



Avoiding Disasters for the “Special Needs Population”

**Effective planning, response, and recovery for the
special needs population, consistent with
Federal civil rights laws**





Topics

- Who is the special needs population—functional approach
- How the civil rights laws apply to persons with special needs in an emergency
- Strategies the emergency preparedness community can use to address their needs
- What OCR is doing to assist persons with special needs in an emergency
- Swine flu – the next emergency





Who Is the Special Needs Population?

- Many definitions of “special needs population,” “at-risk population,” and “vulnerable population” exist.
- In the National Response Framework and the Pandemic and All-Hazards Preparedness Act, the Federal Government has adopted a single function-based definition.
 - A single definition allows for consistency of intergovernmental planning and exercises to ensure the safety and security of all.
 - A function-based definition establishes a flexible framework that addresses common needs irrespective of specific diagnosis, statutes or labels.
 - It provides useful information to emergency planners and responders that mere labeling does not.



Definition of Special Needs Population in the National Response Framework

Before, during, and after an incident, members of this population may have additional needs in one or more of the following functional areas:

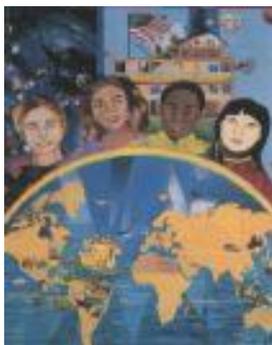
Maintaining independence, communication, transportation, supervision, and medical care. Individuals in need of additional response assistance may include those who:

- Have disabilities
- Live in institutionalized settings
- Are elderly
- Are children
- Are from diverse cultures
- Have limited English proficiency or are non-English speaking
- Are transportation disadvantaged



We Will Focus on Three Populations That Are Protected by Federal Civil Rights Laws

- Persons with disabilities
- Persons from diverse racial/ethnic origins, including Limited English Proficient (LEP) persons





Special Needs Population Facts and Figures

- In 2000, 18% of the population (47 million people) spoke a language other than English at home.
- 63% of hospitals treat LEP patients daily or weekly.
- Nearly 40 million people have one or more disabilities.
- 40% of the population over 65 has one or more disabilities.
- In 2000, persons who were African American, Hispanic or Asian comprised nearly a third of the population. This percentage is projected to increase through 2050.



The Experience of These Populations in Emergencies

- Historically, emergency preparedness activities have lacked sufficient focus on individuals with special needs.
- As a result, these populations often:
 - Did not receive important information about emergencies;
 - Were not evacuated;
 - Were unable to access shelters; and
 - Failed to receive needed services, including medical assistance.
- Many Hurricane Katrina “lessons learned” reports noted the importance of including the special needs population in planning, response, and recovery efforts for those efforts to be successful.



What Civil Rights Laws Apply to These Populations?

- Title VI of the Civil Rights Act of 1964 (Title VI) prohibits discrimination on the basis of race, color, or national origin by recipients of Federal financial assistance.
- Section 504 of the Rehabilitation Act of 1973 (Section 504) prohibits discrimination on the basis of disability by recipients of Federal financial assistance.
- Title II of the Americans with Disabilities Act of 1990 (ADA) prohibits discrimination on the basis of disability by public entities, whether or not they receive Federal financial assistance.



Standards under the Federal Civil Rights Laws Disability Discrimination

Section 504 and Title II implementing regulations:

- Different treatment on the basis of disability
- Actions that have the effect of discriminating on the basis of disability
- Program accessibility
- Provision of auxiliary aids and services where necessary to afford equal opportunity, unless undue burden or fundamental alteration
- Modification of policies, practices, and procedures where necessary to avoid discrimination, unless fundamental alteration
- Administration of services in the most integrated setting appropriate



Standards under the Federal Civil Rights Laws Race, Color, and National Origin Discrimination

Title VI implementing regulation:

- Different treatment on the basis of race, color, or national origin
- Actions that have the effect of discriminating on the basis of race, color, or national origin
 - May include the failure to take reasonable steps to provide LEP persons meaningful access to the program



How Covered Entities Can Effectively Address Functional Needs in an Emergency, Consistent with Federal Civil Rights Laws

- Strategic planning
- Location and assessment of the special needs population
- Communication
- Avoidance of separation of individuals from their sources of support or assistance
- Integration
- Accessibility
- Recovery



Strategic Planning

- Include people with special needs in planning and exercises
- Know their partners and collaborate in developing plans
- Know what resources are available in an emergency
- Develop protocols and procedures for providing services and obtaining resources
- Communicate the emergency plan to response and community stakeholders
- Identify and maintain access to expertise about people with special needs for all staff up and down the line



Location and Assessment

- Coordinate with state and local emergency management officials
- Know the populations - population survey data
- Know the functions with which people may need assistance - use of individual intake and assessment tools
- Consider using a voluntary registry to identify persons with special needs





Communication

- Coordinate with community and faith-based organizations
- Use multiple, accessible communication mechanisms, such as:
 - Large print/audio for persons who are blind or have low vision
 - Interpreter services for deaf/hard of hearing or LEP persons, such as language banks, telephonic interpreter services, bilingual staff, contract or volunteer interpreters
 - Picture boards
 - Captioning of televised messages
 - Translation of written emergency information into other languages
 - Short, simple communication scripts, repeated frequently





Avoidance of Separation from Sources of Support or Assistance

- Durable medical equipment (wheelchairs, walkers, scooters, catheters, ostomy supplies, etc.)
- Service animals
- Caregivers and attendants, family members and companions
- Medication, supplies





Integration

- Avoiding isolation of individuals with special needs unless necessary
- Avoiding misdirecting individuals to higher levels of care than what they need, such as hospitals, acute care facilities, or medical shelters
- Providing access to appropriate equipment, medication, personnel or other resource support





Accessibility

- **Transportation**
 - Secure accessible transportation (lift equipped) for the individual and his or her equipment, service animal, or caregiver
 - Ensure trained personnel to operate the vehicle

- **Evacuation**
 - Arrange an inspection by emergency management or firefighting officials
 - Inform affected persons about the plan as early as possible
 - Employ procedures for 100% accountability



Accessibility

- **Sheltering**
 - Accessible facilities/programs
 - Alternative sources of power
 - Bathing and toileting facilities
 - Beds
 - Supplies and equipment
 - Hospitals, congregate care facilities and sheltering in place



Disability Access Symbols



Recovery

- Accessible housing and transportation
- Continuity of health care and human services
- Supports for everyday life
- Community connections





OCR's Role in Emergency Preparedness

- Developed HIPAA Privacy Rule Emergency Preparedness Planning web-based interactive decision tool
- Issued HIPAA Privacy Bulletins immediately after Katrina to underscore how the HIPAA Privacy Rule allows patient information to be shared to assist in disaster relief efforts
- Assists in the development of tools and documents, e.g., Shelter Intake and Assessment Tool, Medical/General Evacuation Tool, Background Briefing Paper on the Special Needs Population for HHS Playbooks for National Planning Scenarios
- Provides input into LOTS of documents, e.g., National Response Framework, Interim Emergency Management Planning Guide for Special Needs Populations, Playbooks, National Health Security Strategy, Strategic Plans, ConPlans, ConOps, SOPS, IPs,



OCR's Role in Emergency Preparedness

- Participates in Federal/HHS Work Groups/Task Forces, e.g., Interagency Coordinating Council on Emergency Preparedness and Individuals with Disabilities (ICC) and ICC Health Subcommittee, DOJ/DHS/HHS Interagency Work Group on H1N1 and Civil Rights; OMH National Consensus Panel on Emergency Preparedness and Cultural Diversity, OMH National Advisory Panel on a Cultural Competency Curriculum for Emergency Responders, Pandemic and All Hazards Preparedness Act At-risk Population Work Group



OCR's Role in Emergency Preparedness

- Participates in Incident Response: Human Services Watch Group and Emergency Coordinators
- Provides outreach and technical assistance:
 - Presents at conferences and meetings
 - Serves in an advisory capacity to state and local government agencies
 - Provides technical assistance to planners
 - Meets with grassroots and advocacy organizations



Swine Flu (H1N1) Background Information

- World Health Organization designated H1N1 a global pandemic on June 11, 2009
- Overwhelming majority of patients experience mild symptoms and full recovery
- United States, with over one million infected persons, has most widespread incidence, followed, in order, by Mexico, Argentina, and Canada.
- Surge expected in Fall/Winter 2009



H1N1

Background Information

- Symptoms: fever, chills, headache, body aches, cough, sore throat, runny or stuffy nose, fatigue
- Preventive measures: covering nose and mouth when coughing or sneezing, hand-washing, avoiding touching eyes, nose, and mouth, staying home when sick, social distancing
- Priority for vaccine: health care workers, emergency responders, pregnant women, persons caring for infants under six months of age, children under five years of age, children 5-18 with chronic medical conditions



H1N1

Unique Issues for Persons with Special Needs

- Greater vulnerability
- Prioritization of vaccines
- Sheltering in place
- Harassment





H1N1

Federal Efforts for Persons with Special Needs

- Message sent to tens of thousands of stakeholders, in multiple languages, providing information on prevention and response (May 1, 2009)
- Statement by Acting Assistant Attorney General for Civil Rights addressing civil rights in the response to H1N1 (May 7, 2009)
- Ongoing conference calls among Federal agencies to address communications, public health response, harassment, and other issues, and share resources
- HHS is conducting regular conference calls on migrant/immigrant issues in the public health response to H1N1



H1N1

Federal Efforts for Persons with Special Needs

- Centers for Disease Control and Prevention in HHS has conducted outreach to migrant farm workers and immigrants, including through Migrant Clinicians Network, National Council of La Raza, National Center for Farm Worker Health, Regional Migrant Coordinators, and U.S./Mexico Border Health Commission, and translated public materials into multiple languages
- Equal Employment Opportunity Commission has posted information on ADA-Compliant Employer Preparedness for the H1N1 Flu Virus



Resources See Attachments

