

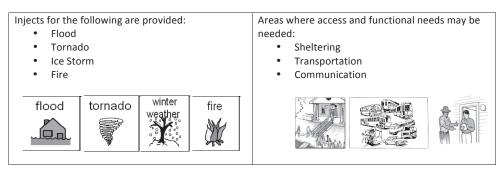
# **Access and Functional Needs**

Injects for Use by
Local Emergency Planning Personnel in
Emergency Management Tabletops and
Exercises

## INTRODUCTION and PURPOSE

These injects were developed using examples and information obtained in listening sessions with people with intellectual/developmental disabilities, family members and emergency responders in three areas of Arkansas.

Appreciation to listening session participants and to emergency management personnel who gave input and participated in the review of this publication.



### ABOUT DEVELOPMENTAL DISABILITY PROVIDER PROGRAMS

There are over 100 community based developmental disability service providers that provide a range of services to people with disabilities and their families. These services includes housing such as apartments, small group homes, support for individuals living in their own apartments/houses in the community, day programs at centers and/or work type programs for people with intellectual/developmental disabilities. In addition to these programs there are five state operated institutions called human development centers that house large numbers of people with developmental disabilities. For locations of programs in your county, you can call your local DHS office and ask to speak with the DDS Service Coordinator or you can call Partners offices.

#### How these programs can benefit your planning efforts.

- 1. Assist with organizational planning
- Participate as members of the Local Emergency Planning Council
- 3. Assist in response and recovery as part of the county plan.



### STRUCTURE OF INJECTS

The structure of injects used in this document utilizes methods familiar to emergency responders. It is written to be used by and meaningful to this audience.

- Injects are situation dependent pieces of information that provide the "scripting" that can be used during an exercise.
- The situation (scenario of the disaster) is the story and the injects provide details that fill out an exercise.
- Injects are new pieces of information that occur in the course of an exercise.
- These injects are for first responders already involved in disaster management and are offered for those who need some relevant information to imbed in existing exercises.

## **ACCESS and FUNCTIONAL NEEDS — CMIST**











**ABOUT CMIST** - There have been a number of efforts to train first responders about specific types of disabilities and conditions. These have usually been driven by circumstances that have incurred media attention after an emergency response incident that

has not gone well. While we support efforts to learn about various disabilities, we also acknowledge that the majority of emergency responders need a framework that is more manageable in the midst of a crisis response. The ACCESS AND FUNCTIONAL NEEDS FRAMEWORK known as CMIST, has been a beneficial model for planning and organizing information.

**Communication** – Some Individuals have difficulties with the receipt of and response to information and will need that information provided in methods they can understand and use. This is true especially in regards to alerting and notification. They may not be able to hear verbal announcements, see directional signs, or understand how to get assistance due to hearing, vision, speech, cognitive processing, intellectual disabilities, and/or limited English proficiency

**TIP** - Assure information reaches audiences with sensory, intellectual, or cognitive disabilities; individuals with limited English proficiency; and others with access and functional needs in the workplace, public venues, and in their homes

The Federal Communications Commission (FCC) has ruled that In an emergency, broadcasters, cable operators and satellite television services must ensure that the audio portion of the programming is made accessible for individuals who have a hearing loss, by using closed captioning or other methods of visual presentation, such as open captioning, crawls, or scrolls that appear on the screen.

**Medical Care** – Individuals who are not self-sufficient or who do not have adequate support from caregivers, family, or friends may need assistance with: managing unstable, terminal or contagious conditions that require observation and ongoing treatment; managing intravenous therapy, tube feeding, and vital signs; receiving dialysis, oxygen, and suction administration; managing wounds; and operating power dependent equipment to sustain life. These individuals require support of trained medical professionals.

Independence – Individuals who maintain their independence based on routines and supports for daily activities may lose this support during an emergency or a disaster. Many of these individuals could use general population shelters if they were accessible. Independence can also be maintained if they have access to consumable medical supplies (bandages, ostomy supplies, etc.), durable medical equipment (wheelchairs, walkers, scooters, etc.), their service animals, and/or attendants or caregivers that assist with care.

**TIP** - Service animals – Sheltering plan should include written procedures that ensure that persons who use service animals are not separated from their service animals when sheltering during an emergency, even if pets are normally prohibited in shelters. The procedures will not segregate persons who use service animals from others but may take into account the potential presence of persons who, for safety or health reasons, should not be in contact with certain types of animals.



- **Supervision** Before, during, and after an emergency individuals may lose the support of caregivers, family, or friends or may be unable to cope in a new environment (particularly if they have dementia, Alzheimer's or psychiatric conditions such as schizophrenia or intense anxiety).
- **Transportation** Individuals who cannot drive or who do not have a vehicle may require transportation support for successful evacuation. This support may include accessible vehicles (e.g., lift-equipped or vehicles suitable for transporting individuals who use oxygen) or information about how and where to access mass transportation during an evacuation.

**TIP** - Identify accessible modes of transportation that may be available to help evacuate people with access and functional needs during an emergency. For instance, some communities have used lift-equipped school or transit buses to evacuate people who use wheelchairs during floods. (pg. 5 Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities)

## LOCAL EMERGENCY MANAGERS AND EMERGENCY OPERATIONS PLANS

- For local emergency managers to develop resources in their community and to expand their emergency operations plans to include access and functional needs, this booklet can be used when meeting with developmental disability program staff in your area.
- This assists in preparing them to participate in exercises and becoming involved in the local coordinated community response during disasters.
- The principles of nondiscrimination that follow are included in the Americans with Disabilities Act and will assist emergency management personnel to plan for the Whole Community.

By supplying the needed supports/devices, these individuals will be able to maintain their independence.

С	Communication
M	Medical Needs
	Independence
s	Supervision
T	Transportation

# **NONDISCRIMINATION – What does Equal Access Mean?**

Federal civil rights laws require equal access for, and prohibit discrimination against people with disabilities. To comply with federal law, those involved in emergency management should understand the concepts of accessibility and nondiscrimination and how they apply to all phases of emergency management. Here are some key concepts.

- Self-Determination People with disabilities are the most knowledgeable about their own needs.
  - Whenever choices are available, people with disabilities have the right to choose their shelter location, what type of services they require, and who will provide them.
- No "One Size Fits All" People with disabilities do not all require the same assistance and do not all have the same needs.
  - Many different types of disabilities affect people in different ways. Preparations should be made for individuals with a variety of functional needs, including individuals who use mobility aids, require medication or portable medical equipment, use service animals, need information in alternate formats, or rely on a care giver.
- Equal Opportunity People with disabilities must have the same opportunities to benefit from emergency programs, services, and activities as people without disabilities.
  - Emergency recovery services and programs should be designed to provide equivalent choices for people with

- disabilities as they do for individuals without disabilities. This includes choices relating to short-term housing or other short- and long-term disaster support services.
- Inclusion People with disabilities have the right to participate in and receive the benefits of emergency programs, services, and activities provided by govern ments, private businesses, and nonprofit organizations.
  - Inclusion of people with various types of disabilities in planning, training, and evaluation of programs and services will ensure that this population is given appropriate consideration during emergencies.
- Integration Emergency programs, services, and activities typically must be provided in an integrated setting.
  - The provision of services such as sheltering, information intake for disaster services, and short-term housing in integrated settings keeps individuals connected to their support system and caregivers and avoids the need for separate service facilities.

- 6. **Physical Access** Emergency programs, services, and activities must be provided at locations that all people can access, including people with disabilities.
  - People with disabilities should be able to enter and use emergency facilities and access the programs, services, and activities that are provided. Facilities typically required to be accessible include: parking, drop-off areas, entrances and exits, security screening areas, toilet rooms, bathing facilities, sleeping areas, dining facilities, areas where medical care or human services are provided, and paths of travel to and between these areas.
- Equal Access People with disabilities must be able to access and benefit from emergency programs, services, and activities equal to the general population.
  - Equal access applies to emergency preparedness, notification of emergencies, evacuation, transportation, communication, shelter, distribution of supplies, food, first aid, medical care, housing, and application for and distribution of benefits.
- 8. **Effective Communication** -People with disabilities must be given information comparable in content and detail to that given to the general public, as well as accessible, understandable, and timely.
  - Auxiliary aids and services may be needed to ensure effective communication. These may include pen and

- paper or sign language interpreters through on-site or video interpreting for individuals who are deaf, deaf-blind, hard of hearing or have speech impairments. Individuals who are blind, deaf-blind, have low vision, or have cognitive disabilities may need large print information or people to assist with reading and filling out forms.
- Program Modifications People with disabilities must have equal access to emergency programs and services, which may entail modifications to rules, policies, practices, and procedures.
  - Service staff may need to change the way questions are asked, provide reader assistance to complete forms, or provide assistance in a more accessible location.
- 10. **No Charge** People with disabilities may not be charged to cover the costs of measures necessary to ensure equal access and nondiscriminatory treatment.
  - Examples of accommodations provided without charge to the individual may include ramps, cots modified to address disability-related needs, a visual alarm, grab bars, additional storage space for medical equipment, lowered counters or shelves, Braille and raised letter signage, a sign language interpreter, a message board, assistance in completing forms, or documents in Braille, large print, or audio recording.



**TIP**: The best resource to insure compliance with ADA requirements relating to emergency management is Chapter 7 of the Department of Justices' - ADA Best Practices Tool Kit for State and Local Government. It addresses in detail key ADA obligations that apply to all aspects of emergency management, including planning, preparedness, evacuation, shelters, medical and social services, lodging and housing programs, recovery, and rebuilding.

## PURPOSES OF EXERCISES and HOW TO USE THESE INJECTS

- Integrate training, equipment, and planning through a cycle of preparedness.
- Help prepare a community for disastrous events before having to react to a real incident.
- Encourage problem solving around issues of access and functional needs prior to the disasters.

These injects can be used singularly or with several in rapid succession depending upon the specific goals of your efforts.

- Time can be altered as needed to meet local exercise goals.
- While these have been developed with a certain disaster in mind, they can be used interchangeably based on exercise objectives.
- This guide also includes tips and resources for additional information



INJECTS – Flooding but could be adapted as needed.

TIME	ESF	INJECT MODE	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
12:30	6-	Phone	This is an exercise message. We	Organization	Local County OEM	
PM or	Mass		have received word that the rain is	with MOU		
insert	Shelter		continuing throughout the day.	for		
own			Flooding is going to be extensive. We	Sheltering –		
time			are setting up our (insert county_)	Shelter		
code			emergency operations center and	Manager,		
			will need a shelter set up for people	Sandy		
			evacuated.			
4:00	6 –	Phone	This is an exercise message. We are	Local County	Ms. Johnson,	
PM or	Mass		experiencing severe flooding in	OEM	Executive Director	
insert	Shelter		(insert County_). Ms. Johnson the		of Developmental	
own			director at Community First, a		Disability Program	
time			nonprofit program that serves		through 911	
code			people with developmental			
			disabilities called and they have			
			been told to evacuate their group			
			home on 3 <sup>rd</sup> Street and need to			
			know where the shelter is so they			
			can take the 10 residents.			
4:15	6 –	Phone	This is an exercise message. Call	Local County	Ms. Johnson,	
or	Mass		back again from Ms. Johnson	OEM	Executive Director	
insert	Shelter		Several people in the group home		of Developmental	
own			use wheelchairs and one has an		Disability Program	
time			electric wheelchair, so they will need		through 911	
code			to be evacuated somewhere that has			
PM			electricity. Please advise where they			
			need to go.			

TIME	ESF	INJECT MODE	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
5:00 PM or insert own time code	6 – Mass Shelter	Phone	This is an exercise message. This is Sandy, manager at (_insert County). The group has arrived at the shelter. We need three universal cots (wide and that can be elevated).	Local county OEM	Sandy, Shelter manager	Information: Church where shelter is located has access to the building and has accessible restrooms
5:20 M or insert own time code	6 – Mass Shelter	Phone	This is an exercise message. This is Sandy, shelter manager at (_Insert County_). The group that has arrived at the shelter and reports that they will need to have a private area set up in the shelter for several of the clients for personal care. They have staff to assist them but we need assistance to set up the private area.	Local county OEM	Sandy, Shelter manager	and showers.  Ideas: A separate room could be utilized or a curtained off area could insure privacy
6:00 PM or insert own time code	6- Mass Shelter	Phone	This is an exercise message. This is Sandy, shelter manager. We have started feeding the people as they are settling in and arriving but have had requests from one of the families who has some dietary issues. Something about gluten sensitivity. Another is diabetic. Can you get something over here for them to eat to help us out?	Local County OEM	Sandy, Shelter Manager	



TIP: Put policies, plans, and guidelines for accommodations in place prior to disasters occurring. Make sure that the shelter meets accessibility requirements. See Americans with Disabilities Act, ADA Checklist for Emergency Shelters. U.S. Department of Justice, Civil Rights Division, Disability Rights Section http://www.ada.gov/pcatoolkit/chap7shelterchk.htm

INJECTS – Flooding but could be adapted as needed.

**TIP** - Invite representatives of group homes and other people with disabilities to meet with you as part of your routine shelter planning. Discuss with them which shelters they would be more likely to use in the event of an emergency and what, if any, functional needs concerns they may have while sheltering. Develop site-specific instructions for your volunteers and staff to address these concerns. (Page 7 - An ADA Guide for Local Governments Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities-

http://www.ada.gov/emergencyprepguide.htm)

TIME	ESF	INJECT MODE	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
10:20	6	Phone	This is an exercise message. Person has	Local	Shelter	Information:
PM or			just arrived at the shelter with a dog. They	county	manager	Service animals
Insert			say it is a service animal. Apparently the	OEM		are not pets.
own			man has seizures and the dog helps to alert			Animal provides
time			him. Shelter has a "no pets" policy.			a service for the
code						person
10:40	9	Phone	This is an exercise message. Heard from	Local	911	
PM or			Jane Brown, a parent of a 25 year old son	police		
Insert			named Jim. He is Deaf and lives at 7201			
own			River Road in the cul de sac that is cut off			
time			by flooding. She has been unable to reach			
code			him by text message. Parent wants us to			
			check about him.			
10:45	9	Radio	This is an exercise message. We have a	Local	Local Police	Information:
PM or			family with a child with autism and the	County	or Fire	Transitions are
Insert			parents will not go to a public shelter and	OEM		extremely
own			will not evacuate their home until they			difficult for many
time			know where they are going. We have told			people with
code			them that the water is rising rapidly. Need			autism due to
			some information about an address they			sensory
			provided and if that location is not being			sensitivities and
			evacuated - they will go there. Their phone			reliance on
			is out and things are escalating. Please get			routines.
			information ASAP.			

INJECTS – **Ice Storm** but could be adapted as needed.

TIME	ESF	INJECT MODE	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
6:00	8, 6	Phone	This is an exercise message	Local OEM	Head of EMS in the	
AM			There have been five calls from people who have oxygen concentrators and people on			
or			ventilators that have run out of power. Calls		community.	
Insert own			are coming into 911 from several people			
time			who have lost power. 911 is dispatching			
code			ambulances but the hospitals are saying			
code			they do not need to go there.			
			they do not need to go there.			
6:40	6	Phone	This is an exercise message	Shelter	Local OEM	
AM			Program that serves people with	Manager		
or			developmental disabilities was sheltering in			
Insert			place at their center but they have lost			
own time			power and want to move everyone to a			
code			shelter because it is extremely cold. They			
			have about 25 people and four staff that are			
			on their way there.			
7:00	6	Phone	This is an exercise message.	Local	Police	Information:
AM .			Police have found a house with a woman	OEM		power chairs
Insert own			outside that uses an electric wheelchair.			have batteries -
time			Talked with her and the house is really			could be an
code			damaged. Explained that she can't go back			explosion
			into her house. The woman needs			hazard can be
			transportation to the shelter. There are gas			placed in roller
			leaks in the area and she uses a power chair.			or manual mode
						and pushed.
			-			Another solution
						is locate a
						manual chair
						and ask her if
						she needs
						assistance in
						moving to it. A
						person with a
						disability is not
						going to want to
						leave her power
						chair on the
						road.
						1

# INJECTS – **Ice Storm** but could be adapted as needed.

TIME	ESF	INJECT MODE	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
2:00 PM Or insert own time code	9	Phone	This is an exercise message Got a call from a passenger on a van carrying people from the developmental disability program here in town. The driver has skidded off the road 5 miles west of town – 10 passengers on board – driver is injured and some of the passengers. Everyone is still in the van. The cell phone was breaking up when the person called.	Police/ Fire/ EMS	911	
3:06 Or insert own time code	9	Phone	This is an exercise message Person called back. His cell phone is running out of power. No one has come yet. Another couple of cars have slid off the road rounding the corner. One car could have injuries.	Police/ Fire/EMS	911	
4:11 or insert own time code	9	Phone/ Radio	This is an exercise message Call back to the passenger. Can't find the location. Do you have some more information? Passenger said the driver has become conscious – He thinks it is county road 283 & thinks the 911 sign is 5054. They are all starting to panic and it is getting cold.	Citizen Cell Phone/ Police/ EMS	911	

## INJECTS – **Tornado** but could be adapted as needed.

TIME	ESF	INJECT MODE	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
9:16 PM or Insert own time code	8,	Radio	This is an exercise message.  First responder has located a woman outside of her home after a tornado. The woman was outside but the roof was caving in on the house. She wanted to go back in and get her medicine but it was too dangerous. Needs medications for seizures. She is on her way to the shelter.	ADH	Local OEM	
9:43 PM or Insert own time code	9	Radio	This is an exercise message.  A sister cannot reach her brother who has an intellectual disability and who lives with her support in his own home close to where the tornado hit. We know that power is out in the neighborhood and he is not answering his cell phone and she is concerned his house may have been hit.	Police	Police at checkpoint on the perimeter	
10:12 PM or insert own time code	9	Phone	This is an exercise message. This is Jim Jones, bus driver for Century Group Home for people with developmental disabilities. We were in the tornado, none hurt, and we were able to get out of our damaged bus but nothing looks familiar around us so I don't know where we are. Clients are upset. Need some assistance quickly but I don't know where we are – we were on highway 36.	911	Call from bus driver	

### INJECTS – Fire

TIME	ESF	INJECT	IMPLEMENTER CONTENT	SEND TO	SEND FROM	ADDITIONAL
		MODE				
or	9	PHONE	This is an exercise message.	Fire Dept.	Frantic	
insert			Call from a disability program located in Little		person on	
own			Rock. We have 6 people who can't walk down		the 8 <sup>th</sup> floor	
time			the stairs stuck on the 8 <sup>th</sup> floor with the fire			
code			alarm going off.			
Insert						
own						
time						
code						
Insert	9	PHONE	This is an exercise message.	911	Hotel Staff	
own			Hotel is on fire and a conference occurring	Dispatch		
time			with dozens of people with disabilities in	-		
code			attendance on various floors. They can't			
couc			evacuate by the stairs. Need backup supports			
			as the fire is spreading through the building.			
			Some of them are trying to get down the stairs			
			but several people can't walk and are stuck on			
			the floors.			



# **Emergency planners should:**

- Identify those in the community who might have functional needs before, during, and after a disaster or emergency. Doing so ahead of time results in an improved emergency plan, a better determination of resource needs, and more informed actions and decisions.
- Customize awareness and preparedness messages and materials for specific groups
  of people and put them in alternative and accessible formats, thereby increasing the
  ability of these individuals to plan and survive in the event of an emergency. Such
  preparedness allows appropriate allocation of critical personnel, equipment, and
  assets during the response period, and it reduces 911-call volume.
- Educate citizens with access and functional needs about realistic expectations of service during and after an emergency, even while demonstrating a serious commitment to their functional needs.
- Learn and gain from the knowledge, experiences, and non-traditional resources the disability community can bring to a partnership effort with emergency professionals.

# **Critical Questions and Next Steps**

- 1. Do you know the Demographic profile in your area that informs you about the type of assistance that may be required by various populations during an emergency including those with functional needs or disabilities?
- 2. Has your county consulted people with disabilities or the programs that serve them about emergency preparedness and response?
- 3. Do people with disabilities and the programs that serve them participate in your local emergency planning committee or in an emergency management working group?
- 4. Have you enlisted people with disabilities to participate during your emergency simulations or exercises?
- 5. Is there an ongoing method to engage in an educational process about emergency management and functional needs?
- 6. Do you collaborate with disability and aging providers, Deaf Clubs or other organizations to improve individual emergency preparation for those with functional needs?

#### COMMUNITY DEMOGRAPHIC PROFILE

Become familiar with the demographic profile of your community. This will allow you to understand the type of assistance that may be required by various populations during an emergency including those with access and functional needs or people with disabilities or older adults.

The following sources of information may be of assistance.

- County level census data for Arkansas
- o http://quickfacts.census.gov/qfd/states/05000.html
- o Arkansas Behavioral Risk Factor Surveillance System
- http://www.healthy.arkansas.gov/programsServices/healthStatistics/Brfss/Pages/CountyData.aspx
  - http://www.healthy.arkansas.gov/programsServices/healthStatistics/Brfss/Documents/DataStatistics/County%20Data/2010/PhysicalandMentalHealth.pdf
- Special Education data from schools
- o http://datacenter.kidscount.org/data/bystate/Rankings.aspx?state=AR&ind=326
- http://datacenter.kidscount.org/data/tables/326-number-of-children-in-special-education?loc=5&loct=2#ranking/2/any/true/36/any/9767

#### **USING A SIGN LANGUAGE (ASL) INTERPRETER**

Although various technological methods are available for communicating with persons who have communication difficulties, or who are deaf, the circumstances of an emergency can reduce the effectiveness of these methods. In adverse situations, sign language interpreters can be a very effective communication link with deaf persons and those who may depend on lip reading.

The best way to know if a person needs an interpreter is to ask the Deaf person if one is needed. Simply speak (if they read lips), write a note, finger spell, or sign directly to the person. If someone else requests the interpreter on behalf of the Deaf person, always ask the Deaf person to confirm the need.

DO NOT USE FAMILY MEMBERS to Interpret
Use Qualified Interpreters



#### HIRING A SIGN LANGUAGE INTERPRETER

\*Pursuant to Arkansas Act 1314 of 2013 an individual interpreting for a person who is deaf or hard of hearing in the state of Arkansas must be not only be certified, but licensed.

# DIFFERENT LEVELS OF COMPETENCY FOR INTERPRETERS:

It is recommended in cases of critical information that only nationally certified interpreters be utilized.\* National certifications are granted by RID (Registration of Interpreters for the Deaf) and are abbreviated as follows: NIC, CI/CT, IC/TC, CSC, NAD III, NAD IV or NAD V. In situations that are related case management, it may be appropriate to consider hiring an interpreter with the following credentials QAST IV, QAST V, BEI IV, BEI V, or BEI Master, if a nationally certified interpreter is not available. Keep in mind that the more competently trained the interpreter, the more effective the communication.

#### **INTERPRETER REFERRAL AGENCIES:**

**COMMUNICATIONS PLUS** Provides sign language interpreting services the state (501-224-2521).

**COMMUNICATING HANDS, INC.** Provides Sign Language Services throughout the state. (501-374-5293) http://www.communicatinghands.com/

#### SIGN LANGUAGE INTERPRETER NETWORK

**SPECIALISTS** Provides sign language interpreting services in the greater Northwest Arkansas area. (479-268-2417 or 479-439-6004 or email scheduling@SlinofNWA.com).

**Arkansas Rehabilitation Services** Maintains a list of interpreters in the state who have been state screened or nationally certified (501-686-9683).

#### PRIVATE INTERPRETERS:

It is possible to hire interpreters directly without going through an agency. This may save some costs, but increases the amount of staff time to locate someone. You can locate, ahead of time, interpreters who work in your area and who may be available to assist in emergency situations.

You are encouraged to work this out now, prior to when you might need it!

•	• •	, .	
INTERPRETING RESOURCE =			
Phone number			
INTERPRETING RESOURCE =			
Phone number			

# **Planning Notes**

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#### RESOURCES AND FOR MORE INFORMATION

"ADA Best Practices Toolkit Chapter 7, ADA Checklist for Emergency Shelters," www.ada.gov/pcatoolkit/chap7shelterchk.pdf

"Functional Needs of People with Disabilities: A Guide for Emergency Managers, Planners and Responders" <a href="http://nod.org/assets/downloads/Guide-Emergency-Planners.html">http://nod.org/assets/downloads/Guide-Emergency-Planners.html</a>

"Access and Functional Needs Guidance Resource Book and County Template, The Whole Community Approach." Published by: Oklahoma State Department of Health, Emergency Preparedness and Response Service, published 9-28-2012.

http://www.ok.gov/health/Disease,\_Prevention,\_Preparedness/Emergency\_Preparedness\_and\_Respon se/Access\_&\_Functional\_Needs\_Populations/index.html http://digitalprairie.ok.gov/cdm/ref/collection/stgovpub/id/399059

"Disaster Resources for People with Disabilities and Others with Access and Functional Needs" June Issacson Kailes, Disability Policy Consultant. http://www.jik.com/disaster.html

An ADA guide for local governments, *Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities*, U.S. Department of Justice, Civil Rights Division, Disability Rights Section. <a href="http://www.usdoj.gov/crt/ada/emergencyprep.htm">http://www.usdoj.gov/crt/ada/emergencyprep.htm</a>. https://www.fema.gov/accommodating-individuals-disabilities-provision-disaster-mass-care-housing-human-services

Federal Emergency Management Agency, <a href="https://www.fema.gov/whole-community">https://www.fema.gov/whole-community</a>

National Response Framework, FEMA, https://www.fema.gov/national-response-framework

"Promising Practices for Evacuating People with Disabilities", January 2011, University of Colorado - Denver, Inclusion Research Institute Inclusive Preparedness Center and West Virginia University. <a href="http://disabilityevacuationstudy.org/">http://disabilityevacuationstudy.org/</a>



Arkansas' University Center on Disabilities

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