going in and taking breaks on their shifts and grabbing a couple of winks but we really also could have used a room -- we had some people who had some sensory issues. The lights were bothering them, the noise, the humming of the air conditioning. It would have been nice to also have a private room. I would suggest that if you could, if you're setting this up maybe to have a room. A lot of people with autism or Asperger's need that kind of a little bit of a break. We do have that our second time around. But I would suggest having two rooms that people could kind of escape to and take a little bit of a break.

>> **Lewis Kraus:** Was the exercise limited only to those with disabilities or functional needs or were others without disabilities or access or functional needs participating?

>> **Luke Koppisch:** We're a disability organization so we had it out there as people with disabilities and people with functional and access needs. That was the way it was presented. Some people came with their assistants, family members, and friends. So we welcome anyone without disabilities but it was geared for people with disabilities essentially.

>> **Lewis Kraus:** Next question. Who was the lead at the shelter?

>> **Carole Tonks:** We had -- a little interesting story there. For some reason, I'm not sure what happened but we ended up -- I think it was we were all kind of a lead. And maybe that was a problem. We, on our end, were getting volunteers so we were assigning roles to people. Other agencies were also assigning roles who were there. I think we started stepping on each other a bit.

So what we're doing the second time around is OEM is going to be the lead in the shelter, setting up the shelter just as they would in any disaster. And our role in this is we are going to be the lead on the disability end, on our end, on getting people, you know, to the shelter, on assisting with who needs

accommodations, setting up kind of a program while we're there at the shelter. I think it will be a little smoother. That's why in one of the challenges we mentioned, you know, not too many cooks in the kitchen because you'll start stepping over each other.

>> **Luke Koppisch:** We did a course on shelter management but we are not shelter managers.

>> **Carole Tonks:** Nor do we want to be.

>> **Luke Koppisch:** We were not expertise in that. And there were other organizations we knew who were there that had the expertise. Our role is getting people out. Our role was getting people with disabilities out for this. Our role was sort of ensuring that people with disabilities are learning or vice versa. Somehow we were charged with that with that role of becoming a manager. I think it worked out in the end.

>> **Carole Tonks:** It works out. Everybody was involved. We're going to have it a little more defined a second time around. That's a good question.

>> **Luke Koppisch:** Here's a question that's pretty interesting. I don't know if you know this yet. Are the people who are signing up for this exercise that you have coming up in September, are they the same as those who attended last year?

>> **Carole Tonks:** We haven't actually advertised it yet. We're still in the planning stages. We do have the location. We're working with -- we have met with OEM and some of the people before bringing the whole planning committee together. We're actually going to be starting the planning committee probably in a few weeks. So it hasn't been out. It will probably not be the same people because it's a different county. So while we were looking for Middlesex County people, the shelter simulation is going to be in Somerset County. We would like to actually have some of the same people so they could kind of let us know how

they felt this one went but we will be looking for a different group from a different county.

>> **Lewis Kraus**: Ok. What do you think is the biggest single warning that needs to be said?

>> **Carole Tonks**: Work together. Make sure that people with disabilities are included in this and are heard. We were really fortunate with Middlesex County. They are wonderful in working together with people.

We're doing two of these now. There's always issues that come up. And from our standpoint, the whole purpose of this is this is just not an exercise. This is so we can make lasting changes. And in order to do that, we can't speak on behalf of people with disabilities. You need to listen to them and they speak on behalf of themselves. They know what the needs are.

On the other end of that, as a community, we need to take some personal responsibility, too. So the biggest warning, I don't know if it's so much as a warning as just keep that in mind. We all have to be part of this planning process. We all have to listen to each other and work together and talk to each other.

I don't know if you have any --

>> **Luke Koppisch**: Be open to learning from each other. I think a lot of people, volunteers, emergency responders who participate in the shelter walked away learning a lot from people with disabilities that they experienced during the shelter. That's really important for us. I'm glad that took place.

>> **Carole Tonks**: What should they want to consider? At the shelter I had heard one of the volunteers saying to a young man is it ok if I used the word handicap. These are great moments. People are talking to each other. So you may want to also think about, after your shelter is over, about training. On both

sides. And that's part of keeping the momentum going and the collaborations going. You could decide what you feel based on your outcome is going to work to try and make some change.

I'm not sure there were warnings but there are important parts.

>> **Lewis Kraus**: And similarly, what would you have done differently or what do you think you will do differently knowing what you now know?

>> **Carole Tonks**: A couple of things that come to mind for me. I think I would like to have more communication, more examples of ways that we could work together. As Luke said, the gentleman who had shown a Red Cross worker how to better transfer, an easier way to transfer him on to a cot. I'd love to see more of those really hands-on type of things happen.

And we're talking about that for the second time around, possibly even breaking people into groups and having discussions, giving examples of things of what if that happens, how would you handle it. What would you need us to do? Those types of things. More learning moments, I think.

And the other thing is, I think just, again, having the roles separated. This time around we're not going to be working on getting volunteers. OEM is going to be doing that. So again, not too many people working on the same type of things that we step on each other.

>> **Lewis Kraus**: Ok. Some of the people who are listening in are emergency management professionals. They have some documents that they're used to seeing like an after action report. Do you get one of those? If so, is that something you're going to make available for people to be able to see?

>> **Carole Tonks**: We didn't get an after action report. The only training -- thing that we had was the post survey. And thank you for bringing that up. I didn't

know there was a post action report actually. I will talk to our OEM about that. Thank you for educating me.

>> **Luke Koppisch:** I guess that could be based on the result of the survey. Like we heard before, we did share the results of the surveys, both surveys given out to both groups, volunteers and participants, to everyone involved in planning this and putting this on. They have a sense of what went right and what went wrong. But the post action report would be a good tool.

>> **Carole Tonks:** That would be great.

>> **Lewis Kraus:** And similarly, there are some questions here about exercising evaluation programs for the exercise like including seminars, drills, workshops before the exercise, maybe the plan objectives, materials, logistics. Any of these things that you guys had that maybe people can see? Would you be able to share?

>> **Carole Tonks:** Yeah. We have a lot of different documentation. If someone wants to contact us, specifically what they're looking for, we'll try our best to help with that.

>> **Lewis Kraus:** Ok. I do want to mention the person that clarified here for us about FAST is with the Department of Human Services Office of Emergency Management. I just wanted to clarify that for everyone.

>> **Carole Tonks:** Thank you.

>> **Lewis Kraus:** Here's another question. Were family members included as caregivers or were there any personal caregivers available to provide assistance?

>> **Luke Koppisch:** Yes. We work with the New Jersey Division on Disability Services and they provided a personal assistant for the night.

>> **Carole Tonks:** We needed more than one.

>> **Luke Koppisch:** We needed more than one. Some volunteers acted as assistants to help the one person that was there as their hire.

>> **Carole Tonks:** People who had experience.

>> **Luke Koppisch:** Yeah. That was good. That may be the case in any real-life situation.

>> **Carole Tonks:** In New Jersey the Division of Disability Services does have personal assistants that they can send out to shelters. That was their role for us as well. But we probably needed -- I know we needed more than one person. So we will have more the next time around.

>> **Luke Koppisch:** There were family members who did come and helped out with the person, the family member who needed assistance as well.

>> **Lewis Kraus:** Ok.

>> **Luke Koppisch:** That's a good question.

>> **Lewis Kraus:** I think everybody's pretty interested. We're getting lots of questions. We're doing the best to get to your questions. Hang in there, everyone.

One question for you is in the -- when you did transfers to the cot, did you video any of those moments?

>> **Carole Tonks:** No. We did not. It was actually a very spontaneous thing.

>> **Luke Koppisch:** I'm not sure why we didn't videotape it.

>> **Carole Tonks:** Actually, we didn't videotape the entire event. We were very grateful that FEMA came and actually made that video for us. We did photo release forms and we had a photographer who donated their time. We would love to videotape it this time around. Some of these things were just spontaneously happening. They weren't set up. They weren't preplanned. We would love to capture things like that. So hopefully this time around we will be able to video. I would suggest if you could get somebody to do it, to do it.

>> **Lewis Kraus:** Were there conflict between people due to the variety of disabilities or people who were not used to dealing with their disabilities?

>> **Luke Koppisch:** We didn't see conflict among people with disabilities. Did you?

>> **Carole Tonks:** I'm trying to think. Not really. There was a couple of small things, you know, complaining that somebody's talking and they're trying to sleep. Just kind of probably things that you would just see in a shelter in general. We haven't run into anything -- we didn't have any service animals at the August event. We hope to have some at this one. So we haven't dealt with anything of who is afraid of a dog or I don't want to sleep near the dog. We had issues with outlets, with plugs, people getting, you know, angry because their cots were not near where their wheelchair was.

>> **Luke Koppisch:** Some of the participants with disabilities had complained that there was not enough mingling between them and the emergency responders, volunteers. So that was something that needs to be --

>> **Carole Tonks:** And to be fair, on their end, they felt that people were not coming up to them and talking to them. So that's why I think for our next time around, breaking people into groups and making sure that people are communicating.

>> **Luke Koppisch**: Right. Yeah. I think that's important.

>> **Lewis Kraus**: One person has a question here. In a shelter the size that you're describing, about 25 people -- at least you said 25 people showed. This person says their policy is one nurse and one medical health -- I'm sorry, mental health worker. With this type of population, do you recommend that more medical or mental health personnel be directly involved?

>> **Carole Tonks**: I don't think so. We did have a mental health person there at the table. What I would recommend is that there is an accommodation table at shelters where there is somebody who is familiar with disability and accommodations. That's one of our recommendations that we're going to be writing up.

>> **Luke Koppisch**: The mental health workers is a good question about that. In a real-life emergency shelter you are going to get people who are just, you know, panicked and nervous and upset. It's important to have someone there to sort of help them out and relieve any kind of anxiety.

>> **Carole Tonks**: They played an important role. They were there all night long. They were there from start to finish in case anyone had any concerns and wanted to talk to them. I'm not sure for what we did that we needed any more than one person. I think that was sufficient.

>> **Luke Koppisch**: Right. Yeah. But it's good to have one on hand just in case.

>> **Lewis Kraus**: Ok. For the person who asked the question about the YouTube website of the video that we saw, you can see it there in your chat window. It is there. You just need to scroll up to where I posted it.

We probably only have time for one more question. Let me do this one. Were only people with disabilities invited or were elderly or those who had disabilities who were older also invited?

>> **Luke Koppisch:** Yeah. We reached out to the Office of Aging. We reached out to senior citizens groups to participate. I don't remember a great representation of elderly people there.

>> **Carole Tonks:** They were invited.

>> **Luke Koppisch:** They were invited. And I think certainly if they came, I think they would be a valuable participant because people can learn from their needs that they have.

>> **Carole Tonks:** Definitely reach out.

>> **Luke Koppisch:** Oh, yeah. Definitely reach out. And maybe we could do a better job in Somerset County when we have the second one, of that.

: All right. Thank you so much, Carole and Luke. We realize that many of you still have your questions and you had many questions for the speakers. There were a lot of questions coming in. It was a very thought-provoking presentation. So I apologize if we didn't get a chance to get your question answered. You can, of course, contact Carole and Luke right there at their information on the screen. If would like to see if they'll be able to answer your question that way.

Also if it's a general question about the ADA, you can contact your regional ADA Center at 1-800-949-4232. You can also contact -- if it's kind of a question around emergency management, you can contact your regional disability specialist, integration specialist, at FEMA. You can get to them through your www.fema.gov and put in ODIC in the FEMA website search.

So you will receive an e-mail with a link to today's -- to an online session evaluation for today's session. Please complete that evaluation. We really value your input and we want to demonstrate to our funder the impact of our presentations.

We want to thank Carole and Luke today for sharing their time and knowledge with us. Don't forget, this session was recorded and it will be available for viewing at the <http://www.adapresentations.org/archives.php> website. You can also get to an archive of the webinar by going to www.fema.gov and entering ODIC in their search box.

One more reminder I want to let everyone know. You should have received a request for applications for Promising Practices for next year's webinars. If you have not received your listserv message, I'm going to put on the chatroom window now the address for where you can get that application and fill that out and follow the directions and send that in to the FEMA representative and we will review those in advance of selecting the Promising Practices to highlight in the coming year.

Thank you for attending today's session. We look forward to seeing you on August 13 for our next webinar, "ADA National Network Learning Session: Strengthening Emergency Communication Strategies Among Responders and People Who are Disproportionately Impacted."

Thank you, again to Carole and Luke and to all of you. Have a good rest of your day.

Bye-bye.