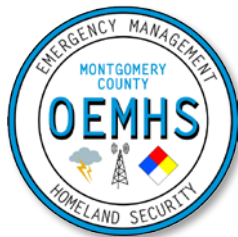




Planning for People with Disabilities And Others With Access and Functional Needs Toolkit



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The development of the Planning for People with Disabilities and Others with Access and Functional Needs Toolkit was supported by:

Kay Aaby
Maryland Emergency Response System

Ian Alexander
Maryland Emergency Management Agency

Anthony Anderson
Prince George's County Office of Emergency Management

Daniel Berkman
Montgomery County Office of Emergency Management and Homeland Security

Marci Catlett
Maryland Emergency Management Agency

Joe Corona
Montgomery County Office of Emergency Management and Homeland Security

Maggie Davis, J.D.
Montgomery County Office of Emergency Management and Homeland Security

Christina Fabac, J.D.
Maryland Emergency Management Agency

Cara Howard
Prince George's County Office of Emergency Management

Elizabeth Jones
Maryland Emergency Management Agency

Cee Cee Molineaux
Maryland Emergency Response System

Marie Warner
Maryland Emergency Response System

Cecilia Warren
Maryland Department of Disabilities

Elizabeth Webster, J.D.
Maryland Emergency Management Agency

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Points of view expressed in this Toolkit are those of the individual planners and subject matter experts involved with its creation. This Toolkit is not intended to provide legal advice.

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Acronyms

ARC	American Red Cross
ADA	Americans with Disabilities Act
AT	Assistive Technology
C-MIST	Communication, Medical Needs, Independence, Supervision, Transportation
CILs	Centers for Independent Living
CPAP	Continuous Positive Airway Pressure
CSS	Cascading Style Sheets
DHMH	Maryland Department of Health and Mental Hygiene
DOJ	United States Department of Justice
EAS	Emergency Alert System
FCC	Federal Communications Commission
FEMA	Federal Emergency Management Agency
HSEEP	Homeland Security Exercise and Evaluation Program
HTML	Hypertext Markup Language
IMAGE	Independent Marylanders Achieving Growth through Empowerment
MDOD	Maryland Department of Disabilities
MDTAP	Maryland Technology Assistance Program
MOUs	Memorandums of Understanding
MSILC	Maryland Statewide Independent Living Council
NGO	Nongovernment organization
OEM	Office of Emergency Management
OHCQ	Office of Healthcare Quality
PCA	Personal Care Attendant
PETS Act	Pets Evacuation and Transportation Standards Act
SME	Subject Matter Expert
SSA	Social Security Administration
TRS	Telecommunications Relay Service
TTS	Text to Speech
TTY	Teletypewriter
UPC	Universal Product Code
VRS	Video Relay Service
W3C	World Wide Web Consortium
WAI	Web Accessibility Initiative
WCAG	Web Content Accessibility Guidelines
XML	Extensible Markup Language

Executive Summary

This Toolkit is intended to serve as a resource that provides tools and materials for emergency managers and planners to use when planning for people with disabilities and others with access and functional needs. This Toolkit emphasizes the importance of planning for people with disabilities and others with access and functional needs, outlines inclusive planning strategies and considerations, and details how different preparedness, response, and recovery activities can affect people with disabilities and others with access and functional needs.

This document does not attempt to identify and detail specific types of disabilities or access and functional needs, nor does this document attempt to create plans for specific disabilities or access and functional needs. Instead, the focus is on inclusive planning and programs for the whole community. This is important because people with disabilities and others with access and functional needs have a range of capabilities and needs; moreover, people with the same type of disability may not have the same needs, as there is not a one-size-fits-all approach to meeting the needs of people with disabilities and others with access and functional needs. To that end, this Toolkit uses a function-based approach to identify ways to meet the needs of a wide-range of people that may be adversely affected by incidents.

This function-based approach is modeled after the “Function-based Framework for Emergency Management and Planning”¹ that was developed by a leading expert in planning for people with disabilities and others with access and functional needs, June Isaacson Kailes. This framework does not focus on specific disabilities, and therefore, does not get mired in attempts to plan for every type of disability. Instead, June Isaacson Kailes’s “C-MIST” Framework addresses five function-based needs: Communication, Medical Needs, Maintaining Independence, Supervision, and Transportation. The C-MIST Framework facilitates a more effective whole community approach because it meets the needs of a broader population and recognizes that people may develop access and functional needs as a result of an incident.

For our purposes in Maryland, the C-MIST Framework is modified, and includes the functional areas of: Communication, Health and Medical Needs, Maintaining Functional Independence, Personal Care Assistance, and Transportation.

¹ June Isaacson Kailes, [Moving Beyond "Special Needs": A Function-Based Framework for Emergency Management and Planning](#) Pages 234-235. Date last accessed 2/7/2017.

I. Purpose

The purpose of the Planning for People with Disabilities and Others with Access and Functional Needs Toolkit (referred to as Toolkit) is to provide planning guidance and considerations to support emergency planning for people with disabilities and others with access and functional needs. The information included herein should not be construed as legal advice, nor is it necessarily a comprehensive list of all of the considerations necessary to meeting the needs of people with disabilities and others with access and functional needs.

II. Scope

The Toolkit is intended to support inclusive planning throughout the State of Maryland to ensure emergency managers and planners are better able to prepare for, mitigate the effects of, respond to, and recover from an incident or disaster.

III. Definitions

The following definitions are for commonly referenced terms and concepts used throughout this Toolkit.

Accessible - Programs and services must be usable by people with disabilities and others with access and functional needs. This includes ensuring facilities are physically accessible (e.g., a facility must have an accessible path of travel, as well as accessible bathrooms, telephones, and drinking fountains, so they are, for example, usable by a person who uses a wheelchair, etc.), and programs and services are accessible (e.g., materials must be presented in accessible formats so they are, for example, usable by a person who requires large print or Braille).

Assistive Technology - "Any item, piece of equipment, or system, whether acquired commercially, modified, or customized, that is commonly used to increase, maintain, or improve functional capabilities of individuals with disabilities."² The term does not include a medical device that is surgically implanted, or the replacement of such device.³

C-MIST Framework - "[A] flexible framework built on five essential function-based needs: communication, medical needs, maintaining functional independence, supervision, and transportation (C-MIST)...[with the goal of] [a]ddressing functional limitations [and] includes both people who identify as having a disability and the larger number of people who do not identify as having a disability but who have a functional limitation in hearing, seeing, walking, learning, language, and/or understanding."⁴

² United States Access Board, Section 508 Standards for Electronic and Information Technology, [§ 1194.4 Definitions](#). Date last accessed 2/7/2017.

³ [Section 508 Standards for Electronic and Information Technology](#). "§ 1194.4 Definitions." Date last accessed, 3/1/2017.

⁴ June Isaacson Kailes. [Moving Beyond "Special Needs": A Function-Based Framework for Emergency Management and Planning](#) Pages 234-235. Date last accessed 2/7/2017.

Equal Opportunity - People with disabilities must have the same opportunities to benefit from emergency programs, services, and activities as people without disabilities, therefore policies and procedures may need to be modified in order to ensure the inclusiveness of programs, services, and activities.

People with Access and Functional Needs - Individuals who may have additional needs before, during, and after an incident or disaster in functional areas, including, but not limited to: communication, health and medical needs, maintaining functional independence, personal care assistance, and transportation.

Person with a Disability - "An individual with a disability is defined by the ADA [Americans with Disabilities Act] as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment."⁵

Whole Community - A concept-encompassing term that represents the "means by which residents, emergency management practitioners, organizational and community leaders, and government officials can collectively understand and assess the needs of their respective communities and determine the best ways to organize and strengthen their assets, capacities, and interests."⁶

⁵ U.S. Department of Justice, Civil Rights Division, Disability Rights Section. ["A Guide to Disability Rights Laws"](#) July 2009. Date last accessed, 3/1/2017.

⁶ Federal Emergency Management Agency (FEMA), FDOC 104-008-1. December 2011. ["A Whole Community Approach to Approach to Emergency Management: Principles, Themes and Pathways for Action"](#) *Whole Community Defined*. Page 3. Date last accessed, 3/1/2017.

IV. Background

A State of Maryland 2012 Disability Status Report developed by Cornell University reported that Maryland had 599,900 residents – at that time, more than 10% of the population – who identified as having a disability or access and functional need.⁷ With the population of people with disabilities and access and functional needs growing steadily each year, this population's needs must be accounted for in inclusive preparedness and planning efforts at the local, state, and federal levels. Issues and considerations for meeting the needs of people with disabilities and others with access and functional needs must be incorporated into emergency planning and emergency operations in order to ensure the preparedness of the whole community and to mitigate risk.

Attempting to classify, categorize, and plan for a specific type of disability is a less comprehensive approach than planning to meet the needs of people according to categories of functional needs because each person is impacted differently by an incident or disaster, regardless of whether they have the same type of disability. Additionally, the concept of just planning for people with disabilities is too narrow an approach for emergency planning purposes. Planning for the broader group of people with disabilities and others with access and functional needs will ensure that the whole community has their needs met before, during, and after an incident or disaster. For this reason, this Toolkit utilizes a modified version of June Isaacson Kailes's "C-MIST" Framework (Communication, Medical Needs, Maintaining Independence, Supervision, and Transportation) to create a more expansive approach to emergency planning that can be used to address the functional needs of people with disabilities and others with access and functional needs. The C-MIST Framework also facilitates a more effective whole community approach because it recognizes that people may develop access and functional needs as a result of an incident or disaster.

Maryland's modified C-MIST Framework includes the functional areas of:

- Communication;
- Health and Medical Needs;
- Maintaining Functional Independence;
- Personal Care Assistance; and
- Transportation.

These are defined further in [Maryland's Function-Based Framework](#) section of this Toolkit.

⁷ Cornell University. ["2012 Disability Status Report – Maryland."](#) Page 9. Date last accessed, 3/1/2017.

V. Planning Considerations to Address Legal Concerns

The purpose of the following sections is to provide emergency managers and planners with general information about some of the legal and practical requirements that are essential to ensuring that emergency preparedness programs and plans are inclusive. Inclusive planning for people with disabilities and others with access and functional needs is critical to ensuring that people's needs are met during incident response and recovery, and it is also critical to the whole community approach to creating a more resilient community.

The following information is not intended, nor should it be construed, as legal advice. Resources for these legal requirements are included in [Appendix A: Resources](#), of this Toolkit.

A. Legal Considerations

The following federal civil rights laws, which were created to prohibit discrimination on the basis of disability and to provide equal opportunities for people with disabilities, as well as other references, should be consulted when planning for people with disabilities and others with access and functional needs:

- Americans with Disabilities Act of 1990 (ADA)
- Rehabilitation Act of 1973
- Executive Order 13347-Individuals with Disabilities in Emergency Preparedness
- Pets Evacuation and Transportation Standards Act of 2006 (PETS Act)

The U.S. Department of Justice's (DOJ) Civil Rights Division's, "A Guide to Disability Rights Laws,"⁸ serves as a useful overview of the "[f]ederal civil rights laws that ensure equal opportunity for people with disabilities." This guide also provides the contact information for the relevant agencies and organizations that may provide additional information and assistance with compliance.

There have also been a number of compliance reviews brought by the DOJ, as well as court cases brought by disability advocacy groups, against counties/cities alleging their failure to adequately address the needs of people with disabilities and others with access and functional needs in their emergency preparedness plans, programs, and services. The findings from these compliance reviews and cases reveal that many cities and counties failed to adequately plan for and respond to the needs of this population, resulting in the need to update plans, programs, and services to ensure they are wholly inclusive. An overview of some of the major compliance reviews and cases is available in [Appendix A: Resources](#) of this Toolkit.

⁸ U.S. Department of Justice, Civil Rights Division, Disability Rights Section. "[A Guide to Disability Rights Laws](#)" July 2009. Date last accessed, 3/1/2017.

The following compliance reviews and cases are specific to Maryland, and should also be considered and consulted when planning for people with disabilities and others with access and functional needs. Links to these resources are also available in [Appendix A: Resources](#) of this Toolkit.

- Settlement Agreement between the United States of America and Montgomery County, Maryland and Maryland-National Capital Park, and Planning Commission under the Americans with Disabilities Act, DJ 204-35-256 (08/16/11)
- Project Civic Access Agreement between the United States of America, Prince George's County, Maryland, and the Maryland-National Capital Park and Planning Commission under the Americans with Disabilities Act, DJ 204-35-252 (07/25/05)
- Settlement Agreement between the United States of America and City of Frederick, Maryland under the Americans with Disabilities Act, DJ 204-35-245 (08/05/04)
- Settlement Agreement between the United States of America and Worcester County, Maryland under the Americans with Disabilities Act, DJ 204-35-240 (07/25/03)
- Settlement Agreement between the United States of America and the City of Bowie, Maryland, Department of Justice, complaint number 204-35-187 (02/15/01)

B. Planning Considerations

State and local governments are required to make emergency preparedness programs available to peoples with disabilities and others with access and functional needs. The best way to gain insight into the critical needs and issues that people with disabilities and others with access and functional needs face during emergencies is to involve representatives from the community, as well as providers of functional needs support services, in the planning process and when conducting exercises on a plan. A Department of Justice reference that captures these goals is titled, "Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities."⁹

"Jurisdictions may begin taking measures to ensure the inclusiveness and legal compliance of their emergency preparedness programs by"¹⁰ engaging in the following preparedness and planning-related activities (note that this is not a comprehensive list of all programmatic considerations needed to ensure the inclusiveness of plans, programs, and services):

⁹ U.S. Department of Justice Civil Rights Division Disability Rights Section. "[Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities](#)". Date last accessed, 3/1/2017.

¹⁰ Elizabeth M. Webster, J.D. *Journal of Emergency Management*, Vol 12 #3. May/June 2014. "Emergency Planning for People with Disabilities and Others with Access and Functional Needs to Ensure Inclusiveness." Page 5. Some of these examples were developed in response to the recent investigations and litigation, which have prompted a shift in the way the field of emergency management prepares and plans for people with disabilities and others with access and functional needs. This may not be a comprehensive list of considerations that must be met in order to ensure a preparedness program is compliant with the appropriate laws and statutes.

- Inviting people with disabilities and others with access and functional needs to participate in the emergency planning processes, including reviewing and updating old plans, and developing new plans;
- Engaging in a plan review process that considers how best to meet the needs of people with disabilities and others with access and functional needs;
- Developing new, needed plans;
- Integrating into emergency plans issues related to meeting the needs of people with disabilities and others with access and functional needs in incidents to bolster general inclusive planning efforts, and to address related issues, including evacuation and accessible transportation, accessible public notification, sheltering, [etc.];
- Integrating issues related to planning for people with disabilities and others with access and functional needs into general emergency planning efforts, as well as plan documents;
- Using the DOJ's ADA Tool Kit as a model for compliance;
- Creating/assigning a planning position within the emergency management organization to advocate for people with disabilities and others with access and functional needs;
- Working to ensure the accessibility of communications sent out to the community;
- Purchasing accessible equipment and resources, such as shelter supplies, as needed; and
- Establishing a long-term recovery working group or committee that includes representation for people with disabilities and others with access and functional needs.¹¹

Additional categories for consideration that should be accounted for in emergency planning include the following:

- Emergency Communications;
- Emergency Preparedness in the Workplace;
- Emergency Transportation;
- Health;
- Sheltering;
- Private Sector Coordination; and
- Governmental Coordination.

¹¹ Elizabeth M. Webster, J.D. *Journal of Emergency Management*, Vol 12 #3. May/June 2014. "Emergency Planning for People with Disabilities and Others with Access and Functional Needs to Ensure Inclusiveness." Page 5.

VI. Maryland's Function-Based Framework

The following sections define the components of the function-based framework as implemented in Maryland, which is an approach to planning that identifies people's actual needs during an emergency: Communication, Health and Medical Needs, Maintaining Functional Independence, Personal Care Assistance, and Transportation. The function-based framework is more inclusive because it is needs based, and it can be more inclusive of the whole community as it identifies needs that can affect all residents regardless of ability. This is also a move away from referring to the population as having "special needs" or being "vulnerable," which are terms that fail to provide any information about a person's actual needs.

Planning for people with disabilities and others with access and functional needs ensures the inclusion of a broader group of people than the more narrowly defined group of people with disabilities (as defined by the above listed civil rights laws). This is critical for emergency planning purposes because many people with access and functional needs, who may face unique challenges in responding to and recovering from emergencies, do not fall within the ADA's definition, and some people may develop access and functional needs as a result of an incident. It is also possible that someone will have more than one disability or functional need, and people's needs may change over time. Thus, a plan that uses disability-specific considerations may not adequately account for people's needs.

Categorizing planning considerations according to functional needs allows emergency managers and planners to plan for impacts to needs rather than specific disabilities, which helps address these problems. This prevents the application of a one-size-fits-all approach to meeting people's needs prior to, during, and following incidents or disasters.

A. Communication

Communication-based needs relate to any person with barriers to their ability to communicate, including, but not limited to:

- People who have needs related to their receipt of and response to information (e.g., visual, audible, cognitive);
- People who have needs related to their processing and acknowledgement of information;
- People who do not speak or read English, or are not proficient in English;
- People who require computer assistance to communicate;
- People who require alternative formats of information; and
- People who do not have the ability to enjoy opportunities as full communication partners.

Alternative communication devices and assistive technology should be part of an emergency preparedness program's resources in anticipation of individuals with communication needs. Examples of assistive technology include, but are not limited to, interpreters and translators, inclusive messaging, speech amplifiers, and mobile applications to facilitate communication. For more information on assistive technology, refer to [Appendix B: Assistive Technology](#), of this Toolkit.

It is important to acknowledge that communication-based needs impact a large percentage of the population, in part because "[f]oreign immigration has been an important component of Maryland's population growth this decade. Between 2000 and 2007, nearly 227,500 foreign immigrants have come to Maryland, the 13th highest total of any state in the country."¹² This demonstrates the importance of relaying information in languages other than English to meet the needs of the whole community, and reveals the need for accessible modes of communication that are available in multiple languages to ensure messages are disseminated to the broader community before, during, and after an incident or disaster.

People with various communication needs may have difficulty receiving emergency notifications and communicating with emergency responders during an incident. The above listed numbers are estimates that provide insight into the larger population of people with communication-based needs that should be accounted for in preparedness and planning efforts. For more information about other types of communication-based needs, and methods and tips to communicate with people with communication needs, see June Isaacson Kailes, ["Tips for Interacting with People with Disabilities."](#)¹³

B. Health and Medical

People with health and medical needs may include people with and without obvious physical medical conditions. People with heart conditions that take medication daily, dialysis patients with renal disease, people who take medication for respiratory illness, or people with dietary restrictions, have health and medical needs but may not identify as having a disability. These people may, however, be disproportionately affected by an incident due to their health and medical needs. Emergency managers and planners who are able to identify solutions that meet the needs of people with health and medical needs can ensure their ability to remain in the least restrictive environment or inclusive setting, such as a general population shelter, unless a person presents with an acute medical need. Some solutions to meet the needs of people with health and medical needs may include, but are not limited to:

¹² United States Census 2010. ["Immigration and the 2010 Census Governor's 2010 Census Outreach Initiatives."](#) Date last accessed, 3/1/2017.

¹³ June Isaacson Kailes. ["Tips for Interacting with People with Disabilities."](#) 2011. Date last accessed, 3/1/2017. Requested and received permission to distribute this article.

- Opening shelters that can accommodate the wide variety of health and medical needs present in a community (e.g., people with allergies, nursing mothers, children, people with sensory processing disorders, etc.);
- Providing access to consumable/durable medical equipment or medications/prescription medications to people in shelters;
- Providing charging stations for people in shelters;
- Providing extra space for people who use durable medical equipment or assistive technology in shelters;
- Modifying meals for people with dietary needs and food allergies in shelters;
- Providing transportation to treatment facilities, such as dialysis centers;
- Utilizing mobile pharmacy services; and
- Establishing relationships with the medical community, such as hospitals, pharmacies, medical equipment providers, long-term care facilities, etc.

There are many people who have health and medical needs that are not always considered when emergency plans are created. People with health and medical needs can include people who are normally able to manage their medical condition, but who may be adversely affected during an incident or disaster if they are separated from their medication or treatment, such as people who have diabetes. For example, according to a 2011 study by the Family Health Administration, Office of Chronic Disease Prevention, an office within the Maryland Department of Mental Health and Hygiene, “[d]iabetes is the sixth leading cause of death [in Maryland, and]...In 2009, 9.4% of adults reported having diabetes.”¹⁴ In 2009, the population in Maryland was 5,699,478.¹⁵ People who have diabetes often maintain special diets with certain restrictions on food, and sometimes require medication, such as insulin. Separation from medication or an improper diet can lead to adverse health and medical conditions for people who have diabetes. Therefore, planning for appropriate shelter diets and access to mobile pharmacies or medical supplies can better prepare members of the broad community, including people who have diabetes, who may develop a health and medical need as a result of an incident.

These statistics represent people who may have pre-existing health and medical needs, and who may also develop additional health and medical needs as a result of an incident or disaster. People who are clinically obese may require accommodations to have their needs met (e.g., bariatric cots in shelters, adequate seating, etc.). This is another example of a population that may be overlooked during emergency planning because they do not identify as having a disability. By creating plans and procedures that consider and focus on meeting the broader

¹⁴ Maryland Department of Mental Health and Hygiene, Family Health Administration, Office of Chronic Disease Prevention. [“Chronic Disease in Maryland: Facts and Figures,” March 2011. Page 1.](#) Date last accessed, 3/1/2017.

¹⁵ Maryland Department of Mental Health and Hygiene. July 1, 2009. Page 57. [“Maryland Vital Statistics Annual Report 2009. Table 1. Estimated Maryland Population by Race, Hispanic Origin, Region and Political Subdivision”.](#) Date last accessed, 3/1/2017.

functional needs of people in our communities, emergency managers and planners can create plans and procedures that are more inclusive to the whole community's needs.

To ensure the broad range of people's health and medical needs are met at locations such as general population shelters, there are many resources available that provide detailed and in-depth considerations for ensuring that shelters in the community are inclusive and accessible to people with disabilities and others with access and functional needs. Some of these resources include "Chapter 7 Addendum 2: The ADA and Emergency Shelters: Access for All in Emergencies and Disasters,"¹⁶ "Chapter 7 Addendum 3: ADA Checklist for Emergency Shelters,"¹⁷ and the Federal Emergency Management Agency's (FEMA) "Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters."¹⁸ By utilizing available resources, such as these, and through proper inclusion of people with disabilities and access and functional needs in emergency planning, training and exercises, and preparedness discussions regarding the necessity of certain supplies, equipment, and facilities for evacuating and sheltering those with health and medical needs, an emergency manager or planner can better prepare to meet the needs of people who have health and medical needs, as well as those who do not regularly identify as having a health and medical need, but who may be severely affected before, during, and after an incident.

C. Maintaining Independence

Many people maintain complete independence and are self-sufficient so long as they have their assistive devices and/or equipment. For example, a person who uses a wheelchair for mobility may be able to maintain their independence as long as they have access to their wheelchair. If they lost access to their wheelchair, however, they would then have a functional need related to their ability to maintain their independence. Additionally, through the use of other mobility devices, such as a "white cane" or service animal, someone with a vision disability can maintain complete independence. Again, however, if they were to be separated from their mobility device or service animal, they would have a functional need related to their ability to maintain independence. Thus, the consideration of functional independence needs in emergency planning is critical to providing the support and equipment needed to ensure individuals can manage and maintain their independence before, during, and following an incident. These needs may be met through providing people with resources that can support their ability to maintain their independence, such as through replacing a white cane or providing other equipment, such as a wheelchair. Additional resources to help support people's ability to

¹⁶ [ADA Best Practices Tool Kit for State and Local Governments, Chapter 7 Addendum 2: The ADA and Emergency Shelters: Access for All in Emergencies and Disasters](#), Date last accessed, 3/1/2017.

¹⁷ U.S. Department of Justice, Civil Rights Division, Disability Rights Section. "[ADA Checklist for Emergency Shelters](#)." Date last accessed, 3/1/2017.

¹⁸ Federal Emergency Management Agency (FEMA). [Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters](#), November 2010. Date last accessed, 3/1/2017.

maintain their independence are to source resources through lending closets, which include a variety of durable medical equipment and assistive technology (AT).

D. Personal Care Assistance

People who require assistance to perform activities of daily living, such as taking medication, bathing, toileting, feeding, and grooming may use the services of personal care assistance providers. Other examples of people with personal care needs include people with sensory needs, privacy needs, or cognitive needs. Additionally, some individuals with personal care assistance needs may have mental or cognitive disabilities, such as dementia, schizophrenia, or autism spectrum disorder, which are not visible but require support. One concern is that individuals with functional needs related to the need for personal care assistance may become separated from not only their home and familiar environment, but also their personal care assistance providers during an incident. Emergency planning should include meeting the needs of people who may have personal care needs, as well as the needs of their care-givers (if applicable), such as ensuring shelters have appropriately trained staff, quiet or private areas, areas for personal care givers to stay with their clients, and family reunification procedures.

E. Transportation

People with a transportation need may include people without access to transportation or who lose their access to transportation. Some examples of people with transportation needs include:

- A person who does not own a car and relies on mass transit services (e.g., city-dwellers, students, people who are homeless, etc.);
- A person who is unable to operate a vehicle (e.g., due to restrictions, temporary or permanent physical disabilities or injuries, some women who are pregnant, etc.); and
- A person whose vehicle is rendered unavailable.

Table 1 below was created by the Maryland Department of Disabilities using ridership information from 2009-2013 from the Maryland Transit Authority (MTA) and the Washington Metropolitan Area Transit Authority (WMATA). It shows an increasing trend in the level of service and performance provided to MTA and WMATA paratransit customers from 2009-2013. It should be noted that paratransit rides are scheduled, shared rides that provide direct travel from destination to destination for registered paratransit users. Fixed route transportation includes transportation services, such as bus and rail, which operate on a published schedule during normal operating conditions.

Table 1: MTA and WMATA Paratransit Ridership 2009-2013¹⁹

RESULTS AND PERFORMANCE MEASURES		FISCAL YEARS				
		2009 Actual	2010 Actual	2011 Actual	Estimated	
					2012	2013
Level of service and performance provided to MTA and WMATA paratransit customers	Number of people with disabilities certified for paratransit	29,025	33,075	36,688	41,284	42,342
	Number of paratransit rides provided (millions)	2.632	2.787	3.213	3.618	3.720
	Percent of paratransit rides provided on time	92.0%	91.5%	90.6%	91.1%	91.1%
	Customer satisfaction rating:					
	WMATA (measured as total number of complaints received per 1,000 trips completed)	6.8	6.2	5.0	5.0	5.0
Level of service and performance provided to people with disabilities using MTA and WMATA fixed route transportation	Number of people with disabilities certified for fixed route	35,739	64,915	93,459	110,660	112,106
	Percent of accessible buses in fixed route:					
	MTA	100%	100%	100%	100%	100%
	WMATA	100%	100%	100%	100%	NA
	Number of people with disabilities receiving travel training:					
	Individual (WMATA)	180	264	300	350	369
	Group (WMATA)	4,255	3,984	4,300	4,550	4,792
Total number of monthly disabled passes purchased	198,726	202,132	207,460	213,500	213,500	

This table reflects only those registered as paratransit users, which is one of the populations with transportation needs. Note, this may not include all the actual or potential people with transportation needs who live in the State of Maryland, and require accessible transportation services.

An emergency manager or planner must focus on the whole community when developing plans specific to meeting people’s transportation needs because of the extensive range of people who may have or develop a transportation need due to an incident or disaster. An effective way to assist people with transportation needs is through pre-planning, such as including people with transportation needs and transportation service providers in plan development, training, and exercises. Useful information on best practices for inclusive pre-planning can be found in, “The ADA Best Practices Toolkit for State and Local Governments,”²⁰ notably in Chapter 7 of that document. One component of pre-planning includes the creation of memorandums of understanding (MOUs) with local, state, and private transportation services. Through relationships with the local/state Department of Transportation agencies, private sector transportation services, and the people with disabilities and others with access and functional

¹⁹ Maryland Department of Disabilities State Disabilities Plan 2012-2015. Exhibit 2(b): Transportation, Page 13. [Maryland Department of Disabilities State Disabilities Plan 2012-2015](#)

²⁰ U.S. Department of Justice, [ADA Best Practices Tool Kit for State and Local Governments](#) Date last accessed 2/7/2017.

needs, as well as providers of functional needs support services, emergency managers and planners can develop ways to ensure that the transportation services are accessible and effective for people with transportation needs during an incident. Additionally, emergency managers and planners should consider community outreach and preparedness education as ways to engage members of the community who have or may develop a transportation need as a result of an incident or disaster.

VII. Functional Needs Considerations Worksheets

An emergency manager or planner must understand the challenges, obstacles, and important considerations that people with disabilities and others with access and functional needs have in order to create inclusive preparedness, response, and recovery plans, programs, and services. In keeping with the approach of this Toolkit, understanding how different functional needs are affected before, during, and after an incident enables an emergency manager or planner to develop inclusive emergency management products.

The Functional Needs Considerations Worksheets are organized by phase in emergency management: Preparedness, Response, and Recovery. Each worksheet presents broad topic areas, which include some, but not all, of the considerations that an emergency management organization should address and understand in order to create more inclusive emergency management plans, programs, and services. These considerations are not meant to supersede any plans or standard operating procedures, but should act as a reference when developing/updating whole community plans, programs, and services.

Functional Needs Considerations Worksheet: Preparedness

Topic Area	Communication Needs	Health and Medical Needs	Maintaining Independence Needs	Personal Care Assistance Needs	Transportation Needs	
External Outreach (EO)	Work directly with the community, people with disabilities and other with access and functional needs, and functional needs support services providers to ensure an inclusive external outreach program.					
	Attend community events to engage and establish relationships with people with disabilities and others with access and functional needs, including providing educational information and resources for emergency preparedness.					
	Encourage people with disabilities and others with access and functional needs, as well as their functional need support services providers, to create "go-kits" that meet their specific needs (e.g., include prescription medications, extra batteries for assistive equipment, important documents, etc.).					
	Ensure the external outreach program incorporates traditional and nontraditional delivery methods, is available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meets Universal Design Standards for assistive technology.	Encourage community members who rely on medical equipment that is power-dependent to notify utility companies and to inquire about programs or registries.	Ensure the external outreach program incorporates traditional and nontraditional delivery methods, is available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meets Universal Design Standards for assistive technology.	Identify and develop relationships with multiple resident community-living homes that serve people with personal care assistance needs to support emergency preparedness.	Work with transportation services (public and private) to ensure transportation information, such as locations, services, times, etc., are consistently updated and disseminated.	
Ensure that the sign-up process for alert systems/services is compatible with assistive technology and allows people to independently complete the registration process.	Encourage community members who rely on medications to have an additional emergency supply, if possible.*	Encourage community members who rely on essential equipment that is power-dependent to notify utility companies to provide situational awareness, and to inquire about programs and utility supplier registries.				
Training & Exercising	Invite people with disabilities and others with access and functional needs, as well as functional needs support services providers, to participate in trainings and exercises.					
	Develop "just-in-time" trainings or job aids for staff assisting people with disabilities and others with access and functional needs.					
	Ensure your staff is trained to recognize the broad needs of people with disabilities and others with access and functional needs, and ways to mitigate or procure supportive devices, equipment, or systems to assist people with disabilities and others with access and functional needs.					
	Utilize assistive technology during training and exercises, and train staff to assist people with disabilities and others with access and functional needs.					
	Ensure public training and exercise products are available in multiple language and, multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards for assistive technology.	Ensure that exercise participants know the procedure to get help should a genuine health or medical need arise during a training event.	Encourage people with independence needs and their care-givers to train with equipment and devices and to have replacement parts and training to replace them.	Request assistance from functional needs support services providers to review and/or train clients, family, and staff on preparedness plans. Provide training to congregate care facilities to ascertain what needs can be appropriately accommodated.	Utilize public and private transportation providers during trainings and exercises.	
Planning	Include people with disabilities and others with access and functional needs, functional needs support services providers, and subject matter experts in the planning process.					
	Ensure considerations for people with disabilities and others with access and functional needs are integrated into the body of the plans and not as separate annexes.					
	Encourage people with disabilities and others with access and functional needs to create, update, and share personal preparedness plans with family members and functional needs support services providers.					

Functional Needs Considerations Worksheet: Response

Topic Area	Communication Needs	Health and Medical Needs	Maintaining Independence Needs	Personal Care Assistance Needs	Transportation Needs	
Shelter-in-Place	Ensure plans exist to provide ancillary support to people with disabilities and others with access and functional needs who are sheltering in place. For example, providing back up batteries for power-dependent devices/assistive technology, meeting dietary needs, food for service animals, prescription and over-the-counter medications, etc.					
	Ensure clear and inclusive public messaging is disseminated through traditional and nontraditional methods, and ensure these messages are available in multiple language and, multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards for assistive technology.					
	Ensure call center staff (e.g., 211, 311, etc.) are trained to recognize and work with people with communication needs, and know how to deliver information to them (e.g., TTY phones, translator services, etc.).	Ensure plans exist to provide assistance to address health and medical issues during sheltering in place (e.g., people who rely on life-sustaining equipment during power outages, replenish prescription/over-the-counter medications, etc.).	Ensure plans exist to provide assistance to people with independence needs who are sheltering in place, such as people who rely on essential equipment that is power-dependent (e.g., medical devices and other assistive technology, including hearing aids, barcode scanners, mobility aids, etc.).	Encourage personal care attendants/services to create personal preparedness plans for themselves, their clients, and family members.	Ensure there are plans or equipment in place/available for people with transportation needs who are sheltered in place and require life sustaining medical treatment (e.g., transportation to dialysis centers or chemotherapy treatment).	
	Ensure jurisdiction alerts (e.g., text, call, email, etc.) are available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards for assistive technology.	Ensure external outreach messages encourage people sheltering in place to have extra food, water, medications, and other life-sustaining supplies to last at least 72 hours.		Ensure facilities that care for people with personal care needs are informed and have appropriate resources to support shelter-in-place, or methods are in place to provide them with necessary shelter-in-place resources.		
Evacuation Support	Ensure there is a method in place to assess and identify the population needing evacuation assistance, including resources required (e.g., equipment for evacuees who use a wheelchair, medical equipment/devices such as oxygen, suction equipment, CPAP, etc., translators/interpreters to facilitate the transmission of evacuation information, etc.).					
	Ensure there is a process to identify, procure, and utilize equipment/personnel for evacuation support of people with disabilities and others with access and functional needs, including but not limited to assistive technology, health and medical equipment/supplies, personal care attendant staff, paratransit vehicles (or contracts with providers), etc.					
	Ensure that equipment/devices (e.g., assistive technology, medical devices, medications, supplies, and service animals, etc.) are transported with the person during an evacuation.					
	Ensure clear and inclusive public messaging is disseminated through traditional and nontraditional methods, is available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meets Universal Design Standards for assistive technology.					
	Ensure call center staff are trained to recognize and work with people with communication needs and know how to deliver information to them (e.g., TTY phones, translator services, etc.).	Ensure local health and medical needs providers have evacuation plans in place for facilities (e.g., nursing homes, assisted living facilities, hospitals, etc.) serving people with health and medical needs.		Ensure that personal care attendants are transported with the person they provide care to during the evacuation.		
Ensure that jurisdiction alerts (e.g., text, call, email, etc.) are in multiple languages and in multiple formats (e.g., large print, braille, electronic) meeting Universal Design Standards.						

Topic Area	Communication Needs	Health and Medical Needs	Maintaining Independence Needs	Personal Care Assistance Needs	Transportation Needs
Emergency Shelters	Ensure there are plans and policies in place to prevent the separation of people with disabilities and others with access and functional needs from their equipment, devices, service animals, personal care attendants, etc. while at the shelter.				
	Emergency shelters should have trained staff to assist people with disabilities and others with access and functional needs as appropriate.				
	Ensure there is appropriate equipment/devices (e.g., assistive technology, medical devices), medications, supplies, etc. available for shelter occupants to utilize if they present to the shelter without their supportive equipment, devices, or personal care attendants.				
	Ensure shelter materials/documents are available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards for assistive technology.	Ensure the shelter has the capability to meet the needs of people with dietary needs/restrictions (e.g., infants, food allergies, low sodium, etc.).	Shelters should accommodate service animal teams, provide a service animal relief area, and have dog food/bowls. Handlers must not be separated from their service animal. Shelter occupants should be discouraged from distracting the service animal.	Shelters should accommodate people who require private/quiet rooms (e.g., sensory integration disorders, nursing mothers, anxiety, etc.).	Shelters must have accessible pick up and drop off areas, including unobstructed access to the shelter entrance.
	Ensure there are alternative communication methods available in person or virtually (e.g., interpreters and translation services/materials, pictograms, pen and paper, etc.).	Ensure shelters have the ability to meet the needs of people with medical devices requiring power.		Ensure there are areas of privacy for personal care attendants and their clients.	

Functional Needs Considerations Worksheet: Recovery

Topic Area	Communication Needs	Health and Medical Needs	Maintaining Independence Needs	Personal Care Assistance Needs	Transportation Needs
Post-Incident External Outreach	Ensure clear and inclusive public messaging is disseminated through traditional and nontraditional methods, is available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meets Universal Design Standards for assistive technology.				
	Work with functional needs support services providers to deliver information and conduct outreach to people with disabilities and others with access and functional needs within their network.				
	Provide inclusive information about disaster recovery services (e.g., the location of the Disaster Recovery Center, available transportation, documents to bring, etc.) and information about recovery agencies (e.g., Department of Social Services, American Red Cross, Department of Aging, Department of Disabilities, etc.), and ensure the information is disseminated through traditional and nontraditional methods, in multiple languages and multiple formats (e.g., large print, braille, electronic), and meets Universal Design Standards for assistive technology.				
	In information regarding recovery should be made available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards for assistive technology.			Communicate recovery information with multiple resident community-living homes that serve people with personal care assistance needs.	
	Ensure call center staff (e.g., 211, 311, etc.) are trained to recognize and work with people with communication needs and know how to deliver information to them (e.g., TTY phones, language lines, etc.).				
Depart Shelter and Demobilize	Implement plans and policies to ensure equipment/devices (including assistive, medical, etc.), medications, service animals, supplies, etc. depart the shelter with the person they came with.				
	Support and connect people with disabilities and others with access and functional needs to agencies providing interim housing solutions to ensure their needs can be met, including, but not limited to, solutions that ensure there is sufficient power for power-dependent equipment/devices, no architectural barriers for maintaining independence, and adequate environments for people with personal care assistance needs, etc.				
	Ensure there are appropriate and adequate transportation services provided to people with disabilities and others with access and functional needs that can accommodate their equipment, service animals, care providers, etc. to depart the shelter.				
	Continue providing accessible notifications to shelter occupants in multiple languages and multiple formats (e.g., large print, braille, electronic), and that meet Universal Design Standards for assistive technology.	Verify with public shelter health services or a case manager that the shelter has social services supports to assist with connecting individuals with health and medical supports within the community.		Ensure the shelter has a transfer plan in place for continuity of service for people with personal care assistance needs when they depart the shelter.	Ensure there are appropriate resources in place to support departing the shelter and returning to the community.

Topic Area	Communication Needs	Health and Medical Needs	Maintaining Independence Needs	Personal Care Assistance Needs	Transportation Needs
Disaster Recovery Services	Disaster Recovery Centers should be accessible facilities that are able to accommodate people with disabilities and others with access and functional needs, including, but not limited to, providing adequate seating, interpreter/translation services, service animal relief areas, privacy areas, accessible entries/bathrooms/parking, etc.				
	Disaster Recovery Centers should have a method/system for connecting/referring people with disabilities and others with access and functional needs with resources, non-profit organizations, loan closets, etc.				
	Connect with service providers, consumer groups, community leaders, etc., to provide accurate information to their constituents about disaster recovery services.				
	Information regarding recovery should be made available in multiple languages and multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards for assistive technology.				Transportation operations must be maintained or provided for people with transportation needs returning home.

VIII. Creating Inclusive Emergency Programs Self-Assessment Checklist

Building on the broad considerations included under each topic area in the Functional Needs Considerations Worksheets above, the following self-assessment is intended to assist emergency managers and planners with evaluating, developing, and updating emergency plans, programs, and services to make them inclusive so they meet the needs of the whole community. Specific areas of consideration include:

Preparedness

- External Outreach
- Training and Exercise
- Planning

Response

- Shelter-in-Place
- Evacuation Support
- Emergency Shelters

Recovery

- External Outreach
- Disaster Recovery Service

In establishing and maintaining an inclusive emergency program, it is important to acknowledge that:

- The community is always growing and changing, and known and new threats and hazards threaten the lives and property of residents in the community;
- When reviewing and revising any program, service, or plan, it is critical to include the whole community;
- It is critical to include people with disabilities and others with access and functional needs in the emergency planning and preparedness processes;
- Planning for specific disabilities is not comprehensive because not all people who have the same disability have the same needs or functional abilities. Additionally, some people have multiple disabilities, and some people who do not have a disability may have a functional need during an emergency. Thus, it is best to plan according to broader functional needs that may be affected following a disaster: communication needs, health and medical needs, maintaining independence needs, personal care assistance needs, and transportation needs.

By considering how people are functionally affected by any incident, an emergency manager can better plan to meet the needs of affected populations in a more inclusive way.

This document organizes considerations and application recommendations that emergency managers should consider according to three phases: Preparedness, Response, and Recovery. These sections are color-coordinated to match the colors of the Functional Needs Considerations Worksheets, as detailed in Table 2 below.

Table 2: Color-coded Emergency Management Phases for Self-Assessment

Green: Preparedness Topic Areas
Red: Response Topic Areas
Blue: Recovery Topic Areas

Within many of the application recommendations are hyperlinks to additional resources. [Appendix D: Hyperlinks Cited throughout Self-Assessment](#) contains detailed descriptions of these webpages, including their full web addresses.

A. Preparedness

Table 3: Preparedness - External Outreach Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Establish Connections:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Engage with functional needs support services providers and disability consumer organizations. <input type="checkbox"/> Conduct outreach prior to a disaster to explain what can be expected from the jurisdiction during a disaster. <input type="checkbox"/> Develop a relationship with information providers and local news channels. 		<ul style="list-style-type: none"> • Engage and build relationships with functional needs support services providers and consumer groups. Examples include: <ul style="list-style-type: none"> ◦ Maryland Statewide Independent Living Council (MSILC) ◦ Easter Seals Serving DC, MD, and VA ◦ Maryland Department of Disabilities (MDOD) ◦ Independent Marylanders Achieving Growth through Empowerment (IMAGE) ◦ United Cerebral Palsy ◦ Maryland-National Capital Homecare Association • Review the Maryland Emergency Alert System (EAS) procedures. Meet with local news outlets to develop a process for information sharing.
<p>Accessibility:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure external outreach programs and preparedness materials/programs are available in multiple languages and delivered across multiple formats (e.g., large print, braille, electronic), as well as traditional and non-traditional media (e.g., television and social media, respectively). <input type="checkbox"/> Ensure interpreters are present at press conferences held by elected officials and the local emergency management agency. <input type="checkbox"/> Perform tests assessing whether notification systems are successful in alerting people with disabilities and others with access and functional needs. <ul style="list-style-type: none"> <input type="checkbox"/> Ensure these systems are publicized and made available to the whole community. 		<ul style="list-style-type: none"> • Use the American Community Survey, U.S. Census data, and data from the Maryland Department of Planning's Data Center to identify common languages in a local community. <ul style="list-style-type: none"> ◦ State of Maryland Data Center • Use these references to ensure products meet Universal Design Standards for use with assistive technologies: <ul style="list-style-type: none"> ◦ WCAG 2.0 Quick Reference ◦ U.S. Access Board Section 508 Standards ◦ WebAIM's Section 508 Checklist • Follow these links for guidance on authoring accessible content and Universal Design Standards: <ul style="list-style-type: none"> ◦ Social Security Administration's (SSA) Accessibility Checklist ◦ SSA Accessible Document Authoring Guide ◦ SSA Guide to Applying Section 508 Standards ◦ Adobe PDF Accessibility Guide ◦ Adobe PDF Accessibility Best Practices ◦ Microsoft Office Accessibility Guides ◦ WebAIM's PowerPoint Accessibility Guide ◦ Creating Accessible Excel Documents
<p>External Outreach Focus:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure personal preparedness campaigns identify the importance of families creating plans and sharing with each other. <ul style="list-style-type: none"> <input type="checkbox"/> Individuals should share this plan with the people they plan to rely on, and inform them of their roles and responsibilities when providing support, before a disaster occurs. <input type="checkbox"/> Encourage individuals to compile equipment and supplies needed to shelter-in-place or evacuate. <input type="checkbox"/> Emphasize the importance of determining a method of evacuating, including who to evacuate with, where to evacuate to, and what needs to be done in order to return home. <input type="checkbox"/> Encourage individuals to remain current on prescription refills before a known event occurs (e.g., snowstorm or hurricane). 		<ul style="list-style-type: none"> • Work with community leaders and nongovernmental organizations (NGOs) to provide external outreach to people who need assistance during shelter-in-place or evacuation situations. • Review/disseminate the following materials to help foster personal preparedness for people with disabilities and others with access and functional needs: <ul style="list-style-type: none"> ◦ Personal Preparedness for Individuals with Disabilities and Others with Access and Functional Needs ◦ American Red Cross (ARC) Disaster Preparedness for People with Disabilities

Table 4: Preparedness - Training and Exercise Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Training & Exercise Materials:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure training and exercise materials are available in multiple languages, in multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards. 		<ul style="list-style-type: none"> • Check with local procurement office to determine if translation services are available to contract with. • Interpreter services may be contracted through the local procurement office. <p>Refer to Universal Design Standards:</p> <ul style="list-style-type: none"> ○ WCAG 2.0 Quick Reference
<p>Staff Training:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Train staff to support/respond to people who identify as having a disability or access and functional need. <ul style="list-style-type: none"> <input type="checkbox"/> Make this training available to all staff. 		<ul style="list-style-type: none"> • Designated staff members should know how to ensure materials are accessible and conform to Universal Design Standards/conduct document remediation (e.g., document accessibility checks). • Refer to Universal Design Standards: <ul style="list-style-type: none"> ○ WCAG 2.0 Quick Reference • Training offered includes: <ul style="list-style-type: none"> ○ Cultural Competency Curriculum for Disaster Preparedness ○ Autism Awareness Training ○ Including People with Disabilities (FEMA) ○ "When Words are Not Enough" Communications Training
<p>Exercises:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Invite people with disabilities and others with access and functional needs to participate in exercises (note: do not use actors to portray people with disabilities and others with access and functional needs). <input type="checkbox"/> Hold exercises in ADA compliant facilities to foster inclusivity and to enable individuals with disabilities and others with access and functional needs to participate. <input type="checkbox"/> In full-scale exercises, include tasks that assess the ability of responders to assist people with disabilities and others with access and functional needs (e.g., evacuating a person who uses a wheelchair from a multistory building). 		<ul style="list-style-type: none"> • Contact consumer groups and functional needs support services providers (e.g., CILs, The Arc, Chimes, etc.) to distribute the recruitment request for volunteers. • Considerations for exercise design should focus on testing the ability of responders to support people with various functional needs (e.g., people who use mobility devices, people with airway management needs, people who use the support of service animals, etc.), as appropriate. • Exercise design guidance is provided in the Homeland Security Exercise and Evaluation Program (HSEEP).

Table 5: Preparedness - Plan Development Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>General Planning Considerations:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Include considerations for people with disabilities and others with access and functional needs within the plan and not just as an annex to the plan. <input type="checkbox"/> Within the organizational structure of the plan, include the option to bring in a subject matter expert (SME) or a liaison that is trained and available to ensure the needs of people with disabilities and others with access and functional needs are met. 		<ul style="list-style-type: none"> • When performing actions and providing services, those actions and services should be available to the whole community and documented in the body of the plan; it is not appropriate to separate considerations for people with disabilities and others with access and functional needs. • The plan’s organizational structure should allow the SME to be grouped with the appropriate response functions (e.g., human services, public information) as the incident dictates.
<p>Planning Team:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Include representation from the community of people with disabilities and others with access and functional needs in the planning team. 		<ul style="list-style-type: none"> • Contact the State Department of Disabilities, local department of public health, local department of social services, local department of aging, and/or consumer groups and functional needs support services providers (e.g., CILs, The Arc, Chimes, etc.) to request a referral for potential participants for the planning team.
<p>Concept of Operations Development:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Identify potential response partners (e.g., functional needs support services providers, such as paratransit services, Meals-on-Wheels, utility companies, etc.). <input type="checkbox"/> Identify the capabilities of functional needs support services providers across the phases outlined in the plan. 		<ul style="list-style-type: none"> • Invite functional needs support services providers to participate on the planning team (see recommendation above for more). • Solicit feedback from functional needs support services providers when developing a concept of operations/matrix of tasks outlined by operational phase to understand policies and capabilities.
<p>Understanding Your Community:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Gather and/or develop community assessments using multiple sources of information to establish a baseline concept of the community being served (e.g., demographics). <input type="checkbox"/> Engage with service providers and people with disabilities and others with access and functional needs to understand citizens’ needs and possible challenges. 		<ul style="list-style-type: none"> • Review statistical data: <ul style="list-style-type: none"> ○ Census data (U.S. Census Bureau, Medicare through the Center for Medicare and Medicaid Services); ○ Community Survey (U.S. Census Bureau); and ○ Brief Economic Facts (Maryland Department of Commerce). • Review registries (if applicable). • Contact the State Department of Disabilities, local health department, local department of social services, local department of aging, and/or consumer groups and functional needs support services providers (e.g., CILs, The Arc, Chimes, etc.) to request information.

B. Response

Table 6: Response - Sheltering in Place Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Information Services:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Train communication center staff to access appropriate translation services and be competent in using TTY (teletypewriter) or alternative relay services (video relay, captioned telephones, etc.) to support call center efforts. <input type="checkbox"/> Work with local community groups to deliver messages to people with disabilities and others with access and functional needs in the community by phone, email, text, in person, etc. <input type="checkbox"/> Partner with 211, 311, or other information call centers to ensure a unified message is being delivered to citizens. 		<ul style="list-style-type: none"> • Procure the appropriate translation services/technology and train on protocols. • Consult with procurement officer to determine whether the jurisdiction has an existing contract with a translation service. • Utilize reverse 911 and social media platforms to distribute messages. • Work with local community groups and functional needs support services providers to deliver messages to people with disabilities and others with access and functional needs in the community by phone, email, text, in person, etc. • Refer to the following links for information on relay services: <ul style="list-style-type: none"> ○ Federal Communications Commission (FCC) Guide to Telecommunications Relay Service ○ FCC Guide to Video Relay Service ○ Explanation of Relay Services
<p>Emergency Notification:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure that sign language interpreters are present at each press conference, and that they are included in the camera shot. <input type="checkbox"/> Ensure social media messages are adapted to meet Universal Design Standards for use with assistive technology. <input type="checkbox"/> Utilize a combination of methods to notify persons of an imminent emergency (e.g., reverse 911 announcements, auto-dial TTY messages, text messaging, email, captioning for television announcements, etc.). <input type="checkbox"/> Ensure any website being used to provide emergency notifications is accessible to assistive technology (i.e., does it meet Universal Design Standards?). <input type="checkbox"/> Share relevant emergency communications and notifications facilitated through canvassing. <input type="checkbox"/> Ensure plans are in place to facilitate and assist people with disabilities and others with access and functional needs if they contact 211, 311, or other call centers for help during a disaster. 		<ul style="list-style-type: none"> • Refer to Universal Design Standards: <ul style="list-style-type: none"> ○ WCAG 2.0 Quick Reference
<p>Shelter-in-Place Support Policies:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Coordinate with functional needs support services providers to meet the needs of individuals sheltering in place. <input type="checkbox"/> During an extended shelter-in-place situation, work with the appropriate authorities to ensure residents have access to necessary medical supplies and prescriptions. 		<ul style="list-style-type: none"> • Identify the agencies and organizations that would be consulted for appropriate waivers and services during an extended shelter-in-place.

Table 7: Response - Evacuation Support Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Pre-evacuation:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure critical health and medical providers have evacuation plans and specific protocols for evacuating their populations. <input type="checkbox"/> Develop a plan and relationships with residential schools and congregate care facilities to ensure their ability to evacuate and continue care at the shelter facility. <input type="checkbox"/> Ensure specialized equipment is available for first responders to enable them to provide proper evacuation support to people with disabilities and others with access and functional needs. 		<ul style="list-style-type: none"> • Establish a relationship with critical health and medical providers in the community, and work to ensure evacuation plans and office of emergency management (OEM) operations are congruous. • Utilize the following links for exam <ul style="list-style-type: none"> ◦ Department of Health and Mental Hygiene (DHMH) Office of Healthcare Quality (OHCQ) List of Licensees ◦ Approved Nonpublic Educational Programs for Children with Learning Disabilities ◦ Residential Treatment Centers for Children • Determine the transportation requirements and resources to support evacuation of residential schools and congregate care facilities.
<p>Evacuation Plan Elements:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure that people with disabilities and others with access and functional needs are accommodated during evacuations, including bringing service animals, devices (e.g., wheelchairs, oxygen, assistive technology, medical equipment), and prescriptions to emergency shelters. <input type="checkbox"/> Ensure that people with disabilities and others with access and functional needs are not separated from their families/personal care attendants (PCAs) and service animals during an evacuation. 		<ul style="list-style-type: none"> • Establish memorandums of understanding (MOUs) or other agreements for these services. • Train first responders on the importance of keeping people with disabilities and others with access and functional needs with their families and/or PCAs.
<p>Transportation Planning:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure there is a transportation plan that includes considerations for people with disabilities and others with access and functional needs. <ul style="list-style-type: none"> <input type="checkbox"/> Include a plan for transporting people with mobility-related needs from multistory buildings. <input type="checkbox"/> Ensure that transportation arrangements are formalized in an MOU with third-party transportation providers. <input type="checkbox"/> Ensure that drivers are trained to facilitate the transport of wheelchairs and medical equipment, and to manage the transport of individuals with cognitive disabilities. <input type="checkbox"/> Identify the jurisdiction's inventory of available accessible vehicles that are capable of transporting wheelchairs and other mobility devices. <ul style="list-style-type: none"> <input type="checkbox"/> Verify that there are transportation providers that can deploy additional drivers, if needed. <input type="checkbox"/> Ensure that these transportation resources are deployable during a no-notice event. <input type="checkbox"/> Ensure that the jurisdiction has had discussions with paratransit service providers to identify how paratransit services will be deployed during a disaster. 		<ul style="list-style-type: none"> • Explore the capacity of accessible transportation to support evacuations.

Table 8: Response - Emergency Shelter Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Shelter Occupant Intake:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure shelter information, such as registration documents, signage, etc., is available in multiple languages and in multiple formats (e.g., large print, braille, electronic). <input type="checkbox"/> Ensure the shelter staff is trained to recognize and accommodate the needs of people with disabilities and others with access and functional needs. <input type="checkbox"/> Take into account considerations for shelter occupants' food allergies and dietary restrictions. <input type="checkbox"/> Ensure there is a procedure to label equipment, medication, and/or devices. 		<ul style="list-style-type: none"> • Provide signage in a pictograph format to meet the needs of individuals with communication needs whenever possible. • Provide registration documents and other shelter forms in formats that support people with disabilities and others with access and functional needs. <ul style="list-style-type: none"> ◦ Consult with procurement official regarding vendors to translate and print Braille and other languages. ◦ For additional resources, see Accessible Emergency Information. • Shelter staff should be able to identify, procure, and provide alternate solutions to shelter occupants with dietary needs. • Use the following link to consult a guide from FEMA on dietary planning for shelters: <ul style="list-style-type: none"> ◦ FEMA's Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters - 4.2.1 "Dietary"
<p>Shelter Facility Requirements:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure all shelter sites have been surveyed for ADA compliance. <input type="checkbox"/> Ensure that shelter sites have the ability to accept prescriptions requiring refrigeration upon request. <input type="checkbox"/> Ensure shelters have backup generators that are permanently installed or have a transfer switch for a portable generator. <input type="checkbox"/> Plan for providing replacement mobility aids (e.g., wheelchairs, walkers, canes) for persons who may have been evacuated without such aids. <input type="checkbox"/> Ensure shelter sites are able to meet the needs of service animal teams. <ul style="list-style-type: none"> <input type="checkbox"/> Shelters should have space available for service animals to sleep and eat, as well as a service animal relief area. <input type="checkbox"/> Ensure charging stations are available for shelter occupants to maintain power to communication and mobility devices (e.g., communication boards, smartphones, amplifiers, powered wheelchairs, etc.). <input type="checkbox"/> Ensure a private, sanitary space is available to support individuals with health and medical needs. <input type="checkbox"/> Ensure there are policies and plans to allow PCAs to remain with their clients. 		<ul style="list-style-type: none"> • Use the PETS Act of 2006, the Chapter 7 Addendum 2: The ADA and Emergency Shelters: Access for All in Emergencies and Disasters for considerations for service animals, such as food and accommodations. <ul style="list-style-type: none"> ◦ The ADA and Emergency Shelters: Access for All in Emergencies and Disasters • To access information about ADA building accessibility standards: <ul style="list-style-type: none"> ◦ ADA Building Accessibility Standards • To access guidance from the DOJ about shelter accessibility: <ul style="list-style-type: none"> ◦ ADA Checklist for Emergency Shelters • Identify partner agencies such as public health, human services, and medical response corps that have access to a small number of PCAs.

C. Recovery

Table 9: Recovery - Post-Incident External Outreach Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Recovery Materials:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure that post-incident and/or recovery materials and information are available in multiple languages, in multiple formats (e.g., large print, braille, electronic), and meet Universal Design Standards. <input type="checkbox"/> Ensure any damage assessment information used is available in multiple languages and in multiple formats (e.g., large print, braille, electronic). 		<ul style="list-style-type: none"> • Work with recovery partners (e.g., local/State agencies) to ensure their materials are accessible. • Recovery materials and information should meet Universal Design Standards and be available in multiple languages and multiple formats (e.g., large print, braille, electronic). • Refer to Universal Design Standards: <ul style="list-style-type: none"> ◦ WCAG 2.0 Quick Reference • Use interpreters, translation services, and assistive technology when conducting damage assessments and briefings to the public.
<p>Recovery Messaging:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Promote community outreach regarding recovery efforts through traditional external outreach practices, as well as working with functional needs support services providers to communicate information regarding recovery to individuals within their networks. <input type="checkbox"/> Ensure the public messaging campaign is in multiple languages and multiple formats (e.g., large print, braille, electronic) to provide accurate information about the damage assessment process for individuals and qualified applicants. 		

Table 10: Recovery - Disaster Recovery Service Considerations

Consideration	Where is this Consideration Incorporated?	Application Recommendations
<p>Recovery Staff Training:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Train disaster recovery center staff to access appropriate translation services and be competent in using relay services to support recovery efforts. 		<ul style="list-style-type: none"> • Procure the appropriate translation and interpreter services/technology and train on protocols.
<p>Disaster Recovery Canvassing:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ensure the jurisdiction has an operational plan for emergency canvassing (small and large scale). <input type="checkbox"/> Develop a plan to rapidly survey people with disabilities and others with access and functional needs to determine critical needs (e.g., water, food, evacuation, power, and medical care). <input type="checkbox"/> Ensure the jurisdiction has canvassing surveys or tools to determine critical needs. <input type="checkbox"/> Ensure the jurisdiction has a plan for long-term engagement. <input type="checkbox"/> Ensure the jurisdiction provides training for personnel and volunteers who will take part in the canvassing operation with regards to assisting people with disabilities and others with access and functional needs. <input type="checkbox"/> Ensure that the messages and information that are provided to the community through functional needs support services providers and other recovery providers are accurate, clear, and in multiple languages and formats (e.g., large print, braille, electronic), and ensure they meet Universal Design Standards. 		<ul style="list-style-type: none"> • Ensure the survey/canvassing tool assists in fulfilling resource requests, such as for food, water, electricity, medical care, durable medical equipment, etc. • Information provided to functional needs support services providers and recovery providers for distribution to their constituents should meet Universal Design Standards for use with assistive technologies and be available in multiple languages and multiple formats (e.g., large print, braille, electronic). • Refer to Universal Design Standards: <ul style="list-style-type: none"> ◦ WCAG 2.0 Quick Reference • Establish an accessible method of information collection following a disaster to allow community members to provide input, ask questions, raise comments and concerns, and otherwise have their voices heard by elected officials and local emergency management agencies.

IX. Conclusion

All members of the community must have the ability to benefit from emergency planning and preparedness efforts, as well as emergency programs and services. Incidents, whether man-made, natural, or technological, can impact everyone in a community and result in people developing an access or functional need. To that end, as the Maryland Function-based Framework demonstrates, it is critical for emergency managers and planners to implement inclusive plans, programs, and services that people with disabilities and others with access and functional needs can utilize to ensure their needs are met before, during, and following an incident.

The legal precedents, guidance documents, and planning resources identified in this Toolkit are not the sole resources to utilize when creating inclusive plans, programs, and services for people with disabilities and others with access and functional needs. This Toolkit and the resources included provide a foundation for planning and preparing to meet the needs of the whole community. Through community engagement, including education, outreach, and community assessments, an emergency manager can work to create plans that are inclusive, and focused not on specific disabilities, but on broad function-based needs that anyone can develop before, during, or after an incident. Thus, inclusive plans and programs will better prepare the whole community for inevitable hazards, and in doing so, create more resilient communities.

Appendix A: Resources

A. Legal Considerations

1. Americans with Disabilities Act of 1990

- A United States law that prohibits discrimination based on disability.
 - [Technical assistance manual of the ADA](#)
 - Date last accessed, 3/1/2017.
 - [Statute of the ADA](#)
 - Date last accessed, 3/1/2017.

2. Disability Rights Advocates

- Court cases against organizations and jurisdictions for disability rights related cases.
 - [Searchable database of disability litigation](#)
 - Date last accessed, 3/1/2017.

3. Executive Order 13347, Individuals with Disabilities in Emergency Preparedness

- An executive order created to strengthen emergency preparedness with respect to individuals with disabilities.
 - [DHS annual report on disabilities and emergency preparedness](#)
 - Date last accessed, 3/1/2017.

4. Maryland Specific Cases

- [Settlement Agreement between the United States of America and the City of Bowie, Maryland](#)
 - Date last accessed, 3/1/2017.
- [Settlement Agreement between the United States of America and City of Frederick, Maryland under the Americans with Disabilities Act](#)
 - Date last accessed, 3/1/2017.
- [Settlement Agreement between the United States of America and Montgomery County, Maryland and Maryland-National Capital Park and Planning Commission under the Americans with Disabilities Act](#)
 - Date last accessed, 3/1/2017.
- [Settlement Agreement between the United States of America, Prince George's County, Maryland and the Maryland-National Capital Park and Planning Commission under the Americans with Disabilities Act](#)
 - Date last accessed, 3/1/2017.
- [Settlement Agreement between the United States of America and Worcester County, Maryland under the Americans with Disabilities Act](#)
 - Date last accessed, 3/1/2017.

5. Pets Evacuation and Transportation Standards Act of 2006. 42 USC 5121

- [An amendment to the Stafford Act to ensure that State and local emergency preparedness operational plans address the needs of individuals with household pets and service animals following a major disaster or emergency.](#)
 - Date last accessed, 3/1/2017.

6. Rehabilitation Act of 1973

- [Replaced the Vocational Rehabilitation Act, to extend and revise the authorization of grants to States for vocational rehabilitation services.](#)
 - Date last accessed, 3/1/2017.

7. **U.S. Department of Justice Civil Rights Division Disability Rights Section, “A Guide to Disability Rights Laws”**
 - [Created to provide an overview of federal civil rights laws that ensure equal opportunity for people with disabilities, with agency contacts listed for specific laws.](#)
 - Date last accessed, 3/1/2017.
8. **U.S. Department of Justice Civil Rights Division Disability Rights Section, “A Guide to Disability Rights Laws. Rehabilitation Act -Section 504.”**
 - [An overview of the Rehabilitation Act, including a summary of the sections.](#)
 - Date last accessed, 3/1/2017.
9. **U.S. Department of Justice, 28 CFR Part 35. “Americans with Disabilities Act Title II Regulations.” Subpart E—Communications, § 35.160 General.**
 - [The Americans with Disabilities Act Title II Regulations.](#)
 - Date last accessed, 3/1/2017.

B. Planning References for Government Entities

1. **ADA Best Practices Tool Kit for State and Local Governments**
 - [Created in 2006, this tool kit is designed to teach state and local government officials how to identify and fix problems that prevent people with disabilities from gaining equal access to state and local government programs, services, and activities.](#)
 - [Chapter 7, Emergency Management under Title II of the ADA](#)
 - Date last accessed, 3/1/2017.
 - [Chapter 7, “ADA Checklist for Emergency Shelters.”](#)
 - Date last accessed, 3/1/2017.
 - [The ADA and Emergency Shelters: Access for All in Emergencies and Disasters](#)
 - Date last accessed, 3/1/2017.
2. **U.S. Department of Justice Civil Rights Division Disability Rights Section, “Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities”.**
 - [U.S Department of Justice, Civil Rights Division guide for local governments to use to create inclusive emergency preparedness and response programs.](#)
 - Available for multiple platforms, including print and screen reader.
 - Date last accessed, 3/1/2017.
3. **Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters, November 2010**
 - [Federal Emergency Management Agency guidance document to provide planning guidance that can be incorporated into existing shelter plans to State emergency managers and shelter planners to meet access and functional needs in general population shelters.](#)
 - Date last accessed, 3/1/2017.
4. **Maryland State Disabilities Plan 2012-2015**
 - [Maryland Department of Disabilities plan, reviewed every four years, outlining the mission and strategy of the agency.](#)
 - Date last accessed, 3/1/2017.

C. Functional Needs Concepts

1. “C-MIST A Function Based Framework”

- [An easy-to-read description of the C-MIST Framework by Barbara Purdy, a physical and occupational therapist.](#)
 - Date last accessed, 3/1/2017.

2. “Moving Beyond ‘Special Needs’”

- [An article by June Isaacson Kailes that describes and promotes the importance of function-based emergency planning.](#)
 - Date last accessed, 3/1/2017.

D. Document Accessibility Resources

1. U.S. Department of Justice Civil Rights Division Disability Rights Section, “Accessibility of State and Local Government Websites to People with Disabilities.”

- [Guidance for state and local governments for creating accessible web pages.](#)
 - Date last accessed, 3/1/2017.

2. Section 508 Basic Authoring and Testing Guide MS Word 2010. Version 1.0

- [Outlines steps for making Microsoft Word documents accessible.](#)
 - Date last accessed, 3/1/2017.

3. Microsoft Office 2010 Accessibility Checker

- [A document outlining the steps to ensure that documents are accessible to assistive technology in Microsoft Word 2010.](#)
 - Date last accessed, 3/1/2017.

4. Web Accessibility Initiative, “Web Content Accessibility Guidelines (WCAG)”

- [A stable and referenceable technical standard, with 12 guidelines for creating accessible web content that are organized under 4 principles: perceivable, operable, understandable, and robust.](#)
 - Date last accessed, 3/1/2017.

E. Assistive Technology

1. Assistive Technology Industry Association

- [An organization for manufacturers, sellers and providers of assistive technology \(AT\)—products, equipment and systems that enhance learning, working and daily living for persons with disabilities.](#)
 - Date last accessed, 3/1/2017.

2. Maryland Technology Assistance Program Assistive Technology Library

- [Maryland Department of Disabilities program that loans assistive technology to residents upon request.](#)
 - Date last accessed, 3/1/2017.
- [Broken down into categories of need and further subcategories of each need and provides information on procurement of specific technology.](#)
 - Date last accessed, 3/1/2017.

3. United States Access Board, Section 508 Standards for Electronic and Information Technology, § 1194.4 Definitions.

- [A component of Section 508 of the Rehabilitation Act of 1973 defining electronic and information technology](#)
 - Date last accessed, 3/1/2017.

4. **Section 508 Standards for Electronic and Information Technology. “§ 1194.4 Definitions.”**
 - [A basic authoring and testing guide in Microsoft Word 2010 guide using Section 508.](#)
 - Date last accessed, 3/1/2017.
5. **Section 504, Rehabilitation Act of 1973 (29 U.S.C. § 701), Section 794. Nondiscrimination under Federal grants and programs; promulgation of rules and regulations. Subsection B, “Program or activity” defined**
 - [Section of the Rehabilitation Act of 1973 that sets precedent for the nondiscrimination for people with disabilities and others with access and functional needs under federal grants.](#)
 - Date last accessed, 3/1/2017.

F. Other Resources

1. **Emergency Preparedness Checklist for Case Management and Home Care Services**
 - [A comprehensive preparedness checklist designed by Montgomery County Public Health Emergency Preparedness and Response to ensure that clients receiving home care and case management services have a conversation, develop an emergency plan, and gather supplies in preparation for an emergency event.](#)
 - Date last accessed, 3/1/2017.
2. **“Tips for Interacting with People with Disabilities”**
 - [A document developed by June Isaacson Kailes to provide guidance and solutions to facilitate the interaction with people with disabilities and others with access and functional needs.](#)
 - Date last accessed, 3/1/2017.

G. Cover Photo Credits

Photo credits are listed top to bottom, left to right.

1. **American Red Cross Worker with Woman in Wheelchair**
 - [New Mobility Magazine](#)
 - “A Red Cross volunteer assists a displaced person at one of its emergency shelters.”
2. **“Diversity” - Blind Man with Guide Dog**
 - [Getty Images](#)
 - Credit: abalcazar
 - Creative #: 174898097
3. **Use of Community Minibus for People with Disabilities and Others with Access and Functional Needs**
 - [New Alresford Town Trust](#)
4. **Emergency Evacuation Lift Sign**
 - [Emergency Exit Sign Sticker Health Safety Warning](#)
5. **Sign Language Interpreter at Conference**
 - [Total Source for Hearing-Loss and Access \(THSA\)](#)
6. **“Good Samaritan helps family who lost home to Sandy”**
 - [AP Photo/Kathy Willens](#)
 - December 24, 2012

Appendix B: Assistive Technology

There are a number of considerations about Assistive Technology that an emergency manager or planner must understand and address within an emergency plan/program, including:

- As defined earlier, Assistive Technology is “[a]ny item, piece of equipment, or system, whether acquired commercially, modified, or customized, that is commonly used to increase, maintain, or improve functional capabilities of individuals with disabilities.”²¹ The term does not include a medical device that is surgically implanted, or the replacement of such device.
- Section 504 of the Rehabilitation Act, Title II, Subpart E, requires that communications with people with disabilities be equal to those without disabilities. Additionally, Title II of the ADA states that:
 - “[N]o qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subjected to discrimination under’ any program or activity that either receives Federal financial assistance...”²²
 - “A public entity shall furnish appropriate auxiliary aids and services where necessary to afford qualified individuals with disabilities, including applicants, participants, companions, and members of the public, an equal opportunity to participate in, and enjoy the benefits of, a service, program, or activity of a public entity.”²³
- In 1998, the United States Congress amended the Rehabilitation Act and created Section 508, requiring that federal agencies make their electronic and information technology accessible to people with disabilities.
 - Non-federal agencies may be held to Section 508 standards due to the requirements of Section 504 of the Rehabilitation Act.²⁴

The U.S. DOJ Civil Rights Division created a guide for State and local governments to use when creating accessible web content. The “Accessibility of State and Local Government Websites to people with Disabilities”²⁵ provides examples and resources for state and local governments to use when creating accessible web pages. There is a global standard for creating accessible

²¹ United States Access Board, Section 508 Standards for Electronic and Information Technology, § 1194.4 Definitions. Date last accessed 2/7/2017.

²² U.S. Department of Justice Civil Rights Division Disability Rights Section. “A Guide to Disability Rights Laws. Rehabilitation Act - Section 504.” Date last accessed, 3/1/2017.

²³ U.S. Department of Justice, 28 CFR Part 35. “[Americans with Disabilities Act Title II Regulations. Subpart E—Communications. § 35.160 General.](#)” Date last accessed, 3/1/2017.

²⁴ [Section 504, Rehabilitation Act of 1973 \(29 U.S.C. § 701\), Section 794. Nondiscrimination under Federal grants and programs; promulgation of rules and regulations. Subsection B. “Program or activity” defined.](#) Date last accessed, 3/1/2017.

²⁵ U.S. Department of Justice Civil Rights Division Disability Rights Section. “[Accessibility of State and Local Government Websites to People with Disabilities.](#)” Date last accessed, 3/1/2017.

internet content known as the Web Content Accessibility Guidelines. The Web Content Accessibility Guidelines (WCAG) was created by the Web Accessibility Initiative (WAI). The WAI develops guidelines, technical reports, and educational resources about web accessibility to help make the internet accessible to people with disabilities. The “WCAG is developed through the World Wide Web Consortium (W3C) process in cooperation with individuals and organizations around the world, with a goal of proving a single shared standard for web content accessibility that meets the needs of individuals, organizations, and governments internationally²⁶...The W3C develops web standards such as HTML, XML, CSS, etc.”²⁷ In conjunction with creating accessible public content, including web material, organizations should also make internal information technology and electronics accessible to employees with disabilities and others with access and functional needs. This can include, but is not limited to, providing screen reader software for computers to allow documents to be read, and providing accessible computers with enhanced screens and keyboards to employees. By utilizing assistive technology, any organization can create an accessible work environment for employees and customers with disabilities and others with access and functional needs.

The external component of assistive technology involves providing assistive technology to the community through preparedness programs, emergency operations, and facilities, such as in emergency shelters or disaster recovery centers. Assistive technology helps eliminate barriers related not only to information technology usage, but to multiple aspects of daily life, and it helps people with disabilities and others with access and functional needs to maintain their independence.

The Maryland Technology Assistance Program (MDTAP) is a program under the Maryland Department of Disabilities with the mission to enhance the lives of all Marylanders with disabilities, older Marylanders, and their families by helping support access to assistive technology devices and services. This program provides an exceptional resource to emergency managers and planners as they plan for people with disabilities and others with access and functional needs through demonstrations of assistive technology and an inventory of available assistive technology with procurement information. By utilizing assistive technologies, any organization can better equip facilities with technology that considers the needs of people with disabilities and others with access and functional needs, facilitating communication and ultimately assisting people with maintaining their independence. MDTAP has an [inventory](#) of available assistive technology, as well as demonstration capabilities; the inventory is available in Assistive Technology Resources Section in [Appendix A: Resources](#).

²⁶ Web Accessibility Initiative. [“Web Content Accessibility Guidelines \(WCAG\) Overview.”](#) Date last accessed 2/7/2017.

²⁷ Web Accessibility Initiative. [“How WAI Develops Accessibility Guidelines through the W3C Process: Milestones and Opportunities to Contribute.”](#) Date last accessed 2/7/2017.

Table 11 provides some examples of assistive technology with descriptions, information on procurement, and what functional need is facilitated. This is not a complete list of all available assistive technology, but provides examples of the types of equipment that are available to assist people with disabilities and others with access and functional needs. It is important that community preparedness programs have available assistive technology so participants with disabilities and others with access and functional needs can gain equal access to preparedness information. It is also important that, during plan development, an emergency manager or planner ensure that the needs of people in shelters and staff of the emergency management agency have appropriate assistive technology to maintain independence and eliminate barriers.

Table 11: Examples of Assistive Technology: Examples of Assistive Technology

Technology	Description	Procurement	Functional Need Served
Franklin Bill Reader	Money scanner for bill identification to help people know what denomination a bill is.	Market Price Estimate: \$250 Manufacturer: Franklin ²⁸	Independence Communication
Med-E-Lert Pill Dispenser	Pill organizer with programmable alarms for people who have difficulty with remembering when to take medication.	Market Price Estimate: \$70 Manufacturer: Dispense-A-Med ²⁹	Medical Personal Care Independence
Text-to-Speech (TTS) or speech synthesizers	Device that receives information going to the screen in the form of letters, numbers, and punctuation marks, and then "speaks" it out loud in a computerized voice.	Zygo USA ³⁰ Estimate: \$2,000	Independence Communication
i.d. Mate Omni - Bar Code Reader	A portable talking bar code scanner that aids people with vision disabilities or limited vision with the identification of items via the product's bar code or universal product code.	Market price Estimate: \$1299 Manufacturer: Envision America ³¹	Medical Independence

²⁸ [Franklin Bill Reader, BR-1000.](#)

²⁹ [MED-E-LERT AUTOMATIC PILL DISPENSERS.](#)

³⁰ [Text-to-Speech Devices.](#)

³¹ [Envision America.](#)

Appendix C: People-First Language for Inclusive Emergency Management Programs

This appendix was created by the Maryland Department of Disabilities Office of Emergency Preparedness and Policy. It focuses on the importance of using people-first language when referring to people with disabilities and others with access and functional needs and provides examples of inclusive language. Using people-first language places the emphasis on the individual and not on their disability, and thereby helps to remove barriers created by negative stereotypes to further create inclusiveness. These considerations have been modified based on suggestions provided by FEMA, and are structured in the table below to create a succinct list of inclusive language for emergency managers. This document is available at the [Maryland Department of Disabilities Website³²](#), located at the bottom of the page in the link provided. In order to be more inclusive in the way people with disabilities and others with access and functional needs are communicated with, these considerations should be understood and used. When referring to people with disabilities and others with access and functional needs, emergency management language and practices should be inclusive of people with disabilities and also should:

- Use people-first language – place the emphasis on the individual instead of the disability;
- Use terms consistent with the integration mandate in the Americans with Disabilities Act;
- Use language that is respectful and straightforward;
- Refer to a person’s disability only if it is relevant;
- Avoid terms that lead to exclusion (e.g., “special,” which is associated with “separate” and “segregated” services); and
- Avoid making assumptions or generalizations about an individual’s abilities based on their diagnosis or disability. Individuals are unique and have diverse abilities and characteristics.

The table below provides examples of inclusive language that should be used contrasted with terms that do not represent inclusive language. By using language that is inclusive, we can mitigate and change insensitive and stereotypical terms used to describe people with disabilities and others with access and functional needs, and better focus on individuals and how to best meet their needs.

³² Refer to Appendix A of this Toolkit for list of online resources.

Table 12: Inclusive Language for People with Disabilities and Others with Access and Functional Needs

Inclusive Language	Not Inclusive Language
People with disabilities	The handicapped, the impaired
An individual or person with a disability	Disabled person
Access and functional needs	Special needs
Deaf, hard of hearing	Deaf and dumb, mute
He has a speech disability	He has a speech impairment, speech impediment
She has a mobility disability	She's mobility impaired, crippled, an invalid, lame, bedridden, house-bound
She has ... (multiple sclerosis, cancer, etc.)	Suffers from, afflicted with, stricken with, impaired by
He uses a wheelchair, he uses a scooter	Wheelchair-bound, confined to a wheelchair, wheelchair person
Assistive devices, assistive technology, durable medical equipment	Handicapped equipment
She sustained a spinal cord injury, she has paralysis, she is a spinal cord injury survivor, has paraplegia, quadriplegia	She's paralyzed, she's trapped in her body, crippled, useless
Prosthesis, prosthetic limb	Fake leg, wooden leg, peg leg
He has cerebral palsy	He's spastic, palsied
He has epilepsy, he has seizures	He has spells, fits
She has Down syndrome	She's Downs, a Down's kid, mongoloid, retarded
He has a learning disability	He is learning disabled, slow learner, dumb
A person with an intellectual disability	The mentally retarded, mentally impaired
A person with a cognitive disability, a person with dementia or Alzheimer's Disease	Senile, demented
A child with a traumatic brain injury or a head injury	Brain damaged, slow
She has a mental illness, an emotional disability, psychiatric disability, she has a diagnosis of schizophrenia or bipolar disorder, uses behavioral health services	Emotionally disturbed, crazy, psycho, schizo, insane, manic, mental, he's a behavior problem, she's a problem child, he is crazy, they are out of control
Congenital disability, sustained a birth injury	Special Medical Needs, birth defect, defective
Children who receive special education services, children with Individual Education Plans	Special education kid, special needs child, rides the short bus, SPED, he's special ed
Accessible bathroom, accessible parking, accessible housing, accessible transportation	Handicapped bathrooms, special needs housing, special housing, special transportation
Medical needs, health care needs	Special Medical Needs
She requires support or assistance with...	She has a problem with...
Universal cot, accessible cot	Special needs cot, special medical cot
A person who doesn't have a disability	Normal person, whole person
Functional needs support services in a general population shelter, accessible shelter, universal shelter	Special needs shelter, special functional needs shelter
Planning for people with disabilities and others with access and functional needs, whole community planning, inclusive planning, integrated planning	Planning for the disabled, special needs planning, special plans, special needs annex

Appendix D: Hyperlinks Cited Throughout Self-Assessment

A. Accessible Emergency Information

- [This website, created by the Northeast Texas Public Health District, contains information about 18 different preparedness topics. Information is translated into American Sign Language and braille, and is available in a large print format. Resources from other sources containing disaster information for individuals with disabilities and others with access and functional needs are also linked to within the website.](#)
 - Date last accessed: 3/1/2017

B. ADA Building Accessibility Standards:

- [The ADA Standards required by the DOJ and DOT are listed on this website, along with links to additional resources relating to accessibility standards.](#)
 - Date last accessed: 3/1/2017

C. ADA Checklist for Emergency Shelters:

- [A checklist provided by the DOJ on setting up emergency shelters that meet ADA standards for accessibility.](#)
 - Date last accessed: 3/1/2017

D. Adobe PDF Accessibility Best Practices

- [A detailed outline that explains the accessibility features of Adobe PDF documents. There is also information on how to perform accessibility checks for PDF documents, as well as other accessibility considerations.](#)
 - Date last accessed: 3/1/2017

E. American Red Cross (ARC) Disaster Preparedness for People with Disabilities

- [Contains information related to disaster preparedness considerations specific for people with disabilities and others with access and functional needs.](#)
 - Date last accessed: 3/1/2017

F. Approved Nonpublic Educational Programs for Children with Learning Disabilities

- [The Maryland State Department of Education has created a directory of nonpublic educational programs for children with learning disabilities.](#)
 - The directory is organized alphabetically by county and contains the name of the school and its contact information.
 - Date last accessed: 3/1/2017

G. Autism Awareness Training

- [This course is intended to give first responders awareness training for meeting the needs of and communicating with autistic individuals.](#)
 - Date last accessed: 3/1/2017

H. Creating Accessible Excel Documents

- [A tutorial developed by Michigan State University on authoring accessible Microsoft Excel documents. Information on document language, alternate text, headings and cell styles, naming cell sections and accessibility checks is provided.](#)
 - There is also information on other accessibility resources.
 - Date last accessed: 3/1/2017

I. Cultural Competency Curriculum for Disaster Preparedness

- [A series of free online courses developed by the U.S. Department of Health and Human Services. These courses are designed are with practitioners in mind, enabling them to provide culturally and linguistically competent services during disaster situations.](#)
 - Date last accessed: 3/1/2017

J. Department of Health and Mental Hygiene (DHMH) Office of Healthcare Quality (OHCQ) List of Licensees

- [A directory provided and maintained by the Maryland Department of Health and Mental Hygiene \(DHMH\) Office of Healthcare Quality \(OHCQ\) of the licensees regulated by the OHCQ.](#)
 - The information is divided by the type of facility, such as residential treatment centers and comprehensive care facilities, and is organized alphabetically by county in three formats, PDF, Word, and Excel. The website notes that upon downloading a document, the website may prompt for a username and password, and selecting “cancel” will allow the user to continue the download.
 - Date last accessed: 3/1/2017

K. Easter Seals Serving DC, MD, and VA

- [The Easter Seals Disability Services D.C., Maryland, and Northern Virginia chapter serves as a non-profit advocacy organization for people with disabilities and others with access and functional needs, including military personnel, their families and veterans.](#)
 - This website contains information about the services they provide, which ranges from medical rehabilitation to veteran employment reintegration.
 - Date last accessed: 3/1/2017

L. Explanation of Relay Services

- [The National Association of the Deaf provides this information that serves as a brief explanation of telephone and relay services mandated by the ADA.](#)
 - Date last accessed: 3/1/2017

M. FCC Guide to Video Relay Service

- [Content related to Video Relay Services \(VRS\) from the FCC. This webpage covers information about how VRS works and the benefits of using VRS for people with disabilities and others with access and functional needs.](#)
 - Date last accessed: 3/1/2017

N. FCC Telecommunications Relay Service

- [Describes how TRS works, what forms of TRS are available, and the mandatory minimum standards required to utilize TRS.](#)
 - Date last accessed: 3/1/2017

O. FEMA’s Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters

- [This guide published by FEMA contains key considerations for functional needs support services in general population shelters. There are sections on planning for shelter set-up, operations, and transition/recovery.](#)
 - Section 4.2.1 contains information specific to dietary considerations during shelter operations, however the entirety of the document is filled with useful information and resources for supporting people with disabilities and others with access and functional needs in emergency shelters.
 - Date last accessed: 3/1/2017

P. Including People with Disabilities (FEMA)

- [This independent study course offered online free of charge, IS-368, is intended to increase understanding of the need for inclusive response efforts representative of the whole community.](#)
 - An awareness level training intended for individuals involved in disaster operations.
 - Date last accessed: 3/1/2017

- Q. Independent Marylanders Achieving Growth through Empowerment (IMAGE) Center Services:**
- [Information on location specific and general resources relating to supportive and inclusive programs for people with disabilities and others with access and functional needs.](#)
 - Date last accessed: 3/1/2017
- R. Maryland Department of Disabilities (MDOD):**
- [The official website of MDOD. Contains links to programs and resources offered by MDOD, including information about emergency preparedness.](#)
 - Date last accessed: 3/1/2017
 - [Maryland Technology Assistance Program \(MDTAP\)](#)
 - Date last accessed: 3/1/2017
- S. Maryland-National Capital Homecare Association**
- [The Maryland-National Capital Homecare Association represents home health agencies, private duty agencies/registries, and home medical equipment businesses.](#)
 - The Association also includes on their webpage disability and access and functional need specific emergency preparedness information in various languages.
 - Date last accessed: 3/1/2017
- T. Maryland State Data Center**
- [The Maryland Department of Planning's Maryland State Data Center contains links to interpreted socioeconomic data for the State of Maryland across a variety of topical areas.](#)
 - Date last accessed: 3/1/2017
- U. Maryland Statewide Independent Living Council (MSILC):**
- [Provides information and resources relating to independent living, including the Maryland State Plan for Independent Living.](#)
 - Date last accessed: 3/1/2017
- V. Microsoft Office Accessibility Guides**
- [Accessibility guides written by Microsoft for business and government organizations. There are also accessibility training tools for IT professionals.](#)
 - Date last accessed: 3/1/2017
- W. Personal Preparedness for Individuals with Disabilities and Others with Access and Functional Needs:**
- [Contains information about personal preparedness considerations specific to individuals with disabilities and others with access and functional needs.](#)
 - Date last accessed: 3/1/2017
- X. PDF Accessibility Guide:**
- [This official guide created by Adobe is an excellent resource for creating and verifying the accessibility of PDF documents. Instructions are provided on how to make a PDF document accessible, how to verify its accessibility, and how to take actions to correct any accessibility issues.](#)
 - Date last accessed: 3/1/2017
- Y. Residential Treatment Centers for Children**
- [A directory of residential treatment centers for children in Maryland. These facilities serve children and adolescents with severe emotional disabilities.](#)
 - The directory is organized alphabetically by county and contains a phone number and email address for each facility if available, as well as bed capacity and information about the population served.
 - Date last accessed: 3/1/2017
- Z. SSA Accessibility Checklist:**
- [The SSA has created a checklist for ensuring 508 accessibility in Microsoft Word 2010.](#)

- Information is provided on how to perform accessibility checks, frequently asked questions about Section 508 compliance and Microsoft Word accessibility, and suggestions and “quick fixes” for Microsoft Word document accessibility.
 - Date last accessed: 3/1/2017

AA. SSA Accessible Document Authoring Guide:

- [The SSA’s Accessibility Resource Center has authored a guide on producing accessible documents in multiple formats, including Microsoft Word and PDF documents.](#)
 - Within the document is a link to a general introduction on accessibility and the requirements of Section 508 of the Rehabilitation Act.
 - Date last accessed: 3/1/2017

BB. SSA Guide to Applying Section 508 Standards:

- [The SSA’s Guide to Applying Section 508 Standards contains detailed technical information on accessibility standards for multiple formats and platforms.](#)
 - Date last accessed: 3/1/2017

CC. The ADA and Emergency Shelters: Access for All in Emergencies and Disasters

- [Information on emergency shelter planning for people with disabilities and others with access and functional needs.](#)
 - Date last accessed: 3/1/2017

DD. U.S. Access Board Section 508 Standards

- [The Section 508 Standards published in the Federal Register. For ease of navigation, the standards are divided into subparts.](#)
 - Date last accessed: 3/1/2017

EE. United Cerebral Palsy

- [Provides information on independent living resources and advocates on behalf of individuals with disabilities and others with access and functional needs.](#)
 - Date last accessed: 3/1/2017

FF. WebAIM’s PowerPoint Accessibility Guide

- [This guide was created by WebAIM to provide assistance in creating accessible Microsoft PowerPoint presentations. It also links to an accessibility checker for PowerPoint.](#)
 - Date last accessed: 3/1/2017

GG. WebAIM’s Section 508 Checklist

- [A Section 508 Standards checklist developed by WebAIM.](#)
 - The information is organized to contain an interpretation of Section 508 Standards and examples of passing and failing web content.
 - Date last accessed: 3/1/2017

HH. Web Content Accessibility Guidelines (WCAG) 2.0 Quick Reference:

- [A quick reference guide on Web Content Accessibility Guidelines \(WCAG\) 2.0 requirements. It is a comprehensive and customizable tool with features that allows the user to filter content in order to facilitate navigation, to save webpage preferences in their browser, and to share the webpage with specific preferences and filters set to allow ease of information transfer.](#)
 - Date last accessed: 3/1/2017

II. “When Words are Not Enough” Communications Training

- [The Woodside Fire Protection District \(WFPD\) in California has created a training program to better enable responders to communicate with individuals with disabilities and others with access and functional needs during emergency situations](#)
 - The resources within this training include a written manual and communications booklet, among other things.
 - Date last accessed: 3/1/2017