



**PREP IS PERSONAL
FIND THE FRIDGE**

**Tips For Emergency Personnel:
Supporting People with Unique
Access or Functional Needs
(including disabilities)**

UConn
UNIVERSITY CENTER FOR
EXCELLENCE IN
DEVELOPMENTAL
DISABILITIES

 **CTCDD**
Connecticut Council on
Developmental Disabilities



PREP IS PERSONAL FIND THE FRIDGE - TIPS FOR EMERGENCY PERSONNEL: SUPPORTING PEOPLE WITH UNIQUE ACCESS OR FUNCTIONAL NEEDS (INCLUDING DISABILITIES)

Prep is Personal Find the Fridge - Tips For Emergency Personnel: Supporting People with Unique Access or Functional Needs (including disabilities) has been created for easy reference by individuals who may not have much experience with people who have access and functional needs. The information is also available on line at

www.uconnucedd.org.



GENERAL INTERACTION GUIDELINES

- Look for “PREP IS PERSONAL” information on the fridge.
- Ask the person how you can best assist
- Speak directly to him/her even if another (e.g., staff member, person without a disability) is present
- Don’t make assumptions about abilities or challenges
- Be even more patient, empathetic, and calm
- Always speak respectfully in the person’s presence
- Remember people with disabilities are often their own best emergency managers
- Taking the extra time to explain why: This may actually save time in the long run

Continued on reverse side —→

GENERAL INTERACTION GUIDELINES

GENERAL INTERACTION GUIDELINES

- Avoid idioms (e.g., “spread eagle,” “knock it off,” or “cut it out”)
- Be aware that access and functional needs differ for each individual regardless of their label or how they may initially appear to you and that some may not be readily apparent
- Watch for and alleviate any signs of anxiety/stress
- Share what you learn about the individual with others who will be assisting
- Avoid restraints. Better to clear the room of others
- See special sections on individuals who:
 - * use a service or therapy animal
 - * depend on others for personal assistance
 - * have responsibility for others

GENERAL INTERACTION GUIDELINES

RESPONSIBILITY FOR OTHERS

Most people are responsible for others but this section is included because of the unique situation of families, friends, or other support providers to people with unique access and functional needs.

- Possible Access/Functional Challenges
 - * May not be able to comply with emergency procedures if others are not accounted for
 - * May need to provide specialized information, training, etc., about someone else
- Unique Interaction Guidelines
 - * Do not separate responsible person and those for whom s/he is responsible if at all possible
 - * Plan for reunification asap if separation has occurred

Continued on reverse side →

RESPONSIBILITY FOR OTHERS

RESPONSIBILITY FOR OTHERS

- Look for/Take with equipment/supplies requested
- Cross reference with any other apparent challenge(s)

RESPONSIBILITY FOR OTHERS

COMMUNICATION CHALLENGES

Some people can understand even if they cannot express themselves. Some who speak may be difficult to understand or may say things that appear out of context. Others require clear and direct language, restatement, checks for understanding, and/or nonspeech cues (e.g., drawings or gestures).

- Possible Access/Functional Challenges
 - * May be non-verbal or have limited speech
 - * May comprehend more than able to express
 - * May not speak English as a primary language
 - * May use an Augmentative or Alternative communication system (AAC) or VOCA (voice output communication aid)

Continued on reverse side →

COMMUNICATION CHALLENGES

COMMUNICATION CHALLENGES

- Unique Interaction Guidelines
 - * Look for signs of not understanding or misunderstanding
 - * Listen carefully to what is being said
 - * Re-word/Try another way to communicate
 - * Don't be afraid to ask the person to repeat themselves or show you
 - * Use your iPhone or similar device to locate a translation app if you need English translated into another language
- Look for/Take with any communication-related equipment/supplies including iPhones, iPads, or similar devices
- Cross reference with any other apparent challenge(s)

COMMUNICATION CHALLENGES

OLDER AMERICAN STATUS

Many “senior citizens” deny having disabilities and see their challenges as “just a sign of aging”. Most of their challenges, though, are identical to individuals who were born with or acquired disabilities through illness or injury in earlier stages of life.

- Possible Access/Functional Challenges
 - * Slower response time. May be uncooperative.
 - * Confusion/disorientation (may actually be due to hearing problem)
 - * Likely to be on multiple medications
- Unique Interaction Guidelines
 - * Listen carefully to reasons/excuses and address with kindness
 - * Reassure person that accessing medical care does not mean going into a nursing home

Continued on reverse side →

OLDER AMERICAN STATUS

OLDER AMERICAN STATUS

- Look for/Take with equipment/supplies
 - * Mobility aids
 - * Hearing aids
 - * Other medical equipment
 - * Glasses
 - * Medications
- Cross references (especially concerning other “look for/take with” items):
 - * Communication challenges
 - * Movement/mobility challenges
 - * Deaf/hard of hearing
 - * Blind/visual impairment
 - * Behavioral/mental health challenges (Alzheimer’s)
 - * Unique health or complex medical needs
 - * Dependence on others for personal assistance

OLDER AMERICAN STATUS

DEPENDENCE ON OTHERS FOR PERSONAL ASSISTANCE

Regardless of other access and functional needs, disability label or age, individuals who depend on others for assistance may be at higher risk in an emergency because of that dependency. For some, the personal assistance is highly specialized and requires unique training to provide.

- Possible Access/Functional Challenges
 - * May require trained assistance
 - * May not be able to access those who usually provide such assistance
- Unique Interaction Guidelines
 - * Whenever the person can, follow his/her directions about how to provide assistance
 - * Be gentle in how you provide assistance
 - * Be wary that some “standard procedures” (e.g., for getting dressed) may need to be modified

Continued on reverse side →

DEPENDENCE ON OTHERS FOR PERSONAL ASSISTANCE

DEPENDENCE ON OTHERS FOR PERSONAL ASSISTANCE

- Unique Interaction Guidelines (cont.)
 - * Connect the individual with his/her assistant asap
 - * If the individual cannot speak, ask the personal assistant what needs to be done
- Look for/Take with equipment/supplies
 - * Directions for personal assistants
 - * Adaptive clothing
 - * Adaptive supplies, equipment, or technology
- Cross reference with any other apparent challenge(s)

BRAIN INJURY

Some people with brain injuries are aware that this is true for them. Others may not be aware. Access and functional needs secondary to brain injuries will depend on such factors as the age of the person when the injury occurred, the severity of the injury, the amount of time since the injury, the availability of appropriate rehabilitative services, etc.

- Possible Access/Functional Challenges:
 - * Varies
 - * Sometimes behavior may mimic substance abuse
 - * Person may experience flashbacks
- Unique Interaction Guidelines
 - * Respect if the individual says they have a brain injury
 - * Allow extra time to process/respond

Continued on reverse side →

BRAIN INJURY

BRAIN INJURY

- Look for/Take with equipment/supplies:
 - * Anything the person is using, says s/he needs
 - * Check for special equipment of any type and take if possible
 - * If person appears to have been a veteran, ask if s/he wants any special mementos that may be on display
- Cross reference with:
 - * Learning challenges
 - * Movement/Mobility challenges
 - * Behavioral/mental health challenges

BRAIN INJURY

USE OF A SERVICE OR THERAPY ANIMAL

Traditionally, the term “service animal” referred to seeing-eye dogs. However, today there are many other types of service animals including those that have a therapeutic relationship with their owners.

- Possible Access/Functional Challenges
 - * Owner may not have time to harness
 - * Animal may be protective of owner/frightened by sirens, uniforms, activity level despite training
 - * Owner may panic if animal is not present
- Unique Interaction Guidelines
 - * **DO NOT SEPARATE ANIMAL FROM OWNER**
 - * Service animals are not pets
 - * No food, treats or even pets without owner’s permission

Continued on reverse side →

USE OF A SERVICE OR THERAPY ANIMAL

USE OF A SERVICE OR THERAPY ANIMAL

- Unique Interaction Guidelines (cont.)
 - * No proof of disability or service status of animal is required
 - * Muzzle is not required but leash or harness is
 - * Give benefit of the doubt and accept claim that animal provides a service, including therapy
 - * LAST RESORT: remove animal if out of control or threat to others after owner has tried to assert control
- Look for/Take with equipment/supplies
 - * Leash/harness
 - * Special “to go” bag or container for animal
 - * (Within reason) food, water bowl, bedding, toys
- Cross reference with any other apparent challenge(s)

USE OF A SERVICE OR THERAPY ANIMAL

ENVIRONMENTAL SENSITIVITIES

Environmental sensitivities range from genuine allergies to various forms of sensitivities to light, smell, taste, sounds, or touch. Severe reactions may be medical or behavioral or both. For some people, sheltering in place may be the only option.

- Possible Access/Functional Challenges
 - * Sirens, flashing lights, shouted directions may be overwhelming
 - * May fight or flee if overwhelmed
 - * May be unable to function if others are wearing scented products
 - * May have an anaphylactic reaction
- Unique Interaction Guidelines
 - * Avoid wearing and using scented products
 - * Open a window/keep doors closed (if possible)
 - * Look for signs of sensitivity such as low volume on TV, darkened rooms, presence of specialized equipment such as an air filter or nebulizer

Continued on reverse side →

ENVIRONMENTAL SENSITIVITIES

ENVIRONMENTAL SENSITIVITIES

- Unique Interaction Guidelines (cont.)
 - * Offer a face mask
 - * Flag the person's chart/other written information about sensitivities
- Look for/Take with equipment/supplies
 - * Special foods
 - * Specialized supplies (e.g., unscented hygiene products, hypoallergenic bedding, custom clothing)
 - * Specialized equipment such as a mask, respirator, air filter
 - * Earplugs or headphones
- Cross reference with any other apparent challenge(s)

BEHAVIOR/MENTAL HEALTH CHALLENGES

People may have behavioral or mental health challenges for many reasons. These challenges may not be apparent until they occur. They may occur suddenly, triggered by something you may not be able to identify. Do not judge/jump to conclusions (e.g., that s/he is intentionally trying to be difficult) because these challenges are out of the person's control.

- Possible Access/Functional Challenges
 - * May exhibit unusual behavior
 - * May become aggressive or have a “meltdown”/tantrum
 - * May be delusional
 - * May “fight or flee” inappropriate to the situation
 - * May threaten suicide
 - * May have voices inside his/her head that competes with yours

Continued on reverse side →

BEHAVIOR/MENTAL HEALTH CHALLENGES

BEHAVIOR/MENTAL HEALTH CHALLENGES

- Unique Interaction Guidelines
 - * Avoid exacerbating agitation. Terms like “calm down” may be triggers. Avoid threats
 - * Allow time for the individual to regain self-control if possible. Is there a quiet place?
 - * Ignore self-talk or other unusual behavior unless interfering with an emergency procedure
 - * Avoid trying to talk someone out of whatever they say they are seeing, hearing, or feeling
 - * Reiterate calmly that you are there to help
 - * Show interest and concern
- Look for/Take with equipment/supplies
 - * Medications
 - * Anything the individuals says s/he must have that is easily accessed
- Cross reference with any other apparent disability

PREGNANCY OR NEWBORN

Generally, pregnancy or the presence of a newborn does not constitute an emergency unless the newborn has had complications, the pregnancy is high risk, or the mother is experiencing post-partum complications (e.g., from a cesarean section or depression). If the woman is in labor and wishes to be/can be safely moved to a hospital or birthing center, this is an appropriate step to take.

- Possible Access/Functional Challenges
 - * Physical inability to participate in existing emergency plans
 - * Need for emergency medical care
 - * General need for specific training in how to support childbirth “in place”
 - * Situations where the woman does not realize she is pregnant
- Unique Interaction Guidelines
 - * Do not separate the mother and newborn
 - * Monitor vaginal bleeding
 - * Be extra reassuring

Continued on reverse side →

PREGNANCY OR NEWBORN

PREGNANCY OR NEWBORN

- Look for/Take with equipment/supplies
 - * Vomit bags
 - * Diapers, formula, baby clothes, bottles if used
 - * Nursing aids
 - * Blankets, pillows, and other items for warmth and comfort
- Cross reference with any other apparent challenge(s)

INTELLECTUAL OR LEARNING CHALLENGES

This broad category of access and functional needs includes individuals who will have difficulty understanding information the way it is presented (e.g., verbally, in writing, or even with pictures).

- Possible Access/Functional Challenges
 - * May not be obvious (e.g., inability to read, understand directions)
 - * Memory difficulties (ex., may not be able to report events accurately)
 - * May need more time to process/respond
 - * May not know names (of people, places, events)
 - * May not have vocabulary to describe people, places, events
 - * May have difficulty with multi-step directions
- Unique Interaction Guidelines
 - * If person misinterprets, ask respectfully (e.g., “Do you need me to _____?”). Wait for response if possible
 - * Try another way/Ask step-by-step questions without hints

Continued on reverse side →

INTELLECTUAL OR LEARNING CHALLENGES

INTELLECTUAL OR LEARNING CHALLENGES

- Unique Interaction Guidelines (cont.)
 - * Tell what will or is likely to happen honestly using everyday language. Provide additional reassurances, encouragement, updates, check-ins
 - * Explain written materials. Avoid “talking down” to the person
- Look for/Take with equipment/supplies
 - * Independence aids (e.g., lists, special stand-alone devices such as timers, med-minders)
 - * Any text-to-speech equipment such as iPhones, iPads, or similar devices
- Cross reference with any other apparent challenge(s)

BLIND/VISUAL IMPAIRMENT

There is a difference between visual impairment and blindness. Some people who are “legally blind” have some light, while others are totally blind. Even with corrective lenses, some people still are visually impaired. It’s okay to say “see” or “look.”

- Possible Access/Functional Challenges
 - * Inability to see emergency signs
 - * Inability to read emergency information
 - * May rely on Braille
- Unique Interaction Guidelines
 - * Announce your presence without shouting
 - * Do not grab or touch the person without notice
 - * Offer your arm and state that you’ve done so if moving
 - * Let the person choose to grasp your shoulder/arm or walk behind you for guidance
 - * Place person’s hand on the back of a seat or side of a vehicle for orientation
 - * Mention doorways, stairs, narrow passages, ramps, other obstacles
 - * Orient the person to any new location

Continued on reverse side →

BLIND/VISUAL IMPAIRMENT

- Look for/Take with equipment/supplies
 - * Special lenses; magnifier with or without lighting
 - * Adaptive text-to-Braille or text-to-speech equipment
 - * White cane
 - * Earplugs or headphones
- Cross reference with any other apparent challenge(s)

DEAF/HARD OF HEARING

There is a difference between hard of hearing and deaf. People who are hearing impaired vary in the extent of hearing loss they experience. Some are completely deaf; others can hear some sounds with hearing aids. Hearing aids do not guarantee that the person can hear and understand speech. They increase volume, not necessarily clarity. Only some may be able to read lips efficiently. There are different types of sign language.

- Possible Access/Functional Challenges
 - * Not hearing alarms or emergency broadcasts (e.g., closings, storm watches/warnings/advisories)
 - * Inability to hear/comprehend urgency or directions as intended
 - * May need interpreter services for specific type of sign language
- Unique Interaction Guidelines
 - * Flick lights to gain attention
 - * Use facial expressions and common gestures but, unless fluent, avoid attempting to sign
 - * Offer pen/pencil and paper
 - * Avoid blocking your mouth/turning away before finishing your communication.

Continued on reverse side —→

DEAF/HARD OF HEARING

- Look for/Take with equipment/supplies
 - * Hearing aids or amplifiers
 - * Extra batteries/battery charger
 - * Other adaptive equipment
 - * Sign language chart/booklet of common signs
 - * Flashlight to signal whereabouts if separated
- Cross reference with any other apparent challenge(s)

UNIQUE HEALTH OR COMPLEX MEDICAL NEEDS

For most people with unique health or complex medical needs, having those conditions is a way of life and not an emergency. However, those with these specific needs are typically at higher risk of requiring additional support or medical attention in the event of an emergency.

- Possible Access/Functional Challenges
 - * May be too weak to respond
 - * May require specialized equipment to remain as healthy as possible
 - * May not be able to identify every need
 - * May require access to different specialists on a regular basis (e.g., for wound care, blood level checks, medication adjustments)
 - * After seizures (post-ictal), may become belligerent, be disoriented, embarrassed
- Unique Interaction Guidelines
 - * Ask anyone who appears ill or weak if they can tell you how to help them best. Look for medical equipment/supplies (e.g., medication containers, oxygen tanks, insulin dispensers, other medical equipment)

Continued on reverse side →

UNIQUE HEALTH OR COMPLEX MEDICAL NEEDS

- Unique Interaction Guidelines (cont.)
 - * Time seizures, asthma attacks, pain episodes or other unique medical events
 - * Be sensitive to any statements made about pain, unusual sensations, other warning symptoms. If possible, allow person to do what s/he usually does when these occur
 - * During seizures, loosen clothing, remove glasses, move nearby objects, gently attempt to turn person onto his/her left side.
- Look for/Take with any identified or requested equipment/supplies
- Cross reference with any other apparent disability

MOVEMENT OR MOBILITY CHALLENGES

There are many reasons why some people experience movement/mobility challenges. Some were born that way while others may have acquired these challenges due to illness or injury. Some movement/mobility challenges (e.g., Parkinson's Disease) may come and go. Conditions like pain and spasticity can be affected by weather.

- Possible Access/Functional Challenges
 - * May require individual equipment or supplies to maintain independence
 - * May need unique "handling" to avoid serious injury
 - * May require additional physical assistance
 - * Equipment may be very expensive/difficult to replace if damaged
 - * Responders should (but may not have) special training
- Unique Interaction Guidelines
 - * Kneel or speak to person at eye level
 - * **DO NOT TREAT POWER WHEELCHAIRS LIKE NON-MOTORIZED WHEELCHAIRS**
 - * Ask how their movement/mobility challenge affects them
 - * Ask what devices improve independent

Getting up/down	Transferring	Stairs
Keeping pace	Walking	Carrying

movement/mobility

Continued on reverse side →

MOVEMENT OR MOBILITY CHALLENGES

- Unique Interaction Guidelines (cont.)
 - * Do not interfere with independence without asking and getting approval
 - * Offer assistance/accept rejection if possible
 - * Act as a buffer in crowds
 - * Use “in chair carry” if at all possible
 - * Turn power chairs off/disconnect battery if not being used independently
 - * Avoid pressure on arms, legs, chest
 - * Avoid “Fireman’s carry”/use one- or two-person carry techniques if absolutely necessary
 - * With stairs, respect the individual’s preference
- Look for/Take with equipment/supplies
 - * Crutches, canes, walkers, wheelchair, scooter
 - * Battery chargers for power equipment
 - * Artificial limb, braces, cushions, positioning devices
 - * Reachers, adapted utensils or other customized equipment
 - * Sleep props
 - * Transfer board or lift
 - * Other specialized seating or standing equipment
 - * Tray tables or wheelchair trays
 - * Adapted clothing or footwear
- Cross reference with any other apparent challenge(s)

AUTISM SPECTRUM

Autism is called a “spectrum” condition because it is extremely complex. Access and functional needs vary widely from person to person. Some individuals can talk. Others cannot. Some can take care of their personal needs. Others require much assistance. Some may have difficulty with changes in routine, have extreme interests or passions about specific topics, and/or be challenged in social situations. Some may rock, flap, spin, etc. (these are generally self-regulatory). Almost all comprehend everything going on around them but just can’t show it.

- Possible Access/Functional Challenges
 - * May be overwhelmed in an emergency
 - * May need visual cues
 - * Posture, behavior, and/or tone of voice may be misinterpreted as disrespectful (e.g., invading personal space, giggling, speaking too loudly)
 - * May not feel or be able to express pain
 - * May speak about unrelated topics
 - * Greater difficulty responding to requests or demands than in initiating behavior
- Unique Interaction Guidelines
 - * Some comprehend better when not required to “look like s/he’s paying attention”
 - * Avoid demanding eye contact
 - * Allow time for the individual to respond

Continued on reverse side →

AUTISM SPECTRUM

- Unique Interaction Guidelines (cont.)
 - * Don't assume (in)competence
 - * Visually look for environmental cues (e.g., about Autism Awareness," ALERT jewelry)
 - * Avoid correcting behaviors, removing objects
- Look for/Take with equipment/supplies
 - * Activity schedules
 - * iPad or other portable high tech electronic devices
 - * "Fidgets" such as koosh balls or other sensory supplies
 - * Weighted vests or blankets
 - * Special foods
 - * Devices that monitor wandering
- Cross reference with:
 - * Communication challenges
 - * Intellectual/learning challenges
 - * Environmental sensitivities
 - * Behavioral/mental health challenges
 - * Unique health/complex medical needs
 - * Use of service or therapy animal
 - * Dependence on others for personal assistance

Designed to Accompany:

Prep is Personal: Find the Fridge!

A Comprehensive Emergency Management Training Curriculum

Addressing Unique Access and Functional Needs

Designed for Municipalities, First Responders, and CERTs as well as People with Disabilities and Their Families, Friends, Assistants, and Other Support Providers.

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