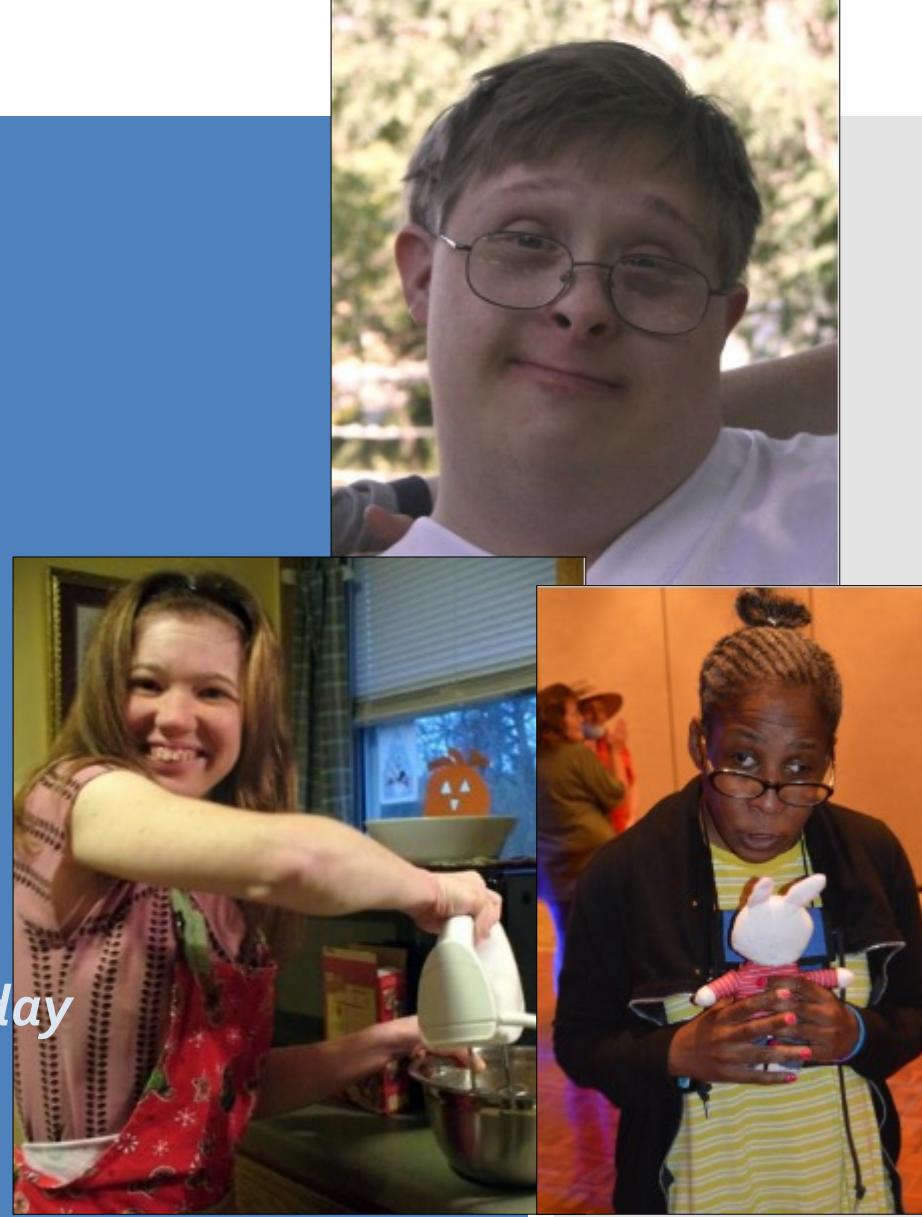


# Disaster Planning for Individuals with Intellectual and Developmental Disabilities

*Building a Safer Tomorrow through Preparedness Today*





DMH'S OFFICE OF DISASTER  
SERVICES BELIEVES  
EVERYONE  
SHOULD BE PREPARED FOR  
EMERGENCIES AND DISASTERS

# Why is this Important?

**People with disabilities, of all types, are disproportionately impacted by disasters**

- Challenges include:
  - Lack of accessible preparedness education
  - Difficulties in receiving/understanding information and directions
  - Lack of access to accessible transportation
- Up to 40% more likely to be impacted, yet
- 83% have no disaster preparedness plan

# Disaster Planning Should Be . . .

## Individualized

- Every facility should have a plan
- Every person being served should have an individual plan
  - One size does NOT fit all

## Accessible

- Everyone should participate in creating their plan, to the best of their ability

## Simple

- Planning can be easier with the right tools at hand
- Planning can be broken up into multiple sessions to avoid being overwhelming

## Available (and Shared!)

- Ensure the information is available to anyone who might be providing services and care after a disaster, including first responders

# NEW Planning Guidebooks



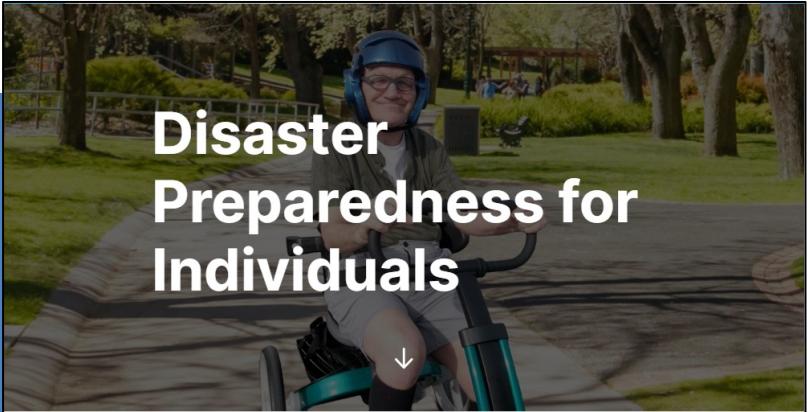
## Disaster Preparedness for Individuals

- DMH's Office of Disaster Services has created Disaster Preparedness Planning Guidebooks.
- Designed to help providers and individuals with intellectual and developmental disabilities plan for emergencies and disasters



## Disaster Preparedness for Providers

# Personal Planning Guidebook



## Disaster Preparedness for Individuals

- The Personal Planning Guidebook is designed to be completed by individuals, either alone or with assistance.
- It is written in plain language to increase accessibility
- It is organized in a question-and-answer format that allows individuals to provide information easily
- There are also helpful tips to assist individuals with their own preparedness

If you know a severe storm is coming, what plans do you have in place?

- Do you have a place you can go? Where is that place? Is it a family member's house, neighbor's house, etc.?
- Contact information for that person/location:
  - How will you let them know you are coming?
  - To reach your destination, you might wonder if someone will pick you up or if you should take a city bus or use a service like OATS.  
**It's important to have the bus schedule and contact information ready to ensure a smooth journey.**

# Provider Planning Guidebook



## Disaster Preparedness for Providers

- The Provider Planning Guidebook assists provider agencies in planning for emergencies and disasters
- It offers considerations for the location's physical plant and overall planning
- It also mirrors the Personal Guidebook, allowing caregivers to provide specific information on ways to ensure the goals in the personal plans of individuals are met

**Consider, for example:**

**Does the location have an emergency generator to restore power for electrical equipment?**

- How often is the generator tested?
- How much fuel is on hand?

**Is the location on emergency utility restoration registries?**

- Ensure the contact information for the utilities is readily available.

The individual planning guide describes a "Support System" as "people in your life who help you" and offers suggestions, giving prompts for naming and providing contact information. It is important for you to know who these people are for each individual. Keep in mind that, although this information may be stored on your organization's database, you may not have that connectivity (or the time to access it) during a disaster or emergency. You should have this information readily available to you at all times.

# Planning Partners

- The planning guidebooks are designed to be used by individuals in any living situation
  - Independent Supported Living (ISL)
  - Group home
  - State-operated facility
  - Provider setting
  - At home with parent/guardian
- The provider guides should be completed by a person who provides supports to that individual
- They should be available to anyone who might provide care during, or after, an emergency or disaster

# Additional Benefits of Complete Planning

Planning with these guides:

- Doesn't have to be completed in a single setting
  - Breaking up the task into smaller sessions makes it easier for all
- Provides information for different shifts or those who may not be usual caregivers
- Examines everything from medications and medical equipment to usual comfort items or routines
- Provides information for first responders in disasters:
  - Law enforcement
  - Firefighters
  - Emergency Medical Service (EMS)
  - Hospital emergency department staff

## Other pieces of the project

**As a part of this new focus on disaster/emergency planning for individuals with intellectual and developmental disabilities, the Office of Disaster Services is offering:**

- Online training on the use of the guidebooks
- Behavioral Health Strike Team training
- Emergency/Disaster Preparedness planning assistance
- COOP (Continuity of Operations Plan) Planning Assistance.
- Writing/Editing Disaster Plans
- Discussion of the Evacuation vs. Shelter-in-Place Decision
  - Evacuation Planning
  - Shelter-in-Place Planning
- Planning Drills
- Conducting Drills and Tabletop Exercises
- Planning for SPED classrooms in schools
- Other services if requested

# Some Basic Training Information

**Individuals with disabilities (like ALL individuals) have differing:**

- Needs
- Capabilities
- Strengths
- Weaknesses
- Expectation

**They MAY:**

- Have varying understanding of the situation
- Process information differently
- React differently to stimuli
- Require extra assistance
  - React differently to help
- Rely on routine
  - Follow routine strictly

# Avoiding Assumptions

## Avoid assigning characteristics based on type of disability

Myths and truths include:

- All disabilities are visible
- Not true; people you know may live with a disability
- All wheelchair users are sickly and are “bound” to the chair
- *Wheelchairs are assistive equipment and aid independence*
- All people with Down syndrome are “sweet” but are “mentally retarded”
- Everyone has their own personality and intellect
- Everyone who is deaf/hard of hearing can read lips
- Not everyone who is deaf/hoh can read lips; interpreters may be needed
- People with disabilities are “inspirational” and “brave” for “overcoming” their disability
- Having a disability does not require bravery; each of us lives with our own circumstances

This generally occurs (without malice) in people who have no “lived experience” with people with disabilities

# Sensitivities

- **Touching = Caring:**

Many of us instinctively offer hugs and touches as caring behaviors

- It is ALWAYS better to ask before touching or helping
  - “Do you need a hug?” or “Is it okay if I give you a hug?”
  - “Is there any way I can help you?”
  - Or ask a caregiver what the individual prefers

- **Food = Caring**

For many, feeding is caring

- You DO want to know if individuals have food sensitivities
  - Can result in digestive issues
- Even more so if they have food allergies
  - Can result in hypoallergenic reactions – even anaphylaxis

# Adherence to Routine

- Routines can be very important for some with cognitive disabilities
  - New York Blizzard
  - Fire response
- *Gently redirect the individual to take the appropriate action*

# Medication Replacement

- Many individuals with I/DDs have co-occurring medical and/or behavioral needs
  - *Understand and be patient with behaviors that may result from ANYONE who does not have their necessary meds*
- Remember:
  - Not all I/DDs are visible
  - Trauma looks different on everyone
- *While medication replacement is not your responsibility, it is helpful if you can notify a caregiver or provide assistance with replacement*

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