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Creating Emergency Kits and Plans with People with Disabilities: Train the Trainer Handbook

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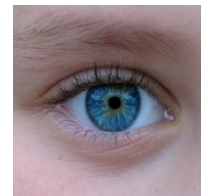
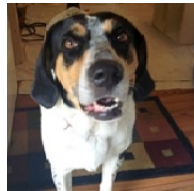
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Creating Emergency Kits and Plans with People with Disabilities

2015
New Hampshire
Disability & Public
Health Project



University of New Hampshire
Institute on Disability / UCED

Alternative formats available on request.

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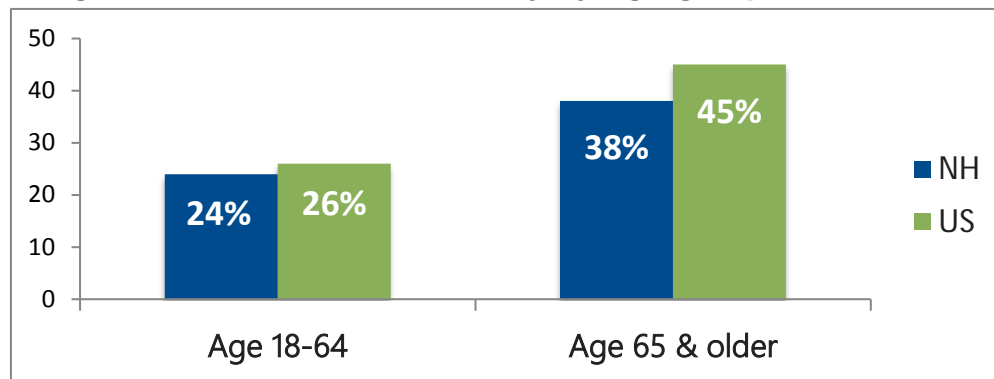
Questions and comments about this handbook or other aspects of the train the trainer modules presented within? Please call DPH at (603) 862-4320 | Relay 711; email us at dph.iod@unh.edu; or get in touch via the project website at <http://nhdisabilityhealth.org>.

DPH & Disability in New Hampshire

The CDC-funded New Hampshire Disability and Public Health project (DPH) is a collaboration between the University of New Hampshire Institute on Disability and NH Division of Public Health Services. The project goal, to promote and maximize health, prevent chronic disease, improve emergency preparedness and increase the quality of life among people with disabilities, is achieved through activities that focus on infusing disability components into existing public health programs and initiatives.

Figure 1 shows the prevalence of disability among adults in New Hampshire compared to the United States.¹ Prevalence rates are one available metric that helps to determine levels of need and demonstrates the importance of including a disability perspective in public health programming and services within the state.

Figure 1. Prevalence of disability by age group (BRFSS, 2013)



Prevalence rates in the figure above come from the CDC’s Behavioral Risk Factor Surveillance System (BRFSS), in which disability is defined as a “yes” response to one or more of the following questions:

- Do you have serious difficulty walking or climbing stairs?
- Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?
- Are you blind or do you have serious difficulty seeing, even when wearing glasses?
- Do you have difficulty dressing or bathing?
- Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor’s office or shopping?
- Do you Are you limited in any way in any activities because of physical, mental, or emotional problems?
- Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?²

Handbook Overview

This trainer handbook is designed to help individuals work with people with disabilities to create customized emergency preparedness kits and plans. If you work in the field of disability or are a family member of a person with a disability, this curriculum will teach you about the basics of emergency preparedness. If you have experience with emergency planning and preparedness, this curriculum will help you teach people about the kinds of modifications and considerations people with disabilities might require in order to be personally prepared.

Learning Objectives

- Establish a common language to interact respectfully and effectively with people with disabilities.
- Review basic, modified, and specialized emergency supply kit items.
- Learn to use the C-MIST Personal Planning Tool to make individual emergency plans.

Before you train

- Read through the entire handbook, so you are familiar with the contents.
- Rehearse at least once, timing yourself to ensure that you can cover the needed material in the time allotted. Leave ample time at the end of your session for questions and for participants to fill out your training evaluations.
- Make enough copies of all the handouts you will deliver, including training evaluations (see Appendix).
- Some trainers have made laminated posters of the prompting questions (page 23) and the blank planning template (page A-16) to write on directly.
 - Be sure to bring tape and/or poster board to hang the posters up.
 - *Or* if you choose not to make posters, consider displaying the prompting questions on a flipchart for participants.
- Have dry erase markers to use with the posters or a white board, or bring a large paper flip chart and a few colored markers.
- Have extra pens or pencils for use with the training evaluation forms.
- Assemble contents of your example Stay Kit and the Go Bag into suitable containers.
- Bring a watch or device and keep track of the time.
- Finally, make it your own!

After the training

- Mail Training Evaluation forms (copies or originals) to

**DPH
10 West Edge Drive
Durham, NH 03824**

Agenda & Timeline

❖ Introduction

Welcome participants and introduce yourself to the group
Hand out Toolkit for Training Participants to everyone
Introduce the training and share the learning objectives

❖ Part 1: Establish a Common Language

Discuss definition of disability
Briefly present and explain the C-MIST Functional Needs Framework

❖ Part 2: Build a Kit

Stay Kit – Go Bag contents activity

- a. Review essential items
- b. Discuss useful modifications
- c. Propose additional specialized items to include

❖ Part 3: Make a Plan

Personal Planning Tool activity

- a. Assess strengths and abilities
- b. Brainstorm needs in an emergency
- c. Complete personalized preparedness plan

❖ Conclusion

Inform participants where to find local, state, and national resources to learn more
Question and answer
Training evaluations – participants fill out both the pre- and post- sections AFTER the training

Key:

- Green boxes highlight talking points
- *Italicized text provides instructions for the trainer*

Create a Demo Kit

Before the training, pull together a demo emergency preparedness kit for the Stay Kit / Go Bag activity. Review the activity on pages 16-19 to help you plan your specific demo kit items. Keep it simple, but consider the kinds of modifications and considerations you'll be discussing with participants.

Ideas for Demo Kit Items

- Durable waterproof container (for Stay Kit items)
- Small backpack (for Go Bag items)
- 1 x gallon water
- Smaller water bottle with easy-open sports cap
- Examples of high-protein, non-perishable foods for a variety of diet and ability types (consider variations such as nut allergies, mobility limitations that may prohibit using a can opener, chewing and swallowing difficulties)
- Flashlight and batteries
- Examples of other types of batteries (hearing aid or other devices)
- Prescription medication in original container (or an item to represent this)
- Small ice pack or cold storage bag for medications that need to stay cold
- Hand Sanitizer in a few different types of containers (e.g., wipes, pump-top, flip-top, spray)
- Personal hygiene items (toothbrush or plastic utensils)
- Model magic or similar putty for molding
- Pet and/or service animal supplies
- Water resistant, easy-open document holder and example document templates
- Whistle or bell
- First aid kit
- Index cards, other "cue card" materials, or a small notebook
- Pen(s)
- Security or comfort item (picture of loved one)
- Busy items (e.g., cards or a slinky)

Part 1

Establish a Common Language

Defining Disability

The World Health Organization (WHO) defines disability as a complex phenomenon involving an interaction between a **person** and the **environment** in which s/he functions.³

What does this mean?

It means that on the one hand, the **person** has a difficulty with a body function or structure. On the other hand, the **environment** can make it difficult for the person to carry out a task or action.

Inaccessible environments, stigma, and stereotypes, pose barriers for people with disabilities to fully participate in community living.⁴

Disability can take many forms and is not always visible or readily apparent.

Disability can occur at any point during the lifespan and may originate from birth, illness, injury, or aging.

Here are just a few examples:

- An infant is born with Spina Bifida, which may affect walking;
- A child in a car crash sustains traumatic brain injury, affecting thinking and remembering;
- A young adult has depression or another mental illness making it hard to manage stress;
- A woman in early midlife develops multiple sclerosis and finds moving about is difficult;
- A college student with epilepsy needs in-class accommodations (e.g., extra time on tests);
- A man in late midlife develops hearing loss, affecting his ability to communicate;
- An older adult loses eyesight from glaucoma.⁵

Let's look at an example of the way the environment can facilitate or complicate disability. (*Direct participants to page A-2 of their Toolkit.*)



Scenario: Maria

Consider two scenarios about Maria, a middle-aged woman with an intellectual disability. Maria does not read or write; she understands many things, but does not remember very well. She sometimes receives help from a paid care provider, and she likes to manage some of her activities independently.

Scenario 1

Maria took the bus to her doctor appointment last Tuesday. The bus stop is near her home, and she was able to recognize which bus to get on by the large red triangle in the front side window. Maria's direct support person had ridden the bus with her several times before she was able to do it on her own. They rehearsed the process and even made small laminated cards of Maria's frequent destinations. One side shows a picture of the places Maria might go (e.g., to the park, the library, the doctor), and the other side informs the bus driver which stop Maria needs, so the driver can cue her when they arrive. Maria followed the sidewalk directly to her doctor's building. Once inside, she consulted the directory, which had names and headshots of all of the physicians. She recognized her doctor and turned in the direction the arrows pointed her. Each time she had to turn in the hallway, the directory with pictures and arrows was there to guide her. After the appointment, Maria returned to the bus stop, got on the bus with the red triangle, showed the bus driver the card with the picture of her home on it, and returned home in time for lunch.

Scenario 2

Maria wanted to go to her doctor appointment on her own this time instead of being taken by her direct support assistant. She lived near the bus stop, so she walked down and waited for the bus. She was not sure if she should get on the first bus that stopped, and she did not recognize the driver, so she kept waiting. She asked the driver of the next bus, "Does this bus stop near my doctor?" The bus driver asked whether she meant the offices on Main Street, but Maria wasn't sure. The bus driver said the bus needed to get going to keep on schedule for the other passengers. Maria was nervous and sad. She went home and didn't make it to her appointment that day.



- Would anyone like to share some thoughts or reactions to what you've read?
- These scenarios introduce the idea of universal design, and illustrate how disability changes (is reduced) when an individual's systems and surroundings are accessible.

Talking About Disability

There are many ways to talk about disability. Sometimes even the same or similar ideas of disability are discussed in multiple ways. Consider the following professional environments, each with its own specific terms and categorizations:



Special Education



In primary education, you may hear terms like **Individualized Education Plan (IEP)** or a **504 plan**



Data Collection



The U.S. Census and other national data sources use terms such as **ambulatory, cognitive, vision, hearing, self-care, and independent living**



Government



Disability is sometimes defined by eligibility for state or federal programs such as **Medicaid** or **Social Security** benefits



Emergency Response



First responders and emergency personnel use the **C-MIST Functional Needs Framework** to plan and prepare to meet the diverse needs of community members

Are you familiar with the C-MIST functional needs framework?

Introducing C-MIST

C-MIST Functional Needs Framework

The U.S. Department of Health and Human Services and the state of New Hampshire use a functional needs framework to identify and understand at-risk individuals' needs in emergency planning and preparedness. The framework includes five essential functional needs categories: communication, medical needs, maintaining independence, supervision, and transportation (C-MIST). C-MIST provides a useful and flexible framework for emergency planning and response, emphasizing a person's needs rather than the disability.⁶⁻⁸

(Direct participants to page A-3 and/or refer to poster.)

C	<p>Communication</p> <p>Some people have difficulties receiving and responding to information. People with communication needs may have reduced or no ability to see, hear, or speak; or have limitations understanding or learning. This category also includes people who cannot speak, read, or understand English.</p>
M	<p>Medical Needs</p> <p>For the purposes of emergency planning, this category includes people who need assistance with activities of daily living such as grooming, bathing, eating, dressing, or toileting; as well as people who are managing chronic, contagious, or terminal illnesses; and people requiring medications, IV therapy, feeding tubes, dialysis, oxygen, suction, catheters, and ostomies.</p>
I	<p>Independence</p> <p>Some people use medication or assistive devices to function independently on a daily basis, such as: mobility aids (wheelchairs, walkers, canes), communication aids (hearing aids, computers), medical equipment (syringes, oxygen), or service animals.</p>
S	<p>Supervision</p> <p>People may require supervision when they experience Alzheimer's or other forms of dementia; psychiatric conditions such as Schizophrenia, severe depression, or chronic and severe mental illness; intellectual or developmental disabilities; or brain injury. Needs in this category sometimes require a more supervised and protected setting in an emergency.</p>
T	<p>Transportation</p> <p>Transportation is an essential part of emergency planning. People who do not drive because of a disability, legal restriction, temporary injury, age, poverty, or lack of access to a vehicle are included in this category.</p>

Part 2

Build a Kit

Build a Kit

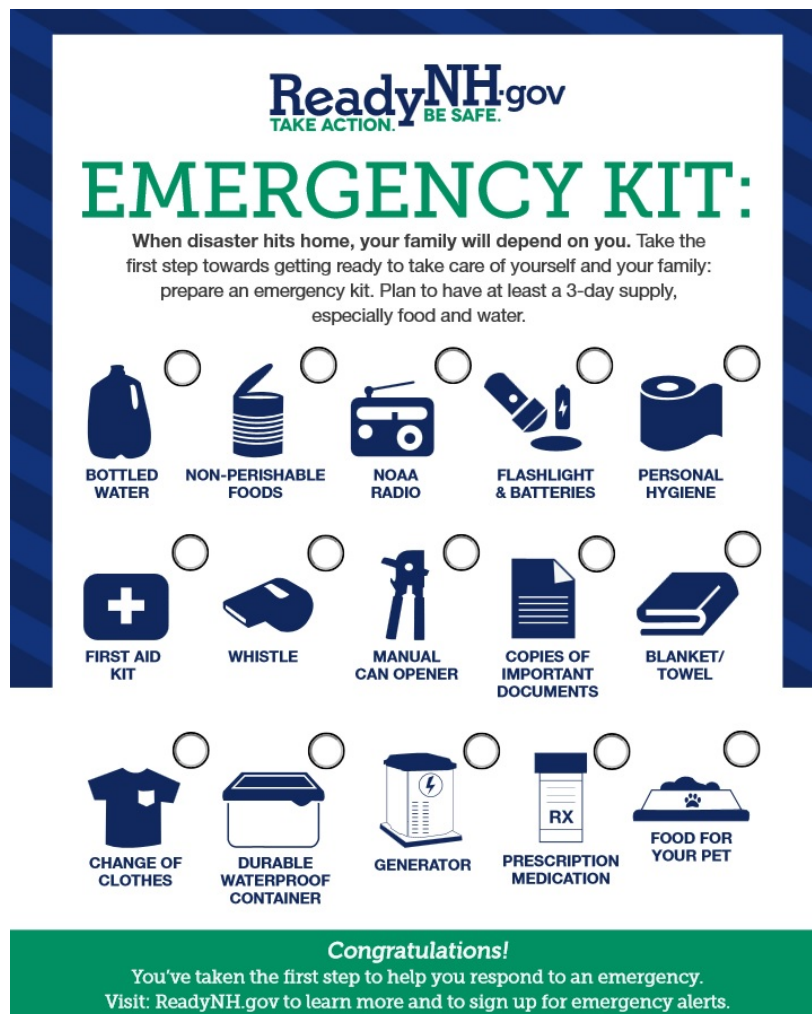
- It is important for everyone to be as prepared as possible for an emergency. Emergency kits are most effective when they are person-centered and individualized.

Stay Kit / Go Bag activity

This activity allows you to cover three important components of building emergency preparedness kits (direct participants to page A-4):

- *Refer to the ReadyNH list of items for a basic kit;⁹*
- *Display each item and discuss person-centered modifications to make the kit accessible; and*
- *Give examples of additional items to include, like special equipment or wellness enhancers.*

*You won't have time to cover everything, but your presentation will **inspire participants to think creatively** about all kinds of contingencies and accommodations. Challenge participants to share their own ideas, too.*



ReadyNH.gov
TAKE ACTION. BE SAFE.

EMERGENCY KIT:

When disaster hits home, your family will depend on you. Take the first step towards getting ready to take care of yourself and your family: prepare an emergency kit. Plan to have at least a 3-day supply, especially food and water.

- BOTTLED WATER
- NON-PERISHABLE FOODS
- NOAA RADIO
- FLASHLIGHT & BATTERIES
- PERSONAL HYGIENE
- FIRST AID KIT
- WHISTLE
- MANUAL CAN OPENER
- COPIES OF IMPORTANT DOCUMENTS
- BLANKET/TOWEL
- CHANGE OF CLOTHES
- DURABLE WATERPROOF CONTAINER
- GENERATOR
- PRESCRIPTION MEDICATION
- FOOD FOR YOUR PET

Congratulations!
You've taken the first step to help you respond to an emergency.
Visit: ReadyNH.gov to learn more and to sign up for emergency alerts.

Modifications: Talking Points



**BOTTLED
WATER**

Why it's in the kit - Water is essential to survival, and must be included in an emergency kit. During an emergency, water sources could be cut off or contaminated. It is recommended to keep one gallon of water per person per day in your stay kit (i.e., 3 gallons for 3 days).

Modification ideas

- Some people with disabilities require drinking straws, modified cups, or cup holders to drink independently. Be sure to plan for your needs.
- Some water bottles are easier to open and drink from than others. Water bottles with straws or twist tops, or camel packs, may be more usable for some people.
- Remember your pets or service animal. They will need water and a bowl to drink from.



**NON-PERISHABLE
FOODS**

Why it's in the kit – In case of a power outage or being confined to the home. Foods in the kit should not spoil easily, should not need to be refrigerated, and should not require cooking.

Modification ideas

- Some people with disabilities have sensitivities to certain foods or textures, or may have difficulty chewing or swallowing certain foods. Create a list of emergency foods that work for the individual.
- Non-perishable foods come in all kinds of containers, and some are easier than others to open, especially for individuals with certain kinds of mobility limitations (packages vs. cans).
- Keep in mind any special dietary needs when choosing what foods to include in the kit.
- Remember to have food for your pets or service animal.



**FLASHLIGHT
& BATTERIES**

Why it's in the kit – Pack a flashlight in case of a power outage and to get around in dark areas. It may also be used to get the attention of neighbors or emergency personnel without going outside.

Modification ideas

- Choose a flashlight that is easy to turn on and off, and does not require screws to replace the batteries. Consider including a shakable, maintenance free flashlight that does not require replacing batteries.
- Consider the usability of the flashlight. A person with a mobility disability may prefer a headlamp, or a flashlight that can be attached to a wheelchair, walker, or cane.
- Glow sticks are another easy to use source of light that you can include in your kit.

EXTRA BATTERIES

Why it's in the kit – Be sure to include extra batteries for the items in your kit or the devices used to function on a daily basis.

Modification ideas

- If the individual uses any special equipment or devices (communication aids, mobility aids, etc.), determine if it can run on batteries in the event of a power outage. If so, know what size and types of batteries are needed, and have extras in the kit.
- Be sure to list which types of batteries go with which items, instructions to change the batteries, and an estimate of how long battery power might operate the device.



PRESCRIPTION MEDICATION

Why it's in the kit - At least a 3-day supply of all necessary prescription medications should be kept in the kit, along with copies of the prescriptions and doctor contact information. Make sure medications are stored in their original labeled containers.

Modification ideas

- If any medications need to be refrigerated, consider putting a small cooler or cold storage bag in the kit. Keep ice packs or baggies of ice in the freezer, so they can be easily added to the kit if needed.



PERSONAL HYGIENE

Why it's in the kit - Hand sanitizer, a toothbrush, and other personal hygiene items can help with safety and comfort if evacuation is necessary or there is a lack of running water.

Modification ideas

- Hand sanitizer is packaged in many different ways (e.g., flip caps, wipes, pump tops), so choose the kind that is easiest for the individual to use.
- Some people with disabilities require special tools or equipment for grooming to eat independently, like utensils or a toothbrush with weighted handles, grips or clips. Include the supplies or equipment that will help you remain healthy and independent in an emergency.



WHISTLE

Why it's in the kit – Whistles are included in the kit to signal for help in an emergency situation.

Modification ideas

- People with respiratory issues may have difficulty using a whistle to signal for help. Consider including an air horn or other loud noisemaker rather than a whistle.

Specialized Items

■ Include any special supplies or equipment in the kit that an individual uses to function on a daily basis. These may include:

- Glasses
- Attachment objects
- Dressing devices
- Writing devices
- Hearing devices
- Oxygen
- Wheelchair
- Wheelchair repair kit
- Walker
- Crutches
- Cane
- Monitors

Suggestions to consider

- Photo(s) of loved ones or a favorite object - may help calm or soothe an individual who is easily upset by changes to the routine and help the person to follow instructions or receive information.
- Model Magic – a great example of a creative and quick problem-solving tool to modify items in the kit.¹⁰ It is non-toxic and doesn't crack like play dough, and can be used to create adaptive eating utensils that are lightweight and contour to a person's unique grip. It can also serve as a busy item to help pass the time.
- Self-Adhesive Foam Shapes – foam shapes can be used as raised characters to label items in a kit for a person with a visual impairment.¹⁰
- WikkiStix – WikkiStix are another example of a quick solution for labeling kit items for a person with a visual impairment.¹⁰ WikkiStix are fun to use, and may also be a calming activity in an emergency situation.
- Velcro products – a highly useful tool that can be used to modify various kit items.¹⁰ For example, a person could apply one side of a Velcro strip to a shirt sleeve or a wheelchair arm and the other side to a flashlight to keep it nearby.

Part 3

Make a Plan

C-MIST Personal Planning Tool

- The C-MIST Personal Planning Tool is helpful in considering what specialized items to add to a Stay Kit and Go Bag because it guides individuals through step-by-step creation of a personalized Emergency Plan. (*Direct participants to page A-7.*)
- We will use a case study of Mr. Smith to learn and practice the three steps of the C-MIST Personal Tool:
 - Assess
 - Brainstorm
 - Plan

Case Study: Mr. Smith

Mr. Smith experienced a traumatic brain injury while serving in the military on a tour of duty overseas. The accident damaged his frontal and left parietal lobes. He has difficulties with concentration, memory, writing, and expressive language. Mr. Smith's civilian career had relied on these skills, and he has been unable to return to work since his discharge. Mr. Smith has been taking medication for anxiety and depression since he returned to the US. He lives alone on the third floor of an apartment complex with his service dog, and he has many friends in the building. He doesn't drive and relies on his sister to run errands and grocery shop. Mr. Smith has not made his own personal preparedness plans, but his sister organized a supply of emergency food and water in his apartment to last him 72 hours.



- While participants read the scenario, draw an empty T-chart on the white board or flip chart.
- Start with the prompting questions for the first category, communication. Have participants respond with their thoughts and ideas and record their input in the left column.
- Point out that Mr. Smith (like a real person) may or may not have needs in all of the areas. When assessing Mr. Smith's abilities, explain how he does things and use your imagination!
- You may need to help frame their input into positive, strengths-based statements; for example:

Participant says:

*Person can't go anywhere alone
Person doesn't talk at all*

You reframe:

*Person's caregiver accompanies on all outings
Person responds to simple drawings*

Prompting Questions

Communication

- How do you best understand and respond to information?
- How do you communicate your needs to others?
- Do you use assistive devices or interpreters for communication?
- How do you keep in touch with your family, friends, caregivers, and others?

Medical Needs

- Do you have help for personal care such as bathing or grooming?
- Do you use assistive equipment for daily activities such as bathing or eating?
- Do you regularly take prescription medication? How do you refill your prescriptions?
- Do you require medical equipment that runs on electricity?

Independence

- What medications or assistive devices do you need to function independently?
- Do any of your devices rely on electricity or batteries to function?
- Do you have a service animal?
- How do you accomplish daily activities such as bathing and eating?
- How do you accomplish other activities, such as grocery shopping and paying your bills?

Supervision

- What strategies help you to keep calm and feel safe?
- How do you stay in touch with your preferred caregivers?
- Are there cues or strategies that help you to remember things or follow directions?
- Are there ways to help you function in an unfamiliar environment or with an unfamiliar person?

Transportation

- How do you generally get where you need to go?
- Is there public transportation in your area?
- Are there people you rely on to drive you places?
- How do you get in touch with people who sometimes take you places?

Brainstorming Questions

What might this ability look like in an emergency?


What tools and strategies could help the person to stay safe and continue functioning?

What information would be useful to a first responder?


Let's start by answering the prompting questions about Mr. Smith's strengths and abilities in two categories: communication and independence. Then we will answer the brainstorming questions about how he can maintain his abilities in an emergency. If we have time, we can fill in additional categories.

➤ *Examples of answers you might hear are provided below. You may not have time to do all of the categories, so starting with two is a good idea. Keep an eye on the time!*

Mr. Smith's Strengths & Abilities Today	To Maintain Abilities in an Emergency
Communication	
<ul style="list-style-type: none"> • Helpful when people speak slowly, clearly, and use short, simple sentences. • Good with visual images Uses cell phone to talk to sister daily	<ul style="list-style-type: none"> • How can he convey this to emergency responders? • A picture board could help with communication Need to have phone charger
Medical Needs	
<ul style="list-style-type: none"> • Uses prescription medication 	<ul style="list-style-type: none"> • Needs to keep as much on hand as possible. Copies of prescriptions; pharmacy and doctor contact info
Independence	
<ul style="list-style-type: none"> • Has a service dog • Does shopping and errands with sister 	<ul style="list-style-type: none"> • Needs food, water and other animal supplies • How will he keep in touch with his sister?
Supervision	
<ul style="list-style-type: none"> • Independent 	
Transportation	
<ul style="list-style-type: none"> • Sister provides transportation 	<ul style="list-style-type: none"> • What if she is unavailable or Mr. Smith is unable to reach her? • Can neighbors or friends provide transportation?

 Now that we understand how to assess and brainstorm, let's transform the information we have generated into action steps and a concrete plan (Step 3).

➤ *Fill in the plan according to the answers the group has generated. Use the example on the next page to help you.*

Mr. Smith's Emergency Plan Action Steps / To Do		 when done
C	• Place note in wallet or Go Bag stating communication preferences.	
	• Get or make a picture board to keep in Go Bag.	
	• Include sister's information in contact list.	
	• Add reminder note / picture to place cell phone and charger in Go Bag.	
M	• Put a few days' extra medication in Stay Kit / Go Bag.	
	• Place copies of prescriptions in Stay Kit / Go Bag.	
	• Add doctor and pharmacy contact information to emergency list.	
	•	
I	• Pack extra dog food and water in Stay Kit and Go Bag.	
	• Make sure dog tags are up to date.	
	• Include necessary supplies (leash, baggies, etc) in Go Bag.	
	•	
S	•	
	•	
	•	
	•	
T	• Make a plan with sister about how to contact/ meet in emergency.	
	• Talk to neighbors to establish back-up transportation / personal support network.	
	•	
	•	

Concluding the Training

- Your Toolkit contains a page with links and resources to help you stay informed and be ready for an emergency.
- You are also given the web address and contact information for staff from the NH Disability & Public Health Project at the UNH Institute on Disability.
- *You may wish to share your contact information, as well.*
- We will conclude now with the training evaluations, which will take about 3 to 5 minutes of your time.
- Thank you for your participation!
- *Hand out training evaluations to participants and designate a place for them to return them anonymously (e.g., face down on the side table).*

References

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- ⁷ Purdy, B. (n.d.). *C-MIST: A Function Based Framework for Emergency Planning*. Retrieved Sept. 2013 from <http://www.freetobe.ca/resources/pdf/C-MISTforEmergencyPlanning.pdf>.
- ⁸ BC Coalition of People with Disabilities. (2008). *Learning CMIST: Train the Trainer: Helping Individuals with Disabilities Create Emergency Preparedness Plans*. Retrieved Sept. 2013 from <http://www.bccpd.bc.ca/docs/learningcmist.pdf>.
- ⁹ State of New Hampshire. (2014). *Emergency Kits*. Retrieved January 9, 2015, from <http://www.readynh.gov/emergency-kits/index.htm>.
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Appendix

Training Evaluation & Participant Handouts

(make copies)

PRE/POST SELF-ASSESSMENT

How confident are you in your ability to...	BEFORE THIS TRAINING					AFTER THIS TRAINING				
	Not Very Confident		Very Confident			Not Very Confident		Very Confident		
help a person with disabilities be prepared for an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
make an emergency plan with a person with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
build a Stay Kit / Go Bag with a person with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TRAINING EVALUATION

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Training content was communicated effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Stay Kit / Go Bag demonstration was a useful learning activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Personal Planning Tool activity was helpful in teaching how to make a personalized emergency plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The training improved my knowledge of emergency preparedness for people with disabilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate how satisfied you are OVERALL with today's session.

- Highly satisfied Satisfied Somewhat satisfied Not satisfied at all

Comments:

Creating Emergency Plans and Kits with People with Disabilities

Toolkit for Training Participants

Person & Environment

Case Study: Maria

Consider two scenarios about Maria, a middle-aged woman with an intellectual disability. Maria does not read or write; she understands many things, but does not remember very well. She sometimes receives help from a paid care provider, and she likes to manage some of her activities independently.

Scenario 1

Maria took the bus to her doctor appointment last Tuesday. The bus stop is near her home, and she was able to recognize which bus to get on by the large red triangle in the front side window. Maria's direct support person had ridden the bus with her several times before she was able to do it on her own. They rehearsed the process and even made small laminated cards of Maria's frequent destinations. One side shows a picture of the places Maria might go (e.g., to the park, the library, the doctor), and the other side informs the bus driver which stop Maria needs, so the driver can cue her when they arrive. Maria followed the sidewalk directly to her doctor's building. Once inside, she consulted the directory, which had names and headshots of all of the physicians. She recognized her doctor and turned in the direction the arrows pointed her. Each time she had to turn in the hallway, the directory with pictures and arrows was there to guide her. After the appointment, Maria returned to the bus stop, got on the bus with the red triangle, showed the bus driver the card with the picture of her home on it, and returned home in time for lunch.

Scenario 2

Maria wanted to go to her doctor appointment on her own this time instead of being taken by her direct support assistant. She lived near the bus stop, so she walked down and waited for the bus. She was not sure if she should get on the first bus that stopped, and she did not recognize the driver, so she kept waiting. She asked the driver of the next bus, "Does this bus stop near my doctor?" The bus driver asked whether she meant the offices on Main Street, but Maria wasn't sure. The bus driver said the bus needed to get going to keep on schedule for the other passengers. Maria was nervous and sad. She went home and didn't make it to her appointment that day.



C-MIST Functional Needs Framework

The U.S. Department of Health and Human Services and the state of New Hampshire use a functional needs framework to identify and understand at-risk individuals' needs in emergency planning and preparedness. The framework includes five essential functional needs categories: communication, medical needs, maintaining independence, supervision, and transportation (C-MIST).

C	<p>Communication</p> <p>Some people have difficulties receiving and responding to information. People with communication needs may have reduced or no ability to see, hear, or speak; or have limitations understanding or learning. This category also includes people who cannot speak, read, or understand English.</p>
M	<p>Medical Needs</p> <p>For the purposes of emergency planning, this category includes people who need assistance with activities of daily living such as grooming, bathing, eating, dressing, or toileting; as well as people who are managing chronic, contagious, or terminal illnesses; and people requiring medications, IV therapy, feeding tubes, dialysis, oxygen, suction, catheters, and ostomies.</p>
I	<p>Independence</p> <p>Some people use medication or assistive devices to function independently on a daily basis, such as: mobility aids (wheelchairs, walkers, canes), communication aids (hearing aids, computers), medical equipment (syringes, oxygen), or service animals.</p>
S	<p>Supervision</p> <p>People may require supervision when they experience Alzheimer's or other forms of dementia; psychiatric conditions such as Schizophrenia, severe depression, or chronic and severe mental illness; intellectual or developmental disabilities; or brain injury. Needs in this category sometimes require a more supervised and protected setting in an emergency.</p>
T	<p>Transportation</p> <p>Transportation is an essential part of emergency planning. People who do not drive because of a disability, legal restriction, temporary injury, age, poverty, or lack of access to a vehicle are included in this category.</p>

Building an Emergency Preparedness Kit

The goal of the Stay Kit and Go Bag is to remain safe, independent, and healthy whether sheltering at home or evacuating. Keep the Kit and Bag packed and ready. Check them every few months to keep supplies fresh and updated. Replace food, animal food, and water, and make sure the change of clothes is right for the season.

A list of basic Stay Kit and Go Bag supplies is in the table below. A sample price list is provided on page A-3. Remember to add specialized items and equipment, as needed. The C-MIST Personal Planning Tool in this toolkit will help you determine what items to include in an individual's unique kit.

ReadyNH.gov
TAKE ACTION. BE SAFE.

EMERGENCY KIT:

When disaster hits home, your family will depend on you. Take the first step towards getting ready to take care of yourself and your family: prepare an emergency kit. Plan to have at least a 3-day supply, especially food and water.

- BOTTLED WATER
- NON-PERISHABLE FOODS
- NOAA RADIO
- FLASHLIGHT & BATTERIES
- PERSONAL HYGIENE
- FIRST AID KIT
- WHISTLE
- MANUAL CAN OPENER
- COPIES OF IMPORTANT DOCUMENTS
- BLANKET/TOWEL
- CHANGE OF CLOTHES
- DURABLE WATERPROOF CONTAINER
- GENERATOR
- PRESCRIPTION MEDICATION
- FOOD FOR YOUR PET

Congratulations!
You've taken the first step to help you respond to an emergency.
Visit: ReadyNH.gov to learn more and to sign up for emergency alerts.

Sample Inventory of Kit Items

Stay Kit / Go Bag Items	Quantity	Walmart	Target	Amazon	Lowe's	Dollar Tree
Water	1 gallon	\$0.88		\$1.20		\$1.00
	16.9 oz, 24 pack	\$10.88		\$4.44		\$4.00
Flashlight		\$4.50 (2 Pack)	\$6.39	\$4.14	\$8.77	\$1.00
Lantern		\$21.88	\$19.99	\$19.28	\$15.97	
Hand sanitizer	8 oz bottles	\$3.68 (2 Pack)				\$1.00
Sanitizing hand wipes	40 count	\$2.28		\$2.28		\$1.00
Extra batteries	AAA 4 count		5.04*	4.93*	3.97*	\$1.00
*Duracell **Energizer	AA 4 count	3.99*	5.04*	3.96*	3.97*	\$1.00
	D 4 count	6.52**	6.99**	6.07**	6.97**	\$1.00
	9-volt 2 count	\$6.97		\$8.34	\$6.97	
Important documents	folder	\$1.76	\$1.00	\$2.00		\$1.00
Blanket		\$1.74	\$8.04	\$15.47		
Toothbrush & paste kit		\$0.97				\$1.00
Wisp	16 count	\$4.96	\$4.99	\$4.96		\$1.00
Busy items (cards, crayons, etc)	playing cards	\$0.99	\$2.99	\$4.50		\$1.00
First aid kit	Johnson's 140 pc	\$9.97	\$9.99	\$10.19		\$1.00
Radio (battery operated or wound)	Red Cross	\$24.99	\$24.99		\$24.97	
Whistle		\$3.88	\$4.89	\$0.87	\$3.97	
Horn		\$4.96	\$9.49	\$6.97		
Duct tape	20 yds	\$3.83	\$3.39	\$3.83	\$3.68	\$1.00
Paper products & utensils	paper plates 20 ct		\$3.19	\$2.99		\$1.00
	disposable utensils 48 ct		\$1.99 (30)	\$4.59		\$1.00
	tissue pocket packs 8x10	\$4.56	\$3.00	\$3.64		\$1.00
Model magic	6 pack of .5 oz	\$5.37		\$5.37		\$1.00
Premade EP backpack		\$14.71		\$17.49		
Industrial twist ties	2 pk 17"			\$2.49		
Velcro	4' x 2" roll	\$7.67		\$7.67	\$8.97	

The C-MIST Personal Planning Tool

The C-MIST Personal Planning Tool assists you to consider what specialized items to add to a Stay Kit and Go Bag and guides you through the creation of a personalized Emergency Plan. The Planning Tool consists of three steps.

Step 1: Assess

Use the space provided in the left column of each page to answer the prompting questions (at the top of each page) for the five C-MIST categories. Think about and write down what strengths and abilities the individual has, rather than writing needs or deficits. Focusing on strengths and abilities will help you to think constructively about planning in the subsequent steps. For example:

Instead of:

Person can't go anywhere alone
Person doesn't talk at all

You write:

Person's caregiver accompanies on all outings
Person responds to simple drawings

Step 2: Brainstorm

After compiling a list of the person's strengths and abilities with the personal assessment in Step 1, brainstorm what the individual may need in order to maintain abilities and continue functioning in an emergency situation. Write your thoughts in the right column on each page. Consider answers to the following questions:

What might this ability look like in an emergency?

What tools and strategies could help the person to stay safe and continue functioning?

What information would be useful to a first responder?

Step 3: Plan

Transform the information and strategies you came up with in Step 2 (anything you wrote in the right column) into action steps and concrete plans. Use the template on page A-12.

	Action Steps / To Do	When Done
C	: : :	
M	: : :	
I	: : :	
S	: : :	
T	: : :	

Make a Practice Plan

Case Study: Mr. Smith

Mr. Smith experienced a traumatic brain injury while serving in the military on a tour of duty overseas. The accident damaged his frontal and left parietal lobes. He has difficulties with concentration, memory, writing, and expressive language. Mr. Smith's civilian career had relied on these skills, and he has been unable to return to work since his discharge. Mr. Smith has been taking medication for anxiety and depression since he returned to the US. He lives alone on the third floor of an apartment complex with his service dog, and he has many friends in the building. He doesn't drive and relies on his sister to run errands and grocery shop. Mr. Smith has not made his own personal preparedness plans, but his sister organized a supply of emergency food and water in his apartment to last him 72 hours.



Prompting Questions

Communication

- How do you best understand and respond to information?
- How do you communicate your needs to others?
- Do you use assistive devices or interpreters for communication?
- How do you keep in touch with your family, friends, caregivers, and others?

Medical Needs

- Do you have help for personal care such as bathing or grooming?
- Do you use assistive equipment for daily activities such as bathing or eating?
- Do you regularly take prescription medication? How do you refill your prescriptions?
- Do you require medical equipment that runs on electricity?

Independence

- What medications or assistive devices do you need to function independently?
- Do any of your devices rely on electricity or batteries to function?
- Do you have a service animal?
- How do you accomplish daily activities such as bathing and eating?
- How do you accomplish other activities, such as grocery shopping and paying your bills?

Supervision

- What strategies help you to keep calm and feel safe?
- How do you stay in touch with your preferred caregivers?
- Are there cues or strategies that help you to remember things or follow directions?
- Are there ways to help you function in an unfamiliar environment or with an unfamiliar person?

Transportation

- How do you generally get where you need to go?
- Is there public transportation in your area?
- Are there people you rely on to drive you places?
- How do you get in touch with people who sometimes take you places?

Brainstorming Questions

What might this ability look like in an emergency?

What tools and strategies could help the person to stay safe and continue functioning?

What information would be useful to a first responder?

Be Informed

Disasters and emergencies can happen without warning. Planning ahead can help you and your family to remain independent, healthy, and safe.

Everyone's needs and abilities are unique. Consider what you might need before, during, and after a disaster. Learn about the different types of hazards that face your community, region, and the places you spend most of your time. Contact local emergency planning committees and emergency responders to learn what plans and services are already in place and whether these plans reflect your needs.

Local

Get involved in neighborhood and community emergency preparedness activities. People with disabilities and functional needs provide valuable information to emergency planners by sharing personal experience and problem solving skills.

State

- Ready NH
<http://www.nh.gov/readynh/needs/>
- NH Homeland Security and Emergency Management
<http://www.nh.gov/safety/divisions/hsem/Planning/planningindiv.html>
- NH Community Emergency Response Teams
<http://www.volunteernh.org/html/certteams.htm>
- NH Public Health Networks
<http://www.nhphn.org>

National

- Ready.gov
<http://www.ready.gov>
- FEMA
<http://www.fema.gov>
- Red Cross
<http://www.redcross.org/prepare>

Copies to Keep

Use the next pages to build a kit and plan
with someone you know.

C

How do you best understand and respond to information?
How do you communicate your needs to others?
Do you use assistive devices or interpreters for communication?
How do you keep in touch with your family, friends, caregivers, and others?

Strengths & Abilities Today

**To Maintain Abilities
in an Emergency**

M

Do you have help for personal care such as bathing or grooming?
Do you use assistive equipment for daily activities such as bathing or eating?
Do you regularly take prescription medication? How do you refill them?
Do you require medical equipment that runs on electricity?

Strengths & Abilities Today

**To Maintain Abilities
in an Emergency**

What medications or assistive devices do you need to function independently?
Do any of your devices rely on electricity or batteries to function?
Do you have a service animal?
How do you accomplish daily activities such as bathing and eating?
How do you accomplish other activities, such as grocery shopping and paying your bills?

Strengths & Abilities Today

**To Maintain Abilities
in an Emergency**

S

What strategies help you to keep calm and feel safe?
How do you stay in touch with your preferred caregivers?
Are there cues or strategies that help you to remember things or follow directions?
Are there ways to help you function in an unfamiliar environment or with and unfamiliar person?

Strengths & Abilities Today

**To Maintain Abilities
in an Emergency**

T

How do you generally get where you need to go?
Is there public transportation in your area?
Are there people you rely on to drive you places?
How do you get in touch with people who sometimes take you places?

Strengths & Abilities Today

**To Maintain Abilities
in an Emergency**

_____’s Emergency Plan
Action Steps / To Do


when
done

C	•	
	•	
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M	•	
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I	•	
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S	•	
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Visit the DPH website at
<http://nhdisabilityhealth.org>

for more tools and resources, including:

- ❖ C-MIST Personal Planning Tool
 - ❖ Medication list templates
- ❖ Basic Emergency Kit supplies from ReadyNH
 - ❖ Emergency contact cards from ReadyNH
 - ❖ Web links to state and national resources