

# Summary of Findings

## Waldo Canyon Fire Forum for People with Disabilities

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Public Forum Co-Hosted By:



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## Background

The Waldo Canyon Fire impacted residents of Colorado Springs, Manitou Springs, Woodland Park, and surrounding communities in June and July 2012. The fire was reported via 911 calls on Saturday, June 16. Over the course of the next several days, evacuation notices were issued for nearly 40,000 residents. The Pikes Peak Area Red Cross opened several shelters to accommodate these evacuees and other shelters were opened to accommodate animals.

During the Waldo Canyon Fire, community members with disabilities were also impacted. Several of these community members contacted The Independence Center and the Rocky Mountain ADA Center to discuss accessibility barriers encountered during the fire.

Because of this anecdotal information and conversations with local emergency operations personnel, the two organizations deployed efforts to collect information from people with disabilities in the impacted areas regarding these access barriers. The intent was to provide emergency operations personnel with specific information so that barriers could be addressed for future emergency events.

## Demographics of Persons with Disabilities in El Paso County

Having some sense of how many people have what type of functional limitations gives policy makers, government staff and residents more information with which to plan.

First a few definitions: People responding to the ACS survey were asked if, based on a physical, mental or emotional condition they had trouble with hearing, vision, cognitive, self-care, or independent living functions.

- Hearing difficulty can range from hard of hearing to deafness.
- Vision difficulty can range from a vision difficulty even with glasses to blindness.
- Cognitive difficulty is defined as having difficulty concentrating, remembering or making a decision.
- Ambulatory difficulty refers to the ability to walk, climb stairs, reaching and lifting independently.
- Self- Care refers to the ability to dress and shower (activities of daily living) independently.
- Independent Living difficulty refers to the ability to do errands such as visiting the doctor's office or shopping independently.

Often those with self-care limitations will need considerable human assistance such as family members, attendants or personal care workers or certified nursing assistants or nurses to live independently in the community.

For El Paso County, the ACS estimates that 10.5% of the estimated 580,645 residents (2000 Census) have a disability. Below are the basic numbers of people with disabilities by the categories used in the ACS. Please note - updated totals are expected in 2013 through the ACS with a more extensive breakdown among types of disabilities/functional limitations and other information.

Hearing difficulty	18,348
Vision difficulty	9,862
Cognitive difficulty	22,054
Ambulatory difficulty	28,641
Self-Care difficulty	9,192
Independent Living difficulty	18,144

Here is a breakdown of functional limitation by age group:

	<b>Birth to 17</b>	<b>Age 18-64</b>	<b>65 and older</b>
Hearing difficulty	794	8,861	8,693
Vision difficulty	727	5,687	3,448
Cognitive difficulty	3557 (age 5-17)	14,249	4,248
Ambulatory difficulty	486 (age 5-17)	16,082	12,073
Self- Care difficulty	924 (age 5-17)	4,564	3,704
Independent Living difficulty	0	10,018	8,126
<b>Total:</b>	<b>4,989</b>	<b>36,137</b>	<b>19,607</b>

## Overview of Legal Requirements Related to Emergency Preparedness

The Americans with Disabilities Act of 1990, as amended, (ADA) is a federal civil rights statute prohibiting discrimination against qualified individuals with disabilities. Title II of the Act requires equal access to state and local government programs, services and activities available to the general public and also includes requirements for barrier removal and effective communication. Therefore, ADA requires access to and prohibits discrimination against people with disabilities in all aspects of emergency mitigation, planning, response, and recovery.

Further, Federal Communications Commission (FCC) rules require broadcasters and cable operators to make local emergency information accessible to persons who are deaf or hard of hearing, and to persons who are blind or have visual disabilities. This rule means that emergency information must be provided both aurally and in a visual format.

The information provided visually and aurally must include critical details regarding the emergency and how to respond. Critical details could include, among other things:

- Specific details regarding the areas that will be affected by the emergency
- Evacuation orders, detailed descriptions of areas to be evacuated, and specific evacuation routes
- Approved shelters or the way to take shelter in one's home, instructions on how to secure personal property, road closures, and how to obtain relief assistance.

In determining whether particular details need to be presented visually and aurally, programmers may rely on their own good faith judgments.

There could be a limited number of instances when an emergency affects the broadcast station or non-broadcast network or distributor and it may be impossible to provide accessible emergency information.

## Public Forum Overview

The Independence Center and Rocky Mountain ADA Center co-hosted a public listening forum at the Pikes Peak Area Council of Governments facility at 15 South 7<sup>th</sup> Street, Colorado Springs, CO 80907. Several local emergency operations representatives from the City of Colorado Springs, City of Manitou Springs, and American Red Cross – Pikes Peak Chapter attended.

The forum was open to people with disabilities, advocates and family members, and disability service providers who were impacted by the Waldo Canyon Fire. Participants were invited to share information about their disability-related experiences during the fire. Input was also solicited on The Independence Center’s website - <http://www.theindependencecenter.org/>.

Approximately 70 people attended the forum and 22 individuals shared their experiences in front of the group. Two note-takers were on hand during the forum to compile notes from these stories. A full CART transcript is also available for review. The section below provides a summary of the comments received during the forum and reported to staff at The Independence Center.

## Summary of Public Input

During the public forum, several themes emerged from the comments offered by community members with disabilities who were impacted by the Waldo Canyon Fire. These themes include:

- Barriers to effective communication for emergency broadcasts
- Barriers to transportation and mobility
- Access barriers in the shelters.

It is also important to note that nearly everyone who spoke mentioned that either they did not know what they were supposed to do or did not have a plan in place, indicating a need for training at the individual level. There seemed to be a lack of understanding as to what the disaster plan was from the government-what were individuals expected to do. Due to the scope and impact of the Waldo Canyon Fire, input from the community of people with disabilities indicates the disaster can serve as a learning experience for everyone involved.

## Communication Barriers

Communication was by far the most heavily commented upon issue. Barriers ranged from lack of access to just not knowing what to do, where to go or who to call. The communication barrier-related comments include:

- Need live captioning during emergencies; scrolling information does not help. We need visual and oral and written information that is current.

- Several people commented on individuals who are Deaf in Manitou who did not know about the fire and either got out very late or stayed home the entire time.
- Need CART (real time captioning on a screen) to be available at the fire briefing. Several hard of hearing individuals went to the fire briefings but could not understand or hear what was being said.
- TV speakers looking away from the camera became unintelligible for people who are hard of hearing; the camera cutting away from the speaker or the interpreter (later on) had the same effect of no communication.
- Need interpreters on the TV for individuals who are Deaf.
- The Deaf community indicated that nothing was accessible to them on TV until Wednesday. They were told that the TV stations would not put interpreters on unless they interpreted for free. Sign Language service finally donated funds to one station and they put interpreters on. (Deaf community seems unaware that sign language interpreters were available at the fire briefings at 9 AM and 7 PM-however two briefings a day as compared to the many briefings and updates throughout the day for everyone else does not constitute equivalent access)
- Reverse 911 didn't work or I didn't know how it worked.
- Shelters needed live captioning and interpreters.
- Cell phones don't work in an emergency; this information needs to be advertised so people know not make personal emergency plans that rely on cell phones.
- Could not register for E-911 because of a lack of email address.
- One person contacted a TV station to ask why there were no interpreters or live captioning. The individual was told that it wasn't the station's responsibility to pay for that, it was the Mayor's responsibility!

### *Information Needs*

Individuals who spoke did offer input on the types of information the group indicated they needed for safer emergency response.

- Those directly affected and unaffected by the fire needed information about what was happening so they could plan their day accordingly (particularly regarding the cancellation of public transit services, which impacts every rider not just people with disabilities).
- What does evacuation mean? How long? Where to go? Where are the accessible shelters?
- Information about air quality and what to do if you have breathing issues.
- Needed someone to talk to about options.
- Several people commented they did not know what to do, did not understand pre-evacuation versus regular evacuation; not sure what to do.
- Didn't know what to do with medical equipment when power went down.
- Didn't know what to do when they were unable to reach Certified Nursing Assistant (CNA) or other caregiver.
- Wanted to see maps of where the fire actually was or where it was going so they could see how much leeway they had.
- Would have been helpful to have an information specialist at the command centers so the public coming in could ask questions. Emergency staff too busy to respond.
- We need a plan to communicate with Home Health care staff (heard this from both the agency staff and consumers).

### *Information Sources*

Individuals who spoke at the forum also shared details about the various sources they used to obtain information during the event. These sources included:

- Facebook
- Texts from Friends
- Twitter
- TV stations websites
- Notifications via Denver media outlets would have been helpful for those in Denver waiting out the fire but little information was reported there until Tuesday or Wednesday of the week during the emergency
- People who are blind or have impaired vision did ok with TV stations
- Tried to get information at command center and during fire briefings-could not hear what they said
- Tried to get info from public TVs (bars for example) but captioning was not turned on

### **Transportation Issues**

Attendees at the forum also reported barriers related to public transit and access to public-rights-of-way. These comments include:

- Metro Mobility (designated paratransit) cancelled its regular rides to provide rides to others with disabilities in the community. No information about the cancellation was given to the public. This affected regular riders with disabilities who were not contending with the fire. Should not have to pull services from one group for another.
- Public bus service was cancelled on Wednesday but no notice was given to the public. People were waiting at bus stops with ash falling everywhere.
- Not sure who to call if unable to self-evacuate.
- What questions should we ask to determine if we are able to self-evacuate?
- Police and emergency responders did a great job getting everyone out of the neighborhoods but very hard for those trying to get in to retrieve family members including those with disabilities. Need a better plan.
- Accessible evacuation transportation needs to be available more quickly...not trucks but accessible vehicles that are safe.
- What should a person do who cannot self - evacuate and their personal network is unable to reach them?
- How do we transport heavy equipment that is needed for disability issues (concentrator, oxygen, etc.)? Hoyer lifts should be considered as well.
- Individual asked to leave without wheelchair (mentioned by consumer of The IC not mentioned at the forum).
- Need a plan for how to get people back home after the emergency-not everyone has the money for an accessible cab.

## Shelter Access

During the forum, a number of individuals also reported issues related to temporary shelters set up during the Waldo Canyon fire. These comments related to information about shelter availability and access barriers within certain shelter locations. It is important to note that additional information about shelter access barriers were provided to shelter management during a site visit by the FEMA Region 8 Disability Integration Specialist. Individual comments related to shelter access include:

- Did not know what shelter to go to.
- Did not know where the accessible shelter was.
- We learned that there are government sanctioned shelters (Red Cross) that are supposed to be accessible; there are also churches, and others who open up a shelter with no understanding of access. Need information on which shelters are accessible.
- Cascade Shelter was not accessible.
- Cheyenne Mountain had many problems first three days: bikes chained to the accessible ramp railing, people in wheelchairs being sent to assisted living facilities, food service up three steps, child area on second floor had no elevator (reported outside of listening session).
- Accessible cots were not available at Cheyenne Mountain- they were promised but never came to this individual. There were a few around but she did not get one during the 4-5 days she was there.
- Cots required "24-7" oversight (not sure what this is referring to).
- Shower not accessible at Cheyenne Mountain.
- Individuals had problems with finding access to electrical charging systems for their equipment.
- Captioning needed to be turned on the televisions available at shelters.
- Shelter turned away a CERT Trained person who is Deaf! Shelters could use people with various disabilities as volunteers.
- Hotels gave their ADA rooms to those who weren't disabled. Several people spoke about having to go to Denver or elsewhere to get an accessible room.
- Needed a better cot to accommodate severely physically disabled individual.
- Need CNAs to be available at the shelter and a space that is private for those services to be delivered.
- Need access to the same shelters as everyone else.
- Communication issues need to be addressed in shelters
- Grief and trauma counseling available to others was not competent for working with people with disabilities - counselor did not understand how disability does and does not affect emotional coping skills. Very difficult experience.

## Other Issues

Additional disability-related issues were also raised by public forum attendees. These issues include:

- Home Health agencies (who provide personal care in the home) had a difficult time finding their clients. HH Clients often had a difficult time finding their aide-communication was difficult.
- HH Agencies need to develop a plan for following up with people. Information on which accessible shelters are open would be helpful (Teller County).
- State Medicaid not very understanding about the increase in hours used for personal care when out of the home in a shelter.

- Personal and Family planning an issue!
- Need more training for people with disabilities: what works and where to go (how to get there and get back for example).
- Would like to see more personal support networks wider than just family members.

## Helpful People

Individuals who spoke were also willing to offer praise for the individuals and organizations that provided quality service during the event. Among those identified during the forum are:

- Park Service and Police
- County health personnel - One person talked about her son's county health nurse coming to check on her son
- Ben Bills with E911 was very helpful
- First responders in Manitou Springs
- Neighbors and friends looking out for them (texting, calling, offering help)
- Sign Language Network and other local sign language agencies who responded to information inquiries related to effective communication
- KKTV for providing interpreters on Wednesday after the fire started

## Discussion

As indicated above, several key issues emerged from the stories shared by individuals with disabilities in the community. Individuals reported access barriers related to communication and information availability about the fire and emergency operations and transportation availability. Some individuals also shared stories related to accessibility barriers at certain evacuation shelters opened during the event. Several comments were also shared about increasing collaboration between government agencies and private home health care providers to better identify and deploy resources during a disaster.

One of the issues discussed by several individuals throughout the forum involved emergency broadcasting information available to the public through the local television stations. Community members indicated that information was not provided in a universally accessible format and attempts to reach out to the television stations to address these issues during the event were met with hostility or apathy. One exception to this was KKTV, which was praised several times throughout the forum for its willingness to make adjustments to their broadcasts to increase accessibility. This behavior by television station personnel indicates a need to develop an agreement with the stations to address significant communication access barriers during future emergency broadcast situations.

Several individuals acknowledged their personal lack of disaster preparedness as a major barrier during the fire. Individuals admitted to not having a developed emergency response plan prior to the fire and continuously shared that they did not know where to go for information. This issue indicates two areas of need. On one hand, individuals with disabilities in our community need education materials and



training to be better prepared at a personal level for emergency events. On the other, emergency operations professionals in our community would be well-advised to solicit input from individuals with disabilities in the emergency planning process while also increasing marketing and public relations effort to this demographic group. Making Emergency Operations disaster preparedness plans readily available to the public will also help individuals better understand areas of personal responsibility as well the limits of what First Responders and other emergency operations personnel can provide. Further, emergency operations professionals would be wise to also review how easy it is for any community member, regardless of disability, to access emergency preparedness information available from the various agencies responsible for emergency preparation for our community. A single, simplified source of information (i.e., website) on preparedness could be very helpful both in disseminating information but also in receiving feedback from residents before and after a disaster.

Some individuals indicated various barriers related to transportation and mobility during the Waldo Canyon Fire. These included issues related to traffic flow and road closures during the evacuation, cessation of public transportation service (including timing and communication of closures to the public), and coordination between local transportation providers and the local government agencies. These barriers indicate that a comprehensive review of emergency operations plans related to transportation and transit is needed to ensure that issues related to disability are adequately addressed.

During the forum, several individuals discussed access barriers at the Cheyenne Mountain High School evacuation shelter. While some of the shelter locations opened during the event were praised for their accessibility (e.g., Lewis Palmer High School), individuals reported barriers in other facilities including Cheyenne Mountain High School. These barriers included availability of accessible cots, path of travel to various areas in the shelter including the food service line, inaccessible shower facilities, and reported denial of service by volunteers in the shelters. These reports indicate that emergency operation personnel, including the Pikes Peak Area Red Cross, would be well advised to review their selection criteria for potential shelter sites to verify they adequately address potential accessibility of those shelters. Further, additional ongoing mandatory training for shelter volunteers would be prudent. Since volunteers from other jurisdictions were present at Waldo Canyon shelters, coordination with other agencies providing back-up volunteers is needed to ensure that all volunteers staffing area facilities have adequate disability-related training.

While it is important to note the identified barriers discussed above, people with disabilities in our community also expressed appreciation toward individuals and organizations that provided quality service during the event. These included first responders, individuals with agencies, agencies as a whole, and KKTU. One individual summed up her thoughts succinctly by adding, "Agencies did a good job with what they had!"

## Resources

There are numerous resources available regarding inclusive emergency preparedness. The following are just a sample:

Emergency Video Programming Accessibility to Persons with Hearing and Visual Disabilities, Federal Communications Commission (Available online - <http://www.fcc.gov/guides/emergency-video-programming-accessibility-persons-hearing-and-visual-disabilities>)

An ADA Guide for Local Governments: Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities, U.S. Department of Justice (Available online - <http://www.ada.gov/emerepreguideprt.pdf>)

ADA Checklist for Emergency Shelters, U.S. Department of Justice (Available online - <http://www.ada.gov/shleterck.htm>)

Considerations for Individuals with Access and Functional Needs, Federal Emergency Management Agency (Available online - <http://www.ready.gov/individuals-access-functional-needs>)

The Independence Center has also developed an emergency preparedness manual to help individuals with disabilities prepare for disasters. Information about the *Personal Emergency Preparedness Workbook* is available online at <http://www.theindependencecenter.org/advocacy/emergency-prep/personal-emergency-preparedness-workbook>. This document is also available in print by contacting the agency.

## Summary

Chief Joe Ribeiro of the Manitou Springs Police Department summed up the event nicely by stating that “If we get it right for people with disabilities, we will get it right for everyone in the community!” Since the Waldo Canyon Fire offered such a vivid lens to review the accessibility of our local emergency operations plan and several significant barriers were identified that impact individuals with disabilities in our community, it is time to address solutions. Perhaps now families and individuals will begin to make their personal plans for safety. It is also important that agencies involved with emergency operations make their emergency plans and related information readily available to the public both before and during a disaster. This allows everyone, regardless of disability, access to information and resources so they know what they should do when a pre-evacuation is called, locations of available shelter facilities, desirable evacuation routes, and other relevant information. While Waldo Canyon serves as a catalyst for comprehensive review of local emergency operation plans, it is important to note that information for people with disabilities should cover all types of emergencies including natural and man-made disasters.

People with disabilities need to be more broadly involved in the continued development of the local emergency operations plan. Individuals with disabilities are the best source of quality input related to the needs and safety concerns of this population. People with disabilities commonly know how to adapt and innovate on the spur of the moment as they do it daily. By creating coalitions between emergency operations planners, first responders, and individuals with disabilities, we can create workable solutions. A core advisory group (CAG) model offers a formalized system for collaborating with people with disabilities. The CAG would represent a direct feedback method to solicit input from volunteers with disabilities representing a broad range of disability types, interests, and socio-economic considerations.

The CAG and area disability organizations can work together to generate a database of disability information for use during emergency events. This database can include contact information for service providers like sign language interpretation agencies, home health care providers, medical equipment providers, including charging stations and wheelchair companies, and accessible transportation providers, to name a few. During emergency events, CAG members would be available to volunteer at the emergency command center to provide information and guidance on available disability resources and other relevant issues.

In parallel, barriers related to emergency broadcasting in our community need to be addressed as soon as possible. Because local emergency operations personnel rely so heavily on television broadcasting for emergency notifications, dialogue is needed between the television stations, emergency operations personnel, and individuals with disabilities to address these barriers. Ideally, this includes agreements with local media outlets that outline how information dissemination is handled, determining what information should be disseminated (e.g., air quality, contact information for medical equipment providers, accessible transportation, home health care services, and identifying shelters that are useable by people with disabilities). Further, it is vital that station general managers understand the critical importance of effective communication methods for our community because of the prevalence of individuals with sensory disabilities.

The disability community philosophy has long been, “Nothing about us without us.” Therefore, it is vital that people with disabilities be included in emergency planning to the greatest extent possible. Local emergency operations officials are wise to include as many people with disabilities, representing the broad range of disability types and interests in the planning process. Only through this type of transparent collaboration will our community be able to sufficiently meet the needs of people with disabilities during future disasters. The Waldo Canyon fire offers a much-needed learning experience to help identify access barriers and work together towards resolution.

## Next Steps

Next steps will be identified in conjunction with area emergency operations personnel, disability organizations, and individuals with disabilities in the community. The key to successful implementation of these next steps and full ADA compliance for emergency planning in Colorado Springs and the surrounding area is ongoing communication and collaboration between these interested parties. True success lies in a community-wide commitment to full integration of the needs of people with disabilities into the comprehensive emergency operations plan for all residents of El Paso County. To that end the following steps are in process:

1. Local OEM leadership has asked staff from the Rocky Mountain ADA Center and its parent organization, Meeting the Challenge, Inc. to review the existing emergency operations plan for ADA compliance. ADA Center representatives will conduct an ADA evaluation of the plan and provide recommendations to address any identified access barriers.
2. Upon completion of this ADA compliance review, local OEM personnel will engage members of the disability community to participate in continued emergency operations plan development and implementation.

3. The Independence Center is applying for a FEMA funded Resilience Grant to help create a citizens advisory group of people with disabilities to collaborate with local OEM agencies. This group will work together to develop a data base of resources for disability needs during an emergency. If the grant application is not funded, steps will be taken to re-direct resources to facilitate the successful completion of this vital advisory panel.
4. Deaf and Hard of Hearing Services Staff at The Independence Center are on stand-by to work with the Deaf and Hard-of-Hearing community to resolve and improve access to emergency information through local TV stations
5. OEM personnel indicate that thought is being given to having a disability liaison in the Emergency Operations Center during any future emergency events.
6. The Independence Center will continue to offer its Individual Emergency Planning checklists and offer support to individuals and groups to create their plans.
7. This summary of findings will be made available to the public, including concerned citizens with disabilities, EM agencies in the area, disability organizations, and any other interested parties.

Further action steps will be identified as appropriate to continue to address the needs of individuals with disabilities in our community during emergencies. The next steps outlined above represent positive progress toward addressing accessibility gaps in local emergency operations.