

Pacific ADA Center

Emergency Management and Preparedness-Inclusion of Persons with Disabilities

Thursday, July 9, 2020

2:10-4:00 p.m. ET

>> LEWIS KRAUS: Welcome to the Emergency Management and Preparedness Inclusion of Persons with Disabilities Webinar Series. I'm Lewis Kraus from the Pacific ADA Center, your moderator for the series. This series of webinars is brought to you by the Pacific ADA Center on behalf of the ADA National Network. The ADA National Network is made up of 10 regional 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.

Realtime captioning is provided for this webinar. The caption screen can be accessed by choosing the CC icon in meeting control bar. You can toggle that meeting control toolbar permanently on by pressing the Alt key and pressing it a second time. As always in our session, only the speakers will have audio. The audio for today's webinar is being broadcast through your computer. Make sure your speakers are turned on and your headphones are plugged in. You can adjust the sound by navigating to the audio settings on the bottom panel. You can adjust the sound by sliding the sound bar left or right on the audio tab. If you are not -- if you do not have sound capabilities on your computer or prefer to listen by phone, you can dial 1-669-900-9128. Or you can dial 1-646-558-8656 and use the webinar ID155-545-130. I do want to remind everyone that this webinar is being recorded and can be accessed in the ADApresentations.org website in the archive section next week. This is the 7<sup>th</sup> year of this Webinar Series, which shares issues and promising practices in emergency management, inclusive of people with disabilities and others with access and functional needs. The series topics include 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.

Upcoming sessions are available at ADApresentations.org under the schedule tab of the emergency management section. These monthly webinars occur 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 this series. Those notices go out two weeks before the next webinar and open that webinar to registration. You can follow along the webinar platform with the slides if you are not using the webinar platform, you can download a copy of today's PowerPoint presentation at the ADApresentations.org web page in the schedule section. 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 web platform. 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 submit questions, type and submit them in the chat area text box as shown on the screen. If you are using keys only, you can press alt-H and enter text in that chat area. If you are listening by phone and not logged into the webinar you may ask your questions by emailing

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Today's ADA National Network Learning Session is titled California's Emergency Plans for Wildfire Season in a COVID-19 Environment. This presentation will focus on plans for fire season and specifically address California's efforts regarding practicing integrated emergency communication transportation evacuation and sheltering in a COVID-19 environment. Today's speakers are J.R. Antablian, in the disaster services branch, he oversees aid regions in California for the Mass Care Coordinators throughout the state. J.R. has a lot of emergency management experience beginning his civil service career in 2008 at the Governor's Office of Homeland Security prior to the formation of Cal OES. Bryan May is the Chief of Public Relations and Media Information for the California Governor's Office of Emergency Services. Since joining Cal OES in 2017 Bryan has been deployed to many of the largest and most destructive wildfires and disasters in California history. Prior to joining Cal OES, Bryan spent the previous 30 years as an Emmy award-winning television sportscaster, frequent guest and emcee he now leads the video production team and often called upon to teach public information officers on camera training across California. And finally, Vance Taylor, the chief of the Office of Access and Functional Needs at Cal OES. Vance is responsible for ensuring the needs of individuals with disabilities and persons with access and functional needs are identified before, during and after a disaster and integrating disability needs and resources into the emergency management systems. So, I am going to now turn it over to you, Jr., Bryan and Vance.

>> Thanks, Lewis, appreciate that. Thanks, everybody. I appreciate that you have chosen to tune in online here. I know that discussing a COVID-19 environment online, bandwidth is a premium, and I also know that we're competing with Netflix, and so the fact that you're here right now is fantastic.

So, I want to go through... if we can go to the next slide. Just do an overview of what it is that we're going to be talking about today. Essentially we're going to focus on our plans in the state of California as they relate to the 2020 wildfire season. Now, as anybody in California can tell anybody outside of California, wildfires are in our state. Seems like every year we have more and more wildfires. And not only are the numbers increasing, but we've seen increase in scope and scale and devastation with the wildfires. And so in order to be able to take inclusive and integrated approach we've focused our efforts at Cal OES and state of California on making sure that things like emergency communication, transportation evacuation and emergency sheltering are able to benefit everyone, whether or not you have a disability or an access or functional need, we serve all of California to make sure that everything is physically and programmatically accessible. But, of course, that all starts with the way we plan. And that's what we're going to be covering today. Next slide. So I think it's important any time we talk about integrated planning on the emergency management side that we just ensure that everybody has got the right historical perspective, understanding it's that thing about -- in order to understand where it is that we are, we really need to understand where we have been. And where we're coming from. Historically speaking, as local and state and national jurisdiction, we

have not always done a terrific job of remembering the whole community in the way that we planned, prepare and respond and recover from disasters. The plans that we have had have always been well-intentioned, and you have had good people trying to do very good things, but if you look at emergency planning, typically emergency managers are former military, former law enforcement, former first responders, and usually not individuals have a lived experience with disability. And so because of that they approach things from their own perspective. Which as we know, is different from anybody in a different situation. I, for example, use a wheelchair. And so when I enter a room, I automatically and really almost at a subconscious level am looking through that room and I'm looking for access. Is there a ramp? Is there anything obstructing the pathway that I might need to have moved? Can I fit underneath the table or desk that is at that restaurant? And that's just because I live my life in a wheelchair so it's something I automatically do. But if you don't come from that perspective or have that experience, then you're probably not going to think about it. And so historically plans would say things like, we're going to evacuate a city, and we're going to send school buses to do that. Well, that's great, until somebody in a wheelchair showed up and asked, where is the lift to get on the bus? Where is the accessible transportation? And then it was like... oh, man, we didn't think about that. And because we didn't think about it, we didn't plan for it, that resource is not here. And it did a couple things. One, it put people's lives in jeopardy. But, two, it sends a very real, though unintended message that lives of individuals with disabilities weren't worth as much. But in the eyes of the people who were charged with planning for and preparing and responding to their needs, for ensuring their health and safety and independence but people with disabilities weren't on that radar. And so there was a rift between the community and emergency managers. And we saw that really come to our head and widen during Hurricane Katrina. During Hurricane Katrina, what we witnessed was that out of even who perished in that disaster, we saw that 70% of them had what we refer to as an access or functional need. And that disparity put a very bright light on this issue. And what we found is that we had to get in front of this. We had to get in front of it to save lives, and we had to get in front of it in order to ensure that the communities that we serve were represented in this process. Next slide.

So California recognized, it's not just an issue of Katrina where you have these major disasters, but we found that is any disaster regardless of how large it was, and regardless of the type of disaster, whether a fire, flood, earthquake, every disaster disproportionately impacted people with disabilities. Anybody with an access or functional need. So in order to get ahead of that, California created the Office of Access and Functional Needs. And essentially what the governor did is create this office and a chief of the office, and that was an appointment. And that individual serves as a senior level official that meets at the senior level with the director of the Office of Emergency Services, that provides briefs for the director and the rest of the executive team, but oftentimes for the governor as well. I've had the privilege of having that position for the last five years, in August, actually. And it's been a privilege to get to work in what we as Cal OES refer to as a "one team one fight" environment. And as we have done that, planning, of course, has been a huge part of what we do. And that's because the office really has a two-fold mission. And one is to identify what are the considerations of people with access and functional needs have before, during and after a disaster, and then once we get our arms around that, that we've got those needs identified, we work to integrate those needs throughout every facet of the emergency management process. And so that's what we've strived to do. And we've made a lot of progress. And while California is the

national leader in inclusive planning in large part because of the structure that we have set up in the Office of Emergency Services, and the partnerships that we have been able to form, we recognize that we're never going to hang that "mission accomplished" banner. There's always going to be more work to do. And it's going to be an ever-changing risk landscape. So let's go to the next slide.

Enter COVID-19. Here we see that in a landscape where disasters disproportionately impact people with functional and access needs, we end up with a pandemic. And COVID-19, in a very cruel and unfair manner, specifically impacts older adults and individuals with underlying medical conditions, many of whom have a disability, to a much higher extent and level of consequence than the rest of the population. So what we found is we have to take these plans that we have that typically focus in on smaller geographic areas and we had to broaden them out to deal with the pandemic that was impacting all 40 million Californians. As you can imagine, as you have seen, while California did flatten the curve, numbers are ticking up, and the pandemic has and continues to strain bandwidth and we're always concerned about resources, and there are complications to moving from what we would consider just a COVID response. So a COVID response within a wildfire season. So to ensure we do the most for all Californians, we took our wildfire plans and we adapted them. We updated them, we revised them, to ensure that every component was integrated. I want to say something about the way we did that. Let's go to the next slide. Just because the word "governor" is in the title and because we are the Office of Emergency Services for the entire state, the world's fifth largest economy, we start with a very real understanding and a very real respect for the fact that there is no one single entity that owns the entirety of emergency management. Right? Our strength, I believe, as Californians lies in our ability to partner with one another. So that's why we as an analysis, and specifically the Office of Access and Functional Needs strive to develop partnerships with community-based organizations, state agencies, local jurisdictions, private entities, private sector partners, and others as a way to develop a more effective coordinated response to disasters. What we tell all of our local jurisdictions is that you can't just develop a plan in a vacuum, right? Because we develop a plan in a vacuum, that's your plan. That's not the community plan. That's your plan. Your plan is going to be filled with gaps. But if you will partner with your whole community stakeholders, while it's going to be a more robust process. You're going to do a few things. One, you're going to build up trust. And that's really needed. But you're also going to end up with a better plan. And that better plan, once operationalized, is going to save lives. And it's going to ease human suffering. And so the guidance that we've developed has come in partnership with agency partners, community partners, and jurisdictional partners and essentially what is going to be presented today, the amalgamation of that. And so that guidance has gone out. It's been pushed out to the counties. And it emphasizes the importance and the steps to use integrative communication, transportation regulation, shelter operation plans throughout the 2020 wildfire season in a way that encompasses pandemic concerns. I've got the great fortune of being able to work with some immensely talented people, and Bryan and J.R. are going to talk about things like communication and the actual sheltering plan itself. I do want to take a moment before I pass that baton and go to the next slide and touch on the emergency transportation and evacuation component. So, essentially we see and realize and promote the message that in order to meet the needs of the whole community on the emergency transportation side, you have got to have three elements that come together. You've got to have awareness. Do people know who to

call? So, okay, I've found out there's an emergency. I found out that there's an evacuation order, but I can't drive myself. And maybe I do or don't have a care attendant that can come and assist. How do I get out? Who the accessible transportation provider that is going to take me where I need to go? So we have to ensure people know who they're going to call. Then we've got to make sure there's coordination. What I mean by that is that communities have to have memorandums of understanding in place with their local transportation providers that are executable 24/7. If there's a fire at 3:00 in the morning, then that service is going to be available without advance notification to anyone and everyone in that state -- I'm sorry, in that jurisdiction that needs that accessible service. Then there's got to be operational expediency. Right? Are we moving faster than we did before? And in order to get there we've made sure that jurisdictions understand that people with disabilities do not have the same luxury of time when it comes to evacuation as their nondisabled counterparts. There are too many people who live with the reality that when there's an evaluation order, their neighbor hears that order, grabs a go bag, pops in the car and drives away. But when it comes to them getting out, they don't hop in a car and drive away, they call a care attendant. They wait for the care attendant to come and they pack up all their supplies, their durable medical equipment, and then they call for accessible transportation provider to come. And then they wait. They're left to wait and hope and pray that the winds shift and that the fire will slow. And in 2020 that type of strategy is just not acceptable. That's why we push the awareness and coordination side to ensure that there's a greater level of operational expediency. Instead of having good people come together to plan for good things, we have good people coming together in partnership that are planning to do great things. I want to turn some time over now to my colleagues, and Bryan will talk about the communications side, and we'll go to that point.

>> BRYAN MAY: Thank you, Vance, I appreciate it and thank you for letting me be here today to talk about crisis communications, public information, and media relations, our job really straight out of the FEMA playbook is to get the right information to the right people at the right time so they can make the right decisions, and that certainly puts us and everyone to the test when we see emergencies happening and even in the pandemic we're looking at right now, we've been activated since just after the first of the year, and it's causing us to change the way we do business. It's causing us to change the way we respond and be ready and react and get information to everyone. So next slide, I'll just kind of go through the ways that we try and get our information out. Obviously the most common one is what we refer to as a WEA, or a Wireless Emergency Alert that is just the messages over your phone. That's how people typically receive those. They can come through your local sheriff's department. They can come from a state level if it warrants that. And Cal OES has established accessibility standards for WEA messages. We are working, obviously, with the font, the text, the size, the color, the complexity, and we try to make sure those will always ready to go. The ask for our part is that you make sure that that WEA message is turned on on whatever cell device you have so you can receive those messages whenever they come out. ASL interpretation at press conferences, and we have never seen the magnitude of that more than we have right now during this event. We have done in the last 100 plus days over 70 press conferences with the governor here at our OES state operation center and headquarters and then elsewhere as well. As a matter of fact, in the next minute or two, the governor will be beginning a press conference on being fire alert, on being aware and fire safety aware right now, and that press conference is happening across the County of Sacramento at McClellan air force base, our

director Mark Dellucci is there and Tom porter is there and talking about we're in a pandemic and we're responding to COVID but we need to be ready for wildfire season. It's here and happening right now. Five of the worst wildfires have happened in the last ten years and the number of wildfires to date this year, 73% higher than what we saw this time last year. As a matter of fact, we had 628 new wildfires just last week. That gives -- new wildfires just last week. Gives you a scope what we need to be ready for. Not necessarily drought conditions but certainly close to it and wildfires are in the back of our mind. So ASL interpretation for us at press conferences is crucial and key any time we have them. We understand that not everyone receives information the same way, so we strive to integrate live ASL interpretation at all of our press conferences. There are obviously press conferences that happen across the state done by local jurisdictions, local sheriffs, and while we don't control those, we always encourage them to have ASL interpretation at local press conferences as well. We work closely with Vance and his team in our access and functional needs department to make sure we're aware not only of press conferences but community meetings, town halls, anything that is going to be used to present information to people that they need, we work with the local jurisdictions to make sure that if at all possible they have ASL interpretation there, and we -- when we do have ASL interpretation at our press conferences, always try to use credentialed disaster response interpreters so that we can make sure we get high quality services. To that end we are actively involved in the Disaster Response Interpreter training, the DRI training. Those happen throughout the state. And it gives us a great opportunity to integrate one of our public information officers into that training and explain thoroughly what is going to happen if you are an interpreter and you get called into a high level press conference that the governor is at or that our leadership is at. It gives us a chance to work with the interpreters and explain that we will control everything that we can and we understand that there are certain things that we can't control. We understand that the interpreters always like to be involved in briefings before the press conference. We do everything we can to make sure that they're in that briefing and can get a good idea of what is going to be said. We make sure that we put a list of speakers up so that they have names ahead of time. We make sure they know exactly where to go. Again, we have done over 70 press conferences since COVID began and we change the way we do them here. We set up a camera dedicated to our interpreter. We've got lighting dedicated to our interpreter so that they're clear, they're on screen. We have moved the box that the interpreter is in from the lower portion of the screen because we found that when TV networks were covering these press conferences and carrying them live, that the interpreters were getting covered up by the lower third banner on the bottom of the screen. So we've moved our box that the interpreter is in the upper portion of the screen so that they're 90% of the time in clear view. And we, again, just work with the interpreters and the DRI trainings all across the state, whether they're southern California, northern California, anywhere in the state, when there's one of those DRI trainings, we have a public information officer, a PIO, that goes in and helps coordinate that and get the message along and make sure they understand exactly what is going to be happening. And then as far as accessible information, you know, we are always looking at how Cal OES is going to communicate sheltering and COVID information during fire season. We put out a lot of videos during fire season during COVID. We want to make sure that those are informational videos that they've got closed captioning, that we post PDF and Word documents, that they're accessible, we maintain 508 compliance. We have had to obviously look at how evacuation information is going to change. We understand that shelter operations are going to go through extensive

updates due to COVID. We work with the Department of Social Services to have a plan where we can do mass care and sheltering in a COVID-19 environment. The state is prepared to secure hotel rooms, college dorms, fairgrounds, campgrounds to allow individuals to shelter in settings where we don't bring massive amounts of people together and they can't social distancing. We have look at protocols that require health screenings and dedicated cleaning staff and meals prepackaged. And all of that needs to have messaging that is out there to the public and that's what we're constantly working on to try and get that out and make sure it's accessible to everyone. Next slide. So I wouldn't -- I would not be doing my job if I didn't leave with the messages that we try and pass along on a daily basis. The picture on the left is a press conference with the governor. This was early in the pandemic and you see the interpreter off to the left. That was before we had everything situated the way we have it now. You see the slide on the right that was from a press conference with the governor just yesterday. Again, I mentioned the interpreter box up in the corner. Their own dedicated camera, well-lit, and we try and keep that up -- or we do keep that up during the entire time. Our message always is -- and I know Vance was talking about this earlier. Be prepared. We want all families to not only think about emergency evacuations and plans but actually sit down with your family and talk about it. How would you respond if you and your family weren't together when an evacuation order calm down? I know for me and my family, wife and two kids, we're in four different places in most parts of the day, so if cell service was knocked out, we have public safety power shutoffs now where we're proactively shutting off electricity to avoid wildfires that can cause disruptions into cell service. So if you had to evacuate and your cell phone didn't work, do you know a spot where you and your family would meet if you weren't able to call them and say, this is where we're going to meet? Have one spot planned out and a backup spot planned out. If you had to evacuate your area, do you have not only a route A but a route B and C you could go if one was impacted or closed due to whatever the emergency is. So be prepared , have a plan, discuss with your family and know what you're going to take and know where it is, and then obviously in COVID-19 we are just spreading the message constantly of wearing a mask for ourselves and for everyone around us. You see the lower third banner on the governor's press conference from yesterday, wear a mask and slow the spread. So that is the messaging that we're working on. Always we can do a better job and we try and work with Vance and his team to make sure that that happens on a daily basis. That's it for me, Vance.

>> VANCE TAYLOR: Thanks, Bryan. I really appreciate it. Thanks to your team. One of the things that Bryan talked about was the Disaster Response Interpreter program. And essentially we have worked really closely hand in hand with partners in the deaf and hard of hearing community, and the reason why is because we want to make sure information gets out to everyone. And communities oftentimes have been left out on the public messaging side, and we've heard far too many times when people who are deaf were unable to get life-saving information simply because their local jurisdiction did not provide ASL interpretation services. So the program was established to ensure a few things. One, that we had a way to ensure that interpreters were really skilled and really qualified. There's been a few famous instances where interpreters weren't actual interpreters but rather people just waving their arms and making hand signals. That happened at the Nelson Mandela memorial and it's happened in hurricanes in Florida. So we need a system to ensure that we get skilled interpreters.

Also, interpreters will be in close proximity to the governor or other officials, we wanted to make sure that they have background checks done. So we knew that was a safe and secure option. And so this program was developed. It's been run throughout the state of California, several trainings for interpreters a year. And if interpreters pass, and they don't all, but those who do receive a credential. And that essentially is a feather in their cap. It designates them as somebody who has the skills and expertise, but also the security clearance to serve as an interpreter. And so we're always very proud of that program and really proud that it's working and really proud that as an agency we're always open to using interpreters. Thanks very much, Bryan, for all the work you and your team do in California.

Now, to talk specifically about the sheltering plans, and that component, that aspect of once the communication side, which Bryan touched on has been addressed and the transportation is addressed, which I touched on, then we get to sheltering in a COVID-19 environment. And in the state of California, the California Department of Social Services, along with the Red Cross or the co-leads for mass care and sheltering. So we've got J.R. from the CDSS disaster services bureau that is going to walk us through this great plan.

>> J.R. TAYLOR: Thank you, Vance. Yes, so specifically the California Department of Social Services created a mass care and shelter guidance in a communicable or infectious disease environment document. We worked with our partners at the California Department of Public Health, CDPH, the emergency medical services authority, the Red Cross, and the Governor's Office of Emergency Services to create this unique document and making sure that during fire season or any other disaster that requires sheltering, that we address the specifics of COVID or any type of pandemic considerations in congregate or non-congregate sheltering. So I want to touch a little on the distribution. So we wanted to make sure that not only in developing this plan it got to all of the stakeholders. So Cal OES, once the plan was finalized, they distributed it to all of the emergency managers and all the counties. We, Department of Social Services distributed it to all the Mass Care Coordinators throughout the state and all the counties. CDPH distributed to all of the local public health offices. And so on. Red Cross, their local chapters, and EMSA to EMTs.

So some of the things I want to touch on are some of the AFN considerations, and I know some have been talked about, but I want to make sure I hit on at least a few of the ones specific. We'll get into them on the next slide -- not yet, but when we talk about some of the sheltering options. But some of the things that we mention in the plan specifically are things like service animals, to ensure that individuals with disabilities or AFN needs are not separated from their assistive devices, service animals or personal care assistants during evacuations and transportation. Making it very clear that service animals are not pets. And that separation of these resources could and possibly would jeopardize the health, safety and independence of survivors with access to function needs. So moving on to the next slide...

I wanted to talk specifically about the change that we're going to be focusing on this year of the non-congregate settings. So non-congregate in this case is going to be hotels, motels, dorms, those types of things. For the big part, it's going to be hotels and motels. I know we have worked to identify hotels and motels throughout the state that volunteered to work during the programs. DJS has been helpful and we also have GIS mapped some of those. Red Cross

has worked out agreements with local hotels as well. And just during a pandemic, hotels, motels, non-congregate settings are definitely the most advantageous. It provides private rooms, easy facilities for eating, providing laundry services, usually laundry is on site, meeting with individual clients. Hotels are preferable to dorms as a first case, even though dorms would still be considered a non-congregate shelter, because they already have things like bedding, towels, WiFi, phone systems, and usually they have housekeeping services available. The only concern with using hotels, especially in mass evacuations, is the limited amount of rooms that may be available. So this would require us procuring or working with the locals to procure multiple hotel facilities. Also the considerations need to be given when -- that was one of the big things we talked about in the document, is that considerations need to be given specifically to the AFN -- I'm sorry, the prioritization to people with access and functional needs. So hotel that have AFN specific rooms. Counts for each of the hotels need to be considered, how many rooms are AFN, specifically in certain areas there may be hotels or motels that are a walk-up. So making sure that all of the first floor rooms are reserved for people with mobility issues. So prioritize those rooms and make sure that those rooms are given to people that have those accessibility or disability needs. Additionally the rooms need to be considered for people that are either sheltering from being exposed to COVID or people that are confirmed positive or any other type of health or medical needs that they may have, depending on how long it may take, and we'll talk about later on the health considerations, because some of the -- right away there might not be a site set up specifically for people that have our confirmed COVID positive or people that are possibly in isolation because they have been exposed. So that's another group of people that would be in the high risk category to ensure they had a room and a hotel or motel. The second one would be congregate with additional guidance. So congregate settings are traditional ones we've used in the past. Churches, schools, gymnasiums, those types of places, however, we are going to have to adapt those places as we have not -- as we've used in the past, we're going to have to take into consideration things like isolation care areas that are separate. Separate living areas for people. And screening areas. We want to ensure that when people are coming to these settings that they're screened prior to being placed inside a facility or a shelter. And then if they are either experiencing any of the symptoms that the local health officer deems high risk, that that isolation area is ready and available to have people shelter in those specific areas.

Campgrounds. We mentioned this as a third option. We do understand that campgrounds are definitely the least favorable for people with AFN needs. Campgrounds are usually not ADA compliant, can have mobility issues, showers and bathroom issues as well. So it's important to note that we mention all three of these items because each jurisdiction, each county, they have their own unique needs and they also have their own unique set-up. So some rural counties may have one or two local hotels that may not have enough room, and they may also have small areas like fairgrounds. So those places will need to be taken into consideration on what to be used and then use campgrounds as a possible last resort consideration. But campgrounds could be identified and possibly used, things like tents or tent cabins already set up in those local jurisdictions, RVs or trailers, again, already set up for that type of location. So, specifically on shelter staffing, one of the big pushes that we worked with the Red Cross when we did Project Room Key in California is identifying shelter workers. And I know Red Cross initially, they were looking to expand people and train people for shelter. So I know they did a big push to recruit additional staff to work in shelters, as well as we worked with them to

create a shelter training course, which is actually embedded as one of the links in our operational area plan that I'm discussing. I believe it's somewhere around -- it depends on -- I think a couple modules that can go between one hour to two and a half hours total. And it kind of just outlines some of the considerations for being a shelter worker in a pandemic or COVID environment. I know Cal volunteers set up the California for all website and from there they took a list of people volunteered to work at shelters and Red Cross took that list and tried to provide training to them specifically on working and sheltering. Still deploying coordinators to the operational area or EOC when requested and we would still deploy our VEST and FAST teams for those of you not familiar, we manage both programs locally with the California Department of Social Services. It's the voluntary emergency service teams and the functional assessment teams that would go through and provide assistance as well during sheltering.

So go ahead to the next slide. So the feeding plan. So no matter whether this is a congregate or non-congregate shelter the recommendation for feeding is clamshell style. So the food is already prepared and it can be dropped off at a person's room where the food is left outside the door, somebody knocks and then they can pick up the food. Same for or similar situation for congregate settings with isolation, food would already be prepared. It wouldn't be in any buffet style serving. And they would be able to either leave it at the cot or right outside. With the cots in the non-congregate, some of the additional things we're talking about is spacing, six foot between cots or potentially setting up screens or walls in between. So additional considerations were also mentioned to be taken for people that have special dietary needs as well. So, again, these are all recommendations that we made to the counties to take into consideration in planning for sheltering in a COVID or pandemic environment. Effective communications. So we definitely went through and outlined a lot of the different ASL services that should be considered, AFN, ASL, the large-print for signs, the translation services that have already been mentioned, and we made recommendations that the counties take in all of those types of considerations when planning for shelters and doing assessments ahead of time. Some of the shelter management things -- considerations mentioned in the plan included things like availability of personal service assistants, the PSAs specific to the activities of daily living, basically helping with aiding and rest rooms, assistance getting dressed, grooming, bathing, those types of things, allowance for caregivers to accompany the PSA. Providing access to certified ASL interpretation, which I know has been mentioned. Establish a process and place for shelter clients to request access and functional needs resources, such as durable medical equipment. And making sure the handouts are in multiple language, large print, interpreting, pictograms, plain language, clear signage.

So those are some of the things that we have mentioned specifically. I know we have a lot. There are available -- this document is available, I believe, if you have Vance's email he should be able to send it out if it helps. But one of the last things I really want to talk about is some of the health shelter screening things that we mentioned, and that was from our CDPH public health partners. In setting up the shelters, whether it is non-congregate or congregate, it's still important to do health screenings. So insuring the health screenings are conducted three times a day, making sure that you have a dedicated cleaning staff on site for when people come and go or cleaning up the cots or the area, especially transportation. So when you transport people from one place to another, that the cleaning services can come in and clean the vehicles. The pre-packaged meals, of course, to all the shelters for the medical as well

medical, behavioral and mental health professionals are on site as needed. Dedicated hygiene assets to be used by individuals. Special considerations should be considered for older adults and individuals with disabilities or other access and functional needs specifically for other healthcare needs as well. And having WiFi availability for people which would allow for some of those remote ASL services or translation services. And, of course, other things like PPE and medical staff on site. And that goes hand in hand with the isolation tents or separate areas so the medical staff can assist. So otherwise, I mean, the plan is pretty robust. I'm hoping, again, this is just a recommendation of the counties. We know each county has their own unique needs and we're hoping that at least some of the aspects can be used and considerations for counties when taking into consideration planning for sheltering needs in a pandemic. So otherwise I think I'll turn it over... back to Vance.

>> VANCE TAYLOR: Thanks, J.R. Appreciate that and thank you for the job you did. I think it's always a real challenge to take a big robust plan and be able to condense that into something that is easily consumable and, you know, just a few minutes. So I think you hit the nail on the head there and I hope that people were informed by that and also if there are more questions that they will go ahead and look at the actual resource itself, which I know is going to be made available through the Pacific ADA Center and also available from each of us if folks want to reach out. I do want to take just a couple minutes and just remind everybody what J.R. touched on at the end there, which is as a statement, we put out guidance. That guidance does not come with regulatory authority. In order, we essentially set the bar. We provide a framework or a blueprint. And then we turn it over to the locals and encourage, implore, and try to empower them to be able to enact and operationalize the plan according to those standards. Recognizing there's 50 different counties. That means there's 50 different ways of doing things. But even more, if you go from the Pacific towns, and cities within each of the counties. But one of the things we have seen, especially in the last few years, is a cultural shift in the way that emergency managers and communities are thinking about access and functional needs and the integration, considerations for older adults and people with disabilities, all the way down the line. And that has been backed up in legislation like assembly bill 2311 which mandated that every plan account for the integrated resources and needs associated with communication, transportation and sheltering. We also saw that followed up last year with assembly bill 477, which says that as you integrate those plans, jurisdictions will need to work with representatives with the access and functional needs population. And that, I think, is where you really get to a picture where it's collaborative. We talk about the whole community. And I think a lot of times we kind of say "whole community," maybe to it out there flippantly or as a casual thing. But the reality is, it takes the whole community. If you are a local emergency manager and you're listening to this webinar, I hope that you will take time to stop and really evaluate... are you partnering with your partners in the whole community, Independent Living Centers, for example? All the community-based organizations that serve people with disabilities with access and functional needs. Are they at your planning table? Are they an integral part of the planning and operation of what you're doing? And if they are, then fantastic, kudos to you. And if they're not, reach out to the Office of Access and Functional Needs. We're more than happy to help develop those relationships for you and facilitate those conversations. The other thing I want to touch on is when we talk about language access, it's not just ASL interpretation services, for example, in a shelter environment. Because recognizing that you don't want to bring more people than you have to, but we are going to try

to leverage technology the best we can. And so that means things like video remote interpreting services, which will be instantly available...

[ dog barking in background ]

... and it also means immediate foreign language translation services, which also will be immediately available to people. And so, again, it's just about helping to make sure that everybody can understand the emergency messages that are going out, that everybody can communicate their needs, and ultimately we can identify and address any unmet needs. So equality when it comes to -- or equity when it comes to the physical and programmatic way that we operate this wildfire season within the COVID-19 environment. So I want to thank everybody for coming on. And absolutely our partners in developing these plans, and I just want to say that we really recognize that everybody that is on this webinar right now is in a very unique position in that not only can you take what we have talked about and integrate it within whatever it is that you're doing and the scope and influence that you have, whether you're in a community or whether you're an emergency manager, whether you're in another state and looking for a model how do we address this, but recognize that there's a lot of people that aren't on this webinar who need this information. The fact that we have it means we have a responsibility to share that with others. And ultimately I think as leaders, these are responsibilities to lift others. Our governor likes to say that it's all about rising to the moment. And I think we have a unique opportunity here to rise to this moment, to take something like planning for a wildfire and leverage it in a COVID-19 environment in a way that allows us to be better at what we do than we ever have been and that ultimately serves as a springboard for every other disaster that we're going to face outside of a COVID-19 environment. So I thank everybody for that. And I know there are a lot of questions. Lewis, I'll turn it over to you to moderate the Q&A portion of this meeting.

>> LEWIS KRAUS: All right, Vance, thank you so much. And thank you, J.R. and Bryan you guys did a great job of highlighting this. Let's turn to some questions. And before we do, I do want to remind everybody, this is your chance, you have not put a question in the webinar chat, but it in there, we'll get to them all.

All right, here is one... the first one for you. What is your recommendation for Red Cross congregate shelters that require masks but the client says he cannot wear a mask due to medical or mental health issues?

>> J.R. TAYLOR: Specifically any of the medical questions in the shelter -- and that's why we partnered with public health. We're recommending that the local public health officer either work or assign somebody to work in the shelters and those questions should be addressed by the low call public health officer on site in the shelter . If someone else has recommendations... specifically when it comes to health, we're not telling the counties have to run it. We're telling the counties, this is an issue that could come up and you should have a plan ready to address when they do.

>> VANCE TAYLOR: We don't get prescriptive at the local level, but we do ensure -- and, of course, the ADA ensures that there are things like reasonable accommodations. Now, those

reasonable accommodations have to be made on a case-by-case basis. We see, for example, in the governor's order in California that everybody is required to wear a face covering, right? When they're out, about, at stores and out in other areas. But even within that executive order, there are some exemptions. And that's children under the age of two. But as well as individuals with disabilities who are unable to put the face covering on themselves or take it off. Who have respiratory issues. Or other medical-related reasons why they can't wear a mask. So all that is going to be understood in accommodating. Nobody is going to be discriminated against at a shelter, right? But how that specific case is addressed, per what J.R. was saying, it will be addressed at the local level, local public health.

>> LEWIS KRAUS: And this is Lewis. Let me add a little bit to that as well from the ADA point of view. We know that this -- that the face masks have been a very hot topic recently. They have become like the most frequently asked question on all of the phone lines of all the ADA Centers around the country. So if you have this kind of question and this is something that you are facing, I would encourage you to call one of the ADA Centers at 1-800-949-4232 and go over some of the details of that with the staff that answer the phone. Next question: This is on feeding. Did you provide information to counties on alternatives to clamshells for someone who cannot open a clamshell container? And if so what are the recommendations?

>> J.R. TAYLOR: We didn't specifically provide details on that. That would come into the spot specifically on having a person -- the people that can help, as well as to let the shelter workers know the needs of the AFN person when they come into the shelter, specifically if they have a PSA that is there, that can do that type of help. Or if they can somehow just notify shelter workers that they need this reasonable accommodation. Again, the clamshell is still very important so that no contamination of the food is made during the distribution, and also it keeps separation between the people handing out the food and the people in the shelters. But, no, not specifically on that. But, again, that just gets to the point of having somebody and allowing people that have access and functional needs, the service workers and programs available.

>> VANCE TAYLOR: You know, one of the things that is really important, especially for people outside of California to understand, I think people in the state know this already, but California, you know, we don't segregate. So we've got integrative shelter environments, and within that we plan for what we refer to as full wraparound services. So if there are individuals, for example that cannot open an individually packaged meal, but part of the full wraparound service is going to be that they will be provided assistance to do so. If, as J.R. said, they don't have a personal care attendant or someone in their own support network that can assist them, then that resource is going to be provided for them. But the thing with their meals, I think it's important to remember, the way that we have done these meals in the past, it's almost like the buffet line, right? We all line up, we all go through and people are right on top of people. It's nice because you can visit and socialize. But obviously in a COVID-19 environment we don't want that to happen. And so it's just individualized meal, but it doesn't change the fact that wraparound services are going to be provided. And one of the great resources that DSS has, the Department of Social Services, are these functional assessment service teams, FAST teams, their sole purpose is to identify and help ensure that unmet needs are being addressed. So whether that's -- say I need help eating or feeding, all the way to I need some sort of

durable medical equipment. You know, those resources are going to be addressed and we've got a process and a plan in place to meet those.

>> LEWIS KRAUS: Okay. The next question reminds me that I forgot to point out the guy dance that Vance was referring to -- the guidance that Vance was referring to, the June 2020 communicable or infectious diseases guidance is on the ADApresentations.org website right now. You can get it on the Schedule page in can Emergency Management section. As of tomorrow that whole background for this presentation will move to the archives section, but you can get that guidance document right now if you want, or as soon as we're done. Vance, somebody is asking how they would contact the offices of access and functional needs. Do you have a slide with your information on it by chance or do you want to just give it out?

>> VANCE TAYLOR: Yeah, so you can send an email to OAFN@CALOES.CA.gov , and I'll make sure all the contact information is available to the Pacific ADA Center, and if you can add it on there, we would appreciate it.

>> LEWIS KRAUS: I just put it into the panel and so did Gabe. So it's there on the chat room for anybody who was asking about that. All right...

>> VANCE TAYLOR: You can find it on Google as well. Vance Taylor. I guess be careful what you find on the Internet, right?

>> LEWIS KRAUS: (chuckling) Right.

All right, next question... is there a question or questions that would be appropriate to ask if a person does not come out and say they cannot wear a mask because of a disability? So, again, I don't know that -- Vance, you guys probably don't have answers to this question. I'm going to suggest that for this kind of question, for all the mask questions to call your ADA Centers at 1-800-949-4232 and they'll be able to answer your question there. Unless, Vance, you have something that you guys have to say.

>> VANCE TAYLOR: I think that's great, Lewis. And that's really what I was talking about when I say whole community. You know, and partnerships. That's what it takes. It's all of us working together. I think all of us want to get to the same place. But because everybody has got their own expertise, I think, you know, there are going to be times when we're going to say, please call Lewis in the Pacific ADA Center. And that's not us, you know, shifting or punting or passing the buck but simply saying the Pacific ADA Center is the expert on that and will help inform our process. So thanks for being a great resource.

>> LEWIS KRAUS: Next question: Is California home rule...?

Do you have an answer for that one?

>> J.R. TAYLOR: I'm not familiar with the California home rule. Can somebody expand on that?

>> LEWIS KRAUS: Donna, can you expand on what your question is and we'll come back to that. All right, next question... for Vance and Bryan... are PPE meant for those serving people with disabilities and AFN available to be distributed to our local and state partners?

>> VANCE TAYLOR: Yes, absolutely. When we say "local and state partners," for example, all of the Independent Living Centers or regional centers or day programs, the IHS providers, IHSS clients, all these groups have access to PPE and also referred to as PPG, essential protective gear. And if there are questions about community-based organizations and we need this, where do I go for it, please send an email to that address, that OAFN@CalOES.gov and we'll get you pointed in the right direction.

>> J.R. TAYLOR: I would like to expand on that. We worked with the Red Cross as well just last week to confirm that in California all of their regional offices had a good amount of PPE to get started, so if a disaster was to occur or a shelter set-up, that they had enough to at least last until we needed to order additional supplies to get to the shelters. So we have strategically worked with the partners that are doing some of the shelter set-up to be sure they had enough PPE for setting this up.

>> LEWIS KRAUS: Next question... actually, it's a comment, not a question. We really appreciate the state guidance on face coverings that takes into account various disability-based exceptions. However, counties and local entities are continuing to use more limited disability-based exceptions in their guidance. So we have to handle those expanded exceptions that are covered under the state guidance as reasonable accommodation modifications instead of just an exception due to the guidance. So I don't know if you have a reaction. You don't have to.

Next question... how are mental health and sensory issues handled in a congregate setting?

>> J.R. TAYLOR: Again, in the plan we recommend to have mental health and social workers on site to address any issues that come up. But, again, this would be something for the local public health official to address. We just make the recommendation that those types of resources be available. And we have worked with Cal OES as well to establish streamlining any necessary needs for a large-scale fire that requires mutual aid resources to be deployed to the local jurisdictions.

>> VANCE TAYLOR: Just to add to that, because we do help support disaster mental health and we do also have local public health, but through what we have learned, it's important that wraparound services also include things like quiet rooms or areas where possible. And, you know, at a traditional shelter, if somebody needed to have accommodation like a hotel room, then that would be provided. But since we're already going to be primarily in hotels and motels, we expect that that will be easier to address. But absolutely those considerations are important and are built into the way that shelters are open, operated, and the way that people receive services at them. Great question.

>> LEWIS KRAUS: All right, next question -- actually, clarification on home rule. Donna says that the home rule means the county has to respond to disasters first following their regulations

and resources independently, not ordered by the state, but they need further assistance, they contact the state. So effectively a state has no control over the county. So her original question is, is California a home rule state?

>> J.R. TAYLOR: Following that in our guidance, and I mentioned specifically that CDSS Emergency Services Coordinators will not be deployed to the county until requested or asked. So every time we have a fire or event occurring locally in the jurisdiction we have our duty officer or our field rep reach out to the county and ask do you need services, do you need assistance? And so far all the counties have been able to tell us that they have it under control, they're working with red cross. We will not deploy our staff to the county until they specifically request that assistance. And we are respecting the counties. Yes, disasters are local, and they have the right and jurisdiction to handle it as they see fit. And we are just there as a resource when they need us.

>> VANCE TAYLOR: The way that Cal OES is structured -- again, emergency management throughout the state, the way we operate, is based on what we call standardized emergency management system. And whereas a lot of organizations are set up top down, SEMS is from the bottom up. The way I explain it is, if one home is on fire, the town can address that. And so they do. If ten homes are on fire, maybe that goes up to the county. If 100 homes are on fire, then the town nor the county can address it, and so at a certain point that need is going to overwhelm their capacity or their capability to respond effectively, and so they kicked up to the state. At that point Cal OES would activate the coordination of resources and be able to deploy assets. So all disaster are fundamentally and essentially local, and we don't come into all of them. We come in when we're needed. And the fact is, you know, all the disasters you hear about that are major and that are presidentially declared, that is a small percentage compared to how many disasters happen every day. So we wait until a local jurisdiction's capacity has been overwhelmed and then where there is a backstop.

>> LEWIS KRAUS: Okay. So there are still questions coming in about face masks. Again, I'm going to refer you to your ADA Centers at 1-800-949-4232 for all the face mask questions at the moment. So question... how are your -- how does your guidance work regarding drills and exercises?

>> J.R. TAYLOR: Again, as Vance mentioned, these plans are made for the locals. So it's up to them if they decide they want to drill or exercise these plans. I know in speaking to a lot of the counties, they're pretty busy working on COVID, preparing for fire season. So I'm not sure if they are doing any -- I spoke to a lot of counties that are saying they're in the planning phase right now and preparing, identifying shelters, locations and those types of things. I haven't heard of specific exercises or tabletops that are being done specifically for sheltering that I am aware of at least. Not to say they're not being done. It's just to say I have not heard of any specific exercises that are being conducted.

>> VANCE TAYLOR: It sounds like Polly needs a cracker over there, my friend.

>> LEWIS KRAUS: Next and maybe the final question. Will you be able to deploy any of the FAST teams in wildfires and in non-congregate sheltering?

>> J.R. TAYLOR: Yes, over the last few months we actually have been sending out surveys to not only our California Department of Social Services but our health and human services agency to recruit additional FAST members. And once we get the names of the people we then have been doing virtual trainings with them as well. So we are recruiting additional. We are preparing. It will just be a decision that is made once a shelter is set up and needed.

>> VANCE: Can we take an opportunity to make a plug for the FAST program? Just ask if there's anybody on the line or on the webinar that is interested in participating in that program? And becoming a FAST team member? That they go to the CDSS website and look up things like future trainings and learn more about the program. One of the things that we envisioned when that program was first developed at Cal OES and now CDSS, but we envisioned a FAST team that would consist and comprise of people that worked in and out of government and that would be comprised of individuals across the access and functional needs spectrum. And so diversity is really important on that. Again, a big part of that is because what we find is that depending on where somebody with lived experience has been, they will be able to automatically spot and identify unmet needs. And environments where people may or may not be readily voicing or making their needs known. So if people on this webinar are interested in being part of that important work, I would absolutely encourage them to contact DSS and go that route.

>> LEWIS KRAUS: And there are -- the chat room -- lots of people are listing the contact information and how to get ahold of that information about FAST teams, if you want. I also will say, if you have a particular interest in FAST team, to learn more, there was a previous webinar on the FAST teams on our Webinar Series. Maybe now a couple of years ago. You can look in the archives section and listen to that to find out more detail about the FAST team, how they started, how they evolved and where they have gotten to, and maybe even pluses and minuses. We realize many of you may have questions for speakers and apologize if you didn't get a chance to ask your question. There was some information for Vance that you can contact him at if you would like. If there are questions that you have around Americans with Disabilities Act and the relationship of all of this to Americans with Disabilities Act, contact your regional ADA Center at 800-949-4232. You will receive an email with a link to an online session evaluation. Please complete the evaluation for today's program, as we value your input and want to demonstrate the value of this program to our funder.

We want to thank our speakers today for sharing their time and knowledge with us and reminder that today's session was recorded and it will be available for viewing next week at ADApresentations.org in the archives section of the emergency management portion of the website. On our next webinar, we will be joined by FEMA for our presentation on an overview of FEMA's roles and responsibilities in the midst of COVID-19 and how FEMA continues to serve people with disabilities during that response. We hope you can join us for that. Watch for your email two weeks ahead of that time and announcing the opening of that registration. Thank you again, everyone, for spending your time with us. Thank you very much for the speakers. And thank you for attending today's session. Have a good rest of your day, everybody!