

Section 4: At-Risk and Vulnerable Populations Preparation

“To be better prepared as a nation, we all must do our part to plan for emergencies. Individuals, with or without disabilities, can decrease the impact of an emergency by taking steps to prepare BEFORE an event occurs.” - National Organization on Disability (NOD)

This section of the toolkit is designed to help your organization understand the varying needs of individuals who may be at a greater risk of harm during an emergency event.

This section includes:

- Identifying & Reaching At-Risk and Vulnerable Populations
- Unique Needs of At-Risk and Vulnerable Populations:
 - Persons with Limited English Proficiency
 - Persons with Children and Single-Parent Households
 - Persons with Pets (to include Service Animals)
 - Elderly, Homebound, and Medically Fragile Persons
 - Persons with Disabilities
 - Persons with Mental Illness
 - Persons Living in Poverty
- Community-based Service Providers for At-Risk or Vulnerable Adults
 - Food Service Providers
 - Community Centers and Immigrant Services
 - Clothing and Home Goods Providers
 - Disability Service Providers
- Considerations for Residential Housing Providers serving At-Risk and Vulnerable Persons
 - Definition of the different housing options for at-risk populations
 - Developing emergency preparedness plans for organizations that provide housing
 - Nursing Homes Facilities/ Long Term Care Facilities
 - Assisted Living Facilities
 - Residential Care Homes/ Special Needs Housing
 - Subsidized Senior Living
 - Homeless Shelters



Tools in this section:

- *Survey for Clients with Special Needs*
- *PowerPoint Presentation, “Emergency Preparedness for At-Risk Populations”*
- *Emergency Preparedness: A Guide for People with Disabilities*
- *Pet Readiness Guide*
- *At-Risk and Vulnerable Populations Resource Guide*
- *See Section 2 (page 22) for Emergency Generators tool.*

A. Identifying and Reaching At-Risk Populations

Some individuals may have greater difficulty accessing the public health and medical services they require following a disaster or emergency. At-risk individuals have needs in one or more of the following functional areas: communication, medical care, maintaining independence, supervision, and transportation. At-risk groups may include children, senior citizens, and pregnant women as well as people who have disabilities, live in institutionalized settings, are from diverse cultures, have limited English proficiency or are non-English speaking, are transportation disadvantaged, have chronic medical disorders, or have pharmacological dependency. They may have additional needs before, during, and after an incident in one or more of the following functional areas; Communication, Medical care, Independence, Supervision, Transportation (C-MIST).

Communication – Individuals who have limitations that interfere with the receipt of and response to information will need that information provided in methods they can understand and use. They may not be able to hear verbal announcements, see directional signs, or understand how to get assistance due to hearing, vision, speech, cognitive, or intellectual limitations, and/or limited English proficiency.

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

Independence – Individuals requiring support to be independent in daily activities may lose this support during an emergency or a disaster. Such support may include consumable medical supplies (diapers, formula, bandages, etc.), durable medical equipment (wheelchairs, walkers, scooters, etc.), service animals, and/or attendants or caregivers. Supplying needed support to these individuals will enable them to maintain their pre-disaster level of independence.

Supervision – Before, during, and after an emergency individuals may lose the support of caregivers, family, or friends or may be unable to cope in a new environment (particularly if they have dementia, Alzheimer's disease, or psychiatric conditions). If separated from their caregivers, young children may be unable to identify themselves; and when in danger, they may lack the cognitive ability to assess the situation and react appropriately.

Transportation – Individuals who cannot drive or who do not have a vehicle may require transportation support for successful evacuation. This support may include accessible vehicles (e.g., lift-equipped or vehicles suitable for transporting individuals who use oxygen) or information about how and where to access mass transportation during an evacuation.

Community-based organizations may want to consider the following recommended preparedness activities:

- Conducting a survey of vulnerable clients and identifying their needs (see the *Survey for At-Risk and Vulnerable Clients* on pg. 95).
- Maintaining a list of names, addresses and telephone numbers for vulnerable clients and their caregivers.

- Educate and train your staff, leadership, and volunteers about the barriers that individuals with special needs face so they may help respond (see the *PowerPoint Presentation, "Emergency Preparedness for At-Risk Groups"* on pg. 96).
- Including vulnerable clients on your telephone tree.
- Pairing vulnerable members with volunteers or family for on-going communication and monitoring (see the *Connecting with Clients* tool on pg. 50).
- Provide training for at-risk individuals in developing a communication and emergency plan as well as preparing them for what changes an emergency may cause and how they can successfully cope with these changes (see the *Planning Guide for Individual and Family Readiness* tool on pg. 65).

B. Unique Needs of At-Risk and Vulnerable Populations

Persons with Limited English Proficiency

This may include those with immigrant or undocumented status. Undocumented populations may fear involvement with governmental agencies and choose to turn to community-based organizations for help.

- Stock emergency resource information in a variety of languages.
- Identify coaches, interpreters or advocates to help non-English speaking persons express their needs in an emergency.

The Emergency and Community Health Outreach (ECHO) program was developed for persons with limited English proficiency. Through this outreach program, persons may receive life saving and safety information in their own languages. Emergency information is available as follows:

- ECHO-TV – Monthly broadcasts on Public Television on channels 2 and 17, in Spanish, Hmong, Somali, Lao, Khmer, and Vietnamese.
- ECHO-Phone – Toll free number 1-888-883-8831. Messages are available in Arabic, Oromo, Spanish, Hmong, Somali, Lao, Khmer, Vietnamese, Russian and English.
- ECHO website – www.echominnesota.org. Printed materials are available from the website or by ordering via e-mail or telephone.
- ECHO-Email – Sign up for e-mails at www.echominnesota.org.

Persons with Children and Single-Parent Households

Consider the following with respect to a family's response to an emergency:

- Daycare support and family support services will need to be available.
- Parents may be separated from children when emergency strikes – reconnection will need to occur. (Think about how this would occur at your facility).
- Some children have special need considerations. (Is your organization aware of them? Can you plan for them in advance?)
- Transportation issues.

Persons with Pets and Service Animals (see the *Pet Readiness Guide* tool on pg. 104)

Pets and service animals may become confused, panicked, frightened or disoriented during and after a disaster. Keep them confined or securely leashed or harnessed. A leash (or harness) is an important item for managing a nervous or upset animal. Be prepared to use alternative ways to negotiate your environment.

- Have pet identification tags - Make sure tags are up to date and securely fastened to the pet's collar.
- Create an emergency Supply Kit for Pets containing:
 - Pet food and water (for at least three days for each pet)

- Can opener and food dishes
- Medications, veterinary records, information on medical conditions, and first aid kit
- Cat litter and litter box
- Sturdy leashes, harnesses and carriers to transport pets safely and to ensure pets cannot escape
- Blankets or towels for bedding and warmth
- Current photos and descriptions of pets in case of separation
- Pet beds and toys to reduce stress
- Other useful items may include grooming items, trash bags, paper towels
- Evacuation - Pets should never be left behind and it is recommended to evacuate early. Be prepared to function without assistance from your service animal. Practice emergency drills using alternative mobility cues.
- Identify appropriate shelters before emergency strikes. Many emergency shelters, hotels and motels cannot or do not accept pets.

Elderly, Homebound, and Medically Fragile Persons who maintain Independence

Special considerations must be made for this population:

- Those dependent on any medical device may require electricity or oxygen refills.
- Some receive home healthcare services that may not continue during an emergency.
- Assistance with evacuation.
- Encouragement to have at least a month supply of medications.
- Encouragement to label mobility aids, have lists of medications and health care provider and or friends/family phone numbers who should be notified.

Persons with Disabilities

- **Mobility Disabilities** – People who use wheelchairs and other mobility aids will require special consideration:
 - Shelters must be physically accessible.
 - Evacuating a chair and/or other equipment. Equipment that is damaged may need immediate replacement and may be unavailable.
 - Consider keeping an Emergency Evacuation Stair Stretcher if your organization is located in a multi-story building.
 - Accessible transportation in evacuation or to get to sites for emergency assistance.
- **Visual Disabilities**
 - Providing assistance (guides) to help with navigation at service locations.
 - Keeping service animals or guide dogs with the person at all times.
 - Finding shelter that will accommodate service animals or guide dogs.
- **Deaf and Hard of Hearing**
 - American Sign Language interpreters at emergency service locations.
 - TTY/TDD equipment with trained personnel at locations where emergency assistance is provided.
 - Assistive listening devices may need batteries and/or electricity.
 - If holding a meeting or communicating information, allow members of this population to sit up front, and try to have an interpreter present and at the front of a well-lit room.
 - Use hand gestures to communicate.
 - Have pre-made signs available - workers should have paper and pens on them at all times if allowed.
- **Environmental Illness or Multiple Chemical Sensitivities**
 - Alternative scent-free shelter environments and additive-free foods.

Persons with Mental Illness

You may not be aware of those with mental health issues.

- If a person begins to exhibit unusual behavior, ask if they have any mental health issues you need to be aware of. However, be aware that they may not tell you.
- This population may become confused during an emergency.
- Know how to contact mental health and substance abuse support services.
- It may help if the individual has a person or object accompany them that are familiar to maintain a sense of consistency during an emergency.

Persons Living in Poverty

- The population will experience long-term recovery needs that will increase over time due to the lack of personal resources and displacement.
- Help by finding post-disaster emergency, temporary, or subsidized housing.

C. Community-based Service Providers for At-Risk or Vulnerable Adults

Food Service Provider

For individuals who depend on their meals being provided, an interruption in service can have many consequences. It is essential for services to be maintained during emergencies, but it is also understood that there may be times when this is not possible.

- Consider providing clients with a 3-day supply of shelf-stable food that can be used during an emergency. This needs to be supplied along with normal food service in order to avoid the client consuming the 3-day supply not during an emergency.
- During an emergency, volunteers and drivers may become limited. Consider providing an extra meal if meals are delivered to clients, this could allow for temporary service interruption for a day in order to reach as many clients as possible.
- Distribute information ahead of time to clients describing the procedures used during an emergency. Also consider encouraging clients to prepare themselves for an emergency.
- Identify alternative service providers that your organization could use if normal food delivery service to your organization is cancelled or delayed.
- If electricity is lost, the manner in which food is stored and prepared becomes an issue. (The USDA's website <http://www.fns.usda.gov/disasters/prepare.htm> contains information about how to handle and store food safely during an emergency)

Community Centers and Immigrant Services

Your community center may be, for some individuals, the only resource that they feel comfortable to go to during an emergency. It is important for your organization to be prepared and ready to assist clients.

- As a base for community members, it is important to utilize your connections to communicate with staff and clients about how to prepare for an emergency. Utilize information in the *Planning Guide for Individual and Family Readiness Tool* on pg. 65. It may be helpful to develop the information about emergency preparedness into an event that all of the community could participate in, consider asking members from the community who work in emergency preparedness come speak to your organization and help encourage your clients and staff to prepare their families for an emergency by gathering supplies and making a plan.
- Consider preparing signs that contain emergency messages ahead of time in the appropriate language for your community. It may be helpful to have images on the signs to better communicate what the message means.

Clothing and Home Goods

This type of service may not be critical for an individual's survival, but it does supply clothing items and furniture that help individuals who may have lost everything during a disaster.

- Your services may not be required initially during a disaster but once individuals are able to return to their homes and access the damage they may find that they require your assistance.
- During an emergency, shelters may call upon your organization to provide clothing to individuals who may have forgotten to bring extra clothing.

Disability Services

You know what your clients' specific needs are. When an emergency arises providing those needs can become difficult.

- Help your clients gather supplies ahead of time as well as set up an emergency plan. These steps will make it easier for your organization to assist them during an emergency.
- Encourage your clients to have an evacuation and shelter-in-place plan, with the consideration that they may require extra assistance or support.
- Educate your clients by providing information that is specific to their disability. Contact your local public health department or Red Cross to find resources that your organization could use.
- There are some emergency shelters that are specifically set-up for individuals with particular disabilities. It may be helpful for your organization to identify ahead of time where these shelters would be during an emergency.



Tool: Survey for At-Risk and Vulnerable Clients

Member Information (Please print)			
Name (First & Last): _____			
Address	City	State	Zip
_____	_____	_____	_____
Phone	Cell Phone	E-Mail	
_____	_____	_____	

Do you live alone?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you live alone and are chronically home-bound, is there someone who checks in on you regularly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a chronic medical condition?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you need help getting around?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you cook for yourself?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have an emergency plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a place to go in the event of an emergency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have enough food, water, and prescription medication supplies at home to last you five days in the event of an emergency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Would you like help from another community member in the event of an emergency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Emergency Contact Information			
Name (First & Last): _____			
Address	City	State	Zip
_____	_____	_____	_____
Phone	Cell Phone	E-Mail	
_____	_____	_____	



Tool: PowerPoint Presentation, "Emergency Preparedness for At-Risk Populations"

At-Risk Populations in an Emergency

[Enter your Organization Name, Logo, and your name here]



Potential At-Risk Populations



Objectives

Identify groups of individuals who are considered at-risk populations during an emergency

Identify barriers and challenges for these groups during an emergency

Identify communication methods with at-risk populations

Identify ways you can help with preparedness activities for at-risk populations



Potential At-Risk Population Groups

- › Elderly, frail
- › Children/Infants
- › Homeless
- › Limited English speakers
- › Poverty stricken
- › Pregnant women
- › Undocumented individuals
- › Intellectual disabilities
- › Deaf
- › Blind/Visual impairments
- › Non-English readers
- › Morbidly obese
- › Wheelchair bound/Limited mobility
- › Culturally isolated
- › Immunocompromised
- › Individuals w/o personal transportation



*Definition of At-Risk Population

"Groups whose needs may not be fully addressed by traditional service providers or who feel they may not comfortably or safely access and use the standard resources offered in disaster preparedness, response, relief, and recovery"

Source: Pennsylvania Department of Health
*Note: This is one of many similar definitions of Special Populations



Some Languages in the Twin Cities

- › Spanish
- › Vietnamese
- › Somali
- › Chinese
- › Cambodian
- › Russian
- › Creolized English
- › Laotian
- › Arabic
- › Hindi
- › Swahili
- › Hmong



Source: MN Department of Education, 2008-2009



**Scenario:
Identify At-Risk Populations**

- ▶ A violent windstorm hits the east side of Bloomington, tearing a path through a ethnically diverse neighborhood.
- ▶ An assisted living center and senior apartment complex were damaged.
- ▶ School was still in session when the storm hit and there are reports of light to moderate damage to the school building.

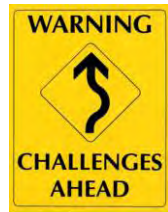


Ways to address and limit challenges

- ▶ Prepare for emergencies by seeking out at-risk groups and encouraging their participation in drills (i.e. speak at cultural centers/senior center)
- ▶ When practicing our emergency plan, always consider if this plan will work for **ALL** groups of people
- ▶ Encourage our members from different racial and ethnic groups to become involved with our Emergency Preparedness planning

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Challenges and Barriers for At-Risk Populations



Factors influencing reactions in at-risk populations

- ▶ Low Income
- ▶ Customs
- ▶ Age
- ▶ Values and Norms
- ▶ Immigration Status – fear of deportation



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Challenges Affecting the Ability to Respond

- ▶ **Language:** Over 50 different languages spoken in the homes of residents in the Twin Cities.
- ▶ **Mobility:** Some people have disabilities that limit their mobility. They may rely on wheelchairs, canes, walkers, or scooters.
- ▶ **Developmental:** Some people have disabilities which can hinder their ability to comprehend oral/written communication.

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Low income challenges

- ▶ Limited or no transportation to evacuate and reach a shelter
- ▶ Limited or no means to stockpile food and water
- ▶ Limited or no means for purchasing medical supplies
- ▶ Limited time to be involved in preparedness planning due to working multiple jobs



How to Address these Factors

- ▶ Empower individuals from different backgrounds/ages/income levels by involving them in emergency preparedness planning
- ▶ Become involved with other local community organizations serving these populations to become more familiar with the factors which may hinder their response



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Considerations for specific disabilities and at-risk groups during an Emergency Response



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How to Address these Factors

- ▶ Engage the community and organizational leaders who may have great influence with at-risk populations
- ▶ Constant communication and involvement with at-risk groups will build trust and awareness



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General Recommendations

- ▶ Ask if they need help
- ▶ Ask how you can assist them best
- ▶ Listen to what they say to help them most efficiently and effectively



Working with the community...

- Work with families to:
- ▶ develop personal emergency preparedness plans
 - ▶ introduce them to resources needed to learn more about personal emergency plans
 - ▶ encourage the need for stockpiling of food and supplies



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General recommendations continued..

- ▶ Always identify yourself and show identification
- ▶ Maintain eye contact
- ▶ Speak clearly and slowly, use gestures/other visual cues if needed
- ▶ Be patient and calm
- ▶ Unless time is a factor, give time to respond to questions and to move about
- ▶ Do not make assumptions about their ability to respond – ask how best to help



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Emergency Health Information Cards

- Communicates to rescuers what they need to know about the person if that person is unable
- May be located in purse or wallet, on the refrigerator, in an emergency kit, or on the person



Vision loss considerations

- Announce your presence and identify yourself when approaching victim
- Offer your arm for guidance if requested
- Provide audio cues such as "turn right" and tell them the path you are taking
- Do not leave them alone once reaching a safe area as the area may be unfamiliar or altered due to damage
- Bring service animal with you (if present)

Source: NC Office on Disability and Health, NC Division of Public Health

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What is on a Health Information Card?

Front:

- Name
- Address
- Phone numbers
- Birth date
- Blood Type
- Health insurance provider
- Physicians

Back:

- Emergency contacts
- Conditions, disabilities
- Medications
- Assistance needed
- Allergies
- Immunization dates
- Communication/ Equipment /Other needs

Source: NC Office on Disability and Health, NC Division of Public Health

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Hearing Loss Considerations

- Flick lights when entering a room
- Do not chew gum when talking and talk slowly
- Keep face uncovered while talking
- Use a flashlight if area is dark to light your face
- Have a paper and pencil, if needed



Source: NC Office on Disability and Health, NC Division of Public Health

Intellectual disability considerations

- Cognitive abilities, processing of direction capabilities, language may be limited
- Simplify directions, break into steps, use brief language, and hand signals
- Be calm and patient
- Treat adults as adults

Source: NC Office on Disability and Health, NC Division of Public Health

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Specific Disabilities and Needs Considerations

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Limited mobility

- ▶ Ask if they need assistance, as it may actually hinder them
- ▶ Offer to carry their crutch, walker, or cane if they are using a side rail for stability
- ▶ If in a wheelchair, ask if help is needed
- ▶ Avoid putting pressure on their extremities, ask how best to move them
- ▶ An evacuation chair/device may be needed

Source: NC Office on Disability and Health, NC Division of Public Health

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Language Barriers continued

- ▶ Create flashcards with common words/phrases represented by symbols; use universal symbols
- ▶ If they speak limited English, speak slowly and articulate your words
- ▶ Have patience, be calm



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Language barrier considerations

- ▶ Have common, useful phrases translated in numerous languages (or at least the most popular: Spanish, Somali, Hmong, Vietnamese) on pre-printed laminated sheets
- ▶ Try to plan for translators to be on the scene of emergencies or on call

Source: Guidelines on Cultural Diversity and Disaster Management, Solis, G.Y., 1997

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At-Risk populations summary

- ▶ Many individuals will have challenges when responding to an emergency
- ▶ Work with local Public Health to identify these at-risk populations
- ▶ Engage and empower at-risk populations to be able to respond quickly in an emergency
- ▶ Follow the general recommendations when assisting at-risk populations

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Language Aid Examples



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Tool: Minnesota State Council on Disabilities "Emergency Preparedness: A Guide for People with Disabilities"

Everybody Needs a Plan – Be Prepared for Emergencies

According to the National Organization on Disability (NOD), "To be better prepared as a nation, we all must do our part to plan for emergencies. Individuals with or without disabilities can decrease the impact of an emergency by taking steps to prepare BEFORE an event occurs."

"You are in the best position to know your abilities and needs before, during, and after an emergency."

According to the National Fire Protection Association (NFPA) Emergency Evacuation Planning Guide for People with Disabilities, "All people, regardless of circumstances, have some obligation to be prepared to take action during an emergency and to assume responsibility for their own safety."

Practice and planning **do make a difference**. For example, during the 1993 bombing of the World Trade Center, a man with a mobility disability was working on the 69th floor. With no plan or device in place, it took over six hours for him to evacuate.

In the 2001 attack on the World Trade Center, the same man had prepared himself to leave the building using assistance from others and an evacuation chair he had acquired and had under his desk. It took less than 90 minutes for him to get out of the building the second time.

Create a Home Plan

- You're on your own (YOYO): plan that no one may be able to assist you.
- Meet with household members, neighbors or personal care assistant to discuss what would happen in an emergency.
- Remember, when creating a plan for an emergency, close proximity is important.
- Discuss different types of emergencies:
 - Tornado
 - Pandemic
 - Flood
 - Chemical spill
- Determine what you will need to do to respond to each type of emergency: Will you shelter-in-place or will you evacuate?
 - Shelter-in-place – do you have enough water, food, medical supplies, and PCA support?
 - Evacuation – do you have a transportation source; is the evacuation site accessible, do you have enough medical supplies, do you have PCA support?

Checklist

- Post emergency telephone numbers where you can find them, near the telephone or programmed into your cell phone.
- Teach children and others in the household what to do, whom to call and when.
- Listen to a battery or crank-operated radio for emergency information.
- Know where the flashlights are located.
- Know where the First-Aid kit is located.
- Learn how to turn off the water, gas and electricity at main valves or switches.
- Arrange for a relative, friend or neighbor to check on you in an emergency.

- Teach those who may need to assist you in an emergency on what to do:
 - the best way to notify you of an emergency if you are deaf or hard of hearing
 - how to assist with a transfer
 - how to do a blood pressure check
 - how to assist with an insulin injection
 - how to operate necessary equipment, etc.
- Keep family records, medical records or other important documents in watertight, fireproof containers.
- Consider getting a medical alert system that will allow you to call for help if you are immobilized in an emergency.
- Consider getting a medical ID bracelet or medical dog tags that state your medical condition.
- Try to identify a second exit, in case the primary exit is blocked. At a minimum, have some ideas on how you would evacuate in this situation.

Consider your transportation options - do you have access to a vehicle?

- Do you have a network of friends, family or neighbors that would be able to provide transportation in an emergency?
- Does your transportation provider have resources available during an emergency?
- Consider getting a medical alert system that will allow you to call for help if you are immobilized in an emergency.
- Pick two meeting places:
 - A place near your home in case of a fire.
 - A place outside your neighborhood in case you cannot return home after an emergency.
- If you live in an apartment, ask the management to identify and mark accessible exits.
- PLAN AND PRACTICE HOW TO ESCAPE FROM YOUR HOME IN AN EMERGENCY.

Learn your community's evacuation plan

- Will your community have transportation options available?
- Are the shelters accessible?
- How will you secure a sign language interpreter?
- Will guides or assistants be available?
- Contact the emergency planner for your area and volunteer to serve on a committee that addresses disability issues.

Prepare an emergency supplies kit

- Assemble supplies you might need in an evacuation. Store them in an easy-to-carry container such as a backpack or duffel bag. Include:
 - A battery or crank-operated radio, flashlight and plenty of extra batteries for them.
 - A first aid kit, extra pair of glasses.
- If you take medication or use supplies, make sure you have a week's worth, if not more, available and travel ready.
- A supply of water – store water in a sealed, unbreakable container. Identify the storage date and replace every six months.
- A supply of non-perishable food and a non-electric can opener, plus any special food you require.
- A sturdy whistle.
- Cash or travelers checks.
- Soap and sanitation products.
- A change of clothing, rain gear, and sturdy shoes.
- Blanket or sleeping bag.
- Important family & medical documents that include:

- A list of physicians and the relative/friend who should be notified if you are injured.
- A list of the style and serial numbers of medical devices such as pacemaker.
- Keep family records, medical records or other important documents in your emergency supply kit in watertight containers.
- ☐ An extra set of car keys.
- ☐ If you have a baby, include extra diapers and other infant care items.
- ☐ Extra wheelchair batteries, oxygen, medication, catheters, food for guide or service animal, or other special equipment you might need.
- ☐ Plastic garbage bags.

Store back-up equipment, such as a manual wheelchair, at a neighbor's home, school or workplace.

Resources and References

- www.codeready.org
- www.noaa.gov
- www.disability.state.mn.us
- www.nod.org
- www.DisasterHelp.gov
- www.PrepareNow.Org
- www.fema.org
- www.ready.gov
- www.hsem.state.mn.us
- www.redcross.org



**When You Go – They Go
Don't Leave Home Without Them!**

When a disaster or emergency occurs and you have to leave, **ALWAYS take your pets with you.**

People think they will be able to return shortly to care for their animals, but too often the situation worsens and people cannot make it back to rescue their pets. Do not put your pets' lives, your life, or other rescuers' lives at risk. **When You Go – They Go.**

If you go to a public emergency shelter, your pets may not be allowed inside. Think ahead. **Have a plan in place.**

- Where can you and your pet go for safety?
- A friend or family members' home?
- A pet-friendly hotel?



Make a back-up emergency plan in case you cannot care for your pets yourself.

- Develop a buddy system with neighbors, friends and relatives to make sure that someone is available to care for or evacuate your pets if you are unable to do so.
- Talk to your veterinarian.
- Get involved with your Local Government Emergency Planning Team.
- Become a Community Emergency Response Team (CERT) member.
- Help with the pet-friendly sheltering plan in your community.
- Check with your Animal Control Officer or local town hall for ways that you can help.

Pet Emergency Information

Pet's first and last name: _____

Breed and age: _____

General description: _____

Discrete physical traits: _____

Behavioral concerns: _____

Owner's name: _____

Address and telephone #: _____

Out of region emergency contact #: _____

Pet's medical condition: _____

Medication/ dosage: _____

Microchip ID #: _____

License/Rabies Tag #: _____

Tattoo location and #: _____

Vet's name and telephone #: _____

Pet Kit Items

- Towel/blanket with your smell on it
- Basic pet first-aid kit
- Can opener
- Fresh water and canned food (or dry food)
- Any medication that you pet may need
- Current vaccination records
- Small garbage bags or other sanitary items
- Litter box and litter (as appropriate)



Deafblind Resources

Deafblind Services Minnesota (DBSM)

1936 Lyndale Ave S, Minneapolis, MN 55403

Tel: 612-362-8454 (V), 612-362-8422 (TTY), 612-362-8433 (VP); Fax: 612-362-8437

Email: info@dbsm.org

Website: <http://www.deafblindinfo.org>

Minnesota Deaf Blind Association

1821 University Ave W., #S-117, St. Paul, MN 55104

Tel: 651-647-6564 (V/TTY)

Email: mdba@deafconnect.com

Website: www.deafnonprofit.net/mdba

Minnesota Deaf-Blind Technical Assistance Project

4001 Stinson Boulevard, #210, Minneapolis, MN 55421

Tel: 612-638-1525 (V), 612-706-0808 (TTY)

Email: mndb@skypoint.com

Blind and Visually Impaired Resources

National Federation of The Blind of Minnesota

5132 Queen Ave S, Minneapolis, MN 55410

Tel: 612-920-0959 or 612-872-0100

Website: www.blindinc.org

American Council of the Blind of Minnesota

6300 Shingle Creek Pkwy, Suite 105, Brooklyn Center, MN 55430

Website: www.acb.org/minnesota

Minnesota State Services for the Blind

2200 University Ave, Suite 240, St. Paul, MN 55114

Tel: 651-284-3300 or 1-800-652-9000

Website: www.mnssb.org

Minnesota Resource Center

PO Box 308, Faribault, MN 55021-0308

Tel: (507) 332-5510; (800) 657-3859 (In MN)

E-mail: Jean.Martin@state.mn.us

Sight & Hearing Association

1246 University Ave W, Suite 226, St. Paul, MN 55104

Tel: 1-800-992-0424 or 651-645-2546, Fax: 651-645-2742

E-mail: mail@sightandhearing.org

Website: www.sightandhearing.org

Services for the Blind and Visually Handicapped (SSB)

2200 University Ave W, Suite 240, St. Paul MN 55114

Tel: 651-642-0500 (V), 651-642-0506 (TTY), 1-800-652-9000 (Voice and TTY)

Email: info@ngwmail.des.state.mn.us

Website: www.mnssb.org

Deaf and Hard of Hearing Resources

Minnesota Commission Serving Deaf and Hard of Hearing People (MCDHH)

444 Lafayette Rd N, St. Paul, MN 55155
Tel: 651-297-7305 (V) or 1-888-206-2001 (TTY)
Email: mncdhh.info@state.mn.us
Website: www.mncdhh.com

Minnesota Association of Deaf Citizens, Inc. (MADC)

532 Snelling Ave S, St. Paul, MN 55116
Email: president@minndeaf.org
Website: www.minndeaf.org

Communication Services for the Deaf of Minnesota

2055 Rice Street, St. Paul, MN 55113
Tel: 651-487-8865 (V/TTY), Fax: 651-487-8876
Website: www.c-s-d.org

Minnesota Speech-Language-Hearing Association

1821 University Ave W, Suite S256, St. Paul, MN 55104
Tel: 651-999-5350, Fax: 651-917-1835
Email: office@msha.net
Website: www.msha.net

Housing Resources

HUD

International Centre, 920 Second Ave S, Suite 1300, Minneapolis, MN 55402
Tel: 612-370-3000, 612-370-3186 (TTY); Fax: 612-370-3220
Email: Dexter_J._Sidney@hud.gov
Website: www.hud.gov

Minnesota Fair Housing Center

2469 University Ave, Lower Level, St. Paul, MN 55337
Tel: 651-917-8869 or 651-917-8907

Minnesota Coalition for the Homeless

2233 University Ave W, Suite 434, St. Paul, MN 55114
Tel: 651-645-7332 or Fax: 651-645-7560
Email: info@mnhomelesscoalition.org
Website: www.mnhomelesscoalition.org

Elim Transitional Housing, Inc.

3989 Central Ave NE Suite 565, Minneapolis, MN 55421
Tel: 763-788-1546, 763-788-1546 (TDD); Fax: 763-788-1672
Email: elimth@qwest.net
Website: www.elimtransitionalhousing.org

Minnesota Housing Partnership

2446 University Ave W, Suite 140, St. Paul, MN 55114
Tel: 651-649-1710 or 1-800-728-8916; Fax: 651-649-1725
Email: info@mhponline.org
Website: www.mhponline.org

Hastings Housing Coalition

413 Vermillion St, Hastings, MN 55033
Tel: 651-438-0089

Partners For Affordable Housing

512 E. Mulberry St., Mankato, MN 56001
Tel: 507-387-2115; Fax: 507-387-1321
Email: pah@hickorytech.net
Website: www.mnsu.edu/univops/housing

People Serving People, Inc.

614 S. Third St., Minneapolis, MN 55415
Tel: 612-332-4500
Website: www.peopleservingpeople.org

Alliance for Metropolitan Stability

2525 Franklin Ave E, Suite 200, Minneapolis, MN 55406
Tel: 612-332-4471 or 612-338-2194
Email: russ@metrostability.org
Website: www.metrostability.org

Dorothy Day House of Hospitality, Inc.

714 8th Street South, Moorhead, MN 56560
Tel: 218-233-5763; Fax: 218-227-0327
Email: fmddh@702com.net
Website: www.fmddh.org

St. Paul Area Coalition for the Homeless (SPACH)

c/o Nelda Rhodes Clark, Emma Norton Residence
670 N. Robert St, St. Paul, MN 55101
Tel: 651-224-1329, Fax: 651-224-6520

Food Resources**The Food Support Program**

Website:
www.dhs.state.mn.us/main/groups/Economic_support/documents/pub/DHS_id_002555.hcsp

Minnesota Food Assistance Program

Website:
www.dhs.state.mn.us/main/groups/Economic_support/documents/pub/DHS_id_017791.hcsp

Minnesota Hunger Partner Agencies - Hundreds of listings

Website: www.mnhungerpartners.org/

Second Harvest Heartland

1140 Gervais, St. Paul, MN 55109
Tel: 651-484-5117, 1-888-339-3663; Fax: 651-484-1064
Website: www.2harvest.org

Aging Resources

Services for the Aging

Elmer Anderson Bldg, Third Fl., Cedar & 11th
PO Box 64976 St. Paul, MN 55164-0976
(651) 431-2600.

Website: www.dhs.state.mn.us/main/groups/aging/documents/pub/dhs_Aging.hcsp

Alzheimer's Association - Minnesota/ North Dakota Chapter

4550 West 77th Street, Suite 200, Minneapolis, MN 55435

Tel: 952-830-0512; Fax: 952-830-0513

24/7 Information Helpline: 1-800-232-0851

Email: lori.arena-voute@alz.org

Website: www.alz.org/mnnd

General Disabilities Resources

Minnesota State Council On Disability

121 E. 7th Place, Suite 107, St. Paul, MN 55101

Tel: 651-361-7800 (V/TTY), 1-800-945-8913 (V/TTY); Fax: 651-296-5935

Email: council.disability@state.mn.us

Website: www.state.mn.us/portal/mn/jsp/home.do?agency=MSCOD

Minnesota On-Line Special Needs Directory

Email: coop0001@tc.umn.edu

Website: www.tc.umn.edu/~coop0001/

Metro Transit

Tel: 612-373-3333, 612-341-0140 (TTY)

Website: www.metrotransit.org

Great Lakes ADA & IT Center

University of Illinois/Chicago

Department on Disability & Human Development

1640 West Roosevelt Road, Chicago, IL 60608

Tel: 312-413-1407 (V/TTY); Fax: 312-413-1856

Website: www.adagreatlakes.org

Statewide Independent Living Council (SILC)

First National Bank Building

332 Minnesota St, Suite E200, St. Paul, MN 55101

Tel: 651-296-5085; Fax: 651-296-5159

Email: Brad.Westerlund@state.mn.us

Website: www.mnsilc.org

Minnesota Association of Centers for Independent Living

519 2nd St. N., Saint Cloud, MN 56303

Tel: 320-529-9000

Email: CaraR@IndependentLifestyles.org

Website: www.macil.org

Mental Health Resources

Mental Health Association of Minnesota

2021 E. Hennepin Avenue, Suite 412, Minneapolis, MN 55413
Tel: 612-331-6840 or 1-800-862-1799
E-mail: info@mentalhealthmn.org
Website: www.mentalhealthmn.org/

State of Minnesota- Department of Mental Health

Tel: 651-431-2225
Website: www.dhs.state.mn.us/main/groups/disabilities/documents/pub/DHS_id_000085.hcsp

NAMI-Minnesota (National Alliance for the Mentally Ill)

800 Transfer Rd, Suite 31, St. Paul, MN 55114
Tel: 651-645-2948; 1-888-473-0237
E-mail: nami-mn@nami.org
www.namihelps.org

The Minnesota Association for Children's Mental Health

165 Western Ave N, St. Paul, MN 55102
Tel: 651-644-7333 or 1-800-528-4511
Website: www.macmh.org

Developmental & Learning Disabilities Resources

University Center for Excellence in Developmental Disabilities

University of Minnesota
102 Pattee Hall, 150 Pillsbury Dr SE, Minneapolis, MN 55455
Tel: 612-624-6300
Email: ici@umn.edu
Website: ici.umn.edu

Children with Disabilities

Tel: 651-296-7675, 1-800-657-3739, 800-627-3529 (TTY)
Website: www.dhs.state.mn.us/main/groups/healthcare/documents/pub/DHS_id_006251.hcsp

Minnesota Governor's Council on Developmental Disabilities

370 Centennial Office Building
658 Cedar Street, St. Paul, MN 55155
Tel: 651-296-4018, 1-877-348-0505; Fax: 651-297-7200
E-mail: admin.dd@state.mn.us
Website: www.mncdd.org

Hennepin CTIC (Community Transition Interagency Committee)

Tel: 952-944-7521 #55; 763-231-3570
Email: colleen_haggart@hopkins.k12.mn.us or hmaghan@kaposia.com
Website: www.hennepinctic.com

Jewish Community Inclusion Program for People with Disabilities

13100 Wayzata Blvd, Suite 400, Minnetonka, MN 55305
Tel: 952-546-0616, 952-591-0041 (TTY); Fax 952-593-1778
Email: jfcs@jfcsmpls.org
Website: www.jfcsmpls.org

Goodwill/ Easter Seals

553 Fairview Ave N, St. Paul, MN 55104
Tel: 651-379-5800
E-mail: mwirth-davis@goodwilleasterseals.org
Website: www.goodwilleasterseals.org

United Cerebral Palsy of Minnesota

1821 University Ave W, Suite S-219, St. Paul, MN 55104
Tel: 651-646-7588; 1-800-528-5678
E-mail: ucpmnReferral@hotmail.com
Website: www.ucp.org/ucp_local.cfm/90

Yellow pages for Kids with Disabilities - Minnesota

Website: www.yellowpagesforkids.com/help/mn.htm

Down Syndrome Association of Minnesota

656 Transfer Rd, St. Paul MN 55114
Tel: 651-603-0720; Fax: 651-603-0726, 1-800-511-3696
Email: dsamn@dsamn.org
Website: www.dsamn.org

Down Syndrome Parents Network

Buffalo ECFE Building, 301 Northeast 2nd Ave, Buffalo, MN, 55313
Tel: 763-682-7468; Fax: 763-682-7701
Email: sheri.jorgensen@co.wright.mn.us

Learning Disabilities Association of Minnesota

6100 Golden Valley Rd, Golden Valley, MN 55422
Tel: 952-922-8374; Fax: 952-922-8102
Email: info@ldaminnesota.org
Website: www.ldaminnesota.org

Upper Midwest Branch of the International Dyslexia Association

5021 Vernon Ave, Minneapolis, MN 55436
Tel: 651-450-7589
Email: info@umbida.org
Website: www.umbida.org

Dyslexia Institute of MN / The Reading Center

847 5th St. NW, Rochester MN 55901
Tel: 507-288-5271; Fax: 507-288-6424
E-mail: Read@TheReadingCenter.org
Website: www.TheReadingCenter.org

Learning Disabilities Program

Children's Home Society and Family Services
1605 Eustis St, St. Paul, MN 55108
Tel: 651-646-6393
E-mail: fsldp@compuserve.com

Limited English Proficiency Resources

Emergency and Community Health Outreach (ECHO)

- ECHO TV – Monthly broadcasts on Public Television on channels 2 and 17, in Spanish, Hmong, Somali, Lao, Khmer, and Vietnamese.
- ECHO Phone – Toll free number 1-888-883-8831. Messages available in Arabic, Oromo, Spanish, Hmong, Somali, Lao, Khmer, Vietnamese, Russian and English.
- ECHO Website – www.echominnesota.org. Printed materials available from website or by ordering via email or telephone.
- ECHO Email – Sign up for e-mails at www.echominnesota.org

Office of Minority and Multicultural Health

Freeman Building 5C, 625 Robert St N, PO Box 64975, St. Paul, MN 55164

Tel: 651-201-5813

Email: health.ommh@state.mn.us

Website: www.health.state.mn.us/ommh

Multicultural Services

Dept of Civil Rights, City Hall, 350 S 5th St, Room 237, Minneapolis MN 55415

Tel: English 612-673-3737, Somali 612-673-3500, Spanish 612-673-2800, Hmong 612-673-3220, Sign Language 612-673-3220, TTY 612-673-2626

Email: narin.sihavong@ci.minneapolis.mn.us

Website: www.ci.minneapolis.mn.us

D. Considerations for Residential Housing Providers serving At-Risk and Vulnerable Persons

Individuals who are unable to live independently require particular type of housing in order to allow for a certain quality of life. Whether this housing comes with complete care by health professionals or assistance with day-to-day tasks, the understanding of how individuals will be taken care of during an emergency is important to have ahead of time. Organizations that provide housing are unique in that they must continue to function during emergencies when other organizations have the option to close. Clients and residents depend on your organization to continue because it is their home and many do not have another place to go.

Definition of the different housing options:

(Adapted from *Partnership for a Strong Community: Definitions of Housing Terminology*)

- **Nursing Home Facilities/Long-term Care Facilities:** Provides medical and non-medical care to people who have a chronic illness or disabilities that do not allow them to live independently.
- **Assisted Living Facilities:** Services provided within a housing site that assists residents with daily living activities.
- **Residential Care Homes/ Special Needs Housing:** Housing developed for and occupied by people with a variety of disabilities, usually the housing has assistance made available to residents to help them maintain residential stability and/or achieve improvements in health, wellness, independent living skills, income, employment, socialization, and quality of life.
- **Subsidized Senior Housing:** Age restricted subsidized housing for people either 55 or 62 years of age or older.
- **Homeless Shelters:** A place where individuals who are transient and have no fixed address can stay the night. They may receive social services that can aid in providing essential needs as well as help finding more permanent housing and healthcare.

Emergency Preparedness for facilities that provide part-time or full-time care to their Residents

Resident Specific Considerations:

- Keep a resident roster that maintains the room number of each resident, their emergency contact information, any special dietary needs, what medications they take and when and where their exact location is throughout an emergency.
- It may be helpful to have a mini chart for each resident that includes basic information. This can be beneficial during times when individuals are moved to accommodate different emergencies, during an emergency when different staff is working with patients they may not be familiar with or when your facility is being evacuated (*Caring for Vulnerable Elders during a Disaster: National Findings of the 2007 Nursing Home Hurricane*). The mini chart should provide the most basic information about the resident:
 - Full Name
 - Any known allergies
 - Critical Diagnosis
 - Facility Name and Location
 - Name of physician and name of responsible parties/ family contacts with contact numbers for each
 - Note if Resident is a “Do Not Resuscitate” (DNR) if DNR status applies
 - A list of any medications the patient is taking

- The resident roster and mini chart would coincide allowing for an efficient system for identification and tracking of residents. The roster would remain with the nurse and the mini chart would remain with the resident.
- It may also be helpful to take digital pictures of each resident with their name displayed in the picture. These pictures would be placed on a CD, made available to be sent to another facility if evacuation becomes necessary (*from the Annals of Long-term Care: Disaster Preparedness for Long-Term Care Facilities*).
- Take special consideration for patients who rely on ventilators, are bedridden, or receiving dialysis on a continuous basis. These individuals should be considered a priority if there is a possibility for loss of electricity, consider having a generator installed on-site that could provide power (*see the Emergency Generator tool on pg. 22*).
- In general, residential care facilities are at high risk for injuries but when there is an emergency situation the risk increases due to changes in routine and circumstances that are hard to prevent. In order to help avoid injury some special considerations should be made for emergency situations (*Caring for Vulnerable Elders during a Disaster: National Findings of the 2007 Nursing Home Hurricane*):
 - Identify residents with a greater risk for injury and provide them extra protection during an emergency.
 - During an emergency, ask healthier, mobile residents to serve as additional eyes and ears.
 - Consider grouping residents who have similar diagnoses into one particular area of the facility in order for staff to monitor them more efficiently during emergencies.
 - Diabetic residents should be especially monitored due to possible changes in meal times and changes in routine.

Evacuation and Shelter-In-Place Considerations:

- Maintain at least a 72-hour supply of food that can be utilized during an emergency. Make sure that the food stored can meet the different dietary needs of your residents and staff (*from Louisiana Model Nursing Home Emergency Plan*). If there is a loss of power, be especially vigilant of foods that are frozen or require refrigeration as they can spoil easily without proper storage.
- Identify medications stored at your facility and make note of any special temperature or security requirements.
- If you must evacuate, work on a plan ahead of time with a transportation service in order to guarantee a safe way of transporting your residents to another facility or shelter. Keep in mind the specific needs of your residents.
 - Depending on the situation, will the form of transportation have air conditioning or heat?
 - How you will transport patients who use wheelchairs or are not able to leave their bed?
 - Where will the buses or vans come from?
 - Who will drive the buses or vans? Qualified staff or hired licensed bus drivers?
- When evacuating, triage the patients in a way that allows for the most critical to be loaded first on to the bus or van followed by the most mobile patients (*from the Annals of Long-term Care: Disaster Preparedness for Long-Term Care Facilities*).

Facility Specific Considerations:

- Devise a security plan to be used in the instance of an emergency. Your facility may have resources and supplies that neighbors or others may not have access to. Hiring security personal or initiating specific security procedures will allow for the protection of supplies and also the residents.

- Emergency Staff Positions: *(from the Louisiana Model Nursing Home Emergency Plan)*
 - **Administrator** should implement the emergency plan, notify public officials if evacuation is necessary, and brief all staff of their responsibilities.
 - **Charge Nurse** needs to develop and maintain the resident roster, supervise the moving of residents and loading of residents into evacuation vehicles, and coordinate with dietary staff.
 - **Food Service Supervisor** would arrange to have food on hand that does not require refrigeration or cooking, and provide ice and containers to preserve perishable foods and medicines in an evacuation or loss of power.
 - **Maintenance Person** would develop procedures for securing the facility and close off all outside ventilation sources when necessary.

Emergency Preparedness for Subsidized Senior Living Apartments

Being that many of your residents are more independent than residents living in Nursing Homes, the main focus during emergencies is making sure those residents are well informed and prepared.

- Encourage your residents to make an Emergency Preparedness Kit. It may be helpful to pair-up with a local food shelf or grocery store to help gather non-perishable food for residents to store for emergencies.
- Also consider starting an emergency preparedness residents group, with the premise that residents would gather to discuss how they can help fellow residents prepare for emergencies. You could pair-up with other organizations outside of your facility that may be able to provide supplies or guidance to your residents. These activities could encourage residents to get involved as well as bring awareness to the subject ahead of time before an emergency occurs.
- Establish a system to help track residents, making sure that if an evacuation would become necessary your organization would be able to identify how many people would need to be evacuated and when the building would be completely cleared.
- Many individuals may not want to leave their homes or evacuate with staff from their facility, even when staying in their homes may be putting them in harm's way. Your facilities emergency preparedness plans should be presented to residents and their families upon moving into the building with the agreement and understanding that they would be required to follow the organization's plan during an emergency. This allows for the knowledge that all residents are safely evacuated and for the staff to feel comfortable leaving the building as well *(from Emergency Preparedness: More Preparation Now, Less Heartache Later)*.

Emergency Preparedness for Homeless Shelters

This could include homeless individuals in or out of shelters, homeless families, and women in shelter programs for domestic abuse reasons *(from Disaster Planning for People Experiencing Homelessness)*.

- Organizations that work with homeless individuals on a daily basis usually know the best way of getting in contact with their clients, and this is important when an emergency occurs.
- Know how to contact mental health and substance abuse support services.
- If your organization is able to, consider providing the supplies to assemble an emergency kit and training on how to utilize it. This knowledge of what to do when there is an emergency allows for individuals to have a sense of independence.
- When an emergency situation is occurring consider preparing leaflets that provide information to individuals simply stating what they need to know about the situation, what

they should bring with them to shelters, and locations of emergency shelters that can help them.

- When distributing materials to individuals make sure that the information is straight forward, in the appropriate language for the community they are being distributed in, and consider placing pictures or objects on the hand-outs for individuals who may not be able to read.
- Runaway youth or women who are victims of abuse may be forced to find alternate community-based shelters if evacuation is necessary. Include list of alternate shelters in their safety plan.
- Help by finding post-disaster emergency, temporary, or subsidized housing (see the *At-Risk and Vulnerable Populations Resource Guide* tool on pg. 106).