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## **The National Study on Carless and Special Needs Evacuation Planning: Government and Non-Profit Focus Group Results**

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# **The National Study on Carless and Special Needs Evacuation Planning: Government and Non-Profit Focus Group Results**

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### Cover Photos:

Listed Left-to-Right

*Evacuation Chair*, <http://fems.dc.gov/fems/cwp/view,A,3,Q,638179.asp>

*Paratransit* by Terry Moakley

<http://www.unitedspinal.org/publications/action/2007/07/25/paratransit-love-it-or-leave-it/>

*Contraflow* by Michael DeMocker of the Times Picayune , New Orleans

[http://blog.nola.com/stormwatch/2007/05/buses\\_to\\_evacuate\\_any\\_who\\_cant.html](http://blog.nola.com/stormwatch/2007/05/buses_to_evacuate_any_who_cant.html)

*Shelter Cots* The Daily Edit 8/3/2008 <http://www.charlotteobserver.com/galleries/gallery/163216.html>

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## Acronyms

ADA	Americans with Disabilities Act
AICP	American Institute of Certified Planners
ARC	American Red Cross
BOMA	Building Owners and Management Assistant
CARD	Community Agencies Responding to Disaster
CERT	Community Emergency Response Team
CDC	Center for Disease Control
CDOT	Chicago Department of Transportation
CDSS	California Department of Social Services
CHART	Center for Hazard Assessment, Response and Technology
CIDNY	Center for Independence of the Disabled in New York
CMAP	Chicago Metropolitan Agency for Planning
COOP	Continuity of Operations Plan
CPHI	Community Partnership of the Homeless Incorporated
CTA	Chicago Transit Authority
DEM	Department of Emergency Management (San Francisco)
DEM&HS	Department of Emergency Management and Homeland Security
DOT	Department of Transportation
DPH	Department of Public Health
EMHS	Emergency Management & Homeland Security
EOC	Emergency Operations Center
ESF	Emergency Support Function
FEMA	Federal Emergency Management Agency
GNO	Greater New Orleans
GOHSEP	Governor's Office of Homeland Security and Emergency Preparedness (Louisiana)
HUD	Housing and Urban Development
IDPH	Illinois Department of Public Health
IHSS	In-Home Supportive Services
MOD	San Francisco Mayor's Office on Disabilities
MOU	Memorandum of Understanding
MTA	Metropolitan Transit Authority (New York)

MTC	Metropolitan Transportation Commission (San Francisco)
Muni	San Francisco Metropolitan Transportation Agency
NIMS	National Incident Management System
NOAA	National Oceanic and Atmospheric Administration
NYC	New York City
NYDIS	New York Disaster in Service
NYFD	New York City Fire Department
NYS	New York State
OEM	Office of Emergency Management (New York)
OEMC	Office of Emergency Management and Communications (Chicago)
OEP	Office of Emergency Preparedness (New Orleans)
OES	Office of Emergency Services (San Francisco)
RTA	Regional Transit Authority (New Orleans)
SEMO	State Emergency Management Office (New York State)
SEMS	Standardized Emergency Management System
STS	Special Transportation Services
SUASI	Super Urbanized Areas Security Initiative
TSA	Transportation Security Agency
UASI	Urbanized Areas Security Initiative
VOAD	Voluntary Organizations Active in Disaster
WCC	World Cares Center

## **Executive Summary**

This report summarizes focus groups, conducted during the fall of 2007 on the topic of carless and special needs evacuation planning, each with government officials and non-profit organizations in Chicago, Miami, New Orleans, New York and San Francisco. Groups were asked questions on challenges, strengths and resources; cross-jurisdictional relationships; and evacuation training and planning.

For all cities, findings include outreach and identification as the greatest challenge. Participants noted that while the dissemination of information is critical during an emergency, reaching vulnerable populations is quite difficult. Low participation rates during evacuations and cross-jurisdictional collaboration were also noted as major challenges.

This report identifies three types of collaboration, which include: 1) collaboration which intends to capacitate the community level emergency response; 2) collaboration efforts that occur between municipalities; and 3) collaboration which looks to a higher authority, i.e. federal government to overcome any cross-jurisdictional barriers that may exist between municipalities or other local agencies.

This study also found that preparedness has not only been a function of local disaster experience but also the national attention of large-scale disasters such as September 11<sup>th</sup> and Hurricane Katrina. However, while nonprofit agencies in New Orleans noted that Katrina probably resulted in local government being more prepared for future disasters, they also mentioned that they would not rely on government after previous experiences. On the other hand, nonprofit agency respondents in Chicago, which has arguably had the least experience with large-scale disasters, professed more of a blind faith reliance on government to meet the needs of vulnerable populations during a large-scale evacuation.

This report begins with a presentation of overall findings, followed by a summary of each focus group, with transcripts from each meeting provided in the appendix.

## Introduction

This report is the second in a series that examines carless and special needs evacuation planning across the United States. The first report, *Carless and Special Needs Evacuation Planning: A Literature Review* (Renne, Sanchez, and Litman, 2008) focused on reviewing the literature surrounding this emerging topic. This report presents the findings from a series of stakeholder focus groups<sup>1</sup> conducted from August to November 2007 in New Orleans, Chicago, New York, Miami, and San Francisco on the topic of carless and special needs evacuation planning. The findings from this study highlight issues faced by government and non-profit agencies as they plan for the needs and concerns of carless and special needs populations. We hope that this report is a step towards a more open dialogue, at the local, regional, state, and national levels, on identifying the issues and crafting better plans and policies that serve the most vulnerable populations during emergencies.

## Methodology

Before conducting the focus groups, the research team devised a methodology for selecting the cities to study. The team, which included input from seven researchers living in four different regions representing the Mid-West, East, South, and Pacific Northwest selected cities based on the following criteria:

- Diversity of geographic areas across the United States
- Types of possible natural and human-caused disasters
- Percent of the population without access to a vehicle
- Percent of the population in poverty
- Percent non-English speaking population

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<sup>1</sup> Although this document was released after the New Orleans' evacuation in response to Hurricane Gustav in August of 2008, the focus groups summarized herein occurred earlier, in 2007. The University of New Orleans Transportation Center continues to maintain an involvement in the city's evacuation planning efforts. Unfortunately, discussions regarding the Gustav evacuation will have to wait for future publications.



The team collected and analyzed data from several sources on 22 cities and regions. Demographic data was collected for both the central city and region. This data was compiled for each category and team members were asked to select their top five cities. The team then had a conference call and chose Chicago, Miami, New Orleans, New York, and San Francisco based on a collaborative decision-making process.

In each city, with the exception of San Francisco, the team conducted two focus groups – a government stakeholder focus group and a non-profit/community agency stakeholder focus group. In San Francisco, the team conducted a government focus group and participated in the San Francisco City and County Stakeholder’s Forum on emergency preparedness for people with special needs<sup>2</sup>, in lieu of a community focus group. This meeting discussed similar issues as the other non-profit/community focus group meetings but was organized by the City and County of San Francisco as part of a larger state-wide outreach effort on special needs emergency preparedness.

Prior to each focus group, the team established a list of possible participants. For the government meetings, the team reached out to emergency managers, transportation planners, transportation service providers, and health care professionals. This included city, county/parish, and state offices of emergency management and homeland security, transportation planning staff from cities, counties/parishes, metropolitan planning organizations, transit agencies, and state departments of transportation. The research team also reached out to city, county/parish, and state offices of health and human services. For the community stakeholder focus groups, invitations were sent to the American Red Cross, and leaders of non-profits that work with the homeless, the elderly, and groups that cross both physical and mental disabilities. The research team also invited organizations that provide

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<sup>2</sup> *The definition “special needs” used herein has been adopted in the National Response Framework and developed by the Department of Homeland Security’s Office of Civil Rights and Civil Liberties. Special needs populations are “populations whose members may have additional needs before, during, and after an incident in functional areas, including but not limited to: maintaining independence, communication, transportation, supervision, and medical care. Individuals in need of additional response assistance may include those who have disabilities; who live in institutionalized settings; who are elderly; who are children; who are from diverse cultures; who have limited English proficiency or are non-English speaking; or who are transportation disadvantaged.”*

transportation services, particularly for those with special needs. Finally, some of the focus groups included representatives from institutionalized housing, particularly nursing homes.

Upon identifying possible participants in each city, the team emailed and telephoned candidates to inform them about our study and encourage them to participate. In some cases, possible participants were asked if they knew of others that would be interested candidates. In other cases, participants suggested potential participants without any prompting. The team had to be careful to ensure broad representation without having too many participants, as focus groups lose their effectiveness with too many people. Ideally, focus groups work best with no more than 6 – 8 participants. Because of time and resource constraints, the team was only able to conduct a two – three hour meeting with each of the government and community stakeholder focus groups in each city.

Table 1 summarizes the number of participants of each focus group. Across the board, the focus groups had better participation amongst government stakeholders. This was most likely the result of several factors, including: 1) This was a federal government sponsored project, thus perhaps government employees felt more obliged to attend; 2) Nonprofit employees may have less ability to break free for an “academic” study; 3) The team responsible for recruiting participants had more experience in working with government employees; this may have limited the recruiting of nonprofit employees as participants. Despite a lower participation rate amongst community agencies, the information collected from all meetings was extremely valuable.

**Table 1: Summary of Carless and Special Needs Stakeholder Focus Groups**

<b>Focus Group</b>	<b>Meeting Date</b>	<b>Number of Participants</b>
New Orleans Government	August 16, 2007	10
New Orleans Non-Profit	August 16, 2007	12
Chicago Government	September 17, 2007	6
Chicago Non-Profit	September 17, 2007	3
New York Government	October 5, 2007	7
New York Non-Profit	October 5, 2007	5
Miami Government	November 5, 2007	6
Miami Non-Profit	November 5, 2007	6
San Francisco Government	November 27, 2007	7
San Francisco Non-Profit*	November 28, 2007	49

*Notes: The number of participants does not include the researchers or the ethnographers (note takers).*

*\* The San Francisco City and County Stakeholders Forum on emergency preparedness for people with special needs replaced our non-profit focus group.*

All participants who attended received emails providing an overview of the research project. They were informed that the format would be a guided discussion about the issues surrounding carless and special needs evacuation planning. Table 2 depicts the outline of questions used for the government and community focus groups. Dr. Pamela Jenkins moderated each focus group. Dr. John Renne, the Principal Investigator, played a supporting role in all focus groups and assisted Dr. Jenkins. It is important to note that while each focus group was guided by the questions listed in Table 2, the discussion was flexible enough to explore important related topics. In all meetings, the focus group moderator attempted to ensure a balance of sticking to the pre-arranged questions while allowing for important input outside of this script guidance.

**Table 2: Outline of Questions for Focus Groups**

**1. Challenges, Strengths and Resources**

- a. What is the biggest challenge that each of your agencies face in light of meeting the needs of the most vulnerable populations? What about specifically for the carless?
- b. What are the strengths of your agency in terms of evacuation for vulnerable populations? Does the agency have resources to allocate during emergency situations or do they rely on other agencies for resources? (i.e. buses, vans, trains, etc). Are their enough resources?
- c. What are the greatest needs of vulnerable populations?

**2. Cross-Jurisdictional Relationships**

- a. Are there strong cross-jurisdictional relationships? Who is the central partner agency during disasters? Which non-profits are crucial?
- b. What are the challenges in planning for cross-jurisdictional evacuations of carless and special needs populations?
- c. What are best ways for multi-jurisdictional agencies and entities to work together?
- d. Describe the agencies that are most critical to your evacuation activities, and how they assist the most vulnerable and/or carless populations?
- e. Which agencies do you partner with? Which agencies would you like to work with?
- f. What are the special needs of your partner agencies during an evacuation? *(For Government Groups)*

**3. Evacuation Training and Planning**

- a. Would the city be able to respond to a no-notice disaster? What would help it respond better?
- b. What is the one thing that would really aid your responsibilities in a mass evacuation event?
- c. Does your agency participate in training exercises? Does planning and training look at multiple types of disasters? Do vulnerable populations play a role in the exercises?
- d. Do you think Hurricane Katrina has changed people's reactions and behaviors regarding evacuation? What needs improvement? How did Katrina affect your agency's role?
- e. Does your organization have any plans for evacuating and/or caring for your members during an emergency evacuation? *(For Nonprofit Groups)*

Each focus group was recorded by at least two ethnographers (note takers). The notes were then combined onto one master transcript to ensure consistency. The team chose not to video or audio record any of the conversations to ensure that participants felt comfortable with sharing their opinions. The participants were assured that their real names would not be used in the final reports. Participants were given the opportunity to review the final transcripts for accuracy.

The final transcripts were summarized to show the key findings for each meeting as well as for the overall findings. In summarizing these focus groups, the transcripts were distilled into concise reviews of the discussions. Anyone interested in the detailed discussions should see the attached appendix of the transcripts. Again, the summaries are based on an interpretation of the important issues as presented by the focus group participants. This is particularly important to note because emergency preparedness and evacuation planning for carless and special needs groups is an emerging field that crosses many disciplines. The research team represents mainly the fields of planning, sociology, and engineering. Certainly, readers from other fields, including emergency management, health care, and public administration might view the transcripts differently from our perspective. Again, we invite all to read the actual transcripts in the appendix to form your own conclusions based on our limited sample of five cities.

## Overall Focus Group Findings

Several themes emerged when comparing the focus groups in participating cities. When questioned about challenges, participants noted that outreach and identification of special needs and/or carless persons are the greatest challenges. Low participation in disaster registries and assisted evacuations was also noted. Cross-jurisdictional issues and subsequent forms of collaboration were defining differences between the cities. Finally, the logistics of evacuation planning and training were identified as important issues. The following is a summary of each of these core issues.

### Greatest Challenges: Outreach and Identification

From all the focus groups, outreach and connection with community members were identified as crucial issues. Participants universally stated that dissemination of information is paramount for a successful evacuation. The public needs to be aware of the risk level, evacuation routes, and other important emergency response information. The focus groups reported that providing outreach with regards to evacuation is challenging. Many factors complicate outreach efforts within the special needs and carless populations. These populations tend to be quite diverse and have a variety of needs and demands that can be very dynamic and difficult to incorporate into evacuation plans.

Focus groups consistently used the term ‘outreach’ to represent a flow of information in two directions. Agencies reach out to the public with important information regarding the importance of evacuating early, the assistance available and how to access it. Outreach, especially in the government groups, encouraged personal responsibility for continual preparedness. This includes knowing how to evacuate, having ‘go-bags’<sup>3</sup> and emergency

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<sup>3</sup> *The New York City Office of Emergency Management recommends ‘go-bags.’ It is a backpack with the following: “copies of your important documents in a waterproof and portable container... extra set of car and house keys, credit and ATM cards and cash... in small denominations... bottled water and non-perishable food... granola bars, flashlight... AM/FM radio and extra batteries... list of the medications each member of your household takes... be sure to refill it before it expires, first-aid kit, contact and meeting place information for your household, and a small regional map, and child care supplies or other special care items.” On the other hand, an Emergency Supply Kit is intended for home-based sheltering. More information at: [http://www.nyc.gov/html/oem/html/get\\_prepared/supplies.shtml](http://www.nyc.gov/html/oem/html/get_prepared/supplies.shtml)*

supply kits prepared in advance of a disaster. In the Miami focus group, for example, participants noted that outreach is best achieved through a focused and consistent public information campaign.

Vital information also comes from the community. Carless or special needs persons need to communicate with the appropriate agencies so their needs can be met during an emergency. Most cities offer disaster assistance registries. Registries provide critical emergency resource planning information and a real opportunity for agencies to respond to individual needs, but it is clear from these focus groups that more attention needs to be spent on thinking through the logistics of how registries are set up and how they function during an emergency. The effectiveness of these registries remains suspect as respondents noted a number of issues with current systems. For example, in New Orleans, only a fraction of those needing the service have actually registered. In Miami, focus group participants noted that it would be impossible to provide evacuation services to 100% of its registrants in a single short-term evacuation.

The challenges with outreach were similar in each city. In Miami, agencies thought that low participation during assisted evacuations was partially due to reluctance on the part of undocumented immigrants. The challenge for Miami is convincing a reluctant population that the evacuation efforts during a disaster will not lead to deportation. Rapidly increasing Hispanic immigrants has also created outreach challenges in New Orleans, which has seen an increase in its Hispanic population post Katrina.

The focus groups report that targeted outreach needs to focus on the variety of needs and diversity of special needs for carless persons including seniors, disabled adults, the homeless, the socially isolated, the blind, the hearing impaired, those that do not speak English, the paraplegic, those in post-operative recovery, those that have difficulty reading, and populations with pets. Consequently, in Miami and New Orleans, pet shelters are now integral to emergency response efforts.

Beyond the primary identification of special needs persons are the complicated logistics regarding their evacuation. For example, those who use powered wheelchairs present very specific challenges particularly if they live on upper floors and if there is no electricity. Because of how evacuations evolve, the “principle of triage” must be avoided. During an evacuation, it is difficult to rapidly determine who is more or less able to evacuate, which is

one reason why disaster assistance registries can be so crucial. The registries, when utilized, allow responders to logistically plan for the needs of the registered persons. For example, in Miami, 2,500 people were registered for evacuation assistance. Such an evacuation would have to begin very early, possibly even before a hurricane's point of landfall has been accurately forecasted to meet the needs of the entire registry. Miami participants suggested that only 20 percent actually participated during prior emergencies. The Chicago focus groups also mentioned concerns over inadequate resources to conduct a large-scale evacuation and shelter the city's special needs population of approximately 30,000 individuals.

The identification of special needs or carless persons presents significant confidentiality issues. The public's concerns over confidentiality need to be appropriately addressed in order to avoid low rates of participation. Just as an undocumented immigrant may be reluctant to register with a disaster assistance registry out of fears of deportation, a senior may be equally reluctant out of concerns of the invasion of personal privacy.

Beyond disaster registries, cities recognize the importance of collaborations with the human service and nonprofit sectors in order to identify special needs persons. These groups, such as Council on Aging, agencies for the mentally and physically challenged, and congregations can be brought into the planning process. Some cities are going even further by recognizing the importance of emergency response at the local neighborhood level. In New York City, work has been done with doormen of apartment buildings and building maintenance unions to educate these workers regarding issues of aging residents. Through such pre-existing networks, people with special needs can be better identified. The creation of Community Emergency Response Teams (CERTs) and San Francisco's Community Disaster Response Hub concept are excellent examples of these efforts and will be discussed in more detail later in regards to their efficiency in bringing resources to a disaster area.



### **Additional Challenges: Low Participation Rates**

Despite intensive and comprehensive emergency evacuation planning, not every resident will evacuate. Even if a city were able to contact all special needs and carless individuals and have the resources necessary to evacuate every resident, some people will still choose to stay behind. During the focus groups, many reasons were discussed about reluctance to leave particularly ‘attachment to place’ and ‘complacency’. This has become evident in the case of hurricane evacuations.

Miami residents have been through Hurricane Andrew and Wilma, and consequently some do not feel as threatened. Transportation officials have seen evacuation buses go underutilized. For example, many people in Homestead, Florida stayed during Hurricane Andrew, which made a post-hurricane evacuation necessary. A post-hurricane evacuation followed Hurricanes Katrina and Rita in New Orleans and the Gulf Coast.

After Hurricane Andrew, the emergency planning efforts in Miami changed significantly. Many of these agencies’ plans were developed as a reaction to the hurricane. However, after a few seasons without strong storm landfalls, complacency was noted among residents. In recent evacuations, buses have been sent out, but they returned with lower numbers of people.

From focus group accounts, evidence suggests that many elderly persons think that they are safer in their home and would rather risk the effects of a disaster (of any kind) than go to a shelter or leave their neighborhood. Additionally, about 30 percent of the seniors in Miami are low income and justifiably afraid of the expense and the length of the evacuation. Seniors with pets may feel even stronger attachment to place and therefore resist evacuation efforts.

### **Cross Jurisdictional Relations: Collaboration**

Each city’s Office of Emergency Management (OEM) emerged as the central partner agency for evacuation planning efforts. During the focus groups, inquiries into cross-jurisdictional relations frequently revealed collaboration efforts which generally extend from the OEM and go in three possible directions: 1) collaboration which intends to capacitate the community level emergency response; 2) collaboration efforts that occur between municipalities; and 3) concentrative collaboration which looks to a higher authority, i.e. federal government to

overcome any cross-jurisdictional barriers that may exist between municipalities or other local agencies. Each city's efforts demonstrate one of the three collaborative directions.

From the focus group accounts, New York City recognizes that citizens are first responders, and as such may emerge as heroes. Many local agencies work with citizens to strengthen the community's emergency response. Particularly, the NYC Office of Emergency Management trains Community Emergency Response Teams (CERTs) which consist of volunteers who have passed an 11 week training program in disaster preparation and response. They are trained to handle initial emergency response before the professionals arrive on the scene. The CERT Program originated with the Los Angeles City Fire Department, California in 1985. The Federal Emergency Management Agency adopted the program in 1993 and has since held trainings in 28 cities nationwide including San Francisco which uses the acronym NERT, Neighborhood Emergency Response Team (see <https://www.citizencorps.gov/cert/about.shtm>).

New York's Office of Emergency Management has been a strong central partner agency for many organizations. The OEM has an innovative syndromic surveillance<sup>4</sup>, public cooling centers during heat waves, strong promotion of go-bags and emergency supply kits, and many other programs. Additionally, the OEM has established an online hurricane evacuation zone finder which advises people regarding risk and guides them to evacuation centers in the case of an evacuation of the general population.

San Francisco's OEM has innovative, community-based, collaborative programs as well. Considering that in many cases large emergency management structures fail, whether they are federal, state or even city, San Francisco is now moving from large-scale response to a balanced neighborhood-based response. The 'Community Disaster Response Hub Concept' came out of a community disaster planning working group. They were looking at how to strengthen community preparedness and response by increasing the ability for communities to be self-sufficient and to get the resources and the information that they need in a disaster event. The idea is that once the hubs are established in communities; they would be a central

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<sup>4</sup> Syndromic surveillance or outbreak detection involves the tracking of certain disease indicators in order to detect an outbreak early and implement appropriate measures. Some of the indicators that the NYC OEM uses are the following: the number of stool samples arriving to certain laboratories, sales of anti-diarrheal medication and other pharmacy sales data.

point around which to organize preparedness and bring organizations together, whether they are feeding programs, housing programs, health services, mental health services, etc. Once together, they can develop an understanding of how everyone would respond and what resources could be available. This will increase self-sufficiency and problem solving at the community level. The hubs would help communities to meet needs at the neighborhood level, where resources and expertise may already be in place.

Focus groups from Miami and Chicago discussed collaboration more in terms of cross-jurisdictional cooperation. The OEM's of each city do extensive work with outlying municipalities. Miami-Dade County Transit supplies evacuation buses to Monroe County (the Florida Keys). There are interesting dynamics related to only having one road leaving the Keys. One such consequence is that the entire population comes to Miami-Dade County, thus becoming part of the evacuation planning for Miami-Dade. Miami OEM also collaborates with other neighbors, such as Broward County, to perform emergency drills and understand evacuation service connections.

In Chicago, much of the planning has focused on the central city, however since 9/11 inter-agency communication has greatly increased and plans have more clearly defined roles and responsibilities for smoother cross-jurisdiction coordination. This is crucial in a metropolitan area with over 280 municipalities and real jurisdictional issues; where suburban areas may have less resources and coordination to handle emergencies, particularly industrial accidents which, ironically, are more probable in these areas.

The New Orleans focus groups emphasized an emergency response from the national level more so than any other focus group. They were concerned that as more and more agencies collaborate in an emergency response, the command structure would be lost. The participants noted that as the scope and severity of a disaster increases, the cross jurisdictional interactions of evacuation planning would also grow in number and complexity. While many organizations have coordinating capabilities, the structure of command authority and accountability would be less defined. Focus group members called for redesigning the national response system through a review of the resources, responsibilities, and roles of government agencies at the local, state and federal levels. Participants also suggested increasing systemic resiliency through emergency management alternatives. Some of the options offered include permanent federal facilities for sheltering and staging for response

personnel, equipment and supplies, as well as providing redundancy through construction of local facilities with secure emergency sheltering capabilities.

Nonprofit focus group participants in New Orleans thought that the government as a whole has been doing a better job planning for emergencies since Hurricane Katrina. However, the response failures to Hurricane Katrina taught these nonprofits to be more self-reliant, despite recent, upwardly-focused, collaboration efforts. Ironically, the nonprofit focus group participants in Chicago expressed less self-reliance regarding emergency planning and more confidence in the government, which has yet to be tested by a disaster of the magnitude of Hurricanes Katrina or Andrew.

The call for a structured command authority in New Orleans is a logical response to the Katrina experience. Focus group participants had experienced difficulties negotiating bus contracts due to legal issues of liability. In general, legal obstacles have strongly discouraged private sector involvement. For example, conflicts over buses have arisen between private evacuation contracts and public evacuation demands.

### **Evacuation Training and Planning**

The logistics of evacuations can be very complicated, and become much more complex when evacuations include special needs and/or carless persons. In New York City, there are 1.3 million seniors. Because of New York City's high urban density, a mass evacuation on foot could be the most efficient in the short-term. Unfortunately, this could mean people pushing wheelchairs out of the city. For those using motorized mobility devices, dead batteries could possibly leave people stranded waiting for ambulances. Furthermore, focus group participants agreed that people would be reluctant to leave behind personal mobility devices which are essential or highly specialized for personal needs.

The New York City Office of Emergency Management has been promoting the use of go-bags and evacuation chairs<sup>5</sup> in buildings. Additionally, the participants recognized that many options for evacuation need to be evaluated such as the potential use of boats, the use of

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<sup>5</sup> Evacuation chairs are essentially emergency-use wheelchairs specifically designed for traveling down stairs by sliding over top of them with the help of an assistant. The evacuation chairs are also designed for use in tight stairwells of tall buildings. Some models use tank-like rubber tracks that allow the assistant to control speed.

community resources, (school or church buses), and the confidential identification or registry of those in need of evacuation assistance.

The San Francisco focus groups discussed weaknesses in their evacuation planning. For example, City officials carry information cards at all times so that in case of a disaster they can come together, shuttled by the Coast Guard, in order to manage the event. This last-minute-event-management scheme has shown weaknesses during simulations which include issues such as reliance upon computer networks which may be down. Although San Francisco has made significant progress toward organizing a community-based response, participants agreed that intergovernmental agreements regarding transit utilization for assisted evacuations are not entirely firm. These are “gentlemen’s agreements” that do such things as try to quickly put every available transit driver into the nearest city vehicle in the case of a disaster. However, much vehicle training would be needed for drivers that can be difficult to mandate and implement.

The Chicago focus groups discussed extensive emergency planning efforts, preparation and mock-event simulations. However, carless and/or special needs evacuation simulations have not been executed.

The Miami focus groups expressed concerns over emergency communication’s dependence upon potentially unreliable telephone networks. The participants discussed the importance of maintaining an intact organization which can provide services throughout an emergency, which is facilitated by internal plans called Continuity of Operations Plans (COOP). The most prevalent portion of any COOP should be the designation of duties for city employees, as discussed in many of the government focus groups.

The New Orleans nonprofit focus group did not have a consensus regarding planning and preparation. They commented that they have experienced greatly increased disaster response capabilities on the part of the government. However, in the end, they thought that they would have to rely upon themselves in the case of a large ‘no-notice’ disaster. Ironically, this goes against the concentrative collaboration model, which was evident in the New Orleans government focus group.

American Disabilities Act (ADA) compliance was discussed extensively in many of the focus groups. It has implications for evacuation and sheltering. San Francisco has begun building a database of ADA compliant facilities throughout the City, which could serve as shelters during emergencies. An ADA compliant evacuation, however, was thought to be nearly impossible given the resources available.

## **Conclusion**

The focus groups have highlighted many important planning issues facing the participating cities. The issues are systemic to evacuation planning for special needs and carless populations throughout the United States. The challenges surrounding jurisdiction, outreach, education, participation, registries, inclusion and collaboration with regards to evacuation planning are the same challenges many cities will face as they undergo the crucial task of planning for the evacuation of special needs and carless populations.

The collaborative efforts, typically stemming from a city's emergency managers, extend in three possible directions: 1) collaboration which intends to capacitate the community level emergency response, as seen in New York and San Francisco; 2) collaboration efforts can occur between municipalities, as seen in Chicago and Miami; 3) collaboration which looks to a higher authority, i.e. federal government to overcome any cross-jurisdictional barriers that may exist between municipalities or other local agencies, as seen in New Orleans. These collaborative efforts are developed in response to the specific risks and experiences of each city.

The challenges are inherent regarding special needs and carless evacuation planning. It is unlikely that one jurisdiction would have all the resources necessary to conduct an evacuation and provide shelter for large-scale emergencies. The exchange of information between emergency managers and the special needs public is hampered by cultural barriers, language barriers, low participation, confidentiality issues, inclusion, and even the choice of communication medium. The special needs and carless populations tend to be quite diverse and have a variety of needs and demands that can be very dynamic and difficult to incorporate into evacuation plans.

## **Individual Focus Group Summaries**

## **Focus Group Summary: Chicago Government**

National Study on Carless and Special Needs Evacuation Planning , September 17<sup>th</sup>, 2007

The Chicago government focus group was attended by representatives from private and public entities, including the Chicago Department of Transportation (CDOT), American Red Cross (ARC), the Chicago Transit Authority (CTA), the Chicago Metropolitan Agency for Planning (CMAP), and the Illinois Department of Public Health (IDPH).

The focus group participants discussed recent events in Chicago including the 1995 heat wave, the 1992 flooding of the central business district, and the 9/11 building evacuation. The flood event offered Chicago practical experience with a partial evacuation. Additionally, a large number of Katrina evacuees moved to Chicago, thus requiring an expansion of the city's communication capabilities.

Participants discussed Chicago's extensive emergency planning, preparation and mock-event simulations. However, we found that carless and special needs evacuation simulations have not been completed. Chicago Metropolitan Agency for Planning (CMAP) has considered the mobility of low income populations. They have geographic data for these carless groups and have been developing travel demand models for evacuations. Participants noted that in assisted evacuation planning, it is important to distinguish between two broad categories: temporarily carless and permanently carless. Both offer distinct challenges. In the specific category of those needing medical assistance, many issues would arise if strangers were to assist them to evacuate. Regular caregivers best know their clients, however they themselves may be evacuating. Chicago American Red Cross (ARC) assists 1,500 clients with 600 staff members and a fleet of vehicles. They would face two major challenges in the event of evacuation: loss of staff due to evacuation and limited communications to coordinate their evacuation with the city's efforts.

Communication was identified as a major obstacle by all focus group participants. The difficulties in identifying the public's needs and informing them about transportation options are made more difficult due to social isolation and language barriers. Participants discussed how to overcome these barriers to inform the public. People need to know their options, the seriousness of the disaster, where to go to be evacuated, and where they will be evacuated to. Another important communication issue mentioned was that people should be kept informed



about when they could potentially return home. While evacuation plans should encourage people to make plans for themselves and their families first and foremost, agencies should know who the evacuees are, where they are from, and their medical needs.

In Chicago, evacuation routes are not public information due to security concerns. The nature of disaster planning in Chicago is focused upon no-notice emergencies, and publicizing routes could compromise public security. Therefore, people would not know where to go during an event. However, participants did note that evacuation routes would essentially be snow routes, which brought up the issue of the snow's effect on a mass evacuation.

Considering the variety of events which could require full or partial evacuations, participants stated that planning is a major challenge. One participant mentioned that a library of scenario-specific evacuation plans would be necessary. A few particular events in the recent history of Chicago were discussed: the 1995 heat wave, the 1992 flooding of the central business district, and the 9/11 building evacuations. One important discovery during the flood was the need for good maps and knowledge of the old, out-of-use tunnel system under Chicago. Additionally, since 9/11, inter-agency communication has greatly increased; and, plans more clearly define roles and responsibilities for more efficient emergency coordination.

An important distinction was made regarding the Chicago area and emergency preparedness; participants noted that cities are much better prepared than suburbs. The disturbing irony is that many suburbs may have a higher risk from industrial accidents. Much of the planning to-date has focused on Chicago itself, particularly downtown Chicago. Coordination becomes very important in the entire Chicago area which contains over 280 municipalities. Neighboring police, fire and water departments may have cross-jurisdictional planning barriers, such as literally being on separate emergency radio wavelengths. The responsibilities and abilities of neighboring agencies can vary greatly in this region. Participants felt that future emergency planning needs to assess these regionally varying strengths and weaknesses. Statewide planning needs to be appropriate for distinctly rural or urban areas. A need for an inventory of services was also recognized.

In conclusion, the Chicago government focus group dealt with specific challenges to carless and special needs evacuation planning. Efficient and reliable communication was considered

paramount, particularly regarding the need for immediate education of evacuees. Two important obstacles to planning were recognized: the enormous variety of disasters which could possibly befall the Chicago area and the large number of distinct jurisdictions which could be involved. Finally, while participants noted an enthusiastic response to the success of their plans, they also noted that these plans have not been tested during a large scale emergency.

## **Focus Group Summary: Chicago Nonprofit**

National Study on Carless and Special Needs Evacuation Planning, September 17, 2007

The Chicago Non-Profit Focus Group included representatives working with disaster response and advocacy for the disabled: American Red Cross and Access Living of Metropolitan Chicago. Group members agreed that greater outreach to vulnerable populations is necessary to create inclusive plans and to educate residents about available assistance. Participants reported increased networking between governmental and non-profit agencies within Chicago, yet noted less cooperation and coordination outside city limits, particularly within suburban areas. Representatives expressed a lack of experience with large scale disasters and a high degree of reliance on city government to design and implement evacuation procedures.

Chicago's large population and corresponding large numbers of people with special needs pose a difficult challenge, as disaster response workers confirmed that vulnerable populations depend on outside assistance more than the general population, and reported difficulties in identifying and addressing specific needs of special needs residents. A disability advocate estimated that the city's disabled population includes 30,000 individuals and worried that the availability of accessible transportation and shelters would not meet the demands of a large scale evacuation. A recent flood revealed communication weaknesses with deaf residents unable to hear emergency announcements on public transit vehicles. Furthermore, live television broadcasts were not closed captioned. Participants recounted progress towards the creation (with some stumbling blocks) of a special needs registry by the City Office of Disabilities. They further noted resistance by building owners to install emergency lift chairs for the disabled in building stairways.

When asked about jurisdictional issues, participants agreed that inter-agency relationships have become more formalized with an increased use of official agreements, such as a memorandum of understanding with city or county officials. However, they noted that coordinating responses to emergencies outside of the city had been more difficult due to differing perspectives on resources and responsibilities. For example, the public transit system's authority ends at the county border, while hospitals operate independently with incompatible record systems. This makes information sharing a significant challenge during an emergency if populations should need to disperse. Participants also called for greater communication with elected officials, as the public often turn to local representatives for

information. The group emphasized that partnerships increased the availability of resources, such as a relationship between Motorola and ARC that improved communications during a flood by providing funding including radios.

Though Chicago has not experienced a disaster on the scale of New York City's September 11<sup>th</sup> terrorist attacks or New Orleans' flood following Hurricane Katrina, local non-profit agencies have learned from these events, as well as their own experiences with smaller scale floods and an evacuation of the downtown area during 9/11. Participants expected to depend on local government to coordinate any emergency response, particularly the City Office of Emergency Management and Communications. Because Chicago's evacuation plans and shelter locations are not public information, non-governmental involvement relies upon direction from local authorities in the event of an emergency. Representatives worried that issues of emergency preparedness are not recognized and prioritized, resulting from a sense of complacency within the region. However, as Chicago plans to compete for the Olympics in 2016, members expected a greater future emphasis on emergency preparedness.

## **Focus Group Summary: Miami Government**

National Study on Carless and Special Needs Evacuation Planning, November 5<sup>th</sup>, 2007

The Miami Government Focus Group was attended by representatives of Miami-Dade County Department of Emergency Management & Homeland Security (EMHS), Miami-Dade County Transit, National Oceanic and Atmospheric Administration (NOAA), Florida Department of Elder Affairs and Miami-Dade Housing Agency. EMHS manages the evacuation assistance registry for people with special needs that need help with evacuation. Miami-Dade County Transit manages over 100 regular bus routes and 22 miles of rapid transit. NOAA offers a breadth of services including daily weather forecasts, hurricane warnings, climate monitoring, and networking to provide emergency planners with reliable information. Florida Department of Elder Affairs is the state agency responsible for managing elderly service programs and coordinates with 45 providers regarding disaster and contingency plans. Most of their clients are homebound with caregivers; however, they also operate elderly outreach programs. Miami-Dade Housing Agency manages 10,000 rental units, half of which are elderly, plus 18,000 units subsidized through Section 8 and other programs.

EMHS works closely with Miami-Dade County Voluntary Organizations Active in Disaster (VOAD) to ensure effective coordination between government and nonprofit agencies. Additionally, they have a seat at the Emergency Operations Center (EOC) in order to help when seniors call who are not part of any provider networks. This effort was in response to the observation that many seniors who are usually independent did need help during an emergency situation.

The EMHS has 2,500 people registered for evacuation assistance. The department thought there would be severe difficulties associated with an evacuation involving 100% of this registry, all 2,500 people. Therefore they have considered sheltering-in-place as well, because such a large evacuation would have to begin very early, possibly even before a hurricane's point of landfall has been accurately forecasted. Anecdotal evidence suggested that only 20% of the registrants actually participated during prior emergencies.

Focus group participants were asked, "What's your greatest challenge?" The response from the representative of the Miami-Dade Housing Agency was the lack of funds necessary to deliver services to the most in-need clients. The Housing Agency dealt specifically with

clients and not the general public. In their experience, tenants resisted evacuation efforts, particularly the elderly with pets.

The Florida Department of Elder Affairs representative concurred that many elderly persons have been concerned because the shelters are ill-equipped. The elderly are typically better equipped to meet their own needs at home, and they would rather risk danger in their home than go to a shelter. Often, such dispersed groups of vulnerable people would not respond to evacuation efforts. Additionally, undocumented immigrants have been reluctant to come forth due to a culturally systemic distrust of government and fears of detainment or deportation. The best way to approach the issue of low evacuation participation has been through outreach. Regarding this, one participant mentioned, “Keep it focused and keep it out there.” The EOC does an incredible job getting out applications to special needs residents, such as disabled adults, the blind, the hard of hearing, the paraplegic. Even pet shelters have now been considered to be an integral part of evacuation services.

The Miami-Dade County Transit representative discussed the resilience of the residents who have been through Andrew and Wilma, and consequently did not feel threatened during more recent storms. For many, living with hurricanes has become a way of life. Even transit officials have seen that evacuation buses are underutilized, because people often do not want to evacuate.

Participants noted an additional challenge facing the EMHS is a unified message from all agencies involved. For example, in the past, many agencies had instructed people to drive to Georgia, which was dangerous advice because people could have been ‘caught’ by the hurricane on the road. The appropriate action is to go inland, to West Miami-Dade. The logic is to shelter-in-place those residents who live outside flood zones.

Emergency planning efforts in Miami were greatly impacted by Hurricane Andrew. Emergency preparation became a top priority for government. Many of these agencies’ plans were developed as a result of the storm. However, after a few seasons without strong storm landfalls, complacency is common; most people would not believe it would happen again. During recent evacuations, evacuation buses have been sent out, but returned with very few people.

Collaboration efforts were discussed by the focus group in response to the question, “Cross-jurisdictionally, what’s the biggest challenge with another county or state?” EMHS, an agency with very strong cross-jurisdictional collaboration, mentioned a strong concern regarding their client’s wait time. Participants noted that additional collaboration efforts were important, such as focus groups similar to this one. For example, at the 2005 National Hurricane Conference (held pre-Katrina) there was a discussion about mitigation for hospitals. A representative of a New Orleans hospital was advised to place all important equipment on the third floor. The EMHS representative stated, “If you did that, you’d be OK even if the levee broke.”

Miami-Dade County Transit supplies evacuation buses to Monroe County (Florida Keys). They collaborate with neighbors, such as Broward County, to perform emergency drills and understand evacuation service connections. The importance of networking and simply “knowing who to call” was considered a “critical time gap.” Nevertheless, during an evacuation everyone has been quick to act, to get resources to the road and coordinate service connectivity. Monroe County works very closely with Miami-Dade County Department of Emergency Management and Homeland Security, EMHS, as well. There are interesting dynamics related to only having one road leaving the Keys. One such consequence is that the entire population evacuates to Miami-Dade County, thus becoming the responsibility of Miami-Dade.

The Housing Agency’s work is primarily related to supplying food, generators (especially for elevators), and many other forms of post-disaster assistance. In such a scenario, County Transit would supply mobility to their clients, who live in 10,000 units located throughout 100 sites. The site managers of these properties have met with clients with special needs to request that they inscribe to the disaster assistance registry. For those that join the registry, Special Transportation Services, (STS) Miami’s Paratransit Service, will be there to evacuate them. Participants noted that the pre-planning was done well. Although, it was suggested that post-disaster planning may need improvement. After Hurricane Andrew, for example, the Housing Agency moved people from Southern Dade County to the North. After a lengthy wait for federal funds, most people never moved back.

The Housing Agency assists people for whom an evacuation would be prohibitively costly. Participants mentioned that approximately 30% of the seniors are low income. Most of

which, wouldn't evacuate because they fear not being able to get back into their homes and the expense associated with evacuation.

Ironically, although complacency may be common among residents, the public agencies and even businesses are giving emergency planning serious consideration. For example, hospitals and nursing homes are mandated to plan for evacuation planning in Miami-Dade County. Requirements ensure that the facilities have mandatory evacuation plans and two agreements with receiving facilities. Ambulance licensing requirements mandate that private ambulance companies assist in evacuations. EHMS sends out the evacuation list and the Red Cross coordinates the evacuation of such hospitals and nursing homes. Three major hospitals, Homestead, Mercy and Mount Sinai, have been cleared to shelter-in-place through a category five hurricane.



## **Focus Group Summary: Miami Nonprofit**

National Study on Carless and Special Needs Evacuation Planning, November 5<sup>th</sup>, 2007

The Miami Nonprofit Focus Group of the National Study on Carless and Special Needs Evacuation Planning was attended by representatives from Community Partnership of the Homeless, American Red Cross (ARC), Miami-Dade Office of Emergency Management (EOM), National Oceanic and Atmospheric Administration (NOAA), the Miami-Dade Voluntary Organizations Active in Disaster (VOAD) and others.

Community Partnership of the Homeless (CPHI) provides assistance to homeless persons who can stay in their facilities up to 6 months. Evacuation transport is provided from their facilities, with arrangements for special needs and general populations. Special needs persons are evacuated first. They have records of all 300 residents and an emergency supply pack for each one. Their hurricane shelter has a capacity of 430 to include those who don't normally use the facilities but would in the case of an emergency. It even has a dog kennel for 40-50 dogs but no cats are accepted.

The American Red Cross (ARC) provides personnel for general population shelters. They try to accommodate special needs when necessary. ARC does presentations and distributes literature particularly to the elderly. ARC noted that people prefer direct contact and presentation over simply reviewing literature alone. ARC practices year-round preparedness and work with the Alliance for Aging and others to get access to the elderly population.

'Hands on Miami' is part of the Points of Light Foundation and Hands On Network, a volunteer civic engagement organization. They have partnerships with ARC and Miami-Dade County. They noted that there is a four-hour training for DART teams (Disaster Assistance Response Teams) to lead and coordinate volunteers post-disaster. However, as participants noted, this pre-storm training and volunteering does not cover transportation issues.

The focus group participants discussed some of the difficulties regarding special needs evacuation planning, particularly the issue that many people would resist an evacuation. Many people, such as seniors with pets, experience a strong attachment to place and denial that evacuation is necessary. Constant education is crucial to overcome this obstacle. It is important that people with special needs register for assistance. Elderly and migrant

populations are the most vulnerable and often miss opportunities to receive assistance. They often do not come forward for assistance that they are eligible for because they do not know about it. Participants also noted that many migrants resist help from agencies, without distinguishing between governments or nonprofits. These are difficult barriers to overcome, which are further complicated by language barriers.

The Miami area is composed of many different municipalities with independent agencies such as law enforcement. Collaboration becomes very important. Integral to this is communication. People, groups and agencies all depend upon telephone systems, which can go down and seriously disrupt the execution of plans. Focus group participants expressed sincere concern over communication during emergencies.

The participants discussed the importance of maintaining an intact organization which can provide services throughout an emergency. This internal plan is called the Continuity of Operations Plan (COOP). Nonprofit agencies in Miami who receive funding from the United Way are required to have a COOP. One successful national model is that of Starbucks' COOP. Two years ago Starbucks started training to bring coffee to facilities throughout Florida. Volunteer Organizations Active in Disaster (VOAD) has trained over 200 Starbucks employees. They noted that they had ten more companies lined up to repeat the Starbucks model. Many companies, such as banks, are interested in developing COOPs in order to maintain operations during emergencies.

Emergency responses and evacuations can be very costly for nonprofit agencies. Funding sources become very important. VOAD obtained a grant from the Peacock Foundation, a State Farm grant for youth summer camps, which includes service learning. Eight hundred hurricane kits were assembled and dropped off at senior facilities by children. CPHI has memoranda of understanding with ARC and other agencies for ten trucks, forklifts, and food. They noted that Cisco had prearranged contracts with these agencies. Additionally, big companies have been lending support, like Wal-Mart, Home Depot and Target. Such corporations are increasingly becoming involved.

## **Focus Group Summary: New Orleans Government**

National Study on Carless and Special Needs Evacuation Planning, August 16<sup>th</sup>, 2007

The New Orleans Government Focus Group included representatives from the City of New Orleans Department of Homeland Security, the Mayor's Office of Emergency Preparedness, New Orleans Regional Transit Authority, US Department of Transportation, Federal Highway Administration, New Orleans Regional Planning Commission, State of Louisiana Office of Homeland Security and Emergency Preparedness, State of Louisiana Department of Social Services, and a private bus company, Hotard Motor Coaches. Participants recognized progress with improved evacuation plans, yet cautioned that issues of identifying, locating, and communicating with carless and special needs populations remain problematic due to liability concerns. Legal obstacles continue, potentially discouraging private sector involvement. While participants identified improved coordination between area first responder agencies, they called for a clearer intergovernmental planning process and relationship.

When asked, "What are the biggest challenges in meeting the evacuation needs of the carless?" the consensus of the focus group was, "Identifying people who need assistance, communicating with them about what assistance is available and how to access it, and convincing them to use that assistance to leave early." Pre-identifying the needs of the population is necessary to allocate resources appropriately. Larger demographic categories, such as 'carless' must be subdivided into more detailed descriptions, matching the needs, numbers, and locations of people with available resources. When moving a population, the demographic needs of evacuating locations may be different than the resources of destination locations. One participant from the State of Louisiana Office of Homeland Security and Emergency Preparedness pointed out that the infrastructure for medical care varies across areas, with some destinations lacking the capacity to meet the health care needs of evacuees, such as methadone patients evacuated to a city lacking relevant facilities.

Private sector issues include conflicts between private evacuation contracts and public evacuation demands, as one bus operator noted that a bus contracted to transport hotel occupants was diverted by law enforcement, with no reimbursement received. A local emergency management planner worried that liability concerns and reimbursement difficulties encourage a philosophy of risk avoidance in both public and private sectors. Massive population relocations may overwhelm the limited excess capacity of private transportation and healthcare providers. The bus, airline, and hospital industries are primarily for-profit

enterprises, driven to increase efficiency, through decreasing underused inventory, which results in less vehicle availability and flexibility in times of increased demand.

As the scope and severity of a disaster increases, the cross jurisdictional interactions of evacuation planning also grow in number and complexity. While many organizations have coordinating capabilities, the structure of command authority and accountability is less defined. Focus group members called for redesigning the national response system through a review of the resources, responsibilities, and roles of government agencies at the local, state and federal levels. Participants also suggested increasing systemic resiliency through emergency management alternatives. Some of the options offered included permanent federal facilities for sheltering and staging for response personnel, equipment and supplies, as well as providing redundancy through construction of local facilities with secure emergency sheltering capabilities.

Focus group participants listed improvements in areas of local evacuation planning, coordination and communication. However, members reported difficulties with identifying and communicating with populations who need evacuation assistance. Private sector participation may be discouraged by vulnerability to lawsuits and insecurity of reimbursement. Participants felt that large scale disasters require a state and federal response which may be hindered by current structures of coordination and command, as well as the distribution of responsibilities and resources.

## **Focus Group Summary: New Orleans Nonprofit**

National Study on Carless and Special Needs Evacuation Planning, August 16<sup>th</sup>, 2007

The New Orleans Non-Profit Focus Group included representatives from area non-profit organizations working with disaster response, and homeless, elderly and disabled residents such as: American Red Cross of greater NY, Center for Independence of the Disabled in NY (CIDNY), Voluntary Organizations Active in Disaster (VOAD), and the World Cares Center. Participants reported progress since Hurricane Katrina in public sector evacuation planning for carless and special needs populations in both government and non-profit sectors, as well as improved communication within and between organizations. However, members detailed continuing difficulties in identifying, locating, and educating vulnerable residents, along with concerns regarding the availability of appropriate transportation resources. Representatives perceived self reliance as necessary, and called for increased outreach to vulnerable populations including the elderly, disabled, homeless, non-English speaking and immigrant groups, service providers such as law enforcement, health care providers (including mental health and addiction services), clergy, neighborhood associations and community groups.

Participants agreed that the City of New Orleans' evacuation plan has improved, as has coordination and communication between government agencies at the local, state, and federal levels. All organizations reported having evacuation plans for staff, along with the resources necessary for implementation. Additionally, all but one of the organizations represented had conducted training on the execution of their evacuation plan.

Non-profit representatives described a carless and special needs population that is diverse and dynamic, with a variety of needs and changing levels of demand. While the post Katrina elderly population has decreased, the number of homeless residents and those with limited English proficiency has increased dramatically within New Orleans. Identifying, locating, and communicating with carless and special needs populations is hindered by the constant transience of these groups. Complacency due to past experience or perceived safety was cited as a concern, and an advocate for the elderly stated that only 1,600-1,700 people have registered for the 311 emergency information and assistance system.

Members reported that negotiating bus contracts is problematic due to legal issues of liability and insufficient transportation resources such as accessible buses, vans, and ambulances.

Participants feared that evacuation costs would overwhelm financial resources, while a representative of privately owned nursing homes, estimated that non-refundable evacuation costs average \$60,000-70,000 per facility. Issues of security, credentialing policies for shelter access, and tracking of evacuees were concerns shared by focus group members.

Some participants asserted that improvements to coordination and communications, though focused towards hurricanes, have increased general disaster response capabilities. However, most focus group members answered, “No”, when asked, “Can New Orleans respond to a no-notice disaster?” In the event of a disaster, participants expected to rely on themselves rather than the government or non-profit sectors. As one member stated, “We have to take care of ourselves. We’d like to rely on our partners, but you can’t guarantee it.” In summary, New Orleans has seen better government preparation and more nonprofit self-reliance since Hurricane Katrina.

## **Focus Group Summary: New York Government**

National Study on Carless and Special Needs Evacuation Planning, October 5<sup>th</sup>, 2007

The New York Government Focus Group was attended by representatives of the New York Office of Emergency Management, Metropolitan Transit Authority (MTA), Mayor's Office for People with Disabilities, Bureau of Community Outreach and Emergency Preparedness, Department of Long Term Care and Active Aging, and finally the New York State Department of Transportation.

The participants agreed that the biggest challenge facing evacuation planning in New York City (NYC) is limited transportation. The City does have paratransit service, door-to-door, shared-ride service for disabled persons, and Access-A-Ride. However, these services represent only a small fleet and would be inadequate if faced with a large scale evacuation. Participants noted that, NYC has 1.3 million seniors, which makes addressing everyone's transportation needs very difficult. Furthering the problem is that many vulnerable persons are not connected to any outreach program, such as meals on wheels, through which they could possibly be identified for assisted evacuation planning purposes. The MTA was concerned that if buses were utilized to provide services to special needs persons it would take away from the fleet available for the general population. Additionally the buses are not designed to take a large number of wheel chairs. One participant noted that, Hospital transportation services have greater capabilities to assist disabled persons. Unfortunately, even when counting all available fleets, there is still not an adequate supply of transportation for everyone in NYC. This stems from the fact that nearly 60% of NYC households do not own a car.

Mass evacuation on foot could be the most efficient, and was effective during the September 11<sup>th</sup> attack. Unfortunately, this would mean people pushing wheelchairs out of the city. For those using motorized mobility devices, dead batteries could seriously complicate matters possibly leaving people stranded waiting for ambulances.

Focus group participants were asked about changes within their organizations following Hurricane Katrina. The responses included further emergency plan follow-up, a new focus on how emergencies affect vulnerable people, and even a push within the OEM and the Mayor's office for a design competition of temporary houses for use in New York.

Focus group participants were asked, “What are the strengths of your agency in terms of evacuation and vulnerable populations? Does the agency have resources to allocate during emergency situations or do they rely on other agencies for resources?” In response, the representative of the Bureau of Community Outreach and Emergency Preparedness mentioned that they contract services through community-based organizations. They are a small agency but have the technology to reach out to the public. For example they have worked with building doormen and maintenance unions to educate workers on issues of aging. Through this pre-existing network, special needs can be better identified. Additionally, multi-use buildings have business information cards which can help to identify special needs persons in the building. The details regarding these cards were not elaborated.

Participants discussed the Mayor’s Office for People with Disabilities as having a policy focus, serving as a mechanism to facilitate the OEM to create better communications with a group of agencies and nonprofits in NYC. They felt that the OEM is a resource of knowledge and technical referral.

The MTA has much strength to bring to the table. They have run simulations with the NYPD and are prepared to handle much of the general evacuation. Thus, other agencies could be free to focus on vulnerable populations, which the MTA is not well equipped to handle.

Hospitals have been doing emergency planning since September 11th because they were the first receivers. Their strength is their very dedicated staff. However, they face obstacles regarding Homeland Security funding (hospitals have to work to receive the little funding they receive).

The New York State Department of Transportation was discussed as having strength in actual disaster preparedness, such as planning efforts and operational planning efforts with the State Emergency Management Office (SEMO) and also the OEM of NYC. They are adamant about ADA compliance in all of their facilities yet do not have a specific way to target efforts at special needs populations. They also have a first response capability aimed at the actual management and assistance to keep facilities operational.



The ADA rules presented obstacles during the blackout of 2003. MTA was restricted from picking up certain passengers who were “not eligible”. Sometimes liability issues exist. NYC, as is every city in the country, is supposed to have an ADA transition plan, which includes such things as curb cuts/ramps. If the ADA transition plan were fully implemented, it would go a long way towards fully facilitating able-bodied and disabled mass evacuation on foot. Additionally, it would be an important step towards getting information from the deaf and blind. Beyond that, symbols should be utilized in order to convey directions to children or the cognitively challenged.

The strength of the OEM of NYC is in bringing all these agencies to the table. Participants felt they were doing an excellent job at coordinating efforts that could resolve such complicated questions, such as: how many evacuees will be assisted? Where are they going? Who will provide food? How long will they stay? Where will they go afterwards? And finally, how will they get there? The OEM coordinates with many services including Community Emergency Response Training (CERT), the City’s sophisticated syndromic surveillance, heat wave cooling centers, a strong promotion of go-bags and emergency supply kits, and many others. The OEM has established an online hurricane evacuation zone finder which advises people regarding risk and guides them to evacuation centers in the case of an evacuation of the general population. When asked about the agency who people would call first during an emergency, everyone noted that the OEM is the first and central point of contact.

## **Focus Group Summary: New York Nonprofit**

National Study on Carless and Special Needs Evacuation Planning, October 5<sup>th</sup>, 2007

The New York Non-Profit Focus Group was attended by representatives of the American Red Cross (ARC), Center for Independence of the Disabled (CIDNY) and the World Cares Center (WCC). The WCC works with agencies, local governments and community groups to prepare citizens to be a part of their communities' emergency response. The CIDNY provides services for the disabled, particularly emergency preparedness, in an advisory role making sure they are brought into the development of emergency plans from the beginning. They advocate that the disabled be "part of the general plan rather than the exception." The ARC provides emergency relief and works to assist the prevention, preparation for, and response to emergencies of outside the disaster-affected area.

One of the most common problems, agreed upon by the participants, is the identification of special needs people; who they are; where they are; and confidentiality issues. Yet, beyond the primary identification of special needs persons are the complicated logistics regarding evacuation. For example, those who use scooters present very specific challenges particularly if they live on upper floors and there is no electricity. In light of such specific needs, the focus group participants all agreed, it is crucial to avoid the "principle of triage" (saving those you can and leaving the less-able to be saved last) because it is inherently flawed. It is impossible to rapidly determine who is more or less able to evacuate. Furthermore, such a preferential treatment constitutes discrimination.

The identification of carless and special needs persons is problematic but not impossible. Many of the people with disabilities are living throughout the City and many of them utilize agencies, caretakers and social networks (such as churches), but not all. These groups have been and can further be brought into the planning process. However, even with such coalitions, many people may still not be taken into consideration regarding emergency planning. For example, during a recent subway flooding incident, deaf people couldn't hear the emergency instructions. Thus the medium to deliver important messages must also be taken into account for all residents. Unfortunately, even people without auditory disabilities function fine within their element, but often don't know what to do in an emergency situation.

The focus group agreed about the importance of convincing people to begin think about such situations and decide what they would do. The self-empowerment focus must reach all communities so they understand it is their responsibility to develop their own evacuation plan. When people consider their options and make plans, identification of carless and special needs persons becomes easier for all the agencies involved because people are searching them out.

Faced with an emergency, some people may also emerge as heroes. More often than not, citizens are the first responders. The ARC, WCC and CIDNY all work with communities to encourage all citizens to become such heroes. The World Cares Center (WCC) was created after September 11<sup>th</sup> because of the need to create a better method for forming spontaneous volunteers, who could be anyone, have better tools to respond to an emergency. Additionally, the NYC Office of Emergency Management trains CERTs which consist of volunteers who have passed an 11 week training program in disaster preparation and response. They are intended to handle initial emergency response before the professionals arrive on the scene. Focus group participants discussed the need to continue training and retraining the CERTs.

Participants further mentioned the need for continued training regarding mobility devices of disabled persons, particularly not separating disabled persons from such devices. Although the focus group was not familiar with the details of any city-assisted evacuation plan for people with special needs, they did express concern regarding a heavy reliance upon taxis or buses and what that could mean for persons dependent upon mobility devices. The consensus was that many people would not be willing to leave a mobility device behind in order to evacuate.

Attachment, such as to a mobility device, is not exclusive to disabled persons. Participants noted that many people feel attachment-to-place and resist evacuation. People may even tend towards the red zone in order to help, as seen during the September 11<sup>th</sup> attack.

As noted above, The World Cares Center was founded post 9/11 to prepare citizens to be a part of their communities' emergency response. However, Katrina changed the WCC's perspective on responsibilities. All participants discussed how extensively complicated it can become to reach citizens. There are language barriers, people who are afraid of government and many others whom are difficult to reach. As discussed, possibly the best alternative is to

present emergency options in a clear manner at the time of evacuation and let the evacuees 'self-identify'.

Participants agreed that in general, a large scale evacuation would be seriously problematic. However, regarding general emergencies, a lot of planning has been done to promote the preparation of such technologies as go-bags and evacuation chairs. When such technologies are made available, their use is intuitive. However, a large scale evacuation is not intuitive and requires planning. Many options for evacuation need to be more thoroughly evaluated such as the potential use of boats, the use of community resources such as school or church buses and, as mentioned before, the confidential identification of those in need of evacuation assistance. Despite concerns, planning does not necessarily need to focus on the specific details. Emergency planning can focus on providing for a need that is known to exist.

## **Focus Group Summary: San Francisco Government**

National Study on Carless and Special Needs Evacuation Planning, November 27<sup>th</sup>, 2007

The San Francisco government focus group was attended by representatives of the Metropolitan Transportation Commission (MTC), the Municipal Transportation Agency (MTA), the San Francisco Office of Emergency Services and Homeland Security, Veolia Transportation and Paratransit.

Like all regions, San Francisco offers unique challenges. The vulnerability of bridges and frequency of earthquakes were the most poignant examples discussed among the group. San Francisco has done extensive planning in regards to these specific concerns. Participants noted that terrorist attacks in New York turned the nation's efforts in that direction; then Hurricane Katrina had the effect of bringing some of the focus from terrorism back to natural disasters. Funding and attention for disaster planning have increased, thus enabling San Francisco to do important disaster planning. This led to the MTC receiving a grant to purchase satellite phones.

Planning for carless and special needs evacuations remains in the developmental stages in San Francisco. Mechanisms and regional networks are in place to do event-specific tabletop planning at the onset of a disaster. All government employees carry information cards at all times so that in case of a disaster they can come together, shuttled by the Coast Guard, in order to manage the event. This last minute event management scheme has shown weakness during simulations which includes such unforeseen things as pet handling and reliance upon computer networks which may be down during an actual disaster.

San Francisco has been looking at carless and special needs evacuation planning and preparedness. Being in the early stages, they face logistical issues, such as identification of needs, public notification, route planning, shelter locating and carrier contracting. Focus group participants agreed that intergovernmental agreements regarding transit utilization for government assisted evacuations aren't entirely firm. These are "gentlemen's agreements" that do such things as try to quickly put every available driver into the nearest city vehicle in the case of a disaster. However, much vehicle training would be needed for drivers, which is difficult to mandate and implement. The transit agencies with limited staff have resisted

requests for training by the United States Transportation Security Agency (TSA) because they cannot justify back-filling positions merely to cover training sessions.

The focus group mentioned their concerns over employees missing work due to personal evacuation. Interestingly enough, in San Francisco the mayor and the governor made a video tape which reminds government employees of their duty to serve during a disaster.

The focus group ended with recognition of the need to expand their network. Strong regional planning exists among agencies. Yet, there was much discussion of strengthening and collaborating with nongovernmental and community groups. Community members are typically the first responders to events. Their roles in communities and neighborhoods should not be taken for granted.

## **Focus Group Summary: San Francisco Nonprofit**

San Francisco City and County Stakeholder's Forum, November 28<sup>th</sup>, 2007

*In lieu of the Nonprofit Focus Group in San Francisco, the National Study on Carless and Special Needs Evacuation Planning was able to fulfill the objectives of the focus group through attendance in the San Francisco City and County Stakeholder's Forum. The forum was called to discuss disabilities issues during emergencies. Additionally, the invitee list of the forum corresponded with the list of those who would have been invited to the Nonprofit Focus Group.*

The forum was led by the Mayor's Disability Council, a body of citizens with disabilities, who was appointed by the Mayor to provide feedback and policy recommendations regarding disability issues. In 2002, following the aftermath of Katrina and Rita, the Disability Disaster Preparedness Committee was formed. They decided the City needed to take some active steps towards preparing for disasters in regards to people with disabilities. A disaster shelter accessibility checklist was developed that took the generic ADA requirements checklist and boiled it down to some of the most basics. Then, 82 shelter sites were identified, including 38 fully accessible sites, 37 partially accessible sites and 7 inaccessible shelter sites. In many cases shelters were classified with restricted accessibility because there was just one step or one threshold that could easily be mitigated with a small ramp or maybe the doors are too heavy. The forum recognized the need for more sites and, participants noted they are always looking for appropriate shelters to add to the database, such as congregation facilities or gymnasiums that can hold 50-100 people.

One of the major issues during Hurricanes Katrina and Rita was that people who needed personal assistant services or accommodations were sent to special shelters. Thus special shelters were overly impacted; and people with disabilities were not necessarily able to move from one location to another. San Francisco had therefore decided that people with disabilities need to be integrated into the general population shelters with all the appropriate accommodations. Although the intention is to integrate evacuees, there had been some discussion of separated areas for those with allergies, those utilizing service animals or those with chemical sensitivities. Documentation and training has been prepared for shelter managers regarding assisting seniors and disabled persons.

Medical shelters are also needed in order to handle evacuees of hospitals or care homes. For example, some people are in immediate need of medical attention after an injury or those recovering from surgery. There is much to consider regarding medical facilities, for example, people on life support or breathing apparatuses need electricity.

The Disability Disaster Preparedness Committee looked at evacuations for special needs persons as well. They defined evacuations as their biggest challenge or ‘Achilles heel,’ in their own words. They have made recommendations to have buildings over three stories equipped with evacuation chairs. But, special needs evacuation planning has been relatively avoided. The committee recognized the need to move towards planning the transportation aspect, which would include ramp taxis, lift-equipped municipal buses and the paratransit vehicles.

San Francisco has also considered public emergency notification systems that reach all people. Traditional siren systems are effective, but not for the deaf or hard-of-hearing. The City procured a Roam Secure system, or as it’s called ‘*Alert S.F.*’. It will provide text messages to text pagers or text cell phones. Therefore, the same emergency message is available to everyone who uses *Alert S.F.* Outreach regarding the notification system has become crucial to ensure that people are, in fact, using it. Additionally, it is crucial to offer captioned TV announcements during emergencies.

Although training and planning of special needs evacuations were lacking, a representative from the Red Cross noted that they were able to do a shelter drill in which about 90 percent of the volunteer evacuees were disabled persons. It was an excellent learning experience for many of the volunteers who had never been exposed to a person with a disability. The diversity of disabilities presented among volunteer evacuees was impressive; they ranged from traumatic brain injuries, speech impediments, paralysis, deafness, and others.

The central partner agency was identified as the Mayor’s Office of Emergency Management. Forum participants discussed collaboration efforts and the importance of planning in a consolidated and unified manner. This is particularly useful to avoid confusion among community partners such as worship centers whom have been contacted by a variety of different offices and agencies looking to utilize them as respite centers. Although these efforts may appear very uncoordinated from the outside in, many agencies are working



closely together. One example of these collaborative efforts is a shelter database, which contains information about the characteristics of available shelters.

Many participants in the forum felt that planning efforts could go much further to include all stakeholders. Planning efforts related to the 1989 Loma Prieta earthquake were quite comprehensive regarding their inclusion of first responders such as the fire department and emergency medical services, as well as the Housing Authority, the Ombudsman, the Mayor's Office on Disability, nonprofits and actual citizens. Some participants were concerned that recent efforts, following Katrina, have not been as inclusive. In response to this concern, mention was made of the importance of community-level responses. In many cases large emergency management structures fail, whether they are federal, state or even at the city level. Therefore, San Francisco is now moving from large scale response to a community-based, neighborhood-based response. They were looking at how to strengthen community preparedness and response by increasing the ability for communities to be self-sufficient and to get the resources and the information that they need in a disaster event. Much of this planning considered the existing programs such as NERT, Neighborhood Emergency Response Team, training program offered by the fire department for approximately the past 14 years. Such Community Emergency Response Teams which are essentially the same as NERT's in San Francisco, originated by the Los Angeles Fire Department in 1985; they are promoted nationally by Citizen Corps and Department of Homeland Security. These teams are basically neighbor helping neighbor in response to disasters.

## **Appendix: Transcripts**

## **Transcript: The Chicago Government Focus Group**

National Study on Carless and Special Needs Evacuation Planning, September 17, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Nicole Buras, Ethnographer/note taker

Henri Dugas IV, Ethnographer/note taker

### Participants:

CTA Rep., Chicago Transit Authority (CTA)

CTA Rep2., Chicago Transit Authority (CTA)

CMAQ Rep., Chicago Metropolitan Agency for Planning (CMAQ)

CDOT Rep., Chicago Department of Transportation (CDOT)

ARC Rep., Chicago American Red Cross

IDPH Rep., Illinois Department of Public Health.

*(In creating this Transcript, three sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by any two note takers.)*

### Transcript:

CDOT Rep.: Transportations Project that impact transportation deal with feasibility of studies. Deals with the movement of people and goods. For example freight CBD especially alleys. ADA committee's streets in the city now down town first.

CDOT Rep.: Chicago DOT (Department of Transit): Deals with feasibility studies, passenger and freight transportation. Works with ADA Committee to make streets more accessible to people with disabilities.

ARC Rep.- Chicago ARC works with people with developmental disabilities. Serves 1,500 people per day.

CTA Rep2.- Chicago Transit Authority- Works in operations. Works on Central Business District (CBD) evacuation plan.

CTA Rep.: Both from the CTA (trains and business in city). Pace does disabilities. Under the bus system it handles 1 million people, and trains service about ½ million. Also, from a survey we service 40 suburbs with the metra which is a heavy rail.

John R: Metra is regional.

CTA Rep.: yes from federal funds. Has RTA oversight, funding, transportation for transit; 3 agencies, pay suburban buses, metra computer rail.

John R: mentioned that CMAQ Rep. might be running late

John R: Introduced the project, noting that his background is with planning and he works with the University of New Orleans, further noting that Pam is a Sociologist. The project is for disaster planning at the University of New Orleans. Transportation work.

CTA Rep.- Chicago Transit Authority (CTA), works on safety, emergency preparedness issues.

CMAP Rep.- Chicago Metropolitan Agency for Planning; Works programming and operations; Safety and security- emergency preparedness. Working on Travel Demand models for evacuation planning.

IDPH Rep.: Illinois Department of Public Health. Works on emergency preparedness

Note: CTA Rep2. and CMAP Rep. arrive around 1pm

John: Started over. Mentioned that they are seeking how people are evacuated if someone does not have their own car. Discussed the timeline of the project, mentioned they are in the first stages. They are seeking to learn different states evacuation planning for the car less society. Households that do not have access to automobiles. Impossible to evacuate city without automobiles like in the case of New York. Chicago is an area that is least likely to have to evacuate the whole city. Issues possibly face is terrorist attacks, biological, and industrial. Natural vs. Non natural.

Note: John asks if they live in the city. CTA Rep2. says he does, CTA Rep. says he does not.

Pam J: Oversee buses and trains?

CTA Rep.: Yes

Pam J: Number of people served, train over a million, buses little under half a million

CTA Rep.: We hear that you're the way out of the city, don't tell me about it now, but I bet you have an evacuation plan

John R: Is Metra part of RTA?

Note: David provides information on the RTA and the other system

CTA Rep.: RTA simply does oversight and funding for transit. There are 3 independent agencies that are overseen by them, CTA, Pace, Metra (suburban rail, basically commuter rail)

John R: Should we wait, apologies for interrupting, we have another person coming

Pam J: We can begin a little

Note: John Renne explains the project, car-less being a broad term which describes anyone who cannot drive.

Note: CDOT Rep. and Tom Bertha from CDOT enters

Pam: Continued by discussing the process of what will happen after the meeting today. She explained that they will send copies of the notes, and each will be allowed to edit the notes. Try to make as painless as possible. EPA last year gave to  
PJ introduces herself and explains her role and the purpose of the focus role and the purpose of the notes. PJ introduces NB and HD

CDOT Rep.: Transportations Project that impact transportation deal with feasibility of studies. The movement of people and goods, for example freight CVD especially alleys. ADA committee's streets in the city now down town first.  
BM deals with products which affect transportation and feasibility, the movement of people and goods in Chicago. Also works with ADA working on accessibility.

Pam: City position?

CDOT Rep.: yes

Pam: Went to speak.

ARC Rep.: ARC did training in Washington; they did training for people with developmentally disabilities.

ARC Rep.: Chicago ARC, disabilities, individuals live in work homes. People vulnerable because dependant on staff in an event. Deal with 1500 people a day. Amer. Red Cross hosted meetings on dealings with developmentally disabled

CTA Rep2.: Transit authority, in operations, contract maintains. He explained that he works with John in developing plans.

CTA Rep2.: CTA, spent most of time in operations. Spent time on daily plans and evacuation plan.

CTA Rep.: Service major systems safety. Many jobs started as a different authority. Now over see construction and contract safety emergency preparedness and management.

CTA Rep.: senior management, moved through various positions, some safety, mainly oversee construction, contract safety through all projects, and emergency. Management and evacuation procedures

CMAA Rep.: Chicago Metra Agency Planning was chief transportation planner, was putting together process was focused with people who low incomes.

CMAA Rep.: I work at Chicago Regional Metropolitan ... chief transit planner.

CMAA Rep.: Had a concentrated focus on low income and (providing folder to Pam)

Pam: Have documented where they live?

Pam: You have them mapped?

CMAA Rep.: Yes

John Renne: sorry didn't catch that.

CMAA Rep.: Identifies areas with low incomes and mapped to provide mobility

IDPH Rep.: IDPH Rep., with Illinois department of public health.

IDPH Rep.: Emergency response coordination for the Il Dept of Health. All hazards plan for emergency response.

ARC Rep.: Asked question based on data by census.

ARC Rep.: Are these areas in your map areas we would normally, having lived in CHICAGO, know about already or could devise?

Pam: Said really need to move because only have time for specific topics.

Pam: Let me stop you, ....

CMAAP Rep.: Have models, some models on evacuation.

Pam: Were any of you in your positions during the 1995 heat wave?

Pam: Were anyone of you in your position for the 1995, do I have the right year, heat wave?

Entire Group: yes.

John R: (Explains carless slant and poses question about carless evacuation.)

Pam: Questions: A) Biggest problem with carless? B) Biggest problem if there were a disaster today?

CMAAP Rep.: Made a go around motion with his right hand and asked John to define car less.

CMAAP Rep.: People in the loop are technically car less, we include them?

John R: Car less, is one that does not have a car but also takes into consideration special needs. Special mobility needs, even people with mental health problems. Very broad and don't have access.

John R: Would included because no accessory also discussion of people with special needs.

John R: I would, later we'll talk about people who have difficulties or cannot.

Pam: Also not get out on their own.

Pam: Very good, temporary car less vs. permanently. What is the greatest challenge with the car less?

Pam: We'll differentiate between temporarily carless and permanently carless.

Pam: What's the difficulty in your position?

CMAAP Rep.: Communication, out reach to identify needs, but know about transportation options; people also socially outside as language.

CMAAP Rep.: Communication, getting to know them and passing information to them. Language barriers.

CMAAP Rep.: A) Communications, letting people know about transportation options. People are socially isolated.

Pam: Now disasters.

Pam: Take that to a moment of disaster. Biggest problem?

CMAAP Rep.: Communication

Pam: What's the difficulty in your position? (to CTA Rep..)

CTA Rep.: Communication but that is a two way street. Understand needs!

CTA Rep.: Communication, two way street, understanding all of their needs and our organization. Learning how to best serve them, playing to their needs not around them

CTA Rep.: A) Identifying needs and planning to their needs

Pam: Identify and plan to it, will come back to plan to. What is immediate challenge?

Pam: in event of disaster, biggest challenge?

CTA Rep.: Getting information to the people to where they should go. To service needs we have different options. Example local and like round but patient street closure. Have to pick up to move. Worst case scenario: two block walk then get pick up by the bused. Who are they? Where they came from? What are medical needs? We do not do, city offices and other city agencies. We are basically are carries.

CTA Rep.: same as general pop. Getting information to them as to where they should go. Depending on the degree of seriousness, the level of the disaster, we have different options. Localized, we pick them up on the corner, pretty much the way we normally do. Street closures, figure out where to pick them up. Mass, walk out to pickup point. ATC (assembly of Transportation Center) 12 blocks W of loop, then be bused to are where you can be assisted. We don't do this, but city office and other city agencies will take the helm for this. We all have a role in this. We're basically just the carriers.

CTA Rep.: B) Getting information to those groups as to where they should go. If the downtown were shut down- there would be a walk out where people would be picked up and transported to an ATC (Alternate Transport Center)

CTA Rep2.: Far be it for me to disagree with John. One issue I would focus on, Education! Pick-up at UOC so communication and education on evacuations. How tell where we are going, what we need to do?

CTA Rep2.: one of the issues you heard JP touch on, which I would focus on is educating people. We pick them up and they don't know where they are or where there going. Where they need to go next, how to educate. Educate?

CTA Rep2.: Immediate education of the evacuees. People won't know where they are.

Pam: Have discussed Front and Back Shelter?

Pam: shelter in place?

CTA Rep.: Not shelter, just move people.

CTA Rep.: no, received immediate assistance and move on.

ARC Rep.: 3 overall. 1) We are dependent on staff that works for us. If they feel a need to leave they leave, so they can take care of their own needs. Need staff to take care of needs have. So, need to know these people. Problem for people because acts out if stuff does not stay to help. 2) Communication to different sites. Have internal transportation department, to have to utilize if can tell.

ARC Rep.: dependant on staff, staff may feel that they may need to leave to take care of own needs. We need the staff. Our people know our clients and they need to be there and have issues which assist us to have someone who know them if strangers are assisting. Staff. Communication, our communicating to our different cites. Fortunately we have a fleet, if we

could tell people where to go. We can move from home to home which is different from wider spread event. We have 600 staff, if they're gone, then we're in bad shape (conversation with Pam J.)

ARC Rep.- Overall we are dependent on our own staff that work for us. They may want to go home to take care of their own needs. Our 1,500 clients feel comfortable with out staff.

Our communications can be a problem. We have a fleet of vehicles that can be utilized if we tell them where to go.

Pam: Asked about residents.

ARC Rep.: Residents rest worked. Certain neighborhoods move one to 3 other locations, we have contingency plans. Issue if larger because staff may leave.

Pam: That happens in New Orleans.

ARC Rep.: If leave in bad shape.

CDOT Rep.: Agreed with what everyone had to say. Then she asked CTA Rep2., "What is the next step from there?" (She spoke with a strong, harsh tone.) Needs to do before so not training on cite; need someone from OEMC

CDOT Rep.: Agree with BN, seems we need a way to convey to the public prior to the disaster. More appropriate for you to have OEMC.

CDOT Rep.: I'm going to concur with everyone else and say communications. We need to convey to the population before a disaster strikes.

Pam and John sent for several and never got back?

John R: sent to Jodie Chapman, but no response

IDPH Rep.: Said knew her (person from OEMC)

IDPH Rep.: I agree with what everyone else has said about communications. From the state prospective, we assist local governments.

CDOT Rep.: Need to address specific needs also variation in plan to address.

CDOT Rep.: must be a plan which has variety for specific communities.

IDPH Rep.: Agreed and message from health department; role is to protect the health of the public. Example we have a high nexus need to get down and have a move have plan. We assist in health department so go into all together. Issue with special needs tonight something have looked at, but more functional.

IDPH Rep.: agree with communication and messaging, Health Dept would be to assist the health of the public. Have a plan, from the State perspective to assist the agencies when they become overwhelmed locally. The issue of special needs, we've been struggling with is that at the state level. We've been working with a functional definition.

Pam: Morning session mentioned high rate population in nursing homes. True?

Pam: We learned about this morning is that there is a high rate of nursing home residents, creates a different kind of planning.

Pam: Question: We learned there is a high number of nursing home residents in Illinois.

IDPH Rep. and ARC Rep. nodded.



IDPH Rep.: agree with staffing issues, (examples of issues)

IDPH Rep.: Important with staff shows up etc. Doing to DVC dispersing criteria.

CTA Rep.: SNS Exercise in 2005

CTA Rep.: OMC have the ability to reverse 9-1-1, to get in touch with people. Larger populations of dual households works. Open?

CDOT Rep.: Only land line?

John: yes, OEMC has the ability to use reverse 9-1-1. It should work for residential and businesses. They have been testing evacuations year-by-year.

Reverse 9-1-1 is only in the city for land lines.

IDPH Rep.: Does work for bus. Anyone in area who has a bus number, John can give number to alert tents, have a number of different programs. Enter and educate evacuees testing this year. Couple of years ago conducted stock piling. Working elements with me have been adjusted plan.

Pam: What have you learned from the three disasters? Meaning the heat-wave, 9/11, and Katrina?

Pam: What leanings came from the three disasters (HK, 9/11, heat wave)?

Pam: Question: Did September 11th or Katrina change the way you do business?

IDPH Rep.: I have to think, can you come back.

CDOT Rep.: Not specify, not here in 1995.

ARC Rep.: Have done some administrative back-up computers, pay stuff, and move administrative offices.

Pam: Good place to start. 9/11 and Katrina.

ARC Rep.: 9/11 and Katrina because keep a lot of data, so have a back-up. Example now have stuff when programs actually from New Orleans.

ARC Rep.: Hurricane Katrina and 9/11 affected us.

ARC Rep.: We have started doing things different with respect to administration. How do we pay people, etc. This came out of 9/11 and Katrina, not the Chicago Heat Wave. Is something happened, we would hear more information post-disaster.

ARC Rep.: So can reach people, medical, pictures, disabilities can give information to officials.

ARC Rep.: (continues)... information in the system for disaster.

CTA Rep2.: Heat waves not much, 9/11 did central business evacuation, 1992 Hood evacuation. Both gave hands on evacuation to what to do and how get to people. 1992 no plan, but 9/11 did write what and how to do. After Katrina when received evacuation education people.

CTA Rep2.: Heat emergency did not have affect, 9/11 affected us with evacuation, the CBD flood of '92. Both event gave us hands on learning experience. We used our experience in both of these to really put down on paper what we could do. When CHICAGO received Hurricane Katrina evacuees.

CTA Rep2.: Heat emergency in '95 did not have an impact. Flood in 1992 and downtown evacuation in 9/11 both gave us practical experience for a CBD evacuation. We were able to practice communication skills with Katrina evacuees.

Pam: Helped evacuees?

Pam: Sounds like you guys did a good job with our evacuees

CTA Rep.: Did by subway, or attack on Tokyo. FTA run for safety. Corner address safety, fine department have has mate team to support fire department. We are there after Fire Department accesses the safety to work rail roads. CTA Rep2.'s operation was good RST, and caused to address.

CTA Rep.: Some of them stayed we did so well. Also the saran attacks in Tokyo, because it was on a subway. We have our own hazmat team, fire department has main responsibility for hazmat in Chicago and the surrounding cities. We enter when the FD says it's safe to enter and we can assist. Also the operation post-Hurricane Katrina, caused us to adjust some of them.

CTA Rep.: The subway attack in Tokyo made the CTA look at security in trains. We have our own Hazmat team, but fire department has the primary responsibility for Hazmat. We tried to learn how to <inaudible> messages, but each situation is so specific. We actually practiced this on 9/11.

Pam: What worked with evacuees?

Pam: You evaluated what happened with the plan

CTA Rep.: It caused us to bring our plan to the table. We got more from air travel as opposed to others who drove. We revived an old mental health facility.

IDPH Rep.: Tinley,...

CTA Rep.: Majority of evacuees who drove, where as thought would drive. Worked PACE. Who takes who where, worked with people who have no relatives. Work with people at mental health facilities. Start down used. PACE outside in cities we took. ARC, etc call there.

CTA Rep.: Yes, not only us but Red Cross, cities were in all one location.

Pam: Learned messaging

Pam: You learned the mechanisms of how to do messaging during this evacuation?

CTA Rep.: Learned to package, but survivors drove. Do get to practice even if have a glitch. When send for information specialist to take alternate. What if evacuate the entire city; did for 9/11. Works well, but dependent on when event occurs. (Referring to the time of the year.)

CTA Rep.: Yes, but their so specific, we could have a library Of each different one. Our big issue is evacuating THE entire city. We put people in the streets during the 9/11 evacuation. It worked, but it was affected about when and where it happens. Rush hour, time ramp up

CMAAP Rep.: Right

CTA Rep.: Awhile, but rush hour.

CTA Rep2.: If Sunday, good luck reaching people.

CTA Rep2.: Snow emergency, if it happens on a week day, then they have to stay, if on Sunday, good luck

Pam to CMAAP Rep.

Pam: So staffing

CMAAP Rep.: Long term planning. Big lesson 1992. Discussed tunnel system was not really good mass. This has become a good book about tunnel systems that came after the flood. Searcher called everyone.

CMAAP Rep.: The best lesson I learned was flood of '92. Because of very disused tunnel system. Knowing the system became very important.

CMAAP Rep.: The big lesson I learned came from 1992 Flood. The cause of the '92 flood was a not-used tunnel system that we didn't have a good map for.

Pam: Go? How do you reach?

Pam: Respond to the question about disaster.

IDPH Rep.: Since 9/11 move internal agencies, corrections, all emergency partners, Illinois national guard etc. Tight development of Illinois emergency plan. A lot done Pan FLU, what to do if Pan FLU, isolation in time. How can keep people in place? Illegal?

IDPH Rep.: Since 9/11 more intercommunication. All of our emer. Partners IL State Police, IL, transportation, IL national guard. Tightened plans. Tighter development of plans which spells out roles and responsibilities. Pan flu has been a lot of discussion and what to do, legal things have been tried to work out in legal.

IDPH Rep.: Since 9/11 we have had more emergency coordination: State police, DOT, National Guard, State Corrections

CDOT Rep.: Pandemic flu?

CDOT Rep.: A lot of the planning we have done is for pan-flu. How do you keep people in place.

ARC Rep.: Received something today.

ARC Rep.: I got an e-mail today about a flu, I haven't opened it yet.

All laugh and remark on that comment.

IDPH Rep.: A lot around Pan FLU. A lot of executive partners? Push trade with NIMS. Is 210,000 etc. and lets not disregard hospitals. Scream for prescreened messages. Metra MCAC. Hospital Course CHI taking a look at roles of ESF 8 & 6 for mans care special needs.

IDPH Rep.: 5 locations where exercises take place using all partners (IL list above) really ramped up. Lets not forget the hospital b/c they play a big role. MHC. Metropolitan Hospital Council.

IDPH Rep.: We had large exercise in 2005-Push towards NIMS training. Metropolitan Chicago Hospital Council pushing for canned messages -Working towards ESF 6 & ESF 8

CMAP Rep.: Can I add one more thing. Done?

CMAP Rep.: one thing I notes during Katrina is that the city is much better prepared than our suburban areas. Some of the suburbs have a big exposure for chemical accidents in suburbs that are not prepared

IDPH Rep.: Mass care and special needs.

CMAP Rep.: Not from Katrina. Chicago city more prepared than Schaumburg, Il. Same suburbs so if the greatest is industrial and they have the least capabilities to develop in the south and southwest.

CMAP Rep.: Learned during Hurricane Katrina, long term again, in Chicago better prepared than urban area. Some suburbs may be in a situation where they have the greatest exposure to industrial risks and have some of the least capabilities to handle this.

CMAP Rep.: one thing I notes during Katrina is that the city is much better prepared than our suburban areas. Some of the suburbs have a big exposure for chemical accidents in suburbs that are not prepared.

CTA Rep.: South and Southwest sever on city if those became breeched.

CTA Rep.: We did and exercise with (chemical name he could not remember) and the exercise was basically if they become breech compromised, how do we handle that. 60-80mppl in the room

CMAP Rep.: Huge issue, and looking at Katrina. St. Bernard not able to handle Orleans

CMAP Rep.: looking at Katrina, St. Bernard was incapable of handling the situation.

CTA Rep.: Flooding what happened in London. CTA, Metra, bit if suburban stop exp metra mutual aid systems go back 25 years. MABAS. Organizations by MABAS to black out fire departments, planning 1 when call box alarm, they call department to tell of activation. It gets used. Example the fire department responded to a fire in December 2005 at LaSalle Bank. It a large building did a MABAS boxes used and planned out. It's a big help on the city, branching out!

CTA Rep.: Looking at London, the tunnel situation in the city and suburbs.

...community which goes back about 20-25 years mavason. When something becomes to large for a city reach out FD. MAVISON has done all preplanning and calls dept it is and activates it. When we had our rail accident about a year ago in July. We had major response to that. We had lasalle bank fire of '05. Mavis covered outer reaches while outer reaches came into the city. Big help for us inside the city.

CTA Rep.: Since London disasters, the CTA and Metra have gotten some resistance from suburban areas about stopping in their areas. MABAS (Mutual Aid Box Alarm System) gets used when we had our train accident and fire in December 2005, the MABAS alarm is used to get extra support.

Pam: People really spoke.

Pam: People here thought it out, John have questions?

John R: Wait to ask questions later.

John R: nope, I'll wait

IDPH Rep.: Problem with the people in the suburbs. In the city there is one body and that is Cook, but there is a 125 different municipalities. These municipalities need to coordinate.

IDPH Rep.: want to add a little but, easy with on governing body, but the 280 individual municipalities.

IDPH Rep.: wants to add about problem in suburbs. Cook county has over 125 municipalities.

CMAQ Rep.: 280 plus; it is the land of many governments and municipalities. Jan 125 in suburbs of Cook county.

CMAQ Rep.: 280+ municipalities in Chicago area.

CMAQ Rep.: land of many governments, fire protection districts may be separate, police and fire on separate wavelengths Water reclamation different.

CTA Rep.: Special use districts. Fire and police, water etc are all different.

CDOT Rep.: Six counties that are age sent can all do together.

CMAQ Rep.: Operationally very difficult.

CTA Rep. and CMAQ Rep.: comments on this topic

CDOT Rep.: Question about operations

CTA Rep. and CDOT Rep.: so many different governments and special districts.

CTA Rep.: County try, but so many, fire better, police (but playing catch up). Cook county just scratch the surface. Buffer zone take out 10 miles. Deal with Metra collaring counties. But so many (pause).

CTA Rep.: County has tried to go on about this, but everyone's playing catch-up with the fire depts., police especially. Explains the area of the metropolitan area of boundaries

Pam: Pretty much answer where I was going. What is the biggest challenge with cross jurisdictions?

Pam: Actually where I'm going. IF you could tell me, from your perspective, what's the biggest challenge with cross jurisdictional planning with carless evacuation?

Pam: Question: What is the biggest challenge with cross-jurisdictional planning?

CTA Rep2.: At the risk of saying the wrong thing. Turf battles! Who is the biggest.

CTA Rep2.: Egos, turf.

CTA Rep2.: problem with turf battle and egos.

CDOT Rep.: Also get all parties table to discuss, plans resource time.

CDOT Rep.: Getting the appropriate parties to the table to discuss it.

CDOT Rep.:getting the appropriate parties to the table.

IDPH Rep.: Agree and at the state level; huge gap in diversity, very rural and very urban. What works great in the North not so good South. NIFIC, 14 health department that works and plans

IDPH Rep.: state level, a wide gap in diversity. Urban, rural, huge dichotomy

What works upstate does not work downstate. There is a group that works together, 14 groups, which have been ...

IDPH Rep.- At the state level, we have a huge gap in diversity between urban and rural.

Pam directed question to CMAP Rep.

CMAP Rep.: Getting political support to get what needs to be done. There is a tendency after a disaster, not before, not to think about it. Wide spread survival capabilities not in less wealthy not done.

CMAP Rep.: getting political support for elected officials to accept the aftermath of a disaster. Been an issue the mayor formed OEMC. Surveillance committee. Less wealthy communities

CMAP Rep.: getting political support from elected officials. "The tendency is not to think about it too much." In many of the less wealthy communities, there us not much being done.

CDOT Rep.: Need an inventory of services. Find out nearest

CDOT Rep.: Entire inventory of resources finding out what's the nearest hospital, FD who can I call when it comes to getting to the small places.

CDOT Rep.: we need an inventory of service. Nearest hospital? Nearest fire department?

Pam: (same question posed to ARC Rep.)

ARC Rep.: We are private agency not sure how agency

ARC Rep.: We're a private agency, I'm not sure how to handle that.

Pam: If in an Emergency, who is partner able?

Pam: Question: In an emergency, who do you call?

ARC Rep.: Gas link not call. Call the city and except instruction for example in the flooding down town. Office building not IFID,

ARC Rep.: Call the city in '92 flood, that's what happened.

ARC Rep.: We would call the city like everyone else and expect to get instructions from the city.

Pam: Have faith city will be there?

Pam: You trust the city?

Pam: Q: Do you have faith that the city will provide?

ARC Rep.: Never had a 911 or a Katrina so I don't know id would have right answer.

ARC Rep.: cannot say, no experience magnitude of experience like Katrina to know.

ARC Rep.: I don't know because we have not had any large scale disasters like a 9/11 or a Katrina.

Pam: Biological hazards?

Pam: CMAP Rep., who would you call in the event of a biohazard?

CMAP Rep.: Procedures set up (pause)

CMAP Rep.: Procedures are set up, I wouldn't make the call.

CMAP Rep.: Depends on where the emergency is.

Pam: True for you guys? (indicating John and CTA Rep2.)

CTA Rep.: 24/7 nexus communicate circa tied into ambulance. In a fashion to put on operational center long and short thing happens. Group of people research people go in and continue buses and but may not need discussion maneuver. People who know what to do and can ramp up.

CTA Rep.: Yes we have a central control system that is in charge. In the past we've gone to conditions orange. When that kind of thing happens, there are a number of people who are expected to respond, go to the OEMC and respond and handle the situation with sufficient knowledge of management and emergency management to at least know what to do when the events ramp up. There would be all the decision makers there.

CTA Rep.: We have a 24/7 operations center. OEMC has a preprogrammed group of people that will go to the command center. We are slowly being tied into a network that is tied into the state.

Pam: OEMC for all you (referring to everyone except IDPH Rep.)

John and CDOT Rep.: OAMC for the city of Chicago, but Cook County it depends.

CTA Rep.: Yes for Chicago, when you get into cook county OEMC may respond, but may not, dunno,

CTA Rep.: Slowly but surly becoming linked together.

Pam: Part all has relationships that trust the system...

No one moved but CMAP Rep., said yes. But if Chicago crippled Springfield move-up

Pam: you have a system set up that you trust? Lots of interaction?

Pam: All know?

IDPH Rep.: If a number called people available; it depends on what it is. Staffing issue? Bus it CTA is different. Coordinate down info.

IDPH Rep.: IDPHC conversation. Nexus of people who have lines of communication.

Pam defers to John

IDPH Rep.: If a number called people available; it depends on what it is. Staffing issue? Bus to CTA is different. Coordinate down info.

IDPH Rep.: Talking about a response now. Take a step back. Mass evacuation scenario. What are mechanism in place or not, what are working to help plan for cross jurisdictional plans?

John R.: Question: Is evacuation planning happening cross-jurisdictionally?

CMAP Rep.: Task top exercise. Security meeting tomorrow. Two separate models developed exercised going on to determine how to reacts.

CMAP Rep.: Series of tabletop exercises going on now.

CMAP Rep.- A series of table top exercises. Two modeling exercises.

CTA Rep.: One now?

CMAP Rep.: One now, didn't think it would happen.

CTA Rep.: Should it happen tomorrow?

CMAAP Rep.: Two separate model exercise going on to determine how the transportation system will react.

John R: Evacuation plan not public?

CMAAP Rep.: Yes

John R: Why are evacuation routes not public information?

CMAAP Rep.: The current view is people don't want to play hard (security issue).

CMAAP Rep.: State has identified sensitive security. No one wants to show their hand.

CMAAP Rep.: there is a security issue

Pam: Asked about security

Pam: Security element?

IDPH Rep.: Good and bad to hear.

IDPH Rep.: The good and the bad will know

CTA Rep.: Security and lead TTTF functions of what want. We meat years taken CBD evacuees played out city, IDOT plays to express ways. Express way model. But changed after Katrina, after might not work, to do close down in bound access. Money spent on traffic lights. Help drivers explain of how to do and facilitate going on since 2003.

CTA Rep.: ITTF (Illinois Terrorist Task Force) does a lot of the function of what IEMA (Illinois Emergency Management Association). IDOT (Illinois Department of Transit) represented to ITTF. (chain of command conversation) taken CBD evacuation, played into our plan, plays into a city plan, plans into and IDOT plan, and in doing that plan, we basically ...

CTA Rep.: Illinois Terrorism Task Force Central Business District Plan. State is putting closure to in-bound expressways. This has all derived expenditures. Counties should know what evacuation plan is. The city looks at CBD evacuation plan as a model for other neighborhoods.

CMAAP Rep.: After Hurricane Katrina, we were told that (closing interstate) wouldn't work.

CTA Rep.: All this plan ha help drive expenditures on how to facilitate the evacuation. Going on since '02, '03.

John R: Confused, if not public what if outside?

John R: The info is not public info, would the small nearby municipality know the plan?

Pam: Question: People are not going to know where to go until the event occurs?

CTA Rep.: Should know but with plan all groups seek tapes other parts is airport. CIDOC not involved but city looks at using the central business district as a model because neighborhoods.



CTA Rep.: They should know the plan. Airports are another issue. What if you had to evacuate Portage Park, not involved in all that. The CBD plan as a model from other neighborhood. Increasing number of people who live down there now. We looked t everyone leaving, but now people live there.

CTA Rep.: We do not expect to have any evacuation event until the event occurs. We don't have warnings like coastal cities. We don't know where the hot zone will be located.

Pam: Why so important messaging people not know where to go?

Pam: This is why you begin speaking about messaging being important?

CTA Rep.: Where work best where have a long term plan in place. All posted. We don't expect to have and event leading to emptying the city. Our equivalent is snow routes. That's what we have and those are marked again where evacuating because depends on where going and security like the states.

CTA Rep.: You made a point in the beginning about Chicago being different from any other city. In the coastal area they expect to have an event, we do not have that benefit of that because of time to warn. Our evacuation route is essentially our snow route. Depends on the center where the hot zone is. The part of the problem, aside from the security stand point, it's a different kind of and event.

CTA Rep.: need to add John?

John R: Have options but like to follow-up

John R: I have opinions, but not the point, I'd like to have a conversation follow up one on one

CMAP Rep.: Like city to encourage a family to have plans. What need to do to get people to be ready. People need to connect to each other.

CMAP Rep.: We'd like to have families have plans. It's more important to have individuals contact.

CMAP Rep.- one thing the city has done is to encourage families to have plans. It's more important for individuals to contact one another.

John: Web programs that give information. Building network to train on how going to do. Our belief people not wait. 9/11 did with out panic for an event did not happen here. If have event here then would not wait how keep people from going to garages. Webchicago, web-based program which gives information. How we as individuals are going to do this as opposed to waiting on high. On 9/11 we experience the evacuation of the CBD without panic. If you had an event that affected Chicago, people would not wait. How do we keep people from rushing the compound and taking the cars stored there? Big trucks at the entrance.

John: alert Chicago is a web-based program that provides information. Our belief is that people will not wait.

Pam: Will let you go at 1.5 hours.

Pam: Law enforcement? Last question? John is going to do more follow-up including more questions. Would Chicago be able to respond to No Notice disaster with respect to car less population?

Pam: No notice disaster: how would Chicago respond?

IDPH Rep.: ...in regards to the carless population?

Pam: Question: Would Chicago be able to respond to a no-notice disaster with respect to the carless population?

CTA Rep2.: Sure, have plan, have practices, have communication, all comes down to the plan.

CTA Rep2.: Sure, we have plans, we've practiced them with all of our partners and sister agencies. Just need to execute.

CTA Rep2.: Sure – we have plans, we have practiced them. If we execute the plans, we should be successful. We practice a lot.

Pam: Have had practice?

Pam: Practice. Feel good about that?

CTA Rep2.: Have practiced a lot.

CTA Rep2.: practice never the same, but we feel good about that.

ARC Rep.: Agencies could not because controlled by the government.

ARC Rep.: Agency alone, could not, we are dependant on govt. which controls city state.

ARC Rep.: Our agency could not. We are dependent upon government.

Pam: Have done planning?

Pam: Have you done planning at your agency?

ARC Rep.: Sites narrow little would

ARC Rep.: Planning rooted to our narrow little world.

CDOT Rep.: Depends, Loop concentrated, CTA, Police, CTA, OEMC, pretty easy on board. Larger area or North side. Think would probably not as bad as New Orleans but it notion that come up that makes or breaks but hospitals etc. Snow storms yes because typical of Chicago don't know.

CDOT Rep.: Depends, loop probably so, constantly traded area, CTA there, POLICE down there, easy to get everyone on board. Happen in area, larger area or just north side or one portion. I don't think we would be as bad as New Orleans, but there are always situations that show up that real test the plan. All hospitals, don't know. Loop confident. Snow days and area specific event maybe.

CDOT Rep.: It depends. If we were doing the loop, probably because the police, OEMC, are down there. If it happened to another part of the city or the whole city, I'm not sure. We have learned how to deal with.

Pam: Chicago? Car less evacuation?

IDPH Rep.: Chicago? Don't know if can speak

Pam: State?

IDPH Rep.: For car less not here state wide on the car less. We would activate plan but nothing car less, think have a way to go.

IDPH Rep.: nothing statewide on that huge of a level, I think we have a number of plans in place, all hazard plans in place. We'd activate those plans and work with our partners. I think we have a ways to go.

IDPH Rep.: I don't know if we have practiced carless evacuation. We have practiced generic and all-hazard plans, but I think we have way to go.

CMA Rep.: I don't. I think where and when!

CMA Rep.: I don't know. It varies where and when the event takes place.

CMA Rep.: I think it depends on where and when the event takes place.

John: Depends on where and when.

Pam: And the car less?

CTA Rep.: What is your measure of success? Walking? But and yes

CTA Rep.: Where when, after the initial fog of war so to speak, could we succeed. What is your measure of success, eventually we could get them out. What's your measure of success?

CTA Rep.: What is your measure of success? They may have to walk 20 blocks. CTA will do general population, but we will work with the city. If it happens in the middle of the night, it will take longer. City is looking at using private transportation.

John Renne: What about disabled?

John Renne: What about blind, and those that cannot walk?

CTA Rep.: Again this is our plan at work, for the general population, but if city request people with special needs.

CTA Rep.: We could do but again time went and staffing. Talking with city we would do test to provided staffing, City looking at private transit, issue, specific and population what

CTA Rep.: Plan to work with the city. General movement of general population. If city requests specific transportation, then we'll do our best to be there, again it depends on time, location, and staffing. General evacuation is still a problem, specific facilities could assist, Private transportation could assist. Where we are with this I don't know.

Pam: Is there anything else you would like to add?

Pam: Anything else

ARC Rep.: End results?

ARC Rep.: End result with all this.

John Renne: End just reposts federal transit and other areas. Next year develop guide book plan for car less, come back to do workshops. Follow-up interviews will send back minutes for accuracy will not include names. Final repost about early 2008, have website.

John Renne: Going to answer and pose another question, who should be at this table?

Report to the Federal Transit Association. Guidebook discussion. Information discussion, minutes explanation for accuracy, no names.

CMA Rep.: (Receives phone call and exits to answer it.)

ARC Rep.: When expect this info?

John Renne: By the end of the year. (More explanation and passing out of make-shift business cards)

CDOT Rep.: Suggested that they talk to the disabled community.

CDOT Rep.: Talk to disabled groups

Pam: ARC focuses in with physical disabilities. We spoke with them this morning.

Pam: Did speak with them this morning.

Discussion of the groups dealing with disabled citizens

John Renne: Anyone who should be at the table (Pam took down names provided by the group)

ARC Rep.: Name other organizations

Pam Jenkins: on human services, Metra Rep., and police department, Emergency Preparedness MOPD

IDPH Rep.: Region Health and human services HHS

John Renne: FEMA?

Pam: ARC and have charged out reach

Department of Human Services, Office of Emergency Management & Communications

Metra Police

Region 5 Admin. 4 Health and Human Service3s

Illinois State Police

ASPR

Assistant Secretary for ASPR

At This Point Many Conversations Began Taking Place At Once.

John Renne: asked who?

Pam: Interested in what they have to say.

IDPH Rep.: Asked where from

John R: Will contract built ask for cont.

ARC Rep.: As she was leaving mentioned to Pam that she kept the focus group very focused.

Pam: Noted that they have a lot of acronyms, and all of them have the same language. If so familiar it might mean have relationships.

Participant: ITTF IL terrorist task force

IDPH Rep.: How fund...

Pam: Homeland Security

Participant: ATI

CMAAP Rep. and IDPH Rep. discussed other groups and doing move on planning (said googled John)

John R: Follow-up with them higher by to do research on car less. This graduate assistant did all the googling to contact people. Issue not published plan

CTA Rep.: because move moving to

CTA Rep.: issue of not comprised

CDOT Rep.: Everyone evacuated to roads nearest them common here.

CTA Rep.: In bound open free way systems what worried about compromised

Pam: No did well evacuate 80% of city.

CTA Rep.: No most success 1.4 million and unsuccessful Shelter of last resources. Have not always been successful took 10 years to do, did practiced state and police managed.

Pam: Carless could not get out, what churches can we work at 9th lots of car, did jave other things

IDPH Rep.: Some did now want

CTA Rep.: Many did leave because categories 5 storm, 2-3 level when hit

Pam: Some did not have resources to leave.

CDOT Rep.: How just that

Pam: 25%, now we are a neighborhood community story. It is a story of neighborhoods that stayed during Hurricane Katrina...

John R: Had levels held, and not talk about public information?

CDOT Rep.: What if levels: What go to other cities? 50,000 superdome and convention center

Pam: Mayor said communities walked out and people were prevented from leaving

John R: Racism

Pam: Caution and perception of caution

CMAAP Rep.: Gave info etc; Sp2050.com, and ww,shavepath,

IDPH Rep.: Region 5 admin for children and families, don't know whether FEMA is same as region 5 services.

Pam: Spoke about ARC this morning who stated they changed the SOP since HK.

IDPH Rep.: asked where everyone was from.

John R: Thanks for coming, and ending remarks

Pam: Thanks and recap and ending remarks discussion on acronyms ITTF

IDPH Rep.: 60 people who have say in where the money goes from homeland security, IL homeland security discussion which runs through IEMA. ITTF created to address terrorism in IL.

Conversation turns to driving evacuation. Shutting down the interstate incoming. Evacuation in New Orleans.

John Renne: Shelter of Last resort.

John Renne: Many years of practices

Pam: Car less could not get out

IDPH Rep.: Choose get out

CDOT Rep.: How help if economic

Pam: Old historic based communities

CTA Rep.: Had levees held you wouldn't have had any of this. CAT 5 hurricane, information dissemination

Pam: Crescent City Connection discussion

Switch to conversation about "the plan" CMAP Rep. brought along  
Shared Path 2030: [www.sp2030.com](http://www.sp2030.com)

## **Transcript: The Chicago Nonprofit Focus Group**

National Study on Carless and Special Needs Evacuation Planning, September 17, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Nicole Buras- Ethnographer/note Taker

Henri Dugas IV- Ethnographer/note Taker

### Participants:

ARC Rep., Director of Health and International Services, American Red Cross

ARC Rep2.- American Red Cross

ALMC Rep.- Program Director, Access Living of Metropolitan Chicago

Participant Y

*(In creating this Transcript, three sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by any two note takers.)*

### Transcript:

ALMC Rep.: Disability Civil Rights organization, Serve and Advocacy, Got calls from Katrina evacuees, Blind individuals

Group Member: Chicago Mayor's Office of People with Disabilities; City law to require all high rise stair cases to have evacuation chairs. High rise building Association against this idea. City counsel is supportive. Works with the National Organization of Disabilities

ARC Rep.: Red Cross, Mental health and health Services, 1,200 disaster per year mostly fire and flood, Serve on Greater Chicago Administration for Disasters, Help with disaster planning with local governments, Most of our clients are in a vulnerable population.

ARC Rep2.: work with Red Cross to formalize partnerships to plan for disaster planning. Managing regional capacity-Administrative Team, CEO, and Board realized, Partnership had to be formalized ahead of time. "We don't want to trade business cards at the scene of a disaster." Insufficient capacity in Chicago. Not enough cots, blankets, volunteers; This is a new framework post-Katrina. New way of operating for Red Cross as of July 2006.

*More participants enter, and the facilitators begin...*

Pam: introduced John as the principle investigator and asked him to provide some information on the project.

John: explained that, after Katrina, he began to look at evacuation planning for people without automotive transportation. People left were without access, also, started to look at other cities with major disasters. He found no major plans according to the US census of major cities. The

government allotted funds, money for transportation research. This is a four year study, currently in the first year. Study looks at New Orleans, Louisiana; Chicago, Illinois; New York, New York; Miami, Florida; and San Francisco, California. The study consists of two focus groups in each city. Chicago chosen mainly because it has no major disasters, only Industrial and Terrorism would affect people at the non profit level. Looking at what you guys are thinking about. And I am an Assistant Professor at UNO in the Rural and Transportation.

Pam: Then introduced Nicole and Henri, Trying to talk to stake holders; Chicago, here is very different. She explained that she is a Professor at the University of New Orleans, works in women's studies and the women group at UNO, the EPA, etc. She also notes, we will send each a copy of the notes, and then each has the chance to respond to the notes, so as to assure that each is represented correctly. Pam explains the purpose of Nicole and Henri and asks if ARC Rep., ALMC Rep., or ARC Rep2. have any issues with notes being taken on their responses.

Pam: Asks about anyone remembering or if in the organizational structure at organizations remember the heat wave.

Pam: asks if any of those present had any opportunity to work with any affected during the heat wave here in Chicago. ARC Rep. responds that here organization, Red Cross, worked with them, but she did not.

ARC Rep.: Did work with Katrina through a mental health group not ARC

Participant R: (entered the room) "I am with the Center". She then gave the layout of the area. 4024 Center of Technologies (here in Chicago) here is a partner in the project.

Pam: asks about roles.

ARC Rep.: role is to respond to mental health/ health service volunteers. She responds when disasters require more assistance than normal food, water, shelter. They assist with funeral assistance and medicine reclamation after disasters. The other section of here two sections. She oversees the integrations services program. The National Admin team for the Grater Chicago chapter,

ARC Rep.: Disaster Centuries and mental health, background also in social work. With the ARC she mentioned that they deal with 1200 disasters a year, with single family fires and floods. ARC works with nurses, doctors, EMTs, and others who provide healthcare services many are volunteers. She discussed that they provide medicines and other equipment lost. While also providing licensed mental health in response. Internal Services and ADMIN of Greater Chicago meet with the city and community partners.

Pam: How does this relate to vulnerable populations?

ARC Rep.: Most of our clients are vulnerable. There are a disproportionate number of people affected because of other issues and most people seeking help because they need it rather than others who have other available resources. 25 people/ groups or more, are willing to open shelters.

Pam: And ALMC Rep.?



ALMC Rep.: explains that here role is the program director of access...

It serves about 1500 people with disabilities. The topic of “evacuation chairs” arises, and PJ inquires more about “evacuation chairs.” S explains that the only way disabled peoples got out of twin towers was due to these chairs as elevators stop working in an emergency.

ALMC Rep.: Explained that she is a program director in disabilities. She went further to discuss that their services and agencies got calls from evacuee forks that where blind people and had problems with public transit, and her organization worked with the city. They also are working with high-rise buildings to have evacuation chairs.

Pam: High-rise chairs?

ALMC Rep.: Went further to explain that, that is how some got out for 9/11, in fact, for many that was their only way of getting out. One gets in the chairs and it goes down, and the majority of people with disabilities, that was their only way out. She went further to explain that the high-rise association is not up for it, so moving forward with approaching commercial then residential. She has also reports evacuees with disabilities or people with disabilities that we (study initiators) sent to them.

ARC Rep2.: explained she also worked for ARC with the research development team to manage the expectations of the ARC in the regional sector. C works with B to start making connections and formalizing partnerships with the goal to have regional capacity before the next disaster. ARC dealing with HK. The top two lessons learned after Katrina is that partnerships need to be formalized beforehand, and that we have insufficient capacity to respond to disaster the size of HK at this time. More products and more vol. with specific skills sets need to be acquired. Asking corporations to stockpile cots and with employees who are not critical to the companies infrastructure, that they be trained as part of the ARC vol. network.

ARC Rep2.: Explained her role with ARC. She is a Resource Development Manager of public and private in the region. Worked with people with disabilities, she works with ARC Rep., and making connections before the next disaster happens at a regional level. The job that she has is not directly related but has a background... (Pause) We respond to disasters here when outside, and after Katrina they realized they were not prepared. For example: partnerships are not formalized. She explained that they have an insufficient capacity to respond to a disaster, and an inadequate amount of resources. She explained how ARC moving in a way across the country...

Pam: When complete?

Pam: asked how long has this been going on since Katrina.

ARC Rep2.: July 2006 (pause) The direction we’re moving in is before, during, and after. And able to talk openly.

ARC Rep2.: Responded that it’s been initiated as a new SOP since July 2006.

Pam: When you think about vulnerable people, what is the biggest challenge?

Pam: “When you think about vulnerable populations, what’s the biggest challenge you company faces globally?”

Pam: Question: What is the biggest challenge with respect to vulnerable populations?

*Participant Y enters*

ARC Rep.: Asked what is a vulnerable population?

Pam: The carless populations.

John: Carless across the board, also people with special mobility needs, i.e. the blind, people in wheel chairs. We are using a broad terminology.

Pam: What is the biggest challenge (short pause) the hardest thing?

ALMC Rep.: Discrimination! Illinois is the worst state in dealing with people with disabilities. Institutional ranked 47th in the Nation for dealing/ assisting people with disabilities.

ALMC Rep.: “Discrimination” we institutionalize people with disabilities. 47th in the country for catering to people with disabilities. This is in violation of the constitution.

ALMC Rep.: Discrimination. Illinois is one of the worst states of institutionalizing populations with disabilities. Ranks 47. Against ADA and Supreme Court. Too many people in nursing homes Chicago does not have enough accessible shelters. We took people out of nursing homes and housed them in our own houses.

Pam: In disasters?

Pam: “Take that to disaster”

ALMC Rep.: We did not have enough accessible shelters for those evacuees. What happens when some called S’s organization saying they had not had baths, or when someone gets put into a nursing home, the incentive for the nursing home, financially, to stay. They are separated from service animals and locomotion devices when evacuated.

ALMC Rep.: (Referring to hurricane Katrina) We had people with disabilities, and there were not enough accessible shelters. And ARC was separating families. (She explained that it was an extremely bad situation.) The organization she works with actually ended up going in, and signing that the organization members where family members of the admitted, so that they could get these people out of there (nursing homes). Her organization was getting calls from the individuals in the home. She went further to explain that Nursing homes have an incentive to keeping people there. Explained about working with separate mobility terms, access to service animals because people where not allowed to bring them especially if they were admitted to a nursing home, and there are not services to have equipment delivered.

Shelters would not let people take wheelchairs or service animals (referring to Katrina Evacuation)

Pam: What need?

ALMC Rep.: Better CDT, disability transit is small, but if had to do massive evacuation, 30,000 with disabilities (pause)

ALMC Rep.: if you had to do a mass evacuation of the city, about 30,000 with disabilities, within the city, it would be impossible. There needs to be better coordination with CDT (Chicago Disability Transit) 30,000 people with disabilities in the city of Chicago.

John: In the city or region?

ARC Rep2.: We serve 11 million people in greater Chicago; they separate out.

ARC Rep2.: serve 11 million people. We don’t have enough time to focus on all of the issues

ARC Rep2. explains that her org. (B confirms) that the organization goes from Chicago to Cook County to the boarder.

ALMC Rep.: Preparedness and education. Income of people affected by fires determines each's need on the resources provided by ARC.

Pam: same question to ARC Rep.

ARC Rep.: Economically disadvantaged, those who have resources don't often need the Red Cross resources when dealing with fires.

ARC Rep.- Preparedness and education ??pg 3?? . People who use Red Cross services are more vulnerable populations

Pam: Floods?

Pam: What about the flood?

ALMC Rep.: The people affected are not the people who really need. Not catastrophic.

ARC Rep.: I would say the flood did not affect a disabled population.

Pam: Briefly discussed the mitigation project working on the LA, and then Pam asks ARC Rep2. what she saw as the biggest challenge.

Pam: Mitigation and preparedness in regards to a fire?

ARC Rep.: Yes

ARC Rep2.: Need to reserve time during the day, and they multiply with added challenges. Disabilities constitute a group, needs them woven in with different groups. System management, allotment of time to work with the other groups.

ARC Rep2.: The amount of time with which we have to prepare this and getting your hands around the groups, and trying to understand the needs. I wish we had more time to get our hands around that. System Management and staff allotment to work on them (the groups)

Pam: Summarized ALMC Rep., so okay Katrina?

Pam: Question: What would the greatest challenge be in the next major disaster?

ARC Rep2.: Don't sit on same administration as ARC Rep.. Work with very urban and rural areas. Evacuation would be a serious issue especially with regard to transportation. Mayor's Office works with people with different disabilities bit all these issues.

ARC Rep2.: Not on the same team as B, but transportations is such an issue in both urban and rural areas. Mayors office of Disabilities is forming a list in regards to evacuation.

ARC Rep2.: Transportation is such a big challenge in both urban and rural areas. Mayor's Office is working on registry, but there are a lot of problems.

ARC Rep.: We contract on feeding and sheltering.

ARC Rep.: (response to same question) Feeding and sheltering, family reunification.

Pam: Asked about pets.

Pam: Pets?

ARC Rep2.: Services yes. Will work either other agencies but pets are not allowed in the shelters, but also mention would work with special needs.

ARC Rep.: Service animals are allowed, non-service animals are worked with outside agencies.

ARC Rep.: non-service pets are not allowed in Red Cross Shelters.

ALMC Rep.: Their department, when the Metra flooded, the deaf had an idea what was going on because the news did not do any text posting over the television. At her organization, the deaf were able to get information from the hearing employees, because they were ready and work with those groups. However what about the people who are not like them, the deaf, and who have no ideas.

ALMC Rep.: Deaf problem with flooding when emergency announcement came over the speaker, they were left out.

ALMC Rep.: Deaf people had no way to understand what was going on, on Metra Trains when announcements are broadcast.

Pam: She described challenges, and then redirects the discussion to strengths.

Pam: What are the strengths your agency brings?

Pam: Question: What are your strengths?

ARC Rep2.: ARC is neutrality as a principle. They help every people, that is why it is important to build relations. Work ahead of time supporting missions. Discussed how “don’t need to be trading business cards at the sight of a disaster.” And also look for government funding, but depends on government health to build with ALMC Rep.’s ideas/ groups. And they eventually build.

ARC Rep2.: ARC’s neutrality. Helping everyone affected free of charge. The focus of my role is to look for government funding. If we partner, it’s to look for government funding to help us start an infrastructure.

ARC Rep2.: Red Cross neutrality and all of our services are free of charge. Another strength that the Red Cross brings is to help partner with other organizations to get government funding to create community infrastructure.

Pam: Strengths?

ALMC Rep.: Need a bond with disabilities along with target population, and also creative with resources need. When people called the mayors office to speak with the department that handles disability needs they were hung up on. “We need to live as people with disabilities.” We don’t have a formal plan; it is just us.

ALMC Rep.: Majority made up of people with disabilities. We know about creative solutions to things, we have access to resources. Don’t have any formal emergency preparedness program, but we can work with people with disabilities to know what they want or need.

ALMC Rep.: biggest strength is the organization and board is people with disabilities. Access living has access to resources for people with disabilities. We don’t have a formal disaster plan, but we have access to resources

Pam: Strengths?

ARC Rep.: Our partnership with emergency management is a bonus. And we have learned lessons from Katrina.

ARC Rep.: Partnerships. Office of community managements in the city. Letting people know what the ARC's responsibility is.

ARC Rep.: our biggest strength is our partnerships

Pam: It was for New Orleans (referring to partnerships), but additionally, Katrina is important. Want to go as far back as the heat wave. She then asked about institutional memories? All respond not knowing much about the heat wave. Also asked if they thought that their agencies are the same after Katrina?

Pam: Describe how your organization has changed since Katrina, although originally removed for this, the conversation dictates that it has affected you. Also, the heat wave is a reference point.

Pam: Q: Do you think your agency has changed since Katrina?

ALMC Rep.: Yes, new buildings, everything we have currently done was impacted by Katrina, We did not have the programs formed, but now getting there like with chairs, programs, etc.

ALMC Rep.: Definitely, we built a building and it influenced the structure.

ALMC Rep.: Absolutely – Katrina has informed everything we have done.

ARC Rep2.: We reset courses, people's perceptions FEMA vs. ARC and manage expectations. We help assist, but we are not a government agency! (Discussed that people need to understand that distinction.) In two years have a National Risk Based Category. Risk of geographic area, such as gulf coast, not selected by geographic, but pushed into polite projects about what they're doing. Geographic preparedness is a life style. We don't have the life style, we need to change, and reports say we are the lowest. So, how do we sustain our self? ARC has to go where the greatest need is.

ARC Rep2.: The Red Cross National reset its course after Katrina, being with ARC for 2 years, not during HK, but redefining our role versus the Government's role. Arc is forming a pilot program which works as preparedness group which C's group has finagled itself into with getting funding because they're about 10 steps ahead of. The Midwest it the least prepared area.

ARC Rep2.: Red Cross has reset its course since Katrina. It's important to distinguish what we do versus what FEMA does. National Red Cross has a pilot program called Risk-Based Capacity. Our chapter does not have as much risk, but we have jumped into the pilot program, but without funding. Preparedness is a lifestyle in places like California.

Pam: Question: Mid-west is the least prepared region in the country. How do you sustain yourself if there is a disaster?

ARC Rep.: Not here for Katrina. People think the government does not go in right away. So be prepared. Would like to work with people who can't afford.

ARC Rep.: Not here during Hurricane Katrina. People think the government is going to come in right away. Encourages everyone to be prepared to sustain yourself for 72 hours, at least.

ARC Rep.- Encourage people with resources to sustain themselves for 72 hours. We (American Red Cross) need to focus on people with disasters

Pam: Challenges in the Midwest?

Pam: Midwest is very different.

ARC Rep2.: This area is not a sexy topic. Not as much hype about it.

ARC Rep2.: This is not a sexy media initiative.

ARC Rep2.- Disaster preparedness is not in the general thinking of the population.

ARC Rep.: What's an evacuation plan? People don't know.

ARC Rep2.: News highlights events for a couple of days, such as with the floods, but we deal with for lasting weeks after.

ARC Rep2.: The floods have been on the news for a week and some days, but ARC is going to deal with this for weeks.

Pam: (Checked with John)

Pam: Before I change directions, John do you have any questions.

John: No

Pam: (Cross 5 jurisdictions.)

Pam: Kind of what ARC Rep2. and ALMC Rep. mentioned partnering, that was big with Katrina. What were the challenges?

Pam: Is partnering across jurisdictions, important? What is challenge working cross-jurisdictionally during disaster?

Pam: Question: Partnering cross-jurisdictions. What is the challenge of cross-jurisdiction?

ALMC Rep.: Transportation. CDT only with the city; they have to call ahead. If needed outside the city (face and body language had a look of exasperation)

ALMC Rep.: CDT stops at the city limits. Major headache if you need to get them out.

ALMC Rep.: CDT (Chicago Department of Transit) Only operates within the city of Chicago. In an emergency, these people won't have the paperwork to use disability transport in other jurisdictions.

John: (question) During an emergency, can they forgo rules?

ALMC Rep.: If there is an emergency it happens so fast and don't have time to go through the processes.

ALMC Rep.: yes but that take time.

Pam: ARC Rep.?

ARC Rep.: Assist with medical, medicine, and benefits and insurance.

ARC Rep.: red tape with benefits.

Pam: Discussed a project where each works toward putting medical records on flash drive. Is there anything done with medical recording.

Pam: After Katrina, getting elderly to put medical records on flash drives.

ARC Rep.: Backed up into hospitals. Hospitals said they would help if said was from there, but if bigger would be in trouble because no one is on the same systems. I work patient disasters; we are working with them to band everyone together, so each can link up to get

medical history and so loved ones can communicate. Patient connection programs for example pick up bigger such as in the case of a metro crash.

ARC Rep.: My background is medical, after HK, if you said you were an evacuee, they treated you no charge. This worked for small numbers, won't work for disasters. Problem here, hospitals on different systems, outpatient and hospital cannot talk in some cases. Patient connection is a program our chapter has initiated. That's just hospitals, not shelters. Safe and well website, problems with access, but phone number so we can register you.

ARC Rep.- Medical records are a big problem. There are no hospitals that operate on the same systems. Red Cross has a program that can connect people with loved ones when an emergency happens. The safe and well website helps connect people in shelters.

Pam: Asked ARC Rep2. what she saw as the biggest challenge.

ARC Rep2.: Role so different from ARC Rep.'s. Observe politicians, not an immediate but happens over time. Don't think we would not help, some of the going around, some people have needs there a really long time. We have 100 paid staff and we have volunteers so there are people who are educated and coordinated. 100 can't be everywhere for 11 million people.

ARC Rep2.: Politics in emergencies and disasters, not an issue, but it's a problem protocol. Time of employment checking with them first. 100 paid staff and vol. organization, getting people ready to go and educated and handle the politics of the situation.

ARC Rep2.- Politics get mixed up in disasters, such as people not knowing proper protocol. Red Cross has 100 paid staff, but we are a volunteer organization.

Pam: Never hear first respondents talk about liability. Do you think liability an issue?

Pam: I interviewed the Southeast director of ARC after the storm. All of you kind of danced around this. I interviewed first responders and liability never came up, but this does now, how do you feel the problems affects cross jurisdictionally?

Pam: Q: Do you think liability is an issue?

ARC Rep.: (Long pause) I don't know if I can answer. (pause)

ARC Rep2.: Don't think if really discussed.

ARC Rep. & ARC Rep2.: We'll say provide these services, and we do, we're not first responders.

ARC Rep. & ARC Rep2.: not an issue we discuss much

Pam: What if someone is stopped at cook county.

ALMC Rep.: When work with city no a problem, but the state, YEA!

ALMC Rep.: City did not worry about liability; state did worry about it when dealing with evacuees.

Pam: Both agencies spoke of partnering. Most successful was partnering. What worked for you?

Pam: Both agencies are working towards partnering, what's the best way. Sign memorandum, sharing staff? What has worked for you?

Pam: Question: What is the best way to work across jurisdictions?

ARC Rep.: Memorandum agreement. City knows what's up, and how we will get out. Hard to get out to the community like getting an MOU signed.

ARC Rep.: Memorandum, Chicago know what we can do, its really hard to get to other cities, they feel we're self sufficient. Getting to them is hard. If we had a disaster tomorrow. Would they know what we do? Don't know if it works. Our municipal partnership has quadrupled, I can get you numbers.

ARC Rep.- We mostly use memorandum of understanding (MOU) Pre-Katrina, we didn't have MOU's, but since Katrina, we have much more preparations with counties and municipalities.

Pam: Do you...

ARC Rep.: Where Katrina happened when MOUs did have MOUs for what now. Really important outside of Chicago harder because areas don't want outside help.

Pam: How?

Pam: Best way to partner?

ALMC Rep.: We did the best we could do. We're not training because we're constantly moving. One time we do and then do not. Communication example: having monthly meeting because of the geography of the area. Connect MOU with public officials because people call Alderman.

ALMC Rep.: We also have MOU, but the best way I think we could do this is cross training. More training, also more on-going communication. A monthly meeting? Working through issues we all have. Also, connecting more with public officials, people dealing with flooding called alderman, and they need to know who to call.

ALMC Rep.- We also have MOU's, but we should be doing more ongoing training and ongoing communication. We could connect better with public officials. During an emergency people call elected officials.

Pam: Explain.

Pam: Clarification on Alderman?

ALMC Rep.: Elected officials that don't know what to do.

ALMC Rep.: City official

ARC Rep.: Suburban municipality.

ARC Rep.: But their offices really don't know what's going on either.

Pam: Best?

Pam: Question posed to C

ARC Rep2.: Long term private and public partners, and on-going communication. When recent flooding happened, there were implied funds. Just not sexy! So trying to formalize would help. Try to keep it on everyone's radar scene. Trying to do MOUs.

ARC Rep2.: long term, on going communication. When the flood happened, suddenly there were communication pieces. Again, it's not sexy to inform. We try to keep info on people's radar screen when there's no disaster. We're more or less beginning to use MOU

ARC Rep2.- Long-term cultivation of public and private partners. Our team also uses MOU's.

Pam: Identify partners who are most useful. When you have problems, who do you call?



PJ: Which partner do you use the most?

Pam: Q; When you have a problem, who do you call?

ARC Rep2.: That's hard

Pam: For anything.

ARC Rep2.: For me, Motorola; but if other 100 didn't answer. Motorola work plans with board members. During flooding, \$50,000 coming our way and communication.

ARC Rep2.: Motorola. Strong national and international connections with Motorola. Need radios? Funding. Many could answer.

ARC Rep2.: Motorola is best private-sector partner. They do a lot of donations. Motorola sent \$50,000 during flooding.

ARC Rep.: 9-1-1, health and mental MCHC

ARC Rep.: Office of emergency management and communication. MCHC.

ARC Rep.: OEMC (9-1-1 center) Office of Emergency Management and Communications  
MCHC – (Metro Chicago Hospitals)

ALMC Rep.: Hands down, mayor office.

ALMC Rep.: Mayors Office of People with Disabilities. I've been with Access Living for 7 years.

Pam: Have people called ahead?

ARC Rep.: I know what they do, don't know what was done.

Pam: How long have each of you been with your partners?

Pam: How long has the agency been with its partners?

ALMC Rep.: 7 years, relations before then.

ALMC Rep.: 7 years, partnerships longer.

Pam: If was bio-hazard had events who would call?

Pam: Biohazard event today, who would you call?

Pam: Question: Who would you call if there were a disaster today?

ALL: agreed would be the same.

ARC Rep2.: United Way and how we connect section.

ARC Rep2.: United Way would help get human services coordinated. This communication would happen 24 hours per day.

ALMC Rep. & ARC Rep.: (same as above)

Pam: Need more info. Example John added examples.

(Clarification on the question and examples)

Pam: What would United Way do for you?

ARC Rep2.: Wait for ARC Rep.'s team, United Way, and ARC to service. Don't provide human services. Then wait to see what have, see what don't have and link out.

ARC Rep2.: United Way helps us get coordinated with other units. And wait. They connect us with other UW. In that instance you make the call at 4am and hope to hear back by 8am.

Pam: Could do this in the middle of the night?

ARC Rep2.: Yes, because I have their cell phone.

Pam: Can't tell how important that is?

ARC Rep2. and ARC Rep.: Not that quick.

Pam: moving on other issues, John any questions?

John: Coordination across jurisdictions of transportation? How move?

John: In regards to transportation, how would you transport your folks?

ARC Rep.: Public transportation

ARC Rep.: Metra, El, traffic diverted outside the city.

ARC Rep.- Metra trains would leave city.

ARC Rep2.: Not our responsibility

ARC Rep2.: That's not our job, to transport.

John: Someone calls you, what do you do.

ARC Rep.: Do have evacuation routes, but they are hidden. Problem because if suburbs are hit.

ARC Rep.: OEMC would submit a statement.

John: Have you come up with a response if someone calls you.

ALMC Rep.: CDT

ALMC Rep.: Mayors office

Pam: So only the city knows?

Pam: City know this?

ARC Rep2. and ARC Rep.: Decision it to go together.

ARC Rep2. and ARC Rep.: Yes

All: Yes

John: What about wheel chair, anything?

John: Have you been part of a special needs evacuation planning?

ALMC Rep., ARC Rep., ARC Rep2.: No the city should provide instructions

Moving on...

Pam: Plans for evacuations for employees?

Pam: Evacuating and caring for your employees during a disaster.

ARC Rep2.: Yes, but different then that of ARC Rep.'s because I am in resource development.

ARC Rep2.: Yes, but I have to defer to B

ARC Rep.: Difficult (Paused) You have to understand that everyone else is leaving and we are going in, for example, we are setting up shelters.

ARC Rep.: The issue with ARC is that everyone is leaving, and we're going in. If there was an evacuation, we're going to the out source and setting up a shelter. It's tricky because we're working. During 9/11, offices in the loop, and the loop had to evacuate, we could not do business. We now have moved to the medical district and have satellite units as well.

ARC Rep.- During 9/11, Red Cross offices had to evacuate downtown (Chicago). They could not conduct business. Now, they have moved out of to the medical district.

ARC Rep2.: In the loop; we were based there and left t behind when we were evacuated. So we learned a lesson, and we are no longer just in one place. Now, we are spread out.

Pam: Who goes and who stays?

Pam: Who decides who stays?

ARC Rep.: Disaster services stays. But others will rotate.

ARC Rep.: Disaster services stay, static.

ARC Rep2.: Outside disaster some people trained to do others tasks for disasters.

ARC Rep2.: In kind donation, stop doing what day to day and use training.

ARC Rep2.- during emergency, I worked to get in-kind donations.

Pam: Everything is risk based capacity.

Pam: Risk based capacity

ARC Rep2.: We did what national is just revamping where as now we are ahead. We were just fast.

ARC Rep2.: In terms of philosophy and structure, we did it our way and did not wait for nation orders.

Pam: ALMC Rep., you have plans to take care of members?

Pam: Question: Do you have plans to take care of your members?

ALMC Rep.: We have whole place, phone tree, pagers of others with disabilities. 9-1-1, TV stations were evacuated down town they where not captioned because captioned are pre-done. We where lucky there we people there to explain to the hearing impaired what was going on. We have 600 buses and 100% CTA buses accessible.

ALMC Rep.: Pagers for deaf. During 9/11 emergency evacuation announcement was not captioned. In Chicago, all buses are accessible, not all EL are accessible, but working on it.

ALMC Rep.: we have pagers, during an emergency, there was no captioning. Chicago, 100% of buses are accessible but not 100% of trains. CDT would also be called.

Pam: Both agencies trained.

Pam: How often train?

Pam: Q: How often do you train?

ARC Rep2.: Not really “how often”, that is part of our structure.

ARC Rep2.: Always.

ARC Rep. and ARC Rep2.: We constantly train.

Pam: Have you done training where people will go?

Pam: Had to evacuate area in 9/11, how work?

ARC Rep2.: CERT teams, where have evacuation drills, but depend on disaster. The disaster will depend where people will go.

ARC Rep2.: CERT teams do drills. Having a drill in the next few weeks. Depends on the disaster as to where it goes.

Pam: If train around disasters?

Pam: Training around disasters.

Pam: Q: Is there training around different types of disasters?

ARC Rep.: It depends, if shelters are in place, so if larger will depend and speed.

ARC Rep.: People are going to be sheltering in place unless major biohazard.

ARC Rep.: Some sheltering “in place” depending on disaster.

Pam: Heat wave?

Pam: Heat wave, sheltering in place, yes?

ARC Rep. and ARC Rep2.: It depends.

ARC Rep.: Yes, but again it depends on the disaster

Pam: Midwest least prepared, more aware?

Pam: Are the people you work with thinking about disaster and evacuation?

ALMC Rep.: People are thinking about, they are worried about how they are going to eat.

ALMC Rep.: No more, they’re worried about money to eat.

ALMC Rep.: most constituents are thinking about day-to-day concerns not major disasters.

ARC Rep.: City yes, but not training down because we have not had disaster.

ARC Rep.: Not had a lot of large disasters, upper levels, yes, but it’s not trickling down.

Pam: Seems learned?

ARC Rep2.: Olympic 2016, because city self need more preparedness high level security preparedness.

ARC Rep2.: Chicago Olympics in 2016, using this as a vehicle to talk about preparedness. Heightened levels of security. Hoping to ride it out until 2016.

ARC Rep2.: Chicago wants to bid for Olympics for 2016. This is a vehicle to begin people thinking about emergency preparedness.

Pam: How successful?

Pam: If there was a mass evacuation this afternoon, how successful would Chicago be?

Pam: Question: If there were a mass evacuation, how successful would Chicago be?

ARC Rep.: Not successful; take a long time, to get message out, the disabilities.

ARC Rep.: Not very, take a long time, figure out what to do, get message out, and take time

ARC Rep.: Not very successful

ARC Rep2.: Slow!!

ALMC Rep.: The construction zones.

ALMC Rep.: Not to mention construction.

ARC Rep.: And it's nice now.

ARC Rep.: And today is a nice day, the rest of the year is harder.

Pam: No contra flow maps?

ARC Rep.: Evacuation route not out.

ARC Rep.: No

ARC Rep.: Evacuation routes are not public information

John: Working on it?

John: Why?

ARC Rep.: Working on

ARC Rep.: Working on it.

Pam: 9/11?

Pam: ALMC Rep. you were here for 9/11 what happened then?

ALMC Rep.: Just employer.

ALMC Rep.: Just worker, I was not with the city.

ALMC Rep.: Evacuation of downtown Chicago during 9/11 went well.

Pam: By law, do they have a plan?

Pam: Plans?

ALMC Rep.: Sure

ALMC Rep.: We did first if mass evacuation, you saw what happened in nursing homes.

ARC Rep.: Nursing homes go in and don't have room.

ALMC Rep.: 76,000 people in nursing homes

ALMC Rep.: 76,000 in nursing homes in Illinois, bus contracts are required, but do they have them? For me that would be my biggest concern

ALMC Rep.: If we had an evacuation, a lot of people in nursing homes in Illinois.

ALMC Rep.: Most do not have plans.

Pam: ARC Rep2.?

ARC Rep2.: Agree again.

ARC Rep2.: Clunky and slow, putting out faiths in transportation and other organizations.

ARC Rep2.: Clunky and slow. We are putting our full faith in the OEMC. Evacuation routes are not published information.

Pam: Don't know?

ARC Rep. and ALMC Rep.: We are dependent on Emergency Management

ARC Rep.: Not published, trains go opposite direction from disaster.

Pam: Know who knows?

Pam: Shelters published?

ARC Rep. and ARC Rep2.: Not published information

Pam: Shelters?

ARC Rep.: Have shelters contracted, and continuing to identify large scale shelters.

Pam: In what city?

ARC Rep.: Red Cross has 100s of shelter contracts. We are looking for large-scale, mega-shelters. McCormick place is a large shelter.

Pam: Large scale shelters? City is dealing with its own "mega-shelter"

John: Use example of New Orleans, have shelters in place (model out and the outside)

John: Louisiana shelter-in-place as staying in the city.

*Clarification of sheltering-in-place which lead to a desertion in the mean between Louisiana Chicago. In Chicago it means sheltering in your home; whereas, in Louisiana it means sheltering in a near by shelter.*

ARC Rep.: Like McCormick's place

ARC Rep.: Do have places, McCormick place

ALMC Rep.: (Echoes B)

Pam: I hear a real reliance on the city, has that proven true in the past?

Pam: Question: Hearing a real reliance on the city, is this true?

ARC Rep.: (paused and starched her head) Don't have much to go on. Did not have a 9/11, or a Katrina, etc. We have house fires, then more preparedness.

ARC Rep.: Don't have that much to go on. Haven't had something to test that faith. You notice when people have house fires, next time their more prepared, learned on the periphery, but nothing first hand.

ARC Rep.: we have no experience to go on. No 9/11, no Katrina.

Pam: Do you have contracts with partners and agencies communicate with?

John: In Louisiana think plans better and don't have trust in government. Have committees?  
John: Have you had direct contact with your partner agencies in places like LA or NY?  
Counterparts think that the plans are better now, but don't trust the government now.  
John- Do you have communications with non-government side in places like New Orleans or New York?

ARC Rep.: Yes, have committee conferences, share with non-government sides. Hear don't rely on government.

ARC Rep.: We have communication, a lot between the chapters. We have conferences. We share a lot of information with non-government.

ARC Rep.: Yes. We have conferences and we always hear "don't trust the government."

Pam: Louisiana, etc., and other locations in partnerships?

ALMC Rep.: Yes, we assisted a sister unit during Katrina, we loaded up and sent stuff down.

ALMC Rep.: We have sister org. in that city (NO), they asked government for assistance, got none, we drove trucks-full down there.

Pam: Anything would like to add?

ALMC Rep.: Any plans aren't complete if they don't include people with disabilities.

ALMC Rep.: Include people with disabilities in the development because often done it not needed.

Pam: Do feel vulnerable people have a voice?

Pam: Do you feel the vulnerable pop. Has a say in these issues?

Pam: Question: Does the vulnerable population have a voice?

ALMC Rep.: Not enough

ARC Rep2.: Agree, not enough, we are starting to be more aggressively inclusive with the disabled. Homeless and poor, not so much, There is disproportionate in the areas inclusion.

ARC Rep2. and ALMC Rep.- Not enough voice.

ARC Rep2.: I agree, starting to be more, but moving and disappointed start where responding to prefect example is the economy is at a disadvantage.

ARC Rep2.- we are trying to work to get more input from people with disabilities.

Pam: Relationship with homeless? Because hard to evacuated

Pam: Homeless, difficult pop to evacuate.

ALMC Rep.: We work dozen, and don't have a plan.

ALMC Rep.: We work very closely with them.

ALMC Rep.- We work closely with Chicago Coalition for the Homeless.

Pam: Evacuation plan for homeless?

ARC Rep2.: Yes/ no because no formalized partnership.

ALMC Rep.: Maybe

ARC Rep.: No formalized partnerships

John: We invited a number of different people so who missing

John: Whose missing from this table? Salvation Army, Catholic Charities drives, Lighthouse of the blind, development disabilities, and ARK of II

ARC Rep.: Salvation Army

ALMC Rep.: Lighthouse blind, developmental disabilities, community service options.

Pam: Economy equality?

Pam: Big group working for economic equality.

ALMC Rep.: Acorns here.

ALMC Rep.: Acorn

ARC Rep2.: School representatives

ARC Rep2.: Neighborhood by neighborhood, another group not here, some kind of school representative,

ARC Rep.: Huge gap, hospitals

ARC Rep.: OOHM, big gap, nursing homes too

ALMC Rep.: Rehab hospitals and nursing homes.

ALMC Rep.: Major research facilities, medical

Pam: Historically, shelters place, why so many died..

Pam: Hospital were always a place, which is why triple population.

-Salvation Army, Catholic churches, Lighthouse for the Blind, groups that work with developmental disabilities

-neighborhood groups

-school representative

-hospitals

-nursing homes

-Equipped for Equality

Pam: Participant Y question comment?

Participant Y: Just watching.

John: May need following up. Many follow-ups and ask for other contact information.

John: Want to follow up interviews, may ask you for contacts from other organizations. I appreciate your time.

Pam: Was not too painful?

All: said no and this is really important

John: Did I give you my contact info?



John: Have my info? Here on my paper

Pam: Do me to.

Pam: How many refugees here?

Pam: How many refugees do you think are still here?

ARC Rep.: 7500 worked here in Chicago

ARC Rep.: 7500 originally, now don't know

ARC Rep2.: We don't keep track.

ALMC Rep.: Mayor's office of disabilities can tell who is here.

ALMC Rep.: MOPD could tell you about disability people here now.

Pam: Backlash?

ALMC Rep.: Housing became available, caused friction, where was this housing for people when we needed it for people on the waiting list for years.

ALMC Rep.- We work closely with Chicago Coalition for the Homeless.

ARC Rep2.: Asked where they were in the study?

ARC Rep2.: Where have you been with the study?

Pam: On to New York in a few weeks. Doing work study where took evacuees. Do you and know the profiles persons work with. Doing evacuation maps because, when 9/11 places. New York mostly about 9/11.

Pam: Explained place of Chicago interview and next places. Interested to see about NY with 9/11

John: New Orleans affected impact Katrina so see 9/11 differences.

John: Interesting to see the focus places differences.

Pam: Compare different stories.

Pam: San Francisco, Oakridge, Miami, Andrew etc. storms.

John: Will send copies of the notes so will be able to follow-up and make sure you were recorded imparted.

John: We will send you copy of minutes

ARC Rep2.: Will this be on a public domain?

ARC Rep2.: Will the minutes be public domain?

Pam: Won't identify who you are. Might include as an appendix.

Pam and John: Won't identify who you are. Be appendix, but not have your name. Completely open process.

Closed discussion.

Ending and parting. Exiting. Thanks and personal information exchange.

## **Transcript: The Miami Government Focus Group**

National Study on Carless and Special Needs Evacuation Planning, November 5, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Burmeister, Ethnographer/note-taker

### Participants:

DEM&HS Rep., Acting Assistant Director, Miami-Dade County Department of Emergency Management & Homeland Security

MDT Rep., Chief of Safety & Security, Miami-Dade County Transit

DEM&HS Rep2., Infrastructure Branch Director, Miami-Dade Department of Emergency Management & Homeland Security

NOAA Rep. of National Oceanic and Atmospheric Administration NOAA & former FIU professor

FDEA Rep., Florida Department of Elder Affairs

HA Rep., Miami-Dade Housing Agency

*(In creating this Transcript, two sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by the two note takers.)*

### Transcript:

*Pam gives the introduction.*

John: We applied for a grant a year and a half ago, and were awarded a contract to study evacuating people with special mobility needs. We selected five cities to get regional representation. Miami is 2nd to last. San Francisco is last. We've already conducted focus groups in Chicago, New Orleans and New York. We are here to learn from you. What is the state for evacuation planning for the "carless" population (people who cannot or do not drive for any reason)? How do we reach a marginalized population within special needs groups? Pam will be organizing and running the meeting.

Pam: There will be three sets of notes. We will send them to you for your review. If you don't like how it turned out, change it. All of you know NOAA Rep., one of the most important scholars in this area. I'll start with a question and round robin it. You never know if you'll be first person or not. This is our 4th city, and we've learned some very interesting things about what comes out when people start talking. This information is rich with understandings. We are here to learn from you and hear your concerns. Please go around and introduce yourselves.

DEM&HS Rep., Acting Assistant Director for Area Human Service Programs and health and medical coordinator. I work on the evacuation assistance registry for people with special needs that need help with evacuation.

DEM&HS Rep.; Acting Asst. Director Coordinated registry

MDT Rep.; in charge of the Wackenhut security contract, in charge of the safety side of the house, the person that actually shuts down the system, who takes us through hurricane/inclement manual in times of need.

MDT Rep.; acting chief, in charge of safety, shuts down the system in time of need

DEM&HS Rep2., Infrastructure (?) I'm also Recovery Manager for the county.

DEM&HS Rep2.: infrastructure head

NOAA Rep., retired professor at FIU. I work with Hugh Gladwin and Walt Peacock for NOAA and national research.

NOAA Rep.: retired professor from Florida

FDEA Rep.: Emergency Coordinator... We have 45 providers of disaster and contingency plans. Most of our clients are homebound and have caregiver issues. We do a lot of outreach to seniors about precautions and what they need to do. We work closely with VOAD so that the community is on the same page in terms of planning. We have a seat at the EOC so that when other seniors who are not part of our provider network call we can help. Most senior people who are usually independent need help during a crisis, and they are in crisis when a hurricane strikes. We have two warehouses to provide meals to elders.

FDEA Rep.: Alliance for Aging, making sure they have disaster and mitigation plans. Elders 60+, homebound, works closely with VOAD and EOC, has a seat and helps elders during emergency

HA Rep.: with Miami-Dade Housing Agency, administration and compliance. We have 10,000 rental units we manage. About half are elderly. We subsidize about 18,000 through Section 8 and other programs.

Pam: Stan, I'll start with you. What's your greatest challenge?

Pam: What is the greatest challenge in meeting the needs (in general not just evacuation)?

HA Rep.: Probably, the most challenging thing is if we had more funding we could deliver services to the most in-need clients.

HA Rep.: If we had more funding we could serve more clients

Pam: So there are people who can't get into the system? Translate that need into a storm situation.

Pam: How does this translate in a storm?

HA Rep.: In our environment we only deal with people we house; we don't address other populations at all. If I look back at our prior emergencies/hurricanes, what we find is that the tenants don't want to go. On (?) under construction, maybe three people got on the bus. There's no effect. Fortunately there was no damage to the units. They wouldn't leave. Again, when you have elderly and families with pets, you ain't getting them out without their pets.

HA Rep.: We only address the population that we house. We have attempted to evacuate developments but tenants don't want to go. During one evacuation we brought 7-8 buses and only 3 people got on. This was the elderly. People don't want to go without pets, shelters won't take pets.

DEM&HS Rep.: If we in some sense had sheltering in public schools. 24 electrically dependent hospitals provide in-place shelter. The challenge is we have 2500 folks in the registry. If everyone wanted evacuation we'd have to start in advance before we're even in the cone of death. It doesn't work when you have 100% participation. If you say the storm is coming, the mayor is considering evacuation, about 20% want to evacuate during an event.

DEM&HS Rep.: The challenge to us is that we have 2,500 folks in the registry. Sounds great in concept, but if it got 100% participation, it would shut down the program. We get about 20% that want to evacuate during a threat. We would need 6 or 7 days to evacuate 100%.

FDEA Rep.: The reason I'm nodding is that for elders this is true. Lots of elders are concerned because the shelters are not the best place. They are more comfortable in their home, and they would rather risk danger in their home than go to a shelter. Pockets of vulnerable people, unless they are connected to, they will not respond. Illegal immigrants are reticent to come forth in case there is legal official documentation. They don't want to be exposed. Disabled adults, the blind, the hard of hearing, the paraplegic; the EOC does an incredible job getting out applications to special needs residents. We are fortunate to have two pet friendly shelters. We are slowly getting the message out. Keep it focused and keep it out there.

FDEA Rep.: Pockets of people with high level of vulnerability, issues with illegal immigrants. We also deal with disabled adults (blind, deaf, paraplegic). There is resistance for people to leave their homes. We now have 2 pet friendly shelters which makes us very fortunate.

MDT Rep.: Special needs run through here, and STS services pre-registered way before buses evacuate because these guys are on top of everything. As far as typical hurricane/inclement weather situations, it's not just the elderly people who have lived on beaches. Residents who have been through Andrew and Wilma don't feel threatened. It's become a way of life. Rolling buses and stopping in evacuation routes in Stage 1 evacuations are underutilized; people don't want to evacuate. There is a plan in place for drivers and their families. We have E phase (landfall) suspend all service before it hits Miami-Dade County, to get back to bus depots and railroads, then they are free to go back to their homes and families. There is a list of volunteer drivers for holiday work. They don't have families and they live in condos and don't have to worry about branches falling on their homes. There is an on-call list of people to report to the bus depot afterward.

MDT Rep.: Special needs are run through EOC and STS services. That flies by itself. Stage 1 people do not want to leave their homes. People don't feel hurricanes are a threat. They have been through Andrew, Wilma... People just don't want to leave.

We suspend services 3 hours before tropical storm winds hit Miami-Dade County. We have a list of volunteer drivers that will come in first back to resume service; we have an on-call list.

Pam: You have seen and met the need.

DEM&HS Rep2.: Two groups are running until the last: trains and buses. It's a question of shut down versus service.

DEM&HS Rep2.: two people in EOC, one is for regular service and one is for evacuation routes.

MDT Rep.: We have 38 routes. Extra buses are cut instantly to evacuation points as we dwindle, up to 200 buses, running scaling down service.

MDT Rep.: 1000 buses, 108 routes, at any time we can have 100-150 buses running evacuation routes with regular service.

DEM&HS Rep.: I missed one in the evacuation. They sent one bus to pick up one person. They are accommodating every department.

DEM&HS Rep.: I have to say transit is one of the most accommodating agencies.

MDT Rep.: If DEM&HS Rep2. says I need a bus, we can get a bus that's down there for that one call. Even for those that live in the outskirts, no man's land. We've gone through this so many times. We revise the manual every year; it's constant revision.

MDT Rep.: We pick up people in the extreme outskirts; our plan is a continual working document

Pam: DEM&HS Rep2., what's your big challenge?

DEM&HS Rep2.: Misconceptions on part of everybody else. They tell our people the wrong things. They tell us to go to Georgia but that's the last thing we want to do. We want people on the coast to go inland. Don't let it catch you on the road. We are a vertical finger, and some west roads are under water. We want you to go to west in Miami-Dade. We have our own citizen transit advisor. What happened to New Orleans will never happen here. We are not below sea level; we can stay put. People down in Homestead went through Andrew; we didn't. Here, the hurricane came and went, you had an elevator full of sand and no power and you just took your last heart pill. You were too dumb to leave and now our people have to come get you. I had to beg and scream for school buses to come here. You can fit six wheelchairs on one bus; schools have multiple wheelchair buses to try to get them in. Now we have two systems that cooperate very well and together. Schools do more special needs.

DEM&HS Rep2.: Our biggest problem is everyone else telling us what to do. The Federal govern wants everyone to go to Georgia. We want people to come inland. We don't want people to be on I-95 during a hurricane.

Pam: Where does this bad info come to?

DEM&HS Rep2.: We are not New Orleans. We are not below sea level. We have a vertical evacuation. I begged and screamed to get the school board here. They couldn't come to this meeting. They have buses that fit six wheelchairs. They sit in the EOC and communicate directly with transit. The school does more of the special needs evacuation.

Pam: What about translating for the deaf?

Pam: Do you have people that translate with the deaf?

DEM&HS Rep.: County employees have two designations: department essential or EOC essential. Some are designated as translators. We could get someone to a particular shelter.

DEM&HS Rep2.: We also have English, Spanish, and Creole. We have that TTD; they have other languages to translate.

DEM&HS Rep2.: We have 3-H call center.

Pam: To review: DEM&HS Rep. said if everyone decided to evacuate there'd be trouble, but MDT Rep. said buses are underutilized.

Pam: to summarize: 1) Attitude about evacuation, 2) DEM&HS Rep. said capacity is an issue 3) MDT Rep. said you are under capacity

MDT Rep.: A lot of people don't realize our capacities; when they find out; they want us all the time. We'd rather be there than not at all.

MDT Rep.: We are, but once people know about us they will continue to utilize us.

DEM&HS Rep2.: In Hurricane Eileen, in the Alexandria Apartments on a Friday night, the sewer backed up and we had to evacuate. Later, the sewer backed up and flooded again, this time on a Saturday night. There was a foot of water in the living room but they wouldn't leave; they'd sit on the dining room table. We have a beautiful pet shelter that isn't used.

DEM&HS Rep2.: We had people with one foot of water.

DEM&HS Rep.: In all five storms, we had no more than 16-17 residents come. They said if you make it pet friendly they will come; they will not.

DEM&HS Rep.: In 2005, we opened our first pet shelter. In five evacuations we have only had about 16 people utilize it. It gets a lot of attention, people want to say we have a pet friendly shelter, but people don't use it.

DEM&HS Rep2.: We all sit around the room and plan the whole thing up. The bus pulls up and only two people get on.

Pam: Why is this state so prepared?

Pam: Why is this state so prepared?

DEM&HS Rep2.: Andrew.

DEM&HS Rep2.: Andrew

FDEA Rep.: It was the change of all changes; when Andrew hit, everybody woke up. In 2004-2005 everybody was up and alert. Then after a couple of seasons without anything big, they think nothing will happen - even seniors.

FDEA Rep.: After Andrew, everyone woke up.

HA Rep.: I can't comment on that. I started in '91 and Andrew was '92, so I didn't get to see the before, but I saw the after. I was the regional manager down south. I had 2800 units; less that 300 were habitable after Andrew.

HA Rep.: I started the year before Andrew, I had 2,800 units before Andrew, and 300 habitable units after Andrew.

Pam: Did your roles change after Katrina?

Pam: Did your roles change after Katrina?

DEM&HS Rep.: No, just more questions from outsiders about things we already do.

DEM&HS Rep./DEM&HS Rep2.: No

DEM&HS Rep2.: Preconceptions. That's not here; that's New Orleans.

MDT Rep.: Our hurricane manual gets shopped out; after Katrina it spanned the U.S. Houston, all over the east coast. I say beg, borrow and steal. I have no problem with taking the work of others and reworking it to your own. We didn't send it to New Orleans.

MDT Rep.: After Katrina, our hurricane manual went out all over the United States. I did not ship it to New Orleans.

DEM&HS Rep2.: The general manager of Greyhound Lines canceled the whole order (in New Orleans) because they wouldn't give a destination.

DEM&HS Rep2.: The head of Greyhound wanted to send 200 buses to New Orleans, but he canceled the order because they wouldn't tell him where to go.

FDEA Rep.: Not particularly. Most of the elders here feel comfortable with the plans that have been made. Whenever there is an issue here, the media gets on it right away, and elders feel it makes it worse than it is. Exaggerating it plays into their sense that they don't want to hear it or deal with it, don't want to listen anymore. Yes, elders were concerned about Katrina. New Orleans didn't have any real plan from my perspective. They called for us to send our disaster plans to New Orleans to use as a model; there was no plan on the local or state level for New Orleans.

FDEA Rep.: A lot of elders don't want to hear media

Pam: Cross-jurisdictionally, what's the biggest challenge with another county or state?

Pam: Katrina only emphasized what you were doing, what is your biggest county cross-jurisdictionally?

DEM&HS Rep.: For us in special needs and sheltering it's in reference to 'gap time'. En route, we always look in-house. Even a well-meaning neighbor takes 'gap time' to arrive; what do you do while you wait?

DEM&HS Rep.: There is a gap time when help comes from outside. We really look inside.

MDT Rep.: We supply buses to Monroe Co (the Keys) and we evacuate. With other neighbors/Broward, we offer aid in emergency drills, buses. We will have a drill in December to be sure our contact points are the same. We have good working relationships, but with Tampa and Orlando, who to contact is a critical gap. But neighboring counties we work with all the time. We have the ability to get resources on the road very quickly, coordination between bus and rail, things like that.

MDT Rep.: We supply buses to Monroe County. We offer aid to them. We have drills with them to ensure our contact points are the same. We have a good relationship with neighboring counties because we communicate with them all the time. We have the resources.

DEM&HS Rep.: The County to the south depends on us. There are interesting dynamics with a chain of islands with one road out.

DEM&HS Rep.: We have a neighboring county to the south which depends on us. They only have one road.

HA Rep.: Everything with us is post-disaster, supply food, generators, generators for elevators. For the pre-disaster, transit does a good job of supplying mobility to our clients. 100 sites to address 10000 units. (?) those site managers that manage those properties have met with those clients with special needs to request they fill out forms and keep on the ready. Emergency STS will be there to move them. The pre-planning is done well. Even after Andrew we addressed a lot of our needs by moving people from south to the north. We had to wait on federal funding. They did not move back.

HA Rep.: Everything with us is post-disaster. Transit does most of the work pre-disaster.

FDEA Rep.: Homebound special needs people don't want to leave, because if they leave they can't get back into their home. They are afraid of how long until they can return and the expense, specifically the elders which are 30% low income people. We have a good understanding in south Florida. Just this year we were brainstorming on catastrophic planning

for a hurricane 5 if the dikes for Lake Okeechobee broke. Because we are a peninsula, counties rely on each other. The State of Florida wants to keep people in place; we saw what happened with Katrina that if people leave they won't come back.

FDEA Rep.: Yes, we have cross-jurisdictional issues. Lots of the people in Monroe County don't want to leave because they won't be able to get back into their home. People are afraid to leave because of the expense. We have a lot of cross-training with other counties. We have to rely on ourselves and other counties. The State does not want people to leave the State, like what happened in Katrina.

DEM&HS Rep2.: Rebecca Garvoille went back to get her PhD and now they have a gap at the South Florida Regional Planning Council. Our problem with Monroe County is their problem ends when their population crosses into our county. Our issue is recovery, but the reality is we do this better than FEMA does. Shut up, sit over there, and pay for stuff. We have tough building codes; our structures can handle more than other places. We have a strong mitigation program. Structural issues in this county are nowhere near somewhere else. It's better to stay in your own house. Nobody who stayed in their house during Andrew was killed. Car crashes and unfamiliar intersections, followed by people who try to put their TV antenna back on the roof, and heart attaches due to exertion from doing something stupid.

DEM&HS Rep2.: The S. FL Regional Planning Council is working on a regional plan. We do this better than FEMA. We have the toughest building codes. Here you are better off staying in your own house. During Andrew, people who stayed in their own house, even with the roof blown off, they all lived.

DEM&HS Rep2.: Here's an example. At the 2005 pre-Katrina national hurricane conference, we were discussing mitigation for hospitals. Ours had everything that matters on the 3rd floor, plus elevator and generators. A guy in the audience was from Tulane. I told him if you did that, you'd be OK even if the levy broke. They said, boy, did you call that one.

MDT Rep.: We have a comfort zone; we are always ready and on alert. Any little breeze and we put the contingency plan in place.

FDEA Rep.: We have a comfort zone because we are always ready.

DEM&HS Rep.: We have to practice it too much. By Jeanne they weren't even out. The more they leave, they learn that shelters aren't comfortable; they decide to stick it out at home. Can you service the recovery post-storm if I choose to stay at home? We move you because we can't get an ambulance to you. We need a different message.

DEM&HS Rep.: In 2004 & 2005 we had 7 evacuations. The more people evacuate the less likely they want to evacuate. If you stay home, you better be self sufficient.

John: What about mandated hospital and nursing home plans?

John: Nursing homes / bus contracts?

DEM&HS Rep2.: They all want to use the same transportation. They have mandatory evacuation plans.

DEM&HS Rep.: There are 800 adult living facilities, and all must have an agreement with two receiving facilities, plus enough water and food. We have a private ambulance company that's one of largest also involved. There is coordination. There is now an ordinance that says if you are a private ambulance company you have to assist as part of your licensing. We



send the list of people to be moved; the Red Cross coordinates the evacuation. We have a seat in the EOC. If there's a Cat 5 we have to evacuate special needs within 48 hours.

DEM&HS Rep.: We have 3 hospitals that would need to evacuate in Cat.4, there is coordination. AMR takes the lead to evacuate with hospitals. During a threat the State initiates a conference call twice a day.

DEM&HS Rep2.: Homestead has been cleared to not evacuate at Cat 5. The three major hospitals are Homestead, Mercy, and Mount Sinai, and all three are shelter-in-place. There was a misconception with the SFRPC (South Florida Regional Planning Council) regional evacuation plan. Then all three counties said we don't want people to get in their cars and go. We have east-west evacuation, and Monroe County has north-south evacuation. Don't count that as being out of county evacuation by going from Miami-Dade to Broward County. A Broward County mobile home park can be picked up by Miami-Dade and vice versa.

DEM&HS Rep.: When neighboring counties come on line, there's a lot of state lead coordination.

Pam: Who's left out of this?

Pam: Who is left out of this?

DEM&HS Rep2.: Hard to say. We have people who's job is to make community presentations. We meet with VOAD agencies and other nonprofits to see what we might be able to do. The idea is to make it so they don't have to leave.

DEM&HS Rep2.: The rest of the United States (joking)... Everybody laughs... The goal here is to make it so you don't have to leave

DEM&HS Rep.: Any population with a minimal support network, with no family. I don't talk to my neighbor. Unfortunately, some people have very solitary lives. They at least know a 311 number.

DEM&HS Rep.: The people that have a limited support network

DEM&HS Rep2.: It's the poorest population who don't want to trust the government, plus illegals don't trust us no matter how much we tell them we are not INS.

DEM&HS Rep2.: Illegal populations that don't trust the government

FDEA Rep.: How to get supplies out because phones are down. We try to get out there and serve who doesn't have supplies. The message is changing: a three day supply of food or 2 weeks of medication may not be enough. We are working with prescription response; setting up medics to come down for medications here through the EOC. We can find out who needs meds.

FDEA Rep.: The preplanning is great, the post is more difficult. Phone lines are down. We need to get the message that a 3-day supply may not be enough. We are working with Rx supply to be able to get medications to people.

DEM&HS Rep2.: We are working with Walgreen's. Also for tourists, national chains can call down prescriptions.

Business Continuity Plan. (?) They would have a roving pharmacy with satellite uplink. Also an issue is cash. We become a cash society after a storm. There is now a coalition of banks. Does evacuation happen at day or night? Weekend? When parents work? If it's the first week of month they may have money; if it's the last week they don't have money. We are working

to have small businesses recover where people work so people can get paid. We get big businesses to help small business to keep the network running. IBM, Office Depot, Home Depot, Walmart, 20 banks, all working on a mechanism.

DEM&HS Rep2.: We have a big tourist population which is an issue here. Depending on the time of the month people are more willing to evacuate at the beginning of the month when they have more money, rather than the end of the month when they don't have money.

NOAA Rep.: What about hurricane education plans?

NOAA Rep.: Is there any plan or hurricane education plans?

HA Rep.: We distribute literature every time a storm gets close. We supply information to clients to do their own planning. We require if in fact they need special help they can request and file for it with specific banks. Staff at sites do prep work like tiedowns and securing equipment. It's not mandatory that tenants get involved. We put up posters about hurricane preparedness, and we let them make their mind up on what they'll do.

HA Rep.: We have some literature that we hand out, the only thing we ask tenants to request special assistance before hand. We have no mandates that the tenants get involved.

NOAA Rep.: Have shutters been put on?

NOAA Rep.: Have shutters been put the housing units?

HA Rep.: We have applied for grants for shutters. Any time we get a mitigation grant we try to do the rest of the units.

HA Rep.: We have been trying to put more shutters on, but not all have them.

FDEA Rep.: With the My Safe Home program, you can get someone to come into your home to check for vulnerable spots. It costs \$5000, but the state government will match that; will help with shutters, strengthen doors, tiedowns, 14 different things.

FDEA Rep.: May Safe Home program helps fund \$5000 for improvements.

NOAA Rep.: We had a RCMP grant but so few people took advantage of it. It's a matter of trust. They don't trust inspectors in their house, especially if things haven't bent built to code. It's a hard sell.

NOAA Rep.: So few people have taken advantage of this program because of government distrust

HA Rep.: We have 79,000 people on the waiting list. Once every three or four years, we give lottery numbers to assign people to get on the list. It's the luck of the draw.

HA Rep.: We have 79,000 people. We will only house 5,000 people that will get housing over the next 3-4 years.

DEM&HS Rep2.: Andrew got everybody's attention. Overwhelmed, but demand dropped.

Pam: With Noel, who's the first person you call?

Pam: Who is the first person you call?

HA Rep.: EOC calls us. DEM&HS Rep. is the one who calls. They are the boss in our eyes.

HA Rep.: the EOC calls us, DEM&HS Rep. calls us.

FDEA Rep.: I check everyday, and then we start the calldown list when we get notice from the Department of Elder Affairs. Once the EOC declares that something is going on we take the lead from them.

FDEA Rep.: We have a chain of command. The EOC calls us.

DEM&HS Rep2.: I watch the weather. I call Bob Boyer, forecast meteorologist, or we also have Hurrivac software.

DEM&HS Rep2.: I call the National Hurricane Center

DEM&HS Rep.: Our EOC is divided into sections. Public Safety is not here now.

DEM&HS Rep.: I look after human services, DEM&HS Rep2. looks after infrastructure and we have someone that looks after public safety

DEM&HS Rep2.: We partner with the South Florida Water Management District. We can call a pre-storm drawdown of the canals. When a hurricane watch is posted we better have everything done.

DEM&HS Rep2.: When a hurricane watch is posted, we are fixed in everything we do.

MDT Rep.: There are six phases of the hurricane manual. If DEM&HS Rep2. notifies me, I will already have progressed through four phases of the manual. I look to NOAA, DEM&HS Rep2., Hurrivac, Weather Underground. Progression through the phases is based on my call. We go through them in 4-5 hours, but we may hover at one phase if the storm hovers. Also, once there is a hurricane watch we are done. We just man this. Team leaders tell everyone what to do. By the time there is a mayor's conference at 3:00 we are done.

MDT Rep.: We are in a constant state of pre-season preparedness. We progress through the phases based on my call. As soon as DEM&HS Rep2. says your people need to be here. We are done. We send two people over here for Alpha Bravo shifts.

DEM&HS Rep2.: We got to test it with Noel. We tell businesses as soon as we know when public transportation or schools shut down, to tell their employees. Drawbridges have to be locked down; it's a big pain in the butt. If the marine community doesn't know, they are stuck on seaward side.

John: In New Orleans there is a big concern of funding. How do we fund the evacuation if the hurricane doesn't come?

John: How do you pay for it?

DEM&HS Rep2.: We are out 10-12 million if we order an evacuation and the hurricane doesn't come. FEMA has emergency and protective measures to motivate small communities to take measures and get reimbursed. County decisions that we will go in and incur are part of the emergency fund. There are 100 million dollars in the fund. If we get a declaration out of it, it would be paid. We fought to get an emergency declaration for Dennis, Ivan, or Ernesto, but didn't get it.

DEM&HS Rep2.: It costs us 10-12 million to evacuate if the hurricane doesn't come here. The county will incur the costs if the declaration does not come. The fund has about \$100 million.

Pam: What about other disasters, like a no-notice biohazard event?

Pam: What would happen in a no-notice bio-hazard event?

DEM&HS Rep2.: Hurricanes are the ones you know about. They cause the most widespread damage.

HA Rep.: Our plan is similar to Transportation in that we have a phase one, phase two, phase three. The reaction of response is out of the EOC. Everything we do comes under direction of the EOC and the mayor. We do have a nuclear plan.

HA Rep.: We have a hurricane manual. Everything we do comes under the director of the EOC. We do have a nuclear plant down south and we do have some plans for that.

FDEA Rep.: Our plan includes all disasters, not just hurricanes. We follow the guidelines the same way. We wait for the EOC to let us know, with the mayor declaring emergency. Providers call down and let me know what to do. When we do our presentations we don't just talk about hurricanes. Something could happen with the port, fear of Fidel dying and civil disobedience. We speak to our staff about these issues. Other cyclones we have to keep abreast of.

FDEA Rep.: Our plan deals with all disasters, although we are more focused on hurricanes based on where we live. We depend on the EOC. We have a port. We train our staff on all-hazards plans.

HA Rep.: We do training in same manner of what you just said.

HA Rep.: Any time you develop a disaster plan there will be overlap in response.

DEM&HS Rep.: Updated, continue to plan for a Turkey Point incident.

DEM&HS Rep.: All agencies has plans that they have to update each year

DEM&HS Rep2.: NOAA radio system and emergency alert system to radio and TV. If it's a biohazard, go indoors, stay indoors. Sirens broadcast a message at Turkey Point. It's a ten-mile emergency planning zone and they can be announced.

DEM&HS Rep2.: All schools, nursing homes, etc. has the weather radios that we can send a message across.

DEM&HS Rep.: There is a text message service you can sign up for. We can use a Reverse 911 system for automated call out.

DEM&HS Rep.: Miami alert sends text message out for people that register. The county has purchased reverse 911.

Pam: Do you have offsite plans?

Pam: Do you have plans for this building?

DEM&HS Rep.: We invested to give everyone laptops and Blackberries.

DEM&HS Rep.: We invested in laptops and blackberries so we can activate the EOC 24/7.

DEM&HS Rep2.: We use ETEAM now. There is less and less chance to (?) What's interesting is knowledge sharing; watching them watch us. Two groups at FIU have contacted us with different projects but needing the same information.

DEM&HS Rep2.: A professor at FIU is trying to set up a virtual EOC. As you get closer to a disaster you have less wiggle room.

Pam: What keeps you up at night? What haven't you done?

MDT Rep.: We dotted our I's and crossed our T's. What keeps me up is that little jog, almost hit or miss. As well as you plan there is always something you might overlook, that one person left behind who needed to get to the shelter. I give kudos to DEM&HS Rep2.; it really is a well-oiled machine. When you see the EOC in action, we come off very well.

MDT Rep.: We have dotted out I's and crossed our T's so many times but there is always something that you miss.

John: If an elder with a wheelchair called 911, who is not on registry, what response do they get if, lets say, they called when the winds start.

John: What would happen if someone called in a wheelchair?

DEM&HS Rep.: Our cutoff is 12 hours before arrival of tropical storm force winds. We stop protective measures at the arrival of the outer bands. Don't focus on eye. There must be time to deliver the person, get the bus to the depot, and the driver to a safe place. After that cutoff we call them 'last minute callers' at 311. After that, the message changes to shelter-in-place measures. The mayor has town hall meetings.

DEM&HS Rep.: 12 hours before a storm we accept our last callers on 311. After that we give directions to shelter in place.

MDT Rep.: Three hours before storm force winds, the buses and Metro Rail shut down. They are all high profile vehicles. There are very rare occasions when we go inside that window. Two years ago we made an exception. It is tough to say no to that person. That bus driver volunteered with a mini bus to get that person. It's a really tough call.

MDT Rep.: We shut down 3 hours our system. There are very few exceptions. It's tough to say no, but there are very few exceptions that we go into that 3 hour window.

DEM&HS Rep.: The plan guides you but it never goes through the way you hope you had enough conversations on sunny days to respond during a disaster.

HA Rep.: You have to develop a plan that addresses the needs of your clients as best you can, and provide that service. We all have unknowns. We don't know what's coming; we just hope it's encompassing enough.

DEM&HS Rep2.: There is a Rumsfeld quote: what bothers you are the things you don't know you don't know.

Pam: Let's say you are almost at Phase 6; is your response flexible to meet that?

DEM&HS Rep2.: You mean procedural rigidity.

DEM&HS Rep.: The disaster never goes the way you plan. Have conversations with your contacts on sunny days.

DEM&HS Rep2.: Everything knocks you off plan. Murphy's law is supreme in emergency management.

DEM&HS Rep.: Our plans are apolitical but disasters are not apolitical.

DEM&HS Rep2.: 911 always has current information. They try to never be more than a few minutes behind being up to date.

NOAA Rep.: For the elderly, prior connections are essential.

FDEA Rep.: Try to communicate that, especially with relatives out of the area. People are calling all over creation to find them. Have their luggage ready, ensure that they have something when they return home. We need services to go to those who really need them, not have everyone take advantage of them.

FDEA Rep.: If people have to go to a shelter or some else's house, they need to have their bag ready.

Pam: In New Orleans, some were dropped off at airports without their charts. We just lost those people. Every nursing home has to have a plan.

NOAA Rep.: We can be smug now, but we had issues with nursing homes in Andrew, too. We had a bus driver drive up to FIU and leave a bus with the passengers still on it.

NOAA Rep.: We had bad things that happened during Andrew, but that was our wake up call.

FDEA Rep.: We are working on pocket sized identification things with their prescriptions and a lot of detail to ensure they can get meds somewhere else. A lot of elders cannot remember their prescriptions.

MDT Rep.: The reluctance of people to use buses is in some areas. It's not that every place is a waste to send resources to. People won't leave South Beach. In some areas people pack the buses to standing room only.

MDT Rep.: The reluctance of people to evacuate is why we have extra capacity.

NOAA Rep.: Surveys show only 5% won't go because of pets. But those are an important 5%: usually elderly.

NOAA Rep.: our surveys show only 5% of people stayed behind due to pets

John: Do you keep extra buses because of emergency preparedness?

MDT Rep.: Our bus fleet is at a capacity of 105 routes. We have the luxury to cut runs in an emergency. Headways cut that 10 minute bus from 20 minutes because we have 1000 buses. Plus we're maintaining service as best we can during evacuations; we are still moving the public on normal routes. Although we are cutting down, putting buses in the depot. Bus operators are telling transit riders about conditions on the bus (and train operators in trains and stations and Metro Movers.) We need to get passengers informed. This is your last trip. On a normal sunny day I don't even know how many we move; I'll find out and call you later.

MDT Rep.: No, our fleet is based on the 108 routes that we have. We have the luxury to cut headways to free up buses because we have 1000 buses. As we cut service, our bus drivers and train operators notify passengers of the emergency.

John: It's on the website as 79 million passenger miles, I think.

DEM&HS Rep.: Corrections is our backup. It's another fleet of buses. We've never gotten to that point. They go to the meetings but they are quiet because it's never gotten to that point.

Claire: Is South Beach vulnerable? If not, why do you want them to leave?

DEM&HS Rep2.: With storm surge, the deeper the water the less the surge. Everything south in Miami-Dade...

DEM&HS Rep.: if you need 911 service, we can't get to you.

NOAA Rep.: When the causeway's under, you're stuck.

DEM&HS Rep2.: If you need supplies you need the ability to walk downstairs.

NOAA Rep.: With the media, ratings run their game. But not everybody should go. With Hurricane Georges and the Keys, there was publicity about bad things happening to people who evacuated. There were delays for people coming back into Keys. The media had more effect on people who did not evacuate. People who went through it are more likely to say they will evacuate next time.

NOAA Rep.: The media is a problem. They encourage everyone to go, but we are very clear that not everyone should go. The people that evacuated are more likely.

DEM&HS Rep.: Images of Katrina led to shadow evacuations.

DEM&HS Rep2.: There was no reason to evacuate Houston. None.

John: Is there a contraflow plan?

DEM&HS Rep2.: Absolutely not. If you put our entire population on the Turnpike and I-95, it's not until Martin County that people can fan out. Here's a crazy thing: our legislators decided that all gas stations along the route should have generators, but hopefully you evacuate before the power goes out. As for contraflow, the Keys don't want it. Krome Avenue (a major north-south road in Homestead) has been fighting to four-lane, but in reality that's only for the Keys traffic.

DEM&HS Rep2.: Absolutely not, you can't do it with the road network.

Pam: How many permanent staff in Miami-Dade Staff?

DEM&HS Rep.: There are 25 permanent staff in the EOC. We have 40,000 in our three evacuation zones, not including tourists and transients. (?)

DEM&HS Rep.: 25 staff, Cat.3 20% seeks shelter

DEM&HS Rep2.: Miami Rescue Mission and Salvation Army psychologists said homeless people don't like to be trapped in a darkened building. Homeless shelters have been mitigated using hurricane glass instead of shutters.

DEM&HS Rep2.: We have homeless shelters that have been mitigated so there is no need to evacuate from them.

## **Transcript: The Miami Nonprofit Focus Group**

National Study on Carless and Special Needs Evacuation Planning, November 5, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Burmeister, Ethnographer/note taker

### Participants:

ARC Rep., American Red Cross

ARC Rep2., American Red Cross

CPH Rep.. Community Partnership of the Homeless

DEM&HS Rep2., Infrastructure Branch Director, Miami-Dade Department of Emergency Management & Homeland Security

NOAA Rep. of National Oceanic and Atmospheric Administration NOAA & former FIU professor

VOAD Rep. Volunteer Organizations Assisting in Disasters

*(In creating this Transcript, three sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by any two note takers.)*

### Transcript:

Pam Jenkins introduced John Renne, who is Project Director for this grant from the Federal Transit Administration regarding evacuation of the "carless", focusing on people with special mobility needs. The goal is to understand the state of preparedness for special mobility needs.

Pam: What's your biggest challenge?

Pam: What's your biggest challenge?

CPH Rep.: The ready availability of transportation. We are connected to the EOC when we have hurricane awareness starting. We do this by pre-planning. Our plan is approved by the trust. The EOC lets us know if we need to evacuate. The bus/transit provides buses to our facility from Metro Dade. We make arrangements for special and regular populations. Special needs folks are evacuated prior to. We are in place by the first of June through Nov 30th. My staff has been doing this for nine years. We work with a transient population. Homeless persons can stay with us between 45-55 days up to 6 months. We keep a card catalog of all residents, and there are 300 residents in the facilities. We have a travel pack for each one. As a homeless shelter we don't expect people to have these items. We have outreach teams. We have two facilities; one in the evacuation zone and one outside the evacuation zone. Teams go out and identify people in the community. There will be those that refuse to come to a shelter under normal circumstances, but in a hurricane they will come in. We are at capacity at 430. We try not to overburden the south facility because in an evacuation we have to ship them to the north facility. Our entire center, not just special



needs, must evacuate at Cat 1 and Cat 2. By the time it gets to the point of no return we need to be on the road.

CPH Rep.: Getting transportation. Transit agency brings buses to the facility. Special needs get evacuated first. The average stay in our facility is 45 days, although people can stay up to 6 months. As people come in, we identify who has special needs. We have a travel pack for every resident

ARC Rep2.: We provide personnel for shelters activated through the emergency management office. They're not considered special needs; they are general population shelters. But if folks with special needs show up, we try to find them a shelter to accommodate them. If not, we do the best we can to meet their needs. No, we don't get them to the shelters. We just provide the service to folks that come; we don't provide transportation.

Pam: How do you reach people not in shelters?

CPH Rep.: The city outreach teams are responsible to go out and bring people in. They have vans for that purpose.

CPH Rep.: We have 3 outreach teams that go around when a storm is approaching. We have a capacity of 300 an emergency capacity of 340. Our entire center evacuates, not just people with especial needs.

ARC Rep2.: There is an evacuation assistance program through the county.

ARC Rep2.: We provide personal for the shelters. We manage general population shelters

DEM&HS Rep2.: they manage only general pop. Shelters.

ARC Rep2.: we are not involved in getting people to the shelters. The transportation is done by the county.

CPH Rep.: the outreach teams go out and bring people to the shelters.

DEM&HS Rep2.: They all have similar issues. Team Metro has neighborhood offices in downtown and the hinterlands, so to speak. There is a whole process to round them up.

DEM&HS Rep2.: there are other non-profits that also have outreach teams

Pam: What is the barrier to get information out?

ARC Rep2.: The education and preparedness side. The questions we run into are about actually registering for these programs and taking steps to get those. I don't think it's a barrier of access to tools; it's more that people are in denial and don't want to leave home, especially elders and people with pets. It's something we battle with. It's about the constant education; it's vital information, and it's important to register.

ARC Rep2.: Human denial. People with pets. People that don't want to leave their homes.

CPH Rep.: We are in the southernmost part of the county. We are a shelter of last resort. We have people coming up from Monroe. We probably have the only facility in the country with a dog kennel. I use the term evacuation on two levels. The elderly do not feel safe at home, and won't leave their pets. If it's a dog we can take them, but we don't have space for cats. We have room for 40-50, but we do have additional space that can be converted to living

space. We are shelter trained from American Red Cross. In Katrina/Rita/Wilma, we even prepared meals for the Red Cross. We have good outreach teams that know where enclaves are, know where trailer parks are. Again, we are careful about who we bring in, careful about increasing the burden of who we have evacuate. We agreed if the Red Cross could come in and train us on shelter care, if we evacuate we can assist you (Red Cross) in running a general shelter. We would then make our facility available to prepare food post-event. You all lured away our food service manager to work for the Red Cross.

CPH Rep.: we are a shelter of last resort for people from Monroe County. We probably have the only facility in the country with a dog kennel. We have about 40 or 50 spaces available, and we can even go more than that. We provide shelter and food in coordination with the Red Cross. Because we have such good outreach teams we generally know where people in the community are. We are Red Cross trained as a shelter.

DEM&HS Rep2.: The Red Cross set up a facility just north of here to do cooking.

Pam: What are your mechanisms to inform vulnerable populations?

Pam: what are the mechanisms you use to inform vulnerable populations?

ARC Rep2.: We do presentations, we have visuals, we distribute literature. Especially for the elderly population. They prefer that we are there; they don't want to go through literature. We practice year-round preparedness. We work with Alliance for Aging, etc. to get access to the elderly population.

ARC Rep2.: Presentations to the community, literature. But the elderly prefer presentations we work with Alliance for Aging and Community Action Agency

Pam: Did Rita, Wilmer and Katrina Change the way you work?

CPH Rep.: Katrina, Wilma, and Rita took the plan off the paper and put it on the floor; they put it into action. Did it change anything? Yes. Last week we had training down south with the Red Cross on Homestead Air Force Base. We talked about how to plan to coordinate in future, and how to make the Red Cross more visible in the community. That's all a part of having gone through this in '05, and the lessons learned. We learned how to coordinate with police departments and the Red Cross. The Red Cross brings volunteers from the whole country, people who don't know the area. We learned we need more police presence. The streets are flooded out; how do you get to people and get them out? It's mostly NGO's and non-profits. We will have a follow-up meeting next week to see what we can do to improve on '05 in terms of impacting South Dade.

CPH Rep.: It put our plan to work. Last week we had training on the homestead Airfare Base that we discussed much of what we are taking about now. One of the things about Red Cross is that volunteers from all over the country they don't know the local streets. The Red Cross-Jessica Cadoy-branch Manager for southeast Red Cross

ARC Rep2.: Yes, it changed what we do. Certainly, with every response we learn something new and make changes accordingly through what we learned from those responses. Elderly and migrant populations are the most vulnerable and fall through the cracks. They don't come forward for assistance that they are eligible for because they don't know about it. Migrants don't know about NGO's versus the government.

ARC Rep2.: Every response changes the way we respond. The Migrant populations fall through the cracks because they don't understand the available benefits

CPH Rep.: We were buttoned down two days before. It was a Category 2, and we should have been gone. But at least we learned that we can withstand a 2! But we still plan to evacuate on a 1.

Pam. What are your cross-jurisdictional issues?

Pam: What are cross jurisdictional challenges?

CPH Rep.: The major thing is communication; speaking the same language, not overflowing with calls. If two mules are pulling a wagon, there's always a lead mule. We've got so many municipalities here, and (most) everybody's got their own law enforcement. If we had a catastrophic event, how do you get all those folks...how do you insure that we're all speaking the same language? Everybody's checking up on everyone else. I know DEM&HS Rep2. will have the buses here. We need to get out of here in an orderly fashion. For people like us in the civilian world, if the phone systems go out were dead in the water. I can't talk to my own company if all cell phones go down. This needs to be addressed. How do we stay in touch with one another?

CPH Rep.: Every time there is an emergency the big issue is communication and making sure everyone is speaking the same language. We have so many Municipalities in Miami-Dade County. How do you all get these various police departments to speak the same language?

If the Phone systems go down, we are dead in the water. How do we all stay in touch together?

DEM&HS Rep2.: Here just the county mayor goes on TV. He is the only voice; there is just one message and it's always the same.

DEM&HS Rep2.: The county mayor goes onto TV and gives only one message. This is not the same as Broward County where you have many mayors saying different

ARC Rep2.: Competition within our municipalities; we have our Red Cross offices in different areas to work with those jurisdictional agencies. We try to get into their response plan to see what we can do.

ARC Rep2. : we coordinate with various Red Cross Chapters, but having municipalities is an issue.

DEM&HS Rep2.: ARC Rep2., I know it's political, but politics is a major problem in the shelters. Commissioner A, or Commissioner B, or Commissioner C wants to show they can move things. They show up at your shelter, not authorized, talking to news media. There was a TB scare in a center when a resident shared with the media rather than up proper channels. This was maybe during Katrina; it was one of the ones when we evacuated. Control of information at those centers is important; nobody should talk to the press. Politicians love to say they are working on behalf of their constituency and show up with things that are not helpful, using means that aren't helpful, and it can lead to pandemonium.

ARC Rep2.: Shelters are run according to policies...

DEM&HS Rep2.: But politicians don't follow rules.

ARC Rep2.: If we don't have enough for all we get into issues of favoritism or discrimination. We don't want a partial supply of cots from a politician; if you have enough for everyone, we'll take them.

DEM&HS Rep2.: We took generators from Publix, Winn Dixie, and Walmart. These commissioners are telling everybody we were opening up a center (?) but we'll see. It's about who has more clout.

Pam: CPH Rep. you said speaking the same language? What type of language law enforcement, social service?

CPH Rep.: We are ahead of the country in terms of hierarchy, but there are agencies that are out there on their own that need to know how to communicate and what things mean. Several always contact us to hook into us. They are our partner agencies, but I don't mean they are under the same administration as us. We are the big dogs on the block; they call us asking, "What do we do?" There are some super-connected business people, and we are seeing some deep pockets. We have two facilities, and each (?) holds 300-400. Each can grow by 10-15% in an emergency.

CPH Rep.: Our Partner agencies call us in time of need. We are seen as deep pockets agency. We have 300 beds in one location, 400 in another

Pam: What is your biggest agency for cooperation?

Pam: Who is the most important partner?

ARC Rep2.: the County is our biggest partner

ARC Rep2.: Emergency management. They assess up with us opening those shelters, and provide transportation for evacuation assistance.

DEM&HS Rep2.: The EOC has trained to assist the Red Cross in shelters. They go through training from the Red Cross.

ARC Rep2.: We all act in conjunction.

CPH Rep.: For information we go to the EOC, for execution we go to law enforcement. Miami-Dade and City of Homestead Police Department. Each year there is a different contact person, so we update our plan. We go to DEM&HS Rep2. for information and police/law enforcement for implementation.

CPH Rep.: For information dissemination it's the EOC. For the evacuation it would be the police department, the police have copies of our plan. Metro- Dade police department would be the ones that help us on the ground.

NOAA Rep.: The homeless on the street...(breaks off)

NOAA Rep.: The Homeless that....

VOAD Rep., Chair of VOAD enters.

VOAD Rep. arrived- Chairmen of VOAD

Conversation about street homeless

DEM&HS Rep2.: Miami- Dade have two positions here at the EOC

CPH Rep.: Most of the street homeless are brought to our shelters

NOAA Rep.: if you know where a homeless congregation is, how do you get them picked up?

CPH Rep.: Either/or. Our outreach team has identified those I call “deep in”, who won’t come to a shelter unless it’s an emergency.

NOAA Rep.: Do feeding facilities give any information to homeless clients?

CPH Rep.: Most do. Also, their locations dictate where you might find people.

DEM&HS Rep2.: We have a Critical Incident Management (?) team getting the message to homeless in the streets here in EOC.

NOAA Rep.: They aren’t taken to general population facilities?

DEM&HS Rep2.: They take them to our shelters.

NOAA Rep.: The reason I asked is my experience with crisis ministries in Charleston. They said we don’t want to be liable for them. Shelters get angry when homeless come; they don’t mix well with the general population.

NOAA Rep.: In Charlotte, they didn’t want to bring homeless to Shelters

CPH Rep.: We are staffed 24/7. Our staff will accompany them to the shelter. That issue was raised and dealt with.

CPH Rep.: Our staff goes to the Shelters to have a high visibility and oversee the homeless.

DEM&HS Rep2.: School police have their own training, their own view on how to deal with them. They separate them from the general population.

DEM&HS Rep2.: The Shelters are in the Schools. The police are trained to deal with the homeless

VOAD Rep.: We are national models. People are coming to Homeless Trust to find out what we are doing. So we aren’t talking to people for the first time when the storm comes up.

VOAD Rep.: We have a national model for dealing with the homeless

NOAA Rep.: During Andrew they had to send additional buses at the last minute to evacuate the Homeless.

CPH Rep.: We now have 2 homeless Shelters as a result of Andrew

Pam asked VOAD Rep. to introduce himself. He asked us to introduce ourselves.

VOAD Rep.: Hands on Miami is part of National Points of Light and Hands On Network, a volunteer civic engagement. The last one was last Saturday. We organized projects like landscaping, environmental, mini-extreme makeovers. There are many collaborating organizations. Red Cross is one of our top partners. We have a great partnership with the county, this office here. Many were trained in what we are calling ‘Cert Light’. There is 4 hour training for DART teams (Disaster Assistance Response Teams) to lead and coordinate volunteers post-disaster. Folks who are unaffiliated are lead by people with that training. Fortunately, we haven’t had to activate one yet.

VOAD Rep.: President of hands on Miami we have 8000-10000 volunteers. We organize volunteers for over 400 partners. We have 250 trained (light) DART, Disaster Assistance

Response Teams. These people help people after the disaster. We sent hundreds of volunteers north a few years ago.

Pam: Is any of this pre-storm?

Pam: Do you have any Pre-storm?

VOAD Rep.: Yes. There is pre-storm training and volunteering, but not a transportation piece. Liability is an issue. We take a community group and pair them with a senior facility like an ALF or a tower of retirees to pre-event talk about what are their needs. I'm also chair of VOAD volunteers. There are about 70 organizations that are a part of VOAD.

VOAD Rep.: we do pre-storm training, but nothing interns of transportation. This is one of our problems.

I am also the chair of VOAD (volunteers of Active Disasters). We go out to food banks, Church groups who don't normally have a seat on the preparedness table. We meet on a regular basis with a number of agencies to prepare.

We break the county into 7 quadrants based on the EOC model so the VOADS know how to coordinate with the various levels of government: How do you get the 20% of the population that is not connected. All responded that they train their agencies on evacuation.

Pam: Do you all train your volunteers?

CPH Rep.: Yes.

VOAD Rep.: Yes.

ARC Rep2.: Yes.

VOAD Rep.: Show us your COOP plan and the training that went along with it.

DEM&HS Rep2.: FIU and Miccosukee Tribes are like a city unto itself. At FIU, it's a city unto itself, and it's full of students without cars.

DEM&HS Rep2.: The universities and the Miccosukee Indians are large groups that don't have cars

VOAD Rep.: For every funded agency last year, in 60 days you have to report back and give us the COOP plan.

VOAD Rep.: All Funded agencies must have evacuation plans. Counting funding United way. Evacuation plans are reviewed every year to make sure you have a continuity of operations plan.

John: From where are you funded?

VOAD Rep.: County, United Way, private foundations or public funding. COOP plan stands for "Continuity of Operations Plan".

DEM&HS Rep2.: Mitigation strategy is key. These agencies cannot help the community if they get ripped up themselves. Make your facility a fortress and make sure they are intact to provide services. Lots of small agencies joined the group and we are getting the funding.

DEM&HS Rep2.: we recognize that agencies can't help anyone if they are incapacitated.

CPH Rep.: If we were wiped out, where would we continue those services? We would partner with and move operations to their facility if we provide phones, etc. It filtered down from the trust. Training on COOP (?)

CPH Rep.: We had partner with other agencies to show that we could continue our operations to how we could continue to operate after a mayor disaster.

Pam: Let me see if I understand this. There are three types of training an agency does: individual training on their staff, training on what to do with clients, and training on what to do with itself.

Pam: Summarize: 1 staff training  
2 Agency training

VOAD Rep.: Believe it or not, we have a national model in Starbucks. Two years ago Starbucks started training. We've now trained over 200 employees. They've got their own COOP. They first ask what can they do to help their associates; then, they come to help with a DART team, or Red Cross. They are brewing and bringing coffee to facilities. They've now rolled it out across the state. We think that model can be used with other companies. We have 10 companies lined up. We offer train-the-trainers on putting together disaster response. Banks, etc. are interested.

VOAD Rep.: 1) Most agencies have a network that they can tap into for volunteers.  
2. Starbucks employees (200) have been trained that many of these employees could become volunteers to brew coffee and bring it to the shelters.  
Starbucks now has rolled this model out across the state.

Pam and NOAA Rep. depart to catch a flight.  
Pam and NOAA Rep. Leave-

John: What about a no-notice scenario?  
John -no notice

VOAD Rep.: First, we are driven by technology, calling and text messaging volunteers.  
VOAD Rep.: technology (email + phones) would help

DEM&HS Rep2.: Take the example of a chemical incident. We grab them and go sideways until they are out of the plume.

CPH Rep.: We get notice from our neighbors because we are neighbors to an air force base. The siren towers talk to us. We all have emergency alert radios on our desks. 80-95% of our population are "carless". Our plan covers tornadoes, Turkey Point, spillages, hurricanes, most will involve evacuation if needed. The main thing is communication. We meet with base on annual basis.

CPH Rep.: We would need notice after notice; our direction would be taken from EOC. Our plan B all-hazards. Communications is key.

DEM&HS Rep2.: A biohazard isn't an immediate event. A chemical event is evacuable. Turkey Point may or may not require evacuation. Maybe shelter in place; go in and stay in.

DEM&HS Rep2.: Bio-Hazard is Shelter in place

ARC Rep2.: We had a gas leak explosion and three buildings were affected. We were going to evacuate 700 residents but only evacuated 300. We follow the plan through; we looked into sheltering options. We are working with the plan.

DEM&HS Rep2.: The National Strategic Stockpile. We call the CDC and they put the plan in action. They send an airplane with medicine for everything on the planet. Once we determine the problem, we take medicine and distribute. Our biohazard plan is do not evacuate; stay put and we'll bring it to you.

John: What resources do your agencies have? Evacuations are costly; who pays for that?

John: how do you pay for this?

CPH Rep.: We pay for food and packs for 300 residence plus staff, bunk beds, mats for beds, blankets. I'm not in loop for the rest of the funding. About half our staff hunkers down with the clients.

CPH Rep.: we pay for a lot of packs.

VOAD Rep.: We obtained a grant from the Peacock Foundation, a State Farm grant for youth disaster response institute through summer camps, service learning for 800 hurricane kits put together by kids and dropped off at senior facilities. We send kids to seniors for seniors to tell their story.

CPH Rep.: We have memoranda of understanding with the Red Cross and other agencies; 10 trucks with food, forklifts, pre-ordered, pre-menu selected. Cisco has prearranged contracts with them.

ARC Rep2.: We take into each other across the board for resources. We do have a vendor program to get services done as well.

CPH Rep.: Big companies step up to the plate like Walmart and Home Depot. They take it seriously from the top level, the corporate level. Target came down, Visa sent an apology that they couldn't come. Banks help. Here in Miami-Dade we tap into that.

VOAD Rep.: The Chamber of Commerce is involved.

ARC Rep2.: We always start out local in getting resources first, then reach out.

Clair: What about pharmacies protecting against looting, and methadone clinics?

DEM&HS Rep2.: We've looked at that big time. I can give you contact information.

DEM&HS Rep2.: Politicians are an issue. They never show up for the drill or read the plan; they just want to be on TV. They always know more than you do.

Clair: How do you prioritize?

DEM&HS Rep2.: Everyone says 'If they didn't use it, it's fair game for me.' When the New Orleans clock strikes midnight we will get their money.



## **Transcript: The New Orleans Government Focus Group**

National Study on Carless and Special Needs Evacuation Planning, August 16, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Rina Thomas- Ethnographer/Note Taker

Christi Langoni- Ethnographer/Note Taker

### Participants:

DHS Rep.; Director, City of New Orleans, Department of Homeland Security

OEP Rep.; Director, City of New Orleans, Mayor's Office of Emergency Preparedness

RTA Rep.; Public Affairs Director, New Orleans Regional Transit Authority, President, South West Transit Association

RTA Rep2.; New Orleans Regional Transit Authority

USDOT Rep.; Intelligent Systems Traffic Ops Engineer, U.S. Dept. of Transportation, Louisiana Division- Federal Highway Administration

Hotard Rep.; Hotard Motor Coaches

RPC Rep.; Director, New Orleans Regional Planning Commission

GOHSEP Rep.; State of Louisiana, Governor's Office of Homeland Security and Emergency Preparedness (GOHSEP)

GOHSEP Rep2.; State of Louisiana, Office of Homeland Security and Emergency Preparedness

DSS Rep.; State of Louisiana, Department of Social Services

*(In creating this Transcript, three sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by any two note takers.)*

### Transcript:

Transcription starts during the pre-introduction chatter in the room...

GOHSEP Rep.: An MOU agreement with Memphis, They've been planning for 6 thousand

Pam: It's the city that is responsible for getting them to the trains

GOHSEP Rep.: The train is a federal contract with Amtrak

Pam: So what's the state's role in this?

GOHSEP Rep.: GOHSEP is the multi-agency... We try to put the plans together

Pam: Do you come out of law enforcement?

GOHSEP Rep.: I do, probation and parole.

Pam: So how do you find this, being a sworn officer to..?

GOHSEP Rep.: Public service all around. Private sector for a year. Wasn't for me. Emergency mgmt is a good field, brand new.

Pam: You know a lot of the city's homeland sec is ex-military. We got real, real issues. Hospitals, decisions we made in 60 days will be the biggest economic decisions will the biggest decisions that control the growth of the city.

Note: Someone arrives

John R: You working for.?

Group Member: I'm tasked temporarily at FEMA.

Note: OEP Rep. arrives

John R: RPC Rep. has said he was going to come but... here he is... We're missing RTA, they'll probably be coming in a little bit late. Well, I'm working on a project for the FTA office of civil rights. Basically, as a result of Katrina, they want to find out how the city is, if the regions are responding to the needs of people without automobiles. We're having 5 different focus groups in cities starting with New Orleans. We'll be going to Miami, New York, Chicago, and San Francisco. Not necessarily just focused on hurricane but, in general, all disaster planning. This morning we brought in people...

Note: Hotard rep & someone else arrives

John R: So in a nutshell, this project is to try and understand what's going on in the country and what do local, state, fed governments cross jurisdictions. How do you create policies, what are the issues, how do you deal with these issues. Pam is conducting the focus group. I'm the project manager but Pam will be conducting the meeting today

Pam: I want to thank you all... spent time in law enforcement...when I said two thirty, I meant two thirty. I've spent a lot of time in the last couple years working on evacuations. We will take notes. Will just say respondent said. If there's something in there you don't want, we'll take it out. I've done focus groups throughout the country now. I may interrupt you...just to move focus groups along... the very first question I'd like to do is I'd like you to answer the question in the first way: tell us who you are and what is your major role in the..

DHS Rep. E: I'm DHS Rep., Director of Homeland Security for the City of New Orleans. I have responsibility for the Police Department, Fire Department., EMS, I'm also the federal administrator for <inaudible> which encompasses the city of New Orleans, Jefferson, Plaquemines... involved with all the major agencies with... major role in the evacuation?

GOHSEP Rep.: Acting evacuation transportation planner. We assist in the agency as far as writing plans for... I work with DOTD or FEMA as needed.

USDOT Rep.: I'm the traffic operations engineer for...LA division. I'm also involved in intelligent transport systems. This is my 2nd summer I've been tasked on the USDOT/FEMA evacuation team to provide support to the states....

Pam: Were you here pre-Katrina?

USDOT Rep.: I've been here all my life

RPC Rep....Director of the Regional Planning Commission... we assist in support roles with data and mapping...

Hotard Rep.... I own Hotard coaches as well as <inaudible> private transport providers. I serve as president of the South Central Motor Coach Association, association of motor coaches over a 5 state region. The evacuation process is something we necessarily have a lot of interest in.

RTA Rep.: I'm public affairs director for the RTA. We obviously handle evacuation within the city to various pickup points. Our regular planning staff is out on funeral leave this week unfortunately. I was going to be joined by ops...

OEP Rep....City of New Orleans Office of Emergency Preparedness... During the evacuation, I'm supposed to orchestrate this plan.

Pam: The nonprofits were impressed by this plan.

OEP Rep.: It looks good on paper.

GOHSEP Rep.: transportation planner GOHSEP Emergency

Pam: If you think of the last year and half – almost 2 years (interjected by participant) – what are the biggest challenges in meeting the needs of the carless?

OEP Rep.: Probably identifying them and in our plan getting them to move early. Those are the 2 biggest challenges.

RTA Rep.: It'd be much the same as # 1, convincing them to go when they need to go. Making sure we're in the right place at the right time.

Pam: For you, what was the biggest challenge?

Hotard Rep.: The biggest challenge previously has been from an organizational point of view. Didn't have preparation and plans that people have now. A number of contracts that are out that are holding motor coaches from not just locally, but the entire country... Nobody thought it'd go down the way it did...

Note: RTA Rep2. enters

RPC Rep.: Identifying the populations at risk, number 1. Second challenge is getting the information to the people so they really know what to do... there's a personal responsibility element here... but people tend to tune it out until the crisis is upon you... if you talk to the

guy on the street, people won't know where to evacuate to and what the procedure's going to be

USDOT Rep.: clearly defined planning process to allocate resources  
Limitation in the market of the assets to meet the requirement and...

GOHSEP Rep.: I would say, people wait until the last minutes. The biggest problem I'd say, not getting out early, waiting till the hurricane's here, and then saying uh-oh, I got to get out of here

RTA Rep2.: information and getting them out to meet that time line... has a pretty good plan in effect here. The city evacuation plan... if we can... in that timeline, we can get them out of here. Moving toward the timelines we have set.

Pam: DHS Rep., what's the biggest challenge

DHS Rep.: If you don't preidentify, you can't allocate resources. You got to match the resources with the information. And the second one in this is not just delay. I got to identify the people, numbers that I need, types of problem, the carless is an easy spectrum to deal with as a study, you got to break that into pieces, finite numbers, and different resources to move different types of citizens out of the city. Identification for resource allocation. And convince those people that they got to go period. If you don't pre-identify, you can't allocate resources. Making the decision. Break carless into pieces.

RPC Rep.: You're dealing with a human behavior problem and it's hard to tell what people are going to do... if you don't know how people are going to respond that plan, it makes it very hard to allocate resources

Pam: What are your thoughts about this identification process? Who are we not identifying, who are we not going to know about in the storm?

OEP Rep.: It's everybody. People in the hospital, in their home now not listening to the TV, hearing-impaired, Spanish-speakers, those who don't pay any attention... we have brochures out... but we can't make them read and we can't make them comprehend... it's the nature of people, not just New Orleanians to wait to the last minute. There's a mishmash of people too, and identifying...

DHS Rep.: We're talking people....Other factors than just bodies...We got laws that... pets... laws that say I can't take guns. There are those other federal requirements. The greatest challenge in planning is something I cannot control. It's the difference between mission and compliance. This is a mission. I'm never going to comply 100% with the requirements. Director of Aid <inaudible> says "DHS Rep., do your planning in a capabilities-based environment." I cannot plan for what I don't have. I can only plan to use for what capacity and capability I do have. The difference is mission is a risk management philosophy. People living in risk....compliance over here, written by hundreds of attorney, who're going drive you into risk avoidance <inaudible> in world. Do your planning in a risk management mode but lawyers have you in a risk avoidance mode. There is no way I can comply with compliance driven orders. Only city in the world...court agreement...going over by the federal government for ADA compliance.

OEP Rep.: With the federal government sending us 22 rail cars which are not ADA compliant.

DHS Rep.: But the fed government is not looking at themselves, they're looking at me.....you have the mission and the difference is the mission ...are not compliance-driven orders...when you respond, in mission mode?... after, in compliance mode? Everything will come back to bite you because there is no city in the country that can comply...there isn't anybody in our role in any city in the nation who can do this in risk avoidance role.

Pam: One of the things that John is recently interested in, and I am, too, is that it's a different kind of challenge. What is the cross-jurisdictional challenge? What do you see, trying to evacuate the carless in the federal, state, & local realms?

USDOT Rep.: To continue what...is saying it's a matter of planning and expectations...one expects compliance...the other expects mitigation <inaudible> One group has compliance driven expectations. All I can do is, this sort of, the problems get exacerbated in a multi-jurisdictional environment... My highway experience, we would've never been able to build the interstate system if we didn't have a planning process with a clearly defined plan...each jurisdiction and what they are to provide. The same thing between the state and the city. To roll out a national highway that crosses national sovereignties, there needs to be clear planning in place... I don't see that in the emergency management world with that allocation of risk, the planning priorities, the financial priorities are clearly defined to all parties. Need a clear planning process to allocate resources.

Pam: To all 3 levels?

USDOT Rep.: At all 3 levels

RPC Rep.: I agree with John's statement. I can put a different spin on it. The federal highway program is federally mandated...come in line. Talking about evacuating the carless, burden falls on local, in a case like this the burden falls on the local governments. Big issues with jurisdiction, what is the role of the state? What physical resources are they going to make available to serve these people? Up until Katrina, it was a local, municipal, county problem...now we realize that disasters like Katrina have far-reaching implications.....we need a clearer chain of command....state is beginning to realize they have a responsibility here. State itself is being limited by local governance who says we don't want certain populations in our area, we don't....

DHS Rep.: We got a national <inaudible> system... everything's local and we form a unified command here in New Orleans. If I'm in charge of unified command, you know who has command written in his title? It's the Commander-in-chief. Everyone else is a coordinator... The fed government and state...state has to live with it... the fed continues to believe... if it need 5 widgets... that's a decision process who gets the 5, it's not a coordination process... the joint field office is a coordination, it's not a command agency. Catastrophic incidents mean the resources do not meet the needs. Feds believe you can coordinate resources but you can't coordinate resources if there are not enough... A catastrophic incident you're not commanding anything. The impact on all these additional resources is not a realistic assumption. Somewhere we need to make the political leadership strong enough to understand there needs to be a command to allocated resources according to their priorities... lists several agencies... and yet there are coordinating agencies. Each one of those I just named has

individual pipelines going up and down their chains. .. you got to decide who gets... You're a triage agency.

Note: Pam repeats questions and recaps for intro of DSS Rep. and Rep2. of GOHSEP ~ 1:32 PM

GOHSEP Rep2: I am the human services planner so the only things I can really speak to are the mass care issues... about moving a population to a certain area, this population is demographically different from the rest of the state, and what I hear from the sheltering parishes is the medical care, the infrastructure for medical care is really different... you take 10 thousand people and put them in Monroe and you got 2 methadone patients... the healthcare crisis is what stops a lot of our sheltering opportunities.

DSS Rep.: I think the key word in that question that hit me is that cross-jurisdictional piece. In my mind, a lot of what we do, as we're trying to coordinate at all the different levels. Everyone's trying to do the same job, trying to service the same citizens....as judiciously, as expeditiously... without loss of human life... without spending too much money... we really are still trying to figure out what the best ways are to cooperate amongst the levels are... as things change, as structures and systems change, yes, we have some of the same systems... we try to change our systems and our processes or addressing these... you have some people who don't want to change... they resist, the resistance to change... one of the major reasons we have the issues that we have... we can't all get on the same page as we're trying to make it happen... we get in each other's way... Try to bring everybody together, all 3 levels in one place.

RPC Rep.: I think the national role in dealing with mega-disasters, whether natural or manmade, needs to be carefully studied and redefined...reading interesting book... he's talking about the lack of resiliency in our system, power grid goes out in our Northeast corridor, we haven't done anything to solve that problem, it's happened at least two or three times. You look at issues like Katrina. The national government was removed... they're still kind of removed... there's an infrastructure issue when dealing with these natural disasters... there are fewer hospital beds today in the US than there were 10 years ago... I want to know who's thinking about this, who at the Washington level is dealing with this. Homeland Security has become a small group of folks. I'm not criticizing them. Maybe we need to get private <inaudible> involved... As a nation, we are ill prepared to deal with these mega catastrophes

John R: We talked a lot about identifying who the carless are.....from a transport perspective, have we identified the resources available and the coordination of these resources available?

USDOT Rep.: At least with transportation as much as people like to complain about it, our motor coach, our aviation industry is all privatized. As much as people think it's an old industry, its mature, its very efficient, efficient at sucking out costs, sucking out excess inventory. Not a lot of excess capacity. There aren't a lot of planes or coach buses sitting around to evacuate Philadelphia. One reason we have trains sitting at <inaudible> is that it's not a private industry. I know in transportation it's not government-driven. Inventory levels operate in a market environment.

RTA Rep.: It's also about who owns and who's operating these systems.

DHS Rep.: The dichotomy on that is the aviation industry is much, much easier to deal with than the railroads. This is the only train in the US pre-staged for evacuation. A storm comes into Charleston, South Carolina, I'm the mayor, I'd ask "where's my train?" Well, it's sitting down in LA... Totally under-utilized. We've gotten all wrapped around the bureaucratic... The motor coaches sucked that inefficiency out... it's insanity when you're talking as an emergency planner. There is no national transportation plan to deal with resources.

Group Member: Trying to feed that back into information about who's out there and what you need to evacuate, what are you planning the states to provide... provide services, provide operating capability...feeding it back to my highway experience, we require RPC Rep. to have a ???... do certain things

DHS Rep.: Nobody does a cost analysis. But flying people out of here on C-5's. As a taxpayer.....you don't think we can pay Amtrak to develop a plan that costs this much? (makes hand gesture to indicate amount)

OEP Rep.: Where is the fed transport plan to get assets in there, medical & everything else? Where is it? Yet we at the bottom level are required to have a plan? That assists me, that doesn't overtake me. I have to have a plan. Where is the federal transportation plan? Yet we at the local level have to have a plan.

USDOT Rep.: I agree with that. But it's not good to bring 1000 planes down here when people can't get to the airport

OEP Rep.: But if you don't have a big plan that... it's a big flop. But if the federal government had.....then as an emergency manager they've given me something instead of... If you don't have a big plan for air, Amtrack, then as an emergency manager, they have given me everything

DHS Rep.: From the bottom up, to get resources in a catastrophic???. I've failed twice. I've failed at the local and state level. Not a very good system.

Hotard Rep.: Not just specifically for this area. Where the resources would be shifted in....one of the big concerns in our area, in the private sector, in the need for evacuation, so many of the private motor coaches are committed to other things... contracts with these hotels to get their people out...oil companies located out in the Gulf to... Contract with FEMA is not just local, it is regional/national. Private sector has limited number of coaches but the coaches also have other demands. Federal government when you sign that contract through the supplier, it doesn't involve just this region, you may have to go to South Carolina, you're committing and guaranteeing those resources... what makes motor coach operators feel a little bit better about this... the last go around it was this agency which contracted with that agency which contracted with this agency... as far as the jurisdiction side of it, it may be off-course just a little bit, when something's going on, in the private sector, getting people out of these hotels is important also... I had buses that were paid for with private dollars that were taken at a checkpoint, at gunpoint to do another job that I never got a dime for

Group Member: We're lucky in that we have one master in this. The city is our client. After that we have ourselves.

WB: On the federal side, there's too much process and not enough decision makers on the ground. People that can make the decisions. I'll give you an example, San Francisco ? 1967? earthquake, they responded immediately, didn't even wait for the mayor. Today it takes 3 days to get through the paperwork... need to take a serious look at this because it's becoming an impediment to helping people. Something wrong with the federal process

DHS Rep.: 10-4 system in the aftermath of Katrina but now you've got a converse that doesn't like it

John R: We talked a lot in the past about the Stafford Act, reimbursement, that sort of issue, your buses were taken, you didn't get reimbursed for it, seems to create issues of trust. What I'm saying is how do you overcome those resource issues?

DHS Rep.: I think private enterprise really took it on the chin. They reacted in many, many cases on their own, trying to assist, damaged/lost equipment, spent millions?? of dollars on personnel and equipment but didn't get reimbursed because we're in a compliance mode.....we have to have leeway in a response mode in any period of time and that's limited, not talking about weeks, I'm talking about hours and days... until those 3 are done

Group Member: What were the 3?

DHS Rep.: save lives, stabilize infrastructure <inaudible> Until you do those things, recovery can't start... I mind when buses held in LaPlace for 4 hours 'cause someone's checking the tire gauge... I blame the attorneys who don't understand... a great burden on private enterprise to try and respond if we don't create a better environment... we have to create a national umbrella of protection... without fear of losing everything they've got in a civil court case

OEP Rep.: We're going to mission accomplishment. We're erring on the side of caution. Just one more bill the city can't play, not that big a deal. If it's a bill we can't pay we will still do it.

DHS Rep.: I'll sign any contract 'because I don't have the money to pay for it. Just 'cause there's more checks in your checkbooks, doesn't mean there's any money in the bank

OEP Rep.: Well there's no contract because somebody said....somewhere...that's the city policy, it's 3 bids, well FEMA says you didn't get your 3 bids... need to put some sense in the reimbursement mode

USDOT Rep.: Every city has a different policy, every state has different laws, for there to be a real basis that the feds have as opposed to a state by state, where all that money flows through that one person

Pam: Resources seem to be tied to policy... tied to compliance. Any other resource issues you want us to put down here? On the very positive side, there's been some very good examples of cooperation between police & firemen across jurisdictional lines... they're solving real problems. When you're dealing with something like evacuation, which is such a large issues, and every district dealing with its own populations, the federal government needs to come in  
Pam: During an emergency, who will you call first? Who is your best partner in this process? Who do you call?



OEP Rep.: If we need help, we call GOHSEP. First we look internally at our assets.

Pam: Who is it that you will call? If you have an emergency and you need help? Say Dean goes north. Who you gonna call first?

OEP Rep.: We work regionally. We talk to each other first and then it's GOHSEP.

Pam: That's new, right?

OEP Rep.: No, that's always been the plan... it was true for Katrina... the difference is plans were not as defined as they are now... until reality came, none of our plans were in detail?? nobody listens

RPC Rep.: A lot of people in this room put together a tremendous contraflow plan, over 1.1 million people evacuated, better than Houston. The RPC camera recorded Ivan. That was used as the base for reworking the plan, a lot of people got involved in that plan Andrew was the thing that scared everybody, close call w/ Georges, Ivan was... success w/ Katrina... contraflow was real partnership with Mississippi... moving our folks up and giving us right of way

DHS Rep.: ...give credit where credit is due. The people who give up something are elected officials who give up political capital. Their constituency in their eyes thinks their group comes first... requires political courage...elected officials that have courage to work regionally

Pam: struck by your example of the hospitals in Monroe

GOHSEP Rep2: That's just my example.

Pam: But it's true...

USDOT Rep.: most important partner is state

OEP Rep.: We also get a lot from the nonprofits. A lot of time Red Cross, Salvation Army, that crew bring resources to me immediately. Don't ask any questions; don't ask for any contracts to be signed.

Hotard Rep.: Ours is all private. We have a lot of private contracts, hotels... through the private contractor that FEMA has contracted with. It may be ultimately FEMA, but we're not dealing with FEMA, we're dealing with the private contractor that FEMA has contracted with. We're not in the government loop.

RTA: city

Pam: Who do you call? These guys?

OEP Rep.: He doesn't call me, I call him.

Pam: They told us they thought the plan looked good.

Pam: Who do you think your most important partner is?

GOHSEP Rep2: My model is that I represent parish and local governments to state agencies. So my biggest partner is my DSS, DHS counterpart. So I call my local OEP partners. I call <inaudible> and listen to him blow off steam. I do call <inaudible> in region 5. I don't call --- (I have enough problems – interjected by ---) I try to guide state agencies to work around that. My biggest partners are my state agencies and my OEP's.

DSS Rep.: For us, as DSS social services, we support the whole evacuation transportation process as far as trying to track the people during the process. We try to contact our partners before the emergency, contact parish, understand their role during the process... State as well as our federal counterparts... We also as the trigger is pulled we would be calling OEP Rep. to get a handle on what's going on. We try to get as much planning done ahead as possible.

Pam: You have a relationship with the person

DSS Rep.: absolutely

Pam: Who else is missing?

GOHSEP Rep.: Neighboring states.

OEP Rep.: The federal government. Again the fed government has truly most of the assets

RTA Rep.: And if they'd accept it, they'd have the command. But they don't seem to want to.

DHS Rep.: I wouldn't be here if I didn't believe that the President of the United States... <inaudible>

Hotard Rep.: 26 different states, those are states that opened up evacuation centers... I know 26 states wouldn't have opened up evacuation centers prior to Katrina... there's no way in this world they're gonna open up the astrodome... It was after they saw what was going on, they opened up those doors... Cooperation in threat of a storm?

DHS Rep.: Our congressional delegation are trying to continue to push this whole regional, this whole sheltering of putting the burden on a state like LA to move 1.2 million people and house them. You don't have to do a study to say the numbers don't work. Why do we want until we get to that point? We need a national sheltering point. I don't know if a terrorist incident down here is gonna cause us to do an evacuation immediately. The diff in the evacuation of a known event, people are tired, disappointed, concerned for their property. But if it's a terrorism event, they're got their families in their cars and they're scared. If the fed government doesn't... this nation's gonna be in a foxhole... that family they know they're driving from where they are to a known point, if they don't know that point... that's my concern about pre-planning of regional sheltering at a fed level so there's pre-designated points so there's 50 shelters doing 200 people at a time... inefficient

USDOT Rep.: If RPC Rep. wants to build an interstate with <inaudible>, we don't give them the money to build it... If the state doesn't want to provide sheltering or does the planning that's necessary to provide sheltering, to assist in a national capability, what prevents them

from... what are the consequences of not doing it... Are we depending on cooperative spirit? Is that a good public policy to rely on that?

OEP Rep.: Morial Convention Center, they have a huge event going on and they lose that revenue, it's not gonna take long before they say they're not gonna do that anymore

RPC Rep.: One of the fortunate things in the US is that we do have a lot of land. So it's possible to do, to establish some locations to hold large numbers of people... difference between evacuation mode and... I don't know how you'd evacuate very large cities like Houston, Miami, New Orleans is on the cusp there. That's a whole other dimension

Pam: Would New Orleans be able to respond to a no-notice disaster? Example: elevator & terrorist report

OEP Rep.: The plan we have in place, when we started designing this thing that was one of our hopes and desires. The same plan, you just modify it, it'd take time. With the hurricane, you get all the resources in. We could modify it and we could make it... No notice, we could take the plan we have on the shelf, gather some of the resources we have and get in implemented....in theory, I can take that plan and start moving people out. At least the framework, we could. Part of the problem is DSS coming in with the system to identify people.

RPC Rep.: Something that upsets me is how ill-prepared our general population is... there's this confidence in America... we found out, hardly, that the government's not gonna help us... if it's a poisonous gas attack or some sort of chemical, how many citizens really know what to do? Why don't we have an education system in a mass way to say this is what you need to do?... maybe we should have certain types of gas masks, some assistance about where we're gonna get water

USDOT Rep.: To follow on that, companies view... what percentage of GDP should we be investing in overhead? What percentage of GDP do we apply to emergency preparedness?

DHS Rep.: You're fighting a world wide war on terror. Its driven by the success of the American economy. If you bankrupt the economy, how much can we afford to spend with the war going on? You are going to bankrupt our country. Based on the way we are going 99 year old lady? How do you deal with a pandemic flu? Do you know what would happen if you put a quarantine sign on a house? We'd have every civil libertarian on us. I think you gotta, until the nation decides it wants to make a realistic application of those dollars instead of an unrealistic <inaudible> with our borders. What can you afford? What's the risk you're willing to take versus the mission?

The American society is going to live with risk. I think we're trying to plan for the aftermath of the chlorine barge that's blown up and the winds blowing this way. It's not practical. I spend more time today on terrorism because the terrorism threat is very great to this nation

DSS Rep.: I like what you say about personal responsibility. We can talk about threats, based one environment or whatnot, it is gonna take a concerted effort to talk to these people... I can way back to Y2K planning... I remember even folks that were poor had some kind of "planning" going on for the Y2K planning? It is possible to prepare. People don't have any confidence in citizens taking this to heart and planning... that's true to some extent...but I saw with Y2K planning

RPC Rep.: I think the national government needs to start looking at building resiliency in our system... what's gonna happen to our food supply lines, the trucking industry....we may be closer to civil disorder than we realize... Americans have always taken it for granted that we're going to have the help when we need it... maybe that's part of the problem, we have a lot of people working in HS, but I don't think the word's getting down to the citizens... none of those types of questions are being discussed with the general public... Build resiliencies into the system, whether its super regions or whatever, to know that vital supplies, medicine, water, whatever will get to...

USDOT Rep.: We have a constitutional form of government while the fed government may not provide the resources, they need to at least provide the framework.....but we can't get away from the state sovereignty, the state and local role in defining.

Pam: I want you to think about, in your mind, from your perspective, from your work, what was the one thing that would've helped, that would've saved lives?

Hotard Rep.: communication from the standpoint of view... there was no such thing as cellphone use... Intact communication? Cell phones didn't work.

RPC Rep.: There are lots of things.

Pam: One thing?

RPC Rep.: The National Guard should come here sooner, but they're in Iraq.

USDOT Rep.: Leadership at the federal level in the whole evacuation, if that planning and conceptual development and all that had been pushed forward

GOHSEP Rep.: If society itself had been more aware of the hurricane & its capabilities, could have self-evacuated

Group Member: information...better communication.....we didn't really get the credit for it, prior to the storm we had 160 vehicles available to be used and we only wound up using about 50 so getting people to respond and move when we say was a biggie

Pam: information, communication, planning, National Guard

DSS Rep.: I've heard many stories, and with the DSS, the work we do involved the people....I know people in situations in other countries overseas....they have to be prepared for what to do if a bomb goes off.....if peoples' mindsets wasn't that we in the US are so above tragedy, that these things, that 9-11 wouldn't have been so oh my god our lives are over... we have to take the responsibility for our own families, for anyone who....

Pam: That got pretty ripped away; the sense of fragility. The work we've been doing shows in many instances the population is more vulnerable today.

GOHSEP Rep2: I was an evacuee too. I worked for the DHH and temporarily got placed at... I can understand that OHS was going through a change, had just gone to this ESF format in the past 10 years, just started doing special medical need shelters... agencies didn't sit across

the table from each other... DHS didn't talk to DHH... in its infancy before Katrina... now DHS does talk to DHH

DHS Rep.: The one thing that'll make evacuation better is convincing people to leave

Pam: Even though you had 80%

DHS Rep.: If the next pre-storm evacuation works as well as the last one, I'll be happy... at <inaudible> time there was not a car on the ramp...the people who had made the decision to go had gone... I spent the next 2 weeks pulling people off their rooftops when they had perfectly good automobiles sitting in the driveways. The carless population... We know from operation Pam we have no place to move them. The shelter of last resort. The failure came with the 2nd evacuation taking 5 days. Nobody died in the Superdome who made the decision to get on the RTA bus, it was a bad time, but nobody died.

OEP Rep.: I wasn't with the city at that time and I evacuated. I agree with Colonel Ebbert. Education, teaching our people, holding them responsible. I remember the mayor saying there is no place of shelter, everybody leave. We have corrected those who can not get out on their own. Now we need to educate those... if they don't heed the warning, then too bad.

RTA Rep.: A lot of them were already said but I guess I'll come back to lack of imagination that it got as bad as it did that it could actually be worse. Ties into communication personal responsibility. I never thought. I should've though but I didn't think.

DHS Rep.: one foundation I think is important for the study? Personal responsibility... all we can do is create a system, voluntary participation and personal responsibility of that individual to link themselves with the system, if they don't do that, it's a democratic society, a free country,

Mandatory evacuation is not forcible evacuation. All we can do is create a system that is voluntary. You can die where you please.

RTA Rep.: Not knowing what hit you has a lot to do with how you respond... obviously, you end up parsing your response to it and that may not be a good thing. Somewhere that communication's gotta be there to convince people.

DHS Rep.: Anybody thinks that we're gonna have any impact on the future... is gonna have to be somebody from the outside... is gonna have to be the federal government coming in and take over

OEP Rep.: We are really I believe the only metro city in the nation that totally evacuates the city. Everybody else shelters in places. Somebody's gotta do a cost-benefit analysis to see if it's the right way...is it more cost-beneficial to build a facility?

John R: Decision to evacuate the whole city, is that a decision made by the local government or handed down by the fed govt.?

OEP Rep.: Combination of both. There is no facility in the city that we'd be willing to put these people in

John R: Why one facility as opposed to many facilities, schools?

OEP Rep.: that's another option. They're doing that now. Mitigation...

DHS Rep.: it ought to be demanded by ordinance that these parking lots can be shuttered... Estimated it'll take about \$35 million to evacuate the city. Minimum \$35 million to the city just for one city

RPC Rep.: Back in the 60's and 70's, vertical evacuation then to the shelter of last resort... so it wasn't like these concepts weren't kicked around and thought about it... but nobody had a Katrina... I don't think you can get everybody out... I fully expect we'll finish our last run and there'll be 30 more people out there

John R: The FTA wants us to come up with tools and strategies that will make a difference in the real world. We'll be doing some small follow-up interviews with you at an individual level.

## **Transcript: The New Orleans Nonprofit Focus Group**

National Study on Carless and Special Needs Evacuation Planning, August 16, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Anjeli Sharma, Ethnographer/note taker

Rina Thomas, Ethnographer/note Taker

### Participants:

CC Rep.- Emergency Management Coordinator, Catholic Charities, Archdiocese of New Orleans

CC Rep2.- Padua Community Services, Catholic Charities, Archdiocese of New Orleans

NHA Rep.-LA Nursing Home Association, Administrator, Meadowcrest Living Center

ARC Rep.- Executive Director, The Arc of Greater New Orleans

RIF Rep.- Consumer Services Coordinator, Resources for Independent Living

NOCA Rep.- Executive Director, New Orleans Council on Aging

MCWC Rep.- Community Educator, Metro-Metropolitan Center for Women and Children

ARC Rep2.- Emergency Services Director, American Red Cross, Southeast Louisiana Chapter

ARC Rep3.- American Red Cross, Southeast Louisiana Chapter

NOLA Rep.- Managing Attorney, New Orleans Legal Assistance, Southeast LA Legal Services

UNITY Rep.- Executive Director, UNITY of Greater New Orleans

*(In creating this Transcript, two sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by the two note takers.)*

### Transcript:

NHA Rep.: (It) takes 3-4 hours to load one bus. I don't think they understand the problem of transporting folks with special needs.

NOLA Rep.: making changes in number of homeless which were previously underestimated adding buses in light of those needing oxygen tanks, stretches, etc. Unity for the Homeless trying to calculate the number of homeless - higher in gross numbers than before the storm - 10 to 20 thousand at a minimum – a guess because they haven't finished Counting NOLAC helps get people off the street, with police problems, birth certificates, legal IDs, but not criminal defense Evacuation of the homeless was a disaster

*2 more participants arrive*

NOLA Rep.: When Unity finished its report, it will be published online. The estimate is probably low. Under HUD's definition, homeless means those living in places not fit for habitation so this does not include crowded multifamily dwellings

John Renne: The grant is from the FTA's Office of Civil Rights to look at issues surrounding the carless population, anyone who can't or doesn't drive. It's a large % of the population, children, elderly, etc. Cites example of NYC. He looks at the government doing to help plan for carless evacuations, but it's actually the community groups who are doing a lot of this work. Look also at the linkages between the community groups and government action. Want to know the issues faced by the community groups and their constituents. Will have individual follow-up interviews. The most important thing is to find out what can be done to help prepare the government, using the community group expertise.

Pam: She plans to do a round-robin going one way then the other. Has prepared a list of questions. Explains the sequence of cities for the focus groups over the next 3 or 4 years.

CC Rep2.: division director w/ CC or Archdiocese of NO oversee adult day health care

MCWC Rep.: community educator for Metropolitan Batttered Women

NHA Rep.: representing LA Nursing Home Assoc. DRC for all the nursing homes in Region 1; represent strictly privately-owned organizations

ARC Rep.: ARC of GNO, supported living program with 14 people; concerned for those at home with elderly parents

RIF Rep.: RIL, provide resources for people with disabilities, from ages 18 to 99

NOLA Rep.: homeless legal advocacy project at NOLAC, very few homeless got out before Katrina repeats UNITY's estimate for the homeless: a ballpark guess of 10 to 20 thousand, 95% will be carless

ARC Rep3.: Red Cross

ARC Rep2.: oversee disaster planning & response for the Red Cross in Southeast LA

CC Rep.: Emergency Management Director for New Orleans CC Brought down to NOLA after Katrina

NOCA Rep.: Director of NO Council on Aging, 45,000 seniors in Orleans Parish – 60 thousand before the storm flaws in the evacuation plans concerning seniors & special needs populations current plan – his 4 centers will be pickup points for seniors still in the education process for those who resist evacuation

Pam: What is the biggest challenge your agency faces in meeting the needs of the carless?

ARC Rep2.: knowing how many are out there

ARC Rep3.: same thing



NOLA Rep.: not just numbers, but where they are

RIF Rep.: We do have a database of the current location and evacuation plans of their consumers. Transportation is the big challenge.

CC Rep.: Same issues. We're struggling with bus contracts for the residential facilities.

ARC Rep.: We're very fragmented. Communication between case workers is an issue.

NOCA Rep.: only 1600-1700 have registered for the 311 system. Registration is a big problem. Lulled into state of complacency.

NHA Rep.: The cost to evacuate a facility for 3 days is about \$60-70 thousand dollars per facility. The state can't reimburse those costs, which are incurred by the owners of the facilities can influence the decision to evacuate.

---: the continuation of care.

CC Rep2.: Attorneys point our problems w/ the bus contracts. Trying to get non-ambulatory people into seated positions. The cost. Have to pay a premium rate. Lose the connectivity. Medically frail population is hard. Costs are so expensive. An array of issues.

Pam: Anything else?

NOLA Rep.: Education for the people being evacuated. Very few homeless no where to go at this stage.

Pam: What do you think the problems across jurisdictions (state, local, federal, etc.) are?

ARC Rep2.: The city has a good plan, with enough resources to take people out. The kink is how many buses are acquired from outside of Orleans Parish. Coordination is the main thing sharing resources, such as buses and ambulances.

NHA Rep.: A lot of progress has been made since Katrina, in terms of communication between the state and federal levels. I think there are not enough resources – not enough buses, ambulances.

NOCA Rep.: seen much progress since Katrina. Not enough resources (buses, ambulances)

ARC Rep.: Medicaid wavers used to be different across states. His group benefited from generous billing practices.

UNITY Rep.: Unity of Greater New Orleans

CC Rep.: Working with residential programs and the diocese of Alexandria. We evacuate our own residential populations to Alexandria. Utilizing local resources w/ our case mgmt programs. The challenges are resources, coordination, communication.

NOCA Rep.: City evacuation plan on paper looks good. Trying to continue education efforts at our centers, meal sites, places where seniors gather together. A gatekeeper problem with the Red Cross refusing access to shelters in Baton Rouge. Red Cross would not allow COA into shelters because they didn't have the proper credentials. difficulties locating seniors. Some facilities also took people out of shelters in order to get their Medicaid. With the new evac plan, everyone will be tagged. The 311 registrants.

ARC Rep2.: Everyone will be tagged when they get on the bus. But not when they get off the bus.

John R: who took them out? Families?

NOCA Rep.: Anybody. Reports of those who took advantage of the situation by saying they had a residential facility that could accommodate X number of seniors. People wanted money. When they couldn't get the money, they would bring the people back or send a bill to the City of Houston. When they found out the Medicaid couldn't be transferred, they either returned the seniors or presented the city with a bill. Now, a person who signs up for 311 can bring a relative with them. Hopefully, this will be someone who can look out for them. Still a problem for those w/o relatives. Another problem w/ security at the shelters.

UNITY Rep.: The very biggest problem is people living in abandoned buildings. The majority are probably not English speakers. Many may have mental problems and may not be able to cooperate. The foremost problem is getting them out of NO. Once they're out, do they have the language & mental skills to deal with others? How do you get those folks out of New Orleans? City plan is improved since Katrina, but now we have new challenges. 9,000 – 10,000 people living in abandoned buildings across New Orleans. New challenges since Katrina – current estimate of 9 to 10 thousand people living in abandoned buildings throughout the city. It's not limited to downtown or to residential buildings.

Pam: I'm hearing some confidence in the city's plan. Also, the diversity of the carless population.

Pam: What agencies are most critical to you in the evacuation process?

NOLA Rep.: We don't really know. Directed from one agency to another. We work most closely with UNITY.

RIF Rep.: need to think about it

CC Rep.: Homeland Security, the city.

Pam: so not another nonprofit

ARC Rep.: We connect with other ARCs and similar organizations around the country.

Pam: agency to resident communication

NOCA Rep.: the RTA, in terms of them being able to pick up people and take them to the evacuation site

NHA Rep.: Department of Hospitals because nursing homes are regulated and licensed by them. This Department regulates the evacuation plans.

Pam: Does everybody have a name to call?

NOLA Rep.: no

CC Rep2.: absolutely

---: We rely on the government. The state coalition for battered women. Rely on city government

CC Rep2.: DHH and people at the Parishes...CARSA, a state group which works with nonprofit groups. Programs in Plaquemines, St. Tammany, Jefferson. I would call Madeleine Monroe in Baton Rouge, the section manager.

ARC Rep2.: By law the local contact at the city government is responsible. By law, the local government is responsible for locals who are not wards of the state. The buck stops at the local agencies. Agencies need to know the local Emergency Manager. The parish Emergency Manager activates the Red Cross. We rely most on the national organization of Red Cross.

UNITY Rep.: In terms of government, we rely on OEP Rep.. An unusual partner - a federal judge named Jay Zany. Although he's not doing this in an official capacity, he can bring people to the table. Sociology studies show that hurricane survivors are less likely to evacuate the next time, believing they've found the safe spots. The city is not calling on the feds and state enough. Should be asking the state to immediately bring in the National Guard. Need a plan which doesn't rely on making people responsible for themselves to avoid a repeat of the loss of life from Katrina.

RIF Rep.: We'd call someone from the state because that's a partial source of our funding.

Pam: Who else should be at this meeting?

UNITY Rep.: Language minority groups. Hispanic, Vietnamese. Huge problem of communication with those who can't understand the TV, etc.

NOLA Rep.: 2 specific names - The Hispanic Apostolate. SOS Boat People. The danger of a narrowly-focused group of community groups. Could use groups like Total Community Action or ACORN.

RIF Rep.: medical care specialists

CC Rep.: The Hispanic community doesn't want to evacuate in order to be the first to get the work. Communicate orders from the city to the Hispanic radio stations

ARC Rep2.: Hispanics are afraid to come forward because they may or may not be documented. There's a pre-Katrina population which speaks English and a post-Katrina population of visiting workers and day laborers, who want to stay to get the first crack at the work.

ARC Rep.: Jefferson Parish Human Services Authority

NHA Rep.: The National Guard. They are responsive, are included in the plan, but they also have a lack of resources.

National Guard must be requested by local emergency management.

---: Medical directors should be here.

Pam: The city's head is named Kevin....

---: Someone from addiction services. Groups that deal with addictive and mental illness

ARC Rep2.: OEP, RTA, heads of 211 and 311.

ARC Rep3.: RTA, state OEP.

UNITY Rep.: 3 groups- The organization of ministers because a lot of people here are fatalistic, rely on ministers' guidance. We have stronger neighborhood associations since Katrina. Groups that have arrived since the storm like Common Ground, even though native New Orleans groups may snub them.

John Renne: If the storm came tomorrow, would you rely more on the government or nonprofit sector?

CC Rep.: I'd rely more on the Red Cross, with whom I have pre-established connections. I think the city would just be swamped.

MK: We'd rely on ourselves. Also the NOPD ??? group under the NOPD.

ARC Rep.: Nonprofit based on experience.

RIF Rep.: Red Cross

NOCA Rep.: Ourselves.

NHA Rep.: We've worked closely with state and local OEPs.

---: Nonprofit

---: Just give us some buses and we'll make it happen.

ARC Rep2. & ARC Rep3.: Ourselves

NOLA Rep.: Nonprofits. Other legal services offices.

John Renne: So who exactly?

UNITY Rep.: Ourselves. But the question should be who should be able to depend upon?

John Renne: So NHA Rep. is the only one who'd rely on government.

Pam: So relying more upon yourselves after Katrina.

CC Rep.: Especially when we look at liability issues with the bus contracts. We have to take care of ourselves. We'd like to rely on our partners, but you can't guarantee it. Research post-Katrina is showing more and more self-reliance. "We have to take care of ourselves."

Pam: Does your org have an evacuation plan for your staff and the resources to execute it?

---: Yes, we've had the plan and resources since Ivan, which was the big wake-up call. The most disappointing thing during Katrina which was the lack of help from Red Cross on the same property.

---: Yes

NHA Rep.: Yes

ARC Rep.: Yes

RIF Rep.: Yes

NOLA Rep.: Yes

UNITY Rep.: Yes, with the caveat that we've made up on 60 different agencies. We've required them all to have a plan. We don't have the capacity for oversight, however.

ARC Rep2. & ARC Rep3.: Yes

Pam: Does everyone have training around evacuation?

Everyone except WB: Yes

WB: No

Pam: Can New Orleans respond to a bioterrorist attack? A no-notice disaster?

ARC Rep2.: No, because the community is mainly focused on hurricane response. We're probably not ready for non-hurricane disasters at the level that we should be. But the hurricane plans can probably be adapted for some of these situations.

ARC Rep3.: We have a national all-hazards framework which is not in place.

Renne: This study is not just for hurricane evacuations.

UNITY Rep.: Geographically, we have limited ways out of the city. But the chances of that are so infinitesimal that I'd rather focus on hurricanes.

NOCA Rep.: no

NOLA Rep.: Absolutely, enthusiastically not. There's no means, no system for telling or getting people out. No way – nothing!

RIF Rep.: No way. Stay put and listen to news for instructions. We have a blurb in our emergency evacuation plan about relying on radio.

CC Rep.: No, but we are thinking about it. Working with City Readiness.

ARC Rep.: No. Also, it takes us a few days to get things ready because we're used to the hurricane timeframe with a couple days advance warning.

NOCA Rep.: Lack of security in the shelters so its one of my greatest fears.

NHA Rep.: I disagree. We probably have one of the best communication systems we've ever had. We won't reach everybody but we are better prepared for anything.

Pam: Even for immediate biohazards? Train wreck, spill hazardous waste?

NHA Rep.: We are able to get the info to the nursing homes. They've been trained. The tornado in Westwego went well. More people are trained today. They are able to get information immediately to nursing homes.

---: In general people are prepared. We haven't had all-hazard training.

---: A few months ago we couldn't use water in Plaquemines. Employees called, but no one from CC called. But this particular facility can be evacuated in two hours. Their CPOC plans – have to have plans for various types. Plans for their facilities must include all disasters.

Pam: If a hurricane turns toward us, what's the one thing you want right away? What would save lives for your population?

CC Rep.: We need our bus contracts signed.

RIF Rep.: Making sure our consumers are evacuated early.

NOLA Rep.: Knowledge about where the homeless are. Finding them because they move. Substantial portion of people would die. Find them, they constantly move.

UNITY Rep.: A system in which the authorities take responsibility for going door to door.

ARC Rep3.: Trained volunteers ready to deploy right after the storm.

ARC Rep2.: Have people take early responsibility for themselves. Get out if you have a car. If you have an empty seat in your car, take somebody with you.

---: wheelchair accessible buses, Government resources in place

---: destination – where to go

NHA Rep.: We're gone. – resources in place

NOCA Rep.: Same thing. Transportation, education, taking personal responsibility for yourself. People relied on nursing homes and nonprofits to take care of their parents.

ARC Rep.: Destination – we hit a hotel. I'd rely on other nonprofit and government agencies.

Pam: You'll be getting a copy of these notes. We hope to share our findings from the other cities with you.

John Renne: Would you be willing to share more time with us?

*Agreement from the group*

ARC Rep2.: There are some more specific groups that can be invited.

NHA Rep.: Looking at what my small sector went through, is this even achievable?

UNITY Rep.: Every human life saved is of value. Every human life saved is valuable. New Orleans is far more vulnerable than any other city in America. We shouldn't be looking at other cities as counterparts. Maybe consider opening your model to cities in Japan.

ARC Rep2.: Miami is probably the most similar to us. San Fran, Chicago, & NYC have a more robust transportation system – buses, subways, the whole nine yards.

UNITY Rep.: I can put you in touch with the Japanese reps arriving September 5.

ARC Rep3.: United Way of GNO should be added to the table.

ARC Rep2.: --- with the Office of Public Health.

UNITY Rep.: We're in a strong position to come up with a list of demands for the Feds. The nonprofits, OEP Rep., the city.... We need a private-public partnership to create this list.

ARC Rep2.: Do you have FEMA, ESF, M14 today?

ARC Rep2.: A training opportunity – develop Volunteer Org Active in Disaster (VOAD) Community disaster educator's program for agencies that want to learn the standard disaster messaging for the constituents. Pandemic flu workshop for community CEO's

John Renne: We will be following up w/ you over the next couple of months for clarification, etc.

NOCA Rep.: NOPD should be included because security is a huge concern.

## **Transcript: The New York Government Focus Group**

National Study on Carless and Special Needs Evacuation Planning, October 5, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Anjeli Sharma, Ethnographer/note taker

### Participants:

NYC HH Rep. – NYC Health and Hospitals – Emergency Management

NYS DOT Rep. – Pedestrian specialist for NYS DOT in Albany

NYC DLCA Rep. – Deputy Assistant Commissioner in NYC's Dept of Long term care and active aging - retirement communities, case management, home care

BCOEP Rep. – Assistant Commissioner to the Bureau of Community Outreach and Emergency Preparedness

MOPD Rep. – Commissioner in Mayors Office for People Disabilities – provide information referral, assistance to the communities regarding disability issues

MTA Rep. – MTA NYC transit Senior director in division of operations planning dept – service planning regarding how trains are routed, where they stop etc. has done a lot on hurricanes, evacuation issues, rain floods

OEM Rep. – NYC Operation of Emergency Management (OEM) Preparedness Specialist

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### Transcript:

NYS DOT Rep.: Good news to share with this group is that we could be the first and only state DOT in the USA that specifically includes disaster preparedness in our design standards.

Pam: what is the biggest challenge that each of your agencies face in light of meeting the needs of the most vulnerable population?

Pam: This evaluation grant is about the car less. What is your agency's greatest challenge for the car less?

NYC DLCA Rep.: very limited transportation, small fleet not enough facilities like access-a-ride; have to find our own meal providers. We have extended services there but not throughout the city.

NYC DLCA Rep.: Very limited transportation we cant service the population the..

BCOEP Rep.: Agree with NYC DLCA Rep. - NYC has 1.3 million seniors that number alone in trying to address those needs very difficult; problem – some choose to be isolated

BCOEP Rep.: NYC: 1.3 million seniors in NYC most people don't have cars

Pam: How many in nursing homes?



NYC DLCA Rep.: We deal with the community population.

MOPD Rep.: Access to the transportation is limited – the most vulnerable, I’m afraid that we don’t reach the most vulnerable – we reach the semi-vulnerable (don’t reach the person not connected with outreach programs i.e. meals on wheels) even with celebrities wouldn’t be able to reach the most vulnerable because their access to information is limited. Can get semi-ready info.

MOPD Rep.: I missed due to phone call. “Semi vulnerable”

MTA Rep.: Most vulnerable are the least visible is exactly correct biggest problem is fleet; we have a general plan for evacuation for hurricanes but uses up the fleet that we have. Using the fleet to serve that population would come out of the fleet for the general population. Not designed to take 20 wheel chairs, can’t sit up etc. idea under very quick deadlines to pull seats out of the buses...no regional fleet lends itself to that...hospital audiences allow for better capabilities in the transportation. Even with all access-a-ride vehicles it is still not enough.

MTA Rep.: Most vulnerable are ones least visible. Listening to your question at the moment our greatest challenge is the fleet. OEM has the “special needs.” Our fleets are for the general population. We will mainstream the disabled population

There is no regional fleet to use. There are about four buses

NYC HH Rep.: Concerned with in-patients not the community; OEM spearheads coastal storm plans – taking care of elderly while taking 911 calls, trying to work our vehicles for the mass evacuation plan; not enough vehicles if we had the luxury of the time, would be more ready but if there was a bad coastal storm – don’t have option to shelter and place; greatest challenge is getting EMS

NYC HH Rep.: Hospitals would only be in-patient. FDNY/EM’S will be facilitating the evacuation of the hospitals. There are... Looking at Board of Ed. for buses or transit authority.

MOPD Rep.: problems in time lining and depending on disaster planning – hard to deploy with systematic planning; sophisticated conversation ...quantity vs. demand.

MOPD Rep.: When it comes down to it, it will be hard to deploy vehicles. Hopefully someone will be there.

NYC HH Rep.: If we only had the luxury if a 72 hour window. If were told if there is a bad costal storm, we have to evacuate hospitals. We have no option to shelter-in-place.

Pam: How are we going to staff that fleet?

MTA Rep.: Yes – staff not going to disappear in an emergency...ex. 9/11 stopped all the trains; same during the blackout and our employees don’t go home (assume the same for hurricane supply family support).

MTA Rep.: It’s important to know our staff does not disappear during an emergency. Our employees tend not to go home during a disaster. 9/11 + Blackout.

NYC HH Rep.: same thing at the hospital – people will stay

NYS DOT Rep.: 3 significant issues

1 – dissemination and implementation of guidance

2 – simply logistics of dealing with multiple agencies and jurisdictions (federal, local state)  
3 – getting whole concept of mass evacuation on foot (pedestrian evacuation on radar screen) as a highly essential mode...especially for urban core areas because all of us know often a highway system and transit system are going to shut down every so often and whether evacuation on foot gives you the option of using another mode in a couple of hours, or if that becomes the only option much more could be done in short term, mid-term and long-term to significantly facilitate mass evacuation on foot.

Jim: I can divide that into 3 significant issues. The first is simply the dissemination and implementation of guidance. The 2nd issue is simply the logistics of dealing with multiple agencies and jurisdictions. The 3rd issue is getting the whole concept of mass evacuation including pedestrian on the radar screen as a highly essential mode, especially for urban core areas. Because all of us know so often that a transit system can shut down and better evacuation on foot. Gives you the option in a couple of hours or if it becomes your only option much movement could be done in short, mid, end long-term to facilitate evacuation on foot

Pam: pushing wheelchairs out of the city on highway because no other transportation available.

Pam: Pushing wheelchairs to superdome

MOPD Rep.: had a lot to do with planning after 9/11...people use heavy motorized equipment (ex blackout) batteries died and can't move until ambulances come.

MOPD Rep.: Pushing is one thing. We, in NY, have heavy motorized wheelchairs and their batteries die.

Pam: what are the strengths of your agency in terms of evacuation and vulnerable populations? Does the agency have resources to allocate during emergency situations or do they rely on other agencies for resources? (i.e. Buses, vans, trains, etc).

Pam: Do you have the resources at you agencies? What are your strengths?

BCOEP Rep.: How you look at timing of evacuation; we do not have direct services but contract services with community based organizations; reached out through technology (email, TV, phone) whatever method we can get to them and they are in touch with the people that they serve; resources to do our part (in touch with groups) never enough resources for the numbers we serve. Have the technology to inform...small agency but manage to get the job done.

BCOEP Rep.: We do not provide direct services. We contract. We reach out to people by technology or whatever method possible. We have the resources to be in touch, but there are never enough resources. We have the technology to alert people in case of an evacuation (they do not conduct the evacuation).

MOPD Rep.: We are more of a policy and liaison office, than a service office. Our staff provides – we serve as a resource through the crisis.

Pam: Do you have a system of accountability?

BCOEP Rep.: Yes

Pam: If there were big hazards?

MOPD Rep.: We wake sure there is a building that is bio-safe. My role is to serve as a disability expert. People know to call me. We have planned in a scientific manner. We have looked pretty in- depth, but will the resources fall into place. I don't have a fleet of vehicles. Our role is technical support.

MOPD Rep.: we're a much more policy than service office; capacity serves mechanism for OEM etc to get the word out to a set group of not for profits and set agencies in the city. We serve as a resource of knowledge and technical referral through the crisis (DIFTA) serving that constituency for those ex that have no experience with certain groups. Better make sure that there is someone that can clean up the bio waste. We should be available to this emergency mechanism – my role is to serve as the disability expert to that team and to my staff

Pam: Do they know to call you?

MOPD Rep., BCOEP Rep. & NYC DLCA Rep.: Yes, We have done it in a systematic manner in the extent that we can – just a function of whether or not all falls into place - linkages to outreach and messaging – accessible little vehicles but really technical support.

BCOEP Rep. & MOPD Rep.: not first responders but are connected...on 24/7  
BCOEP Rep. /NYC DLCA Rep./ MOPD Rep.: We are connected to first responders.

OEM Rep.: transportation planner at OEM.

MTA Rep.: We have a lot of strengths to bring but not targeted to most vulnerable people – mainstream transportation for those with disabilities access-a-ride, elevators etc  
Strengths are that we can handle the general evacuation so well it frees others to help the most vulnerable – likely to shut down and can respond to the pedestrian base. We have gone through drills on paper with the police – ex passengers walking over the bridge what's waiting for them etc. Been with MTA since 1980

MTA Rep.: We have a lot of strengths, but they are not necessarily targeted to the disabled population. Our approach is an ADA approach (Lifts on buses). The strengths are that we can handle the general evacuation. So that will allow the rest to handle the disabled. We can assist with pedestrian evacuation. I have been with the agency since 1980.

Pam: is this kind of organization relatively new? There was some discussion of evacuation maybe pre- 9/11 and the amount of time on evacuation issues tripled after 9/11 and Katrina

Pam: Is this new since 9/11 or Katrina?

MTA Rep.: Pedestrian evacuation may be pre 9/11. Time spent on evacuation tripled after 9/11 and tripled again after Katrina.

OEM Rep.: For the most vulnerable population (don't have info, can't walk etc) What is greatest challenge? Planning goes along the general population not special needs – have separate dept for that (JOE Pas?) Director of OEM for special needs – in the process of recruiting other members. Send word that goes out to other agencies; biggest challenge is getting in touch with everyone – names in one database but might be a lot of names missing.

OEM Rep.: My planning goes in lives with Joe pas is special need “director” with OEM. I handle general Evacuation, not special needs evacuation. Communication is biggest challenge.

NYC HH Rep.: Greatest strength? Hospitals have been doing emergency planning since 9/11 because we are the first receivers; our strength is the staffing, very dedicated. The other issue is the homeland security funding (hospitals get very small percentage and have to do a lot of work to get it). If we had more funding, we would be able to address it (funded mandates) other weakness is closing hospitals – shortage of beds. If we had to evacuate at once, there might not be enough beds. Plan – have to evacuate – actual – can evacuate only to a certain extent

NYC HH Rep.: We are not first responders, but first receivers. Our greatest strength is our staff. If we had more funding we could move. We have a lot of unfunded mandates. If we had to evacuate a bunch of hospitals, we might not have enough beds in outlying areas. Once the storm starts blowing, you can no longer evacuate.

NYS DOT Rep.: your agency's strengths – biggest initial strength actual disaster preparedness for planning efforts and operational planning efforts on with the state emergency management office and also OEM. Also do not have a specific way to target effort for special needs population. What we do have is similar to what MTA Rep. has said and we are very adamant over ADA compliance in all of our facilities and we also have a significant but limited first response capability as far as actual managing and helping to keep operational facilities at a local NY city office and a LI office and a middle Hudson valley office and a number of separate presences. They all have resources, some of which are even kept on stand-by. But if you look at the overall enormity to effectively deal with a major catastrophic event, we couldn't ever be more simply a piece of the overall puzzle as far as the first responder and supplement responses are concerned.

NYS DOT Rep.: Our biggest strength is the actual disaster preparedness and planning efforts and gestational planning efforts. We also do not have a specifically target effort for special needs populations. We have similar to what MTA Rep. has. We have ADA compliance in all of our facilities and we have significant first response capabilities as far as managing or helping to keep operational facilities. We have a NYC and Long Island office and mid Hudson Valley Offices and a number of other satellite facilities where people are kept on stand-by. If you look at the enormity to deal with a major catastrophic event we couldn't be...

Pam: for anybody else...did your agency change anything after Katrina?

Pam: Did your agency change after Katrina?

BCOEP Rep.: we followed up more with the programs to ensure emergency plans were in place.

BCOEP Rep.: We followed up more to make sure our plans were updated.

MOPD Rep.: media portrayals helps (people passing away on TV) allowed us to leverage conversations that emergencies affect the most vulnerable, the most. What I have learned about ADA and building codes –they are minimal. Fire dept. is the greatest advocate because they want larger doors etc. Real estate is the worst for codes. Have to look to exceed in the minimums.

MOPD Rep.: The media portrayals of people dying in wheelchairs gave us the room to say that those most disabled are most in need. The fire department is our biggest advocate. They want big doors and big stairs. The real estate industry is the biggest enemy. We can't use minimum stair tiers.

NYC HH Rep.: hospitals also dealing, not new – push came from outside in because homeland security is reactive; greatest push for evacuation plans (fine tuned and more consistent)

NYC HH Rep.: Homeland security is reactive. We are always responding to the latest big disaster.

OEM Rep.: OEM has a big push for temporary houses – mayor just announced a design competition for temporary housing in NY (would be in the parks above the flood zones)

OEM Rep.: OEM has a big push for temporary housing. The Mayor announced competition for temporary housing designs. Central park will house thousands.

MOPD Rep.: example... ADA rules presented obstacles during blackout...those two seats in blackout seats filled up quickly. ADA doesn't allow transit if you are not eligible MTA wants to pick people up but couldn't because ADA did not allow. ADA and transportation could be a hindrance – laws don't require more. LIABILITY but there are exceptions to the rule

MOPD Rep.: ADA rules sometimes hurt because Para Transit is not allowed by law to pick up someone that not registered. Sometimes the ADA rules can be obstacles. Buses only have 2 seats and they fill up. “During on emergency the rules often go out the window and people do God's work anyway”

NYS DOT Rep.: ADA transition plan – by law every village and town in the country is supposed to have an ADA transition plan. The city had gotten sued over that issue a couple of years ago and the settlement of that suit that the city might commit to spend (monetary amount) to implement curb cuts. If you simply fully implemented the ADA transition plan, you would go a significant way towards fully facilitating able and disabled mass evacuation on foot.

NYS DOT Rep.: The city has gotten sued over the issue and the settlement was that the city made a commitment to spent “218 million on curb cuts” If you've fully implemented the ADA transition plans, which are a federal mandate; you would go a significant way forward facilitating mass evacuation on foot.

MOPD Rep.: there are lots of sidewalks and not enough curb cuts. It's hard to navigate in the rubble for the blind, wheelchair, deaf and hard of hearing; hard to get information to them. What happens to people with cognitive disabilities? Kids can't read the same info – symbols etc.

MOPD Rep.: 60,00 wheelchairs and scooter-sers in NYC. We worry about people with cognitive disabilities, the deaf and hard of hearing. We forget about range of people with disabilities.

Pam: Cross-jurisdictional issues – what is the challenge for you?

Pam: What is the range of issues with cross jurisdictional cooperation?

MTA Rep.: in a hurricane sense due to OEM's work, we do because we have built our evacuation plans for hurricanes around shelters and to public and private facilities. In the case of hurricanes, we are in pretty good shape. Other emergencies, not so sure. Terrorism evacuations and the thought is we would shut down the pedestrian evacuation to a certain point. Depending on what happened, another agency would help those on foot, or we would help to evacuate them. People will head where they can go. Jurisdiction – issue of our region still not coming up with enough vehicles that can't use typical ADA vehicles.

MTA Rep.: From a hurricane point of view, we work with OEM and we are in pretty good shape for other types of disaster, we don't know for terrorism if we would shut down and there would be on foot evacuation. Some other agency will direct where to go. The issue is that this region has not come up with enough vehicles for the disabled.

Pam: You can get the elderly on the train – how are their special needs met when you receive them?

MOPD Rep.: but you saw good coordination from the Not-For-Profit. They provide a great mechanism to set those services up. If we knew we were transporting, we would make those linkages to receive them.

MOPD Rep.: New Orleans saw a good participation from non-profit sector. In NY, the non-profits are important too.

OEM Rep.: everyone has to be on the same page – how many people are we sending; where are they going to go from there? Who is going to feed them? How long will they be there? What happens next, what kinds of transportation when outside of the city (i.e. if go to NJ, PA)?

OEM Rep.: Everybody needs to be on the same page if we take the people to Liberty Park across the bridge, what happens to then?

NYC HH Rep.: able to work with OEM and NYC. OEM is excellent in coordinating...we have a NYC dept of health but regulated by the NYS Dept of Health. Both ask us to do some things and sometimes we do it twice. OEM gets agencies talking – limited on what we deal with. Have a way to get them out with their records? We have this but still fine-tuning. We need so many staff per so many patients. Billing – who is getting paid for all of this? Hospitals upstate are still working out billing issues (if you have to do it you will do it).

NYC HH Rep.: OEM does a good job coordinating. We have plans that help to keep track of patients.

MOPD Rep.: city agencies (OEM) could answer these questions to minute details. This city is on an intense effort to make this the conversation of the day. All agencies were there at a round table talking about the possibility of a hurricane...took you through as if you are watching the radar - contact DIFDA, sent out messaging, press conferences down to phone lines being down – what are the contingencies? Done at Shea stadium and twice in the subway system –great jurisdiction – take this very serious.

MOPD Rep.: since 9/11 this city has been on an intense mission to prepare. We had an intense table top exercise. We did a table top exercise at Shea Stadium, twice in the subways.

NYC HH Rep.: In NY it's a priority. OEM state and emergency planning, non-profits local areas.

NYC HH Rep.: Here NY preparedness is a priority.

Pam: do you have prior relationships? Done at city level or OEM

OEM and Red Cross, state emergency management coordinate with others states

MOPD Rep.: tried to compile lists – my office manifests itself very different around the country

MOPD Rep.: I have tried to compile a list of my counterparts across the country.

OEM Rep.: OEM has a liaison team works with suburban countries. This includes people with disabilities.

OEM ROUTE – regional organization teams around the issues of the most vulnerable

MTA Rep.: people not evacuating that far elevation steps up so quickly that people avoid storm surge within city limits (maybe 5 miles) You could walk it in 40 minutes. Terror disasters – you are staying within city’s jurisdiction.

MTA Rep.: For a hurricane evacuation, the evacuation is more like a tsunami

NYC HH Rep.: These zones are densely populated.

OEM Rep.: city does an evacuation zone find – put in address and find out if you are living in an evacuation zone and where to go and what to expect when you get there and what accessible means. There will be a special needs center and from there, you will be transported. Go to special medical needs and then moved on from there.

OEM Rep.: The city has a web based evacuation zone finder it will tell you where to go in case of an evacuation. The evacuation shelter will also be special med real needs shelter.

NYC HH Rep.: there are zones but densely populated – have to go through systems, it’s a process that takes time.

Pam: those people who don’t have access to the Internet, isolated – fall into category standing out on their window.

Pam: My question is with those people who don’t have access to internet, or TV

MOPD Rep.: those who have deteriorating conditions, haven’t been out of their apartment and there are a lot of those people and we don’t know how to get to them.

Carrier alert – voluntarily sign up – if there is a build-up of mail, will send staff to check up on that.

MOPD Rep.: this person might be someone that can’t get to the shelter

NYC DLCA Rep.: I don’t know how to get to these people \. We started carrier alert. If mail builds up, carriers call 3-1-1 but people have to sign up.

MOPD Rep.: city can’t have registry – compiled lists of lists (carrier alert another tool in the box) what happens is hard to envision. Those on the list have very limited communication and vulnerable.

MOPD Rep.: We collect these lists

BCOEP Rep.: have worked to train doorman, maintenance, etc when their older residences are becoming frail to help those more vulnerable...training with the union to educate their workers with issues around this aging....buildings have identified these people.

BCOEP Rep.: we train doormen and maintenance workers, Union, because they are in conflicts with the seniors. The buildings know who these people are.

BOMA – emergency preparedness taskforce...multiuse buildings have business information card, events going on, if disaster happened, we would know if there are disabled people in the building to send people in the building.

Pam: complicated imbedded system that is flexible.

MOPD Rep.: so much it has to be – could never wrap your arms around the number of different agencies here – 10 million people. The function of the leaders of that time. A city of this size; nature of it is complex.

MOPD Rep.: The Building Owners and Management Assistant (BOMA) has an emergency management task force. They work with the FDNY and others first responders.

Pam: This sounds like a complicated and imbedded system that is flexible.

NYC HH Rep.: the more people you reach out to, the better chance of reaching them.

MOPD Rep.: at some point, we don't know what others are doing (90 city agencies)

MOPD Rep.: there is 10 million people so you can't wrap your arms around it. A learn new things each day. 90 city agencies this is the largest municipal staff on earth

BCOEP Rep.: faith based groups – NYDIS – NY Disaster In Service

BCOEP Rep.: NYDIS Disaster In Service, Faith based service. Prouder services

MOPD Rep.: FL is awake on this because they get it all the time. NY has been through and has had to have these conversations...tremendous web.

Pam: in your work – who is the partner/person you turn to that you rely on?

Pam: who is the partner you turn to during a disaster?

NYS DOT Rep.: separate from our own emergency transportation office it would be the state emergency mgt. plus, we are wonderfully connected with all the significant players in NYC and the suburbs and statewide.

NYC DLCA Rep.: would call Lynda – she has been involved longer. I oversee service areas.

BCOEP Rep.: would call OEM – know whom to call etc.

BCOEP Rep.: I would cal OEM.

MOPD Rep.: OEM would call us at the initial point. In NYC it is so multi-agency. We would take leadership from OEM.

MOPD Rep.: OEM would call us before we call them. NY city is so multy agency.

MTA Rep.: OEM is more intense, more real-time – work directly with police and fire a lot. We have control centers and they have call lists that they keep 100% current. We would be reaching out for information to find out what do we do, what is expected of us, tell us more about what is going on, OEM, police and fire.

MTA Rep.: I would call OEM. We deal with police and five a lot. The rail control centers, which is the lead resources center keeps the lists current. We have the resources but would call OEM for information.

OEM Rep.: OEM MTA and NYC transit then transcom, PA Amtrack, all systems in place all contact info.

OEM Rep.: OEM would call MTA, Port Authority, Amtrak. We have all of the call lists.



NYC HH Rep.: OEM – each hospital has own emergency operation center, Greater association hospital??? Have all the pertinent contact information and have number for OEM watch command.

NYC HH Rep.: Every hospital has EM director?

Pam: How successful would NY be in a no notice disaster?

Pam: How successful would NY be in a no-notice disaster?

MOPD Rep.: 9/11 we proved that

John: but that was very specifically targeted...let's look at bio hazard

MOPD Rep.: hard to say...planning for it is great....blackout of 08 extra vehicle traffic on the street – don't know the answer but we have all the planning in place. At night, the streets got empty. It was a get to see your neighbor party! It's tough but as MTA said, they are ready to mobilize; it's just a function of what happens when stuff hits the fan.

MOPD Rep.: The planning and preparation is done well but when you talk about a mass evacuation you can't tell.

MTA Rep.: if we are running, we have no problem – if we are not running, then there's a problem. 25 miles is much different than a 5 mile evacuation.

MTA Rep.: The key to a 25 mile evacuation is that the MTA needs to be running. As long as we are running we are fine.

NYC HH Rep.: pedestrians also jump in.

NYC HH Rep.: during the blackout neighbors came out to help direct traffic. The MTA is ready to mobilize

MOPD Rep.: 25 miles has to do with OEM linkage – other agencies would have to link up with us. Access-a-ride links with able-ride. Laws are weird when it comes to that particular service.

John: if you had to evacuate to Nassau County.

MOPD Rep.: it's a process to share these responsibilities...in emergencies; my guess is all that stuff would be waived. During the strike, expedited accessibility. Those resources (Suffolk County and Nassau County) – they know we might need your equipment and vice-versa.

Rate of elderly dying has doubled and tripled since the storm

MOPD Rep.: If we had to evacuate to Nassau County, the laws are weird. In an emergency, I think the laws would be waived. As OEM Rep. pointed out, the Nassau County people come to meetings.

MTA Rep.: New American City – article to read

The name that was used for the conference and the meeting, I'm not sure whether it is the most precise type of name for what we are talking about – does imply disability and disadvantaged.

John : Anyone who didn't have access to a car for any reason. People who don't have cars tend to be special needs, poorer, but we didn't want to discriminate against anybody

MTA Rep.: Get into really strange place when working in bigger cities. Traffic problem gets addressed – transit helps traffic. I don't have a better word, but think about it particularly in this setting...people who are responding might be a little off focus.

OEM Rep.:

In charge of health and medical

Also speak to some else higher up.

Must speak to OEM.

## **Transcript: The New York Nonprofit Focus Group**

National Study on Carless and Special Needs Evacuation Planning, October 5th, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Anjeli Sharma, Ethnographer/note taker

Sophia Powers, Ethnographer/note taker

### Participants:

ARC Rep.– American Red Cross of greater NY (Consultation and Therapy); expertise helping moving those with disabilities, work with OEM, non-profits etc across the nation

CIDNY Rep. – Voter Education & Access Coordinator at the Center for Independence of the Disabled in NY (CIDNY) – independent living facility enabling independent living – played a big role for those with disabilities after 9/11; report conducted and provided; advisory role involved VOAD worked with OEM, don't have capacity to directly help with evacuations but make sure people with special needs incorporated into the planning of evacuation; should be part of the general plan

CIDNY Rep2. – Public Policy Associate at the Center for Independence of the Disabled in NY (CIDNY)

WCC Rep. – Founder and Executive Director of World Cares Center; VOAD, part of mayor's plan for volunteer reception center; spontaneous volunteer plan – convergent community members – discussions about what to do when they walk out the door and need to do something – that is who we focus on. How do we transfer the resources, work with responding agencies; general plan, general discussion, templates augmented as we work with the specific communities

WCC Rep2. – World Cares Center

*(In creating this Transcript, two sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by the two note takers.)*

### Transcript:

WCC Rep.: “We are focusing on the people who will just walk out their door and do something—people who are not going to travel three hours to the closest Red Cross.” We also work with the responding agencies on transferring over responsibility, and are interested in focusing on special needs.

CIDNY Rep.: We work to provide services for the disabled, particularly emergency preparedness, and in an advisory role. We are looking to incorporate the needs of people with disabilities, and make sure they are brought into the planning of emergency plans from the beginning. We are advocating that the disabled be “part of the general plan rather than the exception.”

Pam: Greatest Challenge for those who can't provide own transportation during evacuation?

Pam: What is the greatest challenge from your perspective for people who are, disabled, and elderly?

John: “I think the biggest problem is to actually get some of the people out of the buildings.” What if the electricity is down? If you’re on the 10th floor and you use a scooter, then you’re stuck. How can we identify these people? We don’t know where they are, so assisting them needs to be part of a general plan. We can’t tell you where people with disabilities are-- first responders don’t even really know where they can be found.

CIDNY Rep2.: principle of triage came from battlefield where you rescue those in best shape first. Two problems – you can’t tell from looking how likely they are to survive and two it’s discrimination to apply to a community Fireman and police and in Katrina it was done (ARC Rep. and WCC Rep. – not how we did it)

CIDNY Rep2.: Often what happens is the “principle of triage,” is brought to bear. The less able people are saved last. There are two problems with that—first, you can never tell who is more or less able, and second, its discrimination.

WCC Rep2.: access to communication...how and when is it necessary to communicate and those without access to technology...how do we get information to them?

WCC Rep2.: If there’s not access to technology, then who is responsible for getting information out to a community?

WCC Rep.: focus is always on self-empowerment; going out and reaching those communities and having them buy into the fact that saving themselves is their responsibility and developing their own evacuation plan, one might only look to the govt or to advocate a system for change or empower yourself and others, 0-15 minutes, etc. How are we going to gauge when they are going to come?

WCC Rep.: Self-empowerment is always our focus. Reaching communities is number one, and helping people to realize that they should be pro-active about saving themselves. This requires a change in the way we look at the responsibilities of the government. What are we going to do before (government) people come?

ARC Rep.: people who can’t get from point A to Point B, may need assistance but have caregivers and agencies that know who they are. OEM knows these people but that said I know for sure that there are people who are disabled in every building every borough that aren’t known by these agencies. Building upon OEM and getting the community together to identify these people on their back – connected to people on a personal door-to-door way.

ARC Rep.: People who are known to live with disabilities-- some people know who they are, like their agencies and caretakers. In some cases, though, there are still unknown people with disabilities. Getting the community together is extremely important, and getting them to identify disabled people.

Pam: from your experience, you have to drill down in the neighborhoods – does CERT do that?

Pam: Does CERT offer the mechanisms to identify disabled people?

ARC Rep.: Yes, each CERT team, just like all humans, some more active than others and can cause a problem. Rely on the city to be proactive, but we can engage and train them. As time goes by, you become lax, people move, people die – need to be supervised by OEM etc.

ARC Rep.: Some members of the group are more active than others. It’s the city’s responsibility to train people and know that they are still trained. There is a need for re-training, however.

WCC Rep.: CERT is always mentioned, it is inconsistent from team to team. We review curriculum in 9th module for NYC. There are 3 things that CERT curriculum doesn't address and the role that they can play and tagging those that fall under the radar. Most CERT team members what to do action related activities (managing traffic etc.) don't know if they have the culture to do other types of work. One: is it truly in the plan? Two: is it in the interest of those wanting to be involved in CERT? Three: inconsistent across cert in general (fabulous resource)?

WCC Rep.: On CERT: "Its inconstant, from team to team." I was part of a review group, and there are three things: "I don't believe the CERT curriculum addresses the abilities of the CERT team. The members want do action related activities and there is not a culture of doing the sort of social service outreach stuff that is often being taught.

ARC Rep.: my experience is different...I am teaching it so I am the one saying it. Identify people who have language issue, health issue, have go bags, doctors and have people in their neighborhood. What are they told to do with that information? Told actually to get to know various social services in the neighborhood and coordinate with them.

ARC Rep.: We ask people to identify disabled people in their building.

Pam: it would be interesting to think of the mechanisms with CERT etc.

WCC Rep.: What are people told to do with that information

ARC Rep.: we both have two different points of view, assume others are doing something similar. What is needed is that it is written down, have access to it and consistent

ARC Rep.: They are told to get to know various religious places and share the information. What is probably needed is that such information be written down somewhere, so that it can be built upon.

WCC Rep.: information may not be shared, standardized

Pam: Did Katrina change how the disabled community was viewed?

Pam: Do Arron and CIDNY Rep2. know about CERT?

WCC Rep2.: I think one overall problem serving those with disabilities doesn't fit with overall mindset of emergency preparedness. But people lack family, money, car and may not have a plan or back-up plan. As an individual living center, we work with people integrating in to the community as long as resources available and working. Problems if you don't know areas you are trying to navigate, technology not working (interruption to routine) population of people who may have disabilities but don't consider themselves people with special needs until there is an emergency. With money and family, it's easy to come up with a second plan.

CIDNY Rep.: I'm aware of the CERT teams. One major problem is that if people lack resources, (car, money, family) people may not have a back up plan. We work with people who are integrated into the city, but if their resources are down (elevators not working, don't have meds). There is a whole population of people who are fine / functioning day to day but not necessarily in situations of emergency.

CIDNY Rep2.: I only know what it taught me and the people in the community...it's possible for the govt. not to evacuate people in nursery homes, personnel who think its ok to separate people from mobility device. Being left behind because of disability is the most horrific thing. People were being left behind because they were not able to get them out.

CIDNY Rep2.: It's possible for a government to decide not to evacuate nursing homes (Katrina) People think its ok to separate people from their mobility device.

WCC Rep2.: during certain situations, you may become one of those people who didn't think they would need access to these services; have to take in all hazards and have to think about alternate plans.

WCC Rep2.: During certain emergencies, you may become one of those people who is disabled (if you have asthma, for instance) each emergency is different; People need to think about alternate plans.

WCC Rep.: changes tremendously – started post 9/11...different emergency, population disaster, changed those they were advocating individual citizens as first responders; don't expect CERT teams to do it on their own. Our part is to go into the community and facility for those that don't speak the language (Latino population) and have them self-identify. They are presented with the potential of having this happen, so that they can be proactive. Katrina shed light onto what happens if the fire department etc. is not there in time to help.

WCC Rep.: We were founded post 9/11. Katrina was a different emergency. Katrina changed our perspective on which we are willing to embrace as responsible members/ responders. The Latino population—they don't speak the language, they are terrified of institutions. We present them with the options, and ask them to self identify.

ARC Rep.: American Red Cross is NOT a first responder. People are brought to the Red Cross – not equipped to do that. NYC after Katrina, CERT team and Red Cross training as many people as possible...we are very concerned and have scenarios if certain disasters happen here (OEM site to see flood zones). The ARC is trying hard to get more volunteers and training them. Concerned with special needs population (well over 115,000 children dedicated as special needs)

ARC Rep.: American Red Cross is not a first responder. People are brought to us outside of the red zone.

WCC Rep.: Are you involved in sheltering place (as opposed to evacuation)?

Pam: Did Katrina shift what you do?

ARC Rep.: if there is a disaster between Ave A and B we are going to be outside the disaster zone

ARC Rep.: We are trying to train, as many people as possible, and we have scenarios of what would happen in the case of a level 4 hurricanes. You can go on the website and see whether or not you are in a flood zone. We are very concerned about special needs populations everywhere.

WCC Rep.: Are you involved in sheltering in place? (Long Island)

ARC Rep.: If there's a disaster between A & B Ave. we will be outside that zone.

Pam: How it is working cross-jurisdictional for you?

Pam: How is it working across districts for you?

ARC Rep.: that is above my grade level; have partnerships, partner well, when we set up a shelter or welcome center, all city agencies are there (department of health and hygiene),

ARC Rep.: We have partnerships with all the groups here. When we set up a welcome center, we are able to provide all of those services. (OEM calls Red Cross)

Pam: In a disaster, who is the first agency you call?

ARC Rep.: OEM would call the ARC. I believe that's how it works in the command center.

CIDNY Rep.: relationships with a lot of disability agencies for evacuation; issue of resource; offer information from consumers how they deal with blackout and 9/11; don't have the money or staff. Don't know if there are a lot of disability groups involved; had a lot of consumers come because we were closest – not enough funding for us to be doing what we are doing, not really...we are here because this is a topic we are interested in. Agencies don't have the resources.

CIDNY Rep.: We have relationships with a lot of other groups; our group has information (how people do with a blackout, etc) that we could share. I don't know that there are a lot of disability groups that are aware of this. There's no funding for us to be doing what we're doing. There is not nationally a lot of attention paid to this issue.

Pam: – would someone call you?

Pam: Would someone call you about specific catastrophes?

CIDNY Rep.: we are partners with OEM in that sense involved in special needs group there but I think in the disaster with warning we would have to contact consumers that live there.

CIDNY Rep.: We are partnered with OEM.

CIDNY Rep2.: always come in after we hear from consumers regarding bureaucratic problems. On long-term recovery, more than the immediate.

CIDNY Rep.: We work more on the long-term recovery.

CIDNY Rep2.: What happened with 9-11 is that we would here about problems and then come in.

Pam: Who do you turn to if you have a question of disaster?

CIDNY Rep.: I would contact people I know through OEM.

CIDNY Rep.: We would first contact OEM.

ARC Rep.: OEM would contact me or go to local ARC to determine where to deploy.

WCC Rep2.: We are a national program...a lot of training in NY mailing lists go to NY, NJ, CT; a whole host of issues when coming right over the river. Some resources are not used because of jurisdiction; being national is a bonus. We would contact OEM.

WCC Rep2.: Partnerships cross jurisdictionally? We are a national program, our mailing lists – anyone from New Jersey, Connecticut, and New York. We have the advantage of just being a program that is national. We would contact OEM.

On spontaneous plan (NY Cares etc) on committee as members and have responsibilities on that committee outline in disaster plan. As far as other aspects – when talking about constituencies, we have several national relationships. When talking about accessing other resources, we do have a spider web of communication (based private resources we would call upon).

WCC Rep.: In the even of an emergency, we would respond as we have outlined in the plan. Other aspects, our constituency, we have several national relationships. We have a spider web of community based and private sector resources.

Pam: It struck me how you put yourself in time – people that you work with are first responders.

Pam: How you situate your organizations in time—this is incredibly interesting.

WCC Rep.: We work with citizens, and they are the first responders.

ARC Rep.: we work with citizens and they are the first responders...ARC we will be there immediately, assist the family, offer comfort, support and fulfill immediate needs whatever they may need (i.e. burning building not going up but right outside to help).

ARC Rep.: If there is a house fire, we will not enter the building, but be right outside. The Red Cross is there right outside the disaster zone.

CIDNY Rep2.: Who would be calling us...during 9/11, another living center in the Bronx all of the deaf consumers called in; consumers we know and don't know would call us; staff that lived the closest would be there fielding the calls. Providing info the consumer base that we already have.

CIDNY Rep2.: In instances, her consumers (deaf) would call us because they saw images on TV and didn't know what was going on.

CIDNY Rep.: Our first concern is to help people we already know.

WCC Rep.: WCC – not first responder...we train every citizen to embrace individual citizens as their own first responders; that's the way any government agency frames time.

WCC Rep.: "World care center is not a first responder. We train other to realize that they may be the first responder"

Pam: Fascinated by the way you are framing time.

CIDNY Rep2.: our time for people coming in to us is right away, us going out to other agencies happens after.

CIDNY Rep2.: The time for people reaching to us is right away, but when we reach out to other people we are not first responders.

John: curious to learn about resources with respect to transportation – getting people out of a disaster zone – are there the resources to handle it?

John: Are there enough resources to transport to people?

ARC Rep.: needs to be asked to Mayor, OEM; not only their questions, their answer and their duty



ARC Rep.: We have to ask that question to the Mayer!

Pam: from your perspective does there appear to be resources to evacuate?

Pam: From your perspective, then, are there the resources?

ARC Rep.: I have been given no information from any responsible legal authority from NY. No one has given me that direct answer.

ARC Rep.: I'm not sure, I don't have enough information.

CIDNY Rep2.: we can be pretty sure a lot of what transportation there is won't be accessible; private buses are supposed to but laws are not enforced; try to rent and they all go to 1 company in NJ; livery cabs and black cars largest part of the fleet is mandated to be accessible and not; yellow cabs not accessible (80).

CIDNY Rep2.: We can be pretty sure that most of the transportation will not be accessible. (Most private transportation is supposed to be accessible, but is not).

Pam: can someone with handicap ride in yellow cab?

Pam: In an emergency, would someone be able to get in a cab?

CIDNY Rep2.: there might but you might have to leave the scooter behind because you can't carry it. People would rather stay than leave behind equipment

CIDNY Rep.: transportation is a problem PERIOD – we face in the city and throughout the state and have to rely on systems they don't like or can't rely on; it could take a half-day to do something.

CIDNY Rep.: People are generally not willing to leave their equipment. Transportation is one of the biggest issues in general, not just in emergencies. It could take half a day to do anything even on a regular day with no disaster.

CIDNY Rep2.: as soon as something goes wrong it gets much harder.

Pam: are there any buses that can let in more than two wheelchairs?

Pam: Are there any busses that can let in more than 2 wheelchairs?

CIDNY Rep2.: Some people have small wheel chairs and can get on a bus and be transferred, but fixed seats are limited.

CIDNY Rep2.: Not really, sometimes small wheelchairs.

WCC Rep.: wealth of untapped resources in NY and during Katrina; those that one school bus company was willing to have people evacuated but bureaucracy legality stopped that from happening. I don't know, no one has told me; our philosophy of what we do – we go into the communities tell the plan on the table and how this affects you and what resources you have to pull together as a community. Let's plan and share that plan with the powers that be.

WCC Rep.: There is a wealth of untapped resources to assist in the evacuation. There were a wealth in Katrina—individuals taking boats out, school bus owners were willing to have their busses used. Piggyback on ARC Rep.'s standpoint, no one has told me how vast the resources are. We go into those communities, and we say, "Hey, what resources do you have as a community. Lets make a plan together".

Pam: Moving those with disability into the forefront so citizen participation is in the center.

Pam: The citizen participation of the planning should be brought to the fore.

CIDNY Rep.: know there are going to be needs; if we plan well, we know that there will people who are going to be there; really incorporate if you do good planning and well trained, the people will be there (even overrepresented) that is the idea that we are interested in.

CIDNY Rep.: we may not know the details; we know that people are going to need transportation. If you do good planning, people will be there.

Pam: what was the response during the flooding?

Pam: The subway incident—There were deaf people who couldn't hear the evacuation instructions.

CIDNY Rep.: no reliable resources for communication; one of the issues.

CIDNY Rep.: It's difficult for deaf people to use the subway in general.

CIDNY Rep2.: there was a person who wouldn't go on the subway without someone with her; subway gets disruptive easily; workers don't recognize the needs and can't tell which way to go; ordinary citizens come in but we don't get the information from subway personnel.

CIDNY Rep2.: The subway gets disrupted very easily; the workers don't recognize the needs of disabled users.

Pam: How much training does each of your agencies do for disaster for your own agency?

Pam: How focused are your organizations on evacuating your own group?

ARC Rep.: don't know how many but are hyper alert to these issues and many training programs constant exercises with CERT team and OEM (nationally).

ARC Rep.: There are constant exercises, and many contingency plans.

Pam: do you know where they will be in an emergency.

Pam: Do you know where everyone would be in an emergency?

ARC Rep.: I don't know, I will walk and wait to be deployed.

WCC Rep2.: we have internal and external disaster plans, also have luncheons ensuring everyone has a go bag; ensure everyone up to date on contact info, secondary site to set up operations if possible; ensure we practice what we preach, as prepared for all hazard situations.

WCC Rep2.: we have an internal and external disaster plans. We have lunches, where everyone has his or her own evacuation plan. We have a secondary site. We practice what we preach.

CIDNY Rep.: don't have secondary site; emergency contacts; do have evacuation chairs; fire drill procedures; no go bags.

CIDNY Rep.: We don't have a secondary site. Our evacuation isn't that complicated, we have evacuation chairs.

CIDNY Rep2.: after 9/11, a lot of emergency training, plans made, training on evacuation chairs, then died down, now don't know how to use the evacuation chair now. One program deals with traumatic brain injury, has everything set up; go bags and those people to help them.

CIDNY Rep2.: There was a lot of stuff done since Katrina, but a lot of the training has not been kept up. Those who are responsible for consumers—they have ‘go bags.’

CIDNY Rep.: haven’t learned how to use the evacuation chairs; lots of staff turnover; different priorities with training.

CIDNY Rep.: With a small agency, there’s a lot of turnover. Who has been trained and who hasn’t is difficult to keep track of.

WCC Rep.: that is the point about equipment to be used during disaster, the plans and technology to be used, have other responsibilities in our agency so that the equipment, technology. Whatever is expected to do has to be intuitive; no instructions to read etc. should be able to work the chair manage the technology; need 10,000 individuals to man shelters and you have 3,000. How do you make someone intuitive so that they can help immediately? That’s our responsibility...you can plan and be proactive but that’s not intuitive.

WCC Rep.: Things have to be intuitive; people should be able to use a system or a chair without a lot of training. “It needs to be intuitive.” How do you make something intuitive so that they can help immediately? You can plan and practice, but that’s not intuitive.

CIDNY Rep2.: have a place to keep things; issues that need the training is the hardest to maintain.

CIDNY Rep2.: The things that you have to keep training people are the hard things.

Pam: what is the general NY attitude to evacuation plans?

Pam: What’s the general New Yorker way to think about evacuations?

WCC Rep2.: 60 percent said they would take a cab. They don’t think that this is an island; diverse population.

WCC Rep2.: People will take a cab.

WCC Rep.: A diverse population of responses.

CIDNY Rep2.: those that have some resources (using scooters etc.) think about this and know what to expect. Do they feel there is anything they can do to prepare? Supposed to have something you can do by going to NYFD to let them know you have a disability.

CIDNY Rep2.: People with severe disabilities, they think about this stuff. But they probably don’t know what they could do to prepare.

ARC Rep.: all experience as a New Yorker; I saw people going to ground zero to help their neighbors, providing water during 9/11 and the blackout. We didn’t leave, we move toward the problem – interesting human response. Katrina speaks to this; people don’t want to leave their homes...so how will you communicate what is the likelihood of that to happen?

ARC Rep.: People really helped each other during 9-11. People didn’t leave, they moved toward the problem...an interesting human response. People don’t want to leave their home—their animals are there. What is the likelihood that people are just going to leave?

Pam: attachment to place; we saw that in Katrina; be prepared, think about leaving and want to stay.

Pam: Attachment to place...we must consider this.

WCC Rep.: what ARC Rep. said is exactly why we were founded; potential good Samaritans; planned my whole life and nothing has turned out as planned; have diverse resources, social networking to maximize resources at hand.

WCC Rep.: That's why we were founded in that community that we work with the most, we want to work with people who are potential good Samaritans. Social networking to maximize the resources you have at hand.

Pam: what would be the one thing that would help most in the next disaster?

Pam: What would be the one thing that would help most in the next disaster?

WCC Rep.: money

ARC Rep.: special needs or in general? Special needs – I need to know where everyone is; ability to identify.

ARC Rep.: We need to know where people with special needs are.

CIDNY Rep2.: there is a real diff in identify bc isolated people can't be found, some people don't want to be down on a list and there are kinds of disabilities people wouldn't see.

CIDNY Rep2.: There's a real difficulty in identifying people—some people don't want to be written down, there are people who don't know they have disabilities.

ARC Rep.: I've been in homes and in projects – there are people that nobody knows are there.

CIDNY Rep2.: money; everyday things made accessible.

ARC Rep.: I don't want my name on a list either, but time for religious agencies to come together with other agencies to have a list somewhere – let it be somewhere.

ARC Rep.: I don't like my name on a list either, but its time for churches/synagogues/mosques to start collecting this information...let the list be somewhere.

WCC Rep.: how many of CIDNY constituencies do you have?

WCC Rep.: How many members do you have?

CIDNY Rep.: 7,000/year

CIDNY Rep.: 7,000 people

WCC Rep.: how many with computer access?

CIDNY Rep2.: less than 1/3

CIDNY Rep2.: Only one third have computer access.

WCC Rep.: Groups should come together to create these lists (have the technologies etc.) but I do not see everybody getting on the same table and sharing that info accessible to everybody (CAN database) resistance, confidentiality issues; interoperability needed to address that – share certain info at a certain time; you will not cross barrier of confidentiality, NGO values by the number of people they serve; need a way to have people own the resources and share that in an interoperable way without giving away all of it.

WCC Rep.: There are technologies that will allow those lists to be made. I do not see everyone getting on the same table and getting their name out there in that way. There needs

to be interoperability (how different systems can share info). NGO's want to own their resources, they need some way to share that info, but in a way that doesn't give away all of it.

Pam: don't register with 311, list upon lists upon lists.

CIDNY Rep.: time of emergency is not the time you notice that people have disabilities; disaster multiplies the effect on the person.

CIDNY Rep2.: doesn't believe individual has to do everything; a lot of barriers caused by society – government has to come in.

CIDNY Rep.: subway inaccessibility is not our problem; blamed on individual living facilities for not meeting needs during the disasters but don't have the access. How do we plan if we are not invited to the planning?

CIDNY Rep.: The problems that special needs people face, they face every day, not just in a disaster. It's a community problem. After Katrina, people in these centers (aimed at advocating for special needs clients) are blamed for not taking care of people.

WCC Rep2.: acceptance of resources that are readily available now not being utilized; understanding there are solutions to these problems not being utilized.

WCC Rep2.: Acceptance of the resources that are there that aren't being utilized. The average citizen does have a role to play.

John: NY is so large, but who are some of the key stakeholders who should be having this discussion?

John: Who should be at this meeting who is not here?

CIDNY Rep2.: seniors

CIDNY Rep2.: Some one to represent seniors

ARC Rep.: ARC, AARP UCP, Catholic charities, massive social services agencies

ARC Rep.: Social Service Agencies.

John: A lot of them were invited.

CIDNY Rep2.: reps, substance abuse and mental health communities

CIDNY Rep2.: Substance abuse community/ nursing homes/ mental health workers.

ARC Rep.: nursing homes

Pam: Grass roots community agencies here

Pam: Acorn's active here?

ARC Rep.: ACORN, local communities

WCC Rep.: St. Bernards Community Center; Chinese planning council, Project Find (senior centers), PTA, teachers

WCC Rep.: Groups in Chinatown (Chinatown planning council).

WCC Rep.: Project Find

ARC Rep.: PTA

WCC Rep.: In disaster response, children are constantly overlooked

WCC Rep.: Children are constantly overlooked.

ARC Rep.: NYC schoolteachers.

Pam: Bioterrisom, larger than 9/11...

John: how successful would NY be in a bio terrorism event (evacuate a 25 mile radius) all boroughs about 8 or 9 million

John: You had to evacuate all of Manhattan.

ARC Rep.: we're toast, it's a small place with a lot of people.

CIDNY Rep2.: could get the Bronx out, everyone should be thinking about this.

WCC Rep.: reality of it; is it a dirty bomb?

CIDNY Rep2.: Whether it's contagious or not matters.

ARC Rep.: even in 9/11 I ran to my neighbors and told them to get gas in their car and make decision to leave city; I can't get out on a regular day; better be first one to know and closest to getting out.

ARC Rep.: I decided that I was going not leave for 9-11. You had to decide right away whether or not you were leaving.

CIDNY Rep2.: too little use of boats in NY.

CIDNY Rep2.: Use of boats not considered enough.

WCC Rep2.: agree. When they close bridges and tunnels, there is a greater need for ferries; need info of that.

WCC Rep2.: Ferries were running.

CIDNY Rep2.: Private boats.

Pam: Worrisome to us; almost not worth thinking about; denial

Pam: Its worrisome.

CIDNY Rep2.: I don't think we could get everyone out, but if we had to stay we would be able to handle it really well.

CIDNY Rep2.: "I don't think that we could get everyone out, but if we all stayed there, then we'd do a pretty good job."

## **Transcript: The San Francisco Government Focus Group**

National Study on Carless and Special Needs Evacuation Planning, November 27, 2007

### Facilitators:

John Renne, Assistant Professor of Urban Planning, Associate Director of the University of New Orleans Transportation Center (& note taker)

Pam Jenkins, Professor of Sociology, a founding member of Center for Hazard Assessment, Response and Technology (CHART) at the University of New Orleans

Andrew Hudak, note taker

### Participants:

MTC Rep., Metropolitan Transportation Commission, Transportation Planner

MTA Rep., MTA, Department of Parking and Traffic, Safety Analyst

MTA Rep2.e, Municipal Transportation Agency, Fixed-Route Accessibility Coordinator.

OES&HS Rep., City and County of San Francisco, Office of Emergency Services and  
Homeland Security, Emergency Planner,

Veolia Rep., Veolia Transportation, Special Assistant to the General Manager,

Veolia Rep2., Veolia Transportation, Director of Operations,

Veolia Rep3., Veolia Transportation, Contract Compliance/Road Supervisor

*(In creating this Transcript, two sets of notes have been collated, resulting in many repeated annotations with slight variances. Note-takers attempted to capture everything said; however, fast moving groups necessitated summarization of participants' remarks. Consequently, twin annotations of a given remark may not be equally summarized by the two note takers.)*

### Transcript:

Intro- Why Choose SF? Team discussed what locations are appropriate.

Pam: Thanks for coming, Focus on elderly evacuation, vulnerable populations, and community disaster response. Around Country conversation about learning for everyone involved

John: Introduction- At the time of Hurricane Katrina, we started asking questions about how the car-less population would be able to evacuate in an emergency and looking at issues around vulnerable populations. After the Hurricane, we received funding from Federal Transportation Administration to look at evacuation planning for car-less, special needs populations. We found New Orleans similar to seven other cities, Listed. New Orleans disabled and vulnerable populations are similar to these other cities. We are looking to answer the questions of what is the state of evacuation planning for car-less. Two other studies are looking into similar questions, one being run by the Transportation Research Board and the Department of Homeland Security.

The Chicago focus group said that Katrina greatly affected planning and policy. In New York, 9/11 and Hurricane Andrew in Miami were emergencies that challenged and changed policy and planning. This focus group will be followed up with interviews. The point of these focus groups is to learn what cities face when dealing with issues of car-less vulnerable populations.

Pam: "What are your agency's greatest challenge?"

Pam: We will focus today on the carless that are also vulnerable. What is your greatest challenge in meeting the needs of the most vulnerable?

MTA Rep2.: I don't know any specifics, but generally, good communication between staff and the departments. He said that there was a willingness to do anything; there is some planning going on in his department, but I don't know what it is specifically. The department is looking to answer disaster related questions such as: What kind of shuttle service to provide? What kind of schedule will it run on? How will the fleet drive through a crowd if a disaster caused similar crowds to athletic events? What kind of route should the fixed transit run? What kind of vehicles would be useful in a given type of emergency event?

MTA Rep2.: I don't know the specifics of the city's evacuation plan. I look at the planning of the vehicles to make sure the MTA's vehicles are accessible.

MTC Rep.: Facilitate needs of providers, amend contracts to include disaster planning, MTC has hired consultant to develop a template for emergency for para-transit services that are contracted by large transit operators like MTA and BART. MTC organizes and runs committees for elderly, disabled and minority groups

MTC Rep.: We are working on a contract to make sure paratransit providers can provide transit during disasters. We have an Elderly and Disable Advisory Committee (EDAC) to work with us in identifying their mobility needs.

Pam: "What is the greatest needs of vulnerable populations?"

MTC Rep.: Understanding and communicating special needs of individuals, organizing coordinated services between agencies, running plans through agency and community committees to obtain their input/feedback. Conversations with the community have brought up the needs of wheelchair dependant populations. Drivers of the transit vehicles are often not equipped to meet such medical needs (mental and physical incapacities). The transportation community has to meet the needs of the client. This has to be communicated to the agencies.

1. Accurate Communications is one of the biggest issues we face. I chair an emergency planning for transportation committee. What we have found with the vulnerable populations is that many of the people have kidney --- and mental needs, these are needs that drivers are ill-equipped to handle; they are not trained to be "health workers".

Jeff: Intro

MTA Rep.: His agency has a plan to create emergency routes through the city, accessible only to emergency vehicles. The challenge would be to keep those routes clear for the disaster response. His agency and the Coast Guard coordinate on plans and studies, and have a plan to bus people to coast guard boats in order to evacuate the area. Workforce availability during an event like bird flu would be an internal challenge. The car-less vulnerable population is not in his department's territory, but rather plan to transfer people from point A to B once they get to point A. His agency is concerned with the enough busses and the routes. He brought up the concern of workers being victims too? Everyone has said they will show up. The department has emergency contact numbers, but that may do no good if the phone system is not working. Will people be willing to respond to the call? The department has thought about and considered a plan, but not defined it.

MTA Rep.: We have emergency routes after a disaster. We have plans with Coast Guard who will pick up MUNI bus routes. If we have bird flu, we don't know if we will have enough employees to pick up vulnerable population.

Pam: What is you biggest challenge?



MTA Rep.: it all depends upon the disaster. One of our main concerns is that our crew is unable or unwilling to show up for work

OES&HS Rep.: Response that San Francisco's geographic concerns and the type of disaster are the greatest challenge. Any evacuation depends on the scenario, an earthquake or a tsunami. He is concerned whether the city employees can return to the city. One case scenario, assuming an evacuation, who and where are the vulnerable populations? He mentioned that lists of this population must be held by the organizations who deal with them, or people who have signed the voluntary assistance list.

OES&HS Rep.: San Francisco is not like New Orleans and I don't think we would need to evacuate the whole city. With earthquakes we would want people to shelter in place. A large concern is getting people back into the city. Assuming we did need to evacuate we don't know where the population who needs assistance is located. Some nonprofits have lists; there is a registry of people ... this list is Dept. of Public Health

MTA Rep.: Added that tourists are also a vulnerable population, as are commuters into the city.

MTA Rep.: We also have a lot of tourists and commuters.

OES&HS Rep.: So the concern follows from identifying the vulnerable population to how to notify them? What if no phone service exists? Is the population tuned into the system resources? How many drivers and how many buses? His department coordinates other departments and resources.

OES&HS Rep.: even if we identify the people how do we notify them? Identification, Notification, Resources- How many buses? How many drivers? Where do we take people?

MTC Rep.: The geography of S.F. Bay Area is unique; eight bridges criss-cross the Bay.

Veolia Rep.: How to get people into San Francisco? What about commuters, and bridges? Transportation depends on drivers from outlying areas.

Veolia Rep.: The emergency plan

MTC Rep.: Mentions that if the county runs out of resources, resources are requested and "brokered" through State Office of Emergency Services (OES) from other counties.

MTC Rep.: The Coastal Region of the State OES would coordinate needed resources from counties that have the assets to loan out.

Pam: Do you have shelters in other counties

MTA Rep.: Inter county contracts for housing and shared services exist around the bay area

MTC Rep./MTA Rep.: Yes we have a lot of regional planning in S.F.

Veolia Rep.: If the bridge collapses we have...

MTA Rep.: Describes cards carried by county and city workers with color coding to describe where each employee is to assemble and provide aid; red or Hot zone, yellow zone, and green zone collection points. He mentions plans to get workers into SF from the south, via Coast Guard, and Metro. Says that it is practiced by exercises and meetings.

MTA Rep.: Every SF City government dept has a card that tells them where to report to. Coast Guard would pick us up and bring us. We would have tabletop exercises ...

MTC Rep.: Describes the efforts of county operational areas to exercise specific elements of their Emergency Operations Plans (EOPs).. Exercises focus on elements such as hospital services. MTC's annual functional exercise allows agencies to Practice and test their EOPs under scenarios with specific focus for each operator.

MTC Rep.: MTC facilitates an annual transportation exercise. There are lots of exercises that go on from emergency medical. Nov. 14th we had a terrorist exercise of a bomb on a bridge.

Pam: Do vulnerable populations play a role in the exercises? Are the disabled part of the exercises?

Pam: What part do elderly and vulnerable populations ... a part of the exercise?

MTC Rep.: We coordinate with OES across the region. County OpAreas also host exercises and may focus on getting hundres of injured to limited hospitals in their counties. Counties may use actors to "simulate" the vulnerable people during their exercises just as transit operators might practice moving wheelchair patrons on their buses and trains.

MTA Rep2.: Doesn't know

MTA Rep2.: I'm not sure how big a part they are in the planning.

MTA Rep.: Says that there are tabletop exercises, and point out pets as another concern?

MTA Rep.: In the past, we have had tabletops and even with pets it becomes a major issue.

Pam: mentions that the people can evacuate New York on foot, but that there are concerns over motorized wheelchairs running out of power.

Veolia Rep2.: Raises concerns over how to communicate the needs of the vulnerable population with drivers, and how the customer will get a hold of our organization. Also, worries about the availability of drivers during an emergency, and what about their concern for their own families. Suggests that some resources be available for the families, such as temporary shelters. Have the drivers work, worry free. Concerned about traffic conditions, how to predict what it will look like, how to identify safe places for people to go to, communicate with shelters and hospitals, where does the vulnerable population go on the vans? She mentions that she has seen no conversations about that. How to communicate pick up locations to customers and their families, and communicate the end destination. She says that the community relationship with the planning organizations is solid. Answers an earlier point that her organization has a list of names, but questions how to access them if computers aren't working for any reason.

Veolia Rep2.: Communication is the biggest issue. Resources is another issues. Drives may not be able to come to work. Allowing the drivers to a safe place for driver's families. We are worried about traffic conditions. Identifying safe places to go to. There has yet to be talks with hospitals, shelters, medias groups to deliver announcements. Coordinating efforts across agencies. The advantage about paratransit. We have the names of people but if electricity and computer shut downs. We have no idea, we had a computer shutdown and it was a disaster.

Veolia Rep.: Answers that the corporate office has an off site back up, but no specific plan to communicate that to local organization.

Veolia Rep.: Our corporate office is in Chicago and they back up the data

Veolia Rep2.: But getting this information from Chicago would be difficult

MTC Rep.: Mentions that Contra Cost county held a forum for vulnerable population needs and transportation to encourage “networking” among the non-profit agencies and their services and the vulnerable population groups needing those services

Veolia Rep.: Her organization is contracted to provide emergency services, and the planning org (OES) is to tell Para Trans where to go.

Veolia Rep.: The city is planning on using taxi frequency

MTC Rep.: MTC purchased satellite phones, gave them to transit Operators and County Offices of Emergency Services.. MTC itself is a planning organization NOT an Operator. MTC facilitates monthly tests using the equipment so that these organizations can practice and train on the equipment.

MTC Rep.: MTC has purchased satellite phones and we test these phones twice a month

MTA Rep.: Says that MUNI has six satellite phones.

MTA Rep.: NWI has six satellite phones

Veolia Rep3.: Worried that families will not know where the transported individuals are.

Veolia Rep3.: You are all thinking about the big policies, but I’m thinking about the bus drivers all over the Bay Area. Where would the drivers take the people in the vehicle? Where does my mom go? How would I get a hold of these people?

Veolia Rep2.: Suggests that they, her and other organizations, identify vans and where they are, and a central drop off point for each area. Communicate to families that they check predetermined areas before calling Para Trans. Suggests central locations for given areas, so drivers are not overwhelmed by driving everywhere and can continue to transport their passengers.

Veolia Rep2.: This is where the clog in information comes. Does the driver know where to bring people? If the phones work, they will be flooded. We need to train ourselves and our passengers to check five locations for people.

John: Are there five locations?

Veolia Rep2.: There are not five locations. Our drivers will be overwhelmed They need information about what to do and where to go.

MTA Rep.: “What about jail prisoners?”

MTA Rep.: Where do we take people in jail?

MTC Rep.: Limited resources. Says that Alameda County encourages NGOs to come to meetings and tackle these questions and communicate so that every one knows GIS.

MTC Rep.: I know counties are limited with resources Alameda county works to coordinate NGO’s within their county.

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Pam: Is the disaster registry mapped?

OES&HS Rep.: Some mapping, cluster mapping, of given populations location.

OES&HS Rep.: I've seen cluster mapping?

MTC Rep.: Different groups for different Bay Communities.

Pam: Asks, Did Katrina Alter your job?

Pam: When you think about your role, did Katrina change your job?

MTC Rep.: The Commission started to focus on special populations, and a consultant looked for planning holes. A lot of money is going to Department of Homeland Security. They are trying to separate security from emergency planning, and the pot of money is going to security, and is not integrated with emergency planning.

MTC Rep.: Yes, What does the paratransit need?. We are now hiring a consultant to look into this. This wouldn't have happened without Katrina.

One thing that is conflicting is that the money going to DHS that s going to security planning does not include emergency planning which is needed.

OES&HS Rep.: The media challenged OES as to the readiness of San Francisco. We spent a lot of time responding to requests for information, and asking what are the plans? The office became much more scrutinized, office was growing in size already by 9/11. Money come from the federal government for terrorism, and then Katrina brought focus back to natural disasters.

OES&HS Rep.: Katrina is a huge wake up call, especially from the media. Our office grew in size after 9-11, but after Katrina it moved the spotlight away from terrorism back to natural disasters

MTC Rep.: An earthquake is more likely than terrorism.

Pam: Response to Northridge said to been done well.

MTA Rep.: Helped to raise general concern, management was forced to know more, and find out what was going on. Worried that that the focus will not stay, and long term planning isn't taken into account because of the short term appointments of general management and administration. The politics of disaster.

Veolia Rep2.: No increase in staffing, it did raise of awareness for disaster, but still focused on terrorism. The London bombings. Transport as focus for an attack on a bus or something. Alarmed that drivers and staff not required to be trained, knowledgeable or prepared for terrorist attack on a van or bus. No situational knowledge. Suggests raising the awareness and training among drivers.

Veolia Rep2.: Post-Katrina we didn't increase staff but did increase awareness. The bombings in London were important. We are equally focused on terrorist attacks. The only driver training is CPR and light first aid. Our drivers are not trained what to do if, for example, there is a suspicious package on a bus.

MTC Rep.: Mentions NTI sponsored free terrorism training for providers. NTI provides a forum on terrorist training for transit.

MTA Rep2.: Mayor's office on disability started emergency planning after Katrina. The mayor's office pushed focus in that direction.

MTA Rep2.: I know the mayor's office of disabilities started after Katrina

MTC Rep.: Satellite phone purchase came about as a result of Katrina, larger attendance of managers and other staff for emergency planning and tabletops.

MTC Rep.: After Katrina I now had money available to buy satellite phones and I now have the attention to get the Deputy Manager to attend emergency preparedness meetings.

Veolia Rep.: Raised awareness, but not staff or money. Attends some monthly meetings and disaster forums in San Francisco

Pam: Asks about the ebbs and flows of preparedness theme. What about cross-jurisdictional issues? Good relationships?

Pam: Cross-jurisdictional issues? Are there good relationships?

MTA Rep.: There is inter-county communication, a lot. but needs to be better to be effective.

MTA Rep.: I don't like the way you structure your question. There is a lot of cross government coordination. Is it good enough? No

MTC Rep.: Between 1994 and 1997, we developed contractual mutual aid agreements between transit agencies to commit assistance. It has no specifics, "gentleman's agreement." There is talk of shared resources; drivers who live in one place can drive those buses, but training on specific type of equip is problem; CNG, Trolley, Diesel, buses. Labor contracts are also issues. Labor unions, do not want to put driver in harms way. We can't mandate it.

MTC Rep.: We have some intergovernmental agreements, but with few specifics

No written agreements with transit providers to share equipment, but drivers don't know how to drive different equipment. The labor union agreements come into play. We can't mandate within the context that people show up. We have a "gentleman's" agreement across the transit agencies.

MTA Rep.: The chain of command must remain intact, and follow how the communication is set up too work. Heads of transit don't talk to each other. It's manager to mayor, mayor to mayor, mayor to head of transit agency.

MTA Rep.: You have to remember the Union of command makes it difficult to coordinate across transit agencies.

MTC Rep.: Protocols under SEMS and NIMS exist. The governor is the head, but knows the managers know their job, and allows managers to do their jobs. The managers trust their officers for specialties, like safety.

MTC Rep.: SEMS & NIMS comes into play

OES&HS Rep.: There is an organized system to request services, and everyone understands how to use it.

OES&HS Rep.: There is an organized system for requesting resources. But the system is in place.

MTA Rep.: There is a system there, but room to improve it.

MTA Rep.: But the system can get better

OES&HS Rep.: Money goes to region, and then allocated.

OES&HS Rep.: The region gets the money and forces collaboration through the Super Urban Area Security Initiative SUASI

Veolia Rep2.: Social service agencies have vehicles that can be used in a disaster.

MTA Rep2.: Super shuttles vehicles are not accessible.

MTC Rep.: mentions the Super Urbanized Area Security Initiative (SUASI).

MTC Rep.: Resource management was a huge issue through the SUASI. For example, need database of medical resources to keep track of what's available and where.

MTA Rep.: Mentions that they've left off volunteer organizations. What can city and county do to include them?

OES&HS Rep.: Non governmental organizations have their own vehicles.

Veolia Rep2.: Some organizations assume they will be a safe house, or have a role.

OES&HS Rep.: Hotels have vehicle fleets. Can we assume their fleets?

MTC Rep.: But does everyone assume the vehicles can be used by their own organization?

Veolia Rep2.: Hotels assume that they will use their own fleets.

MTC Rep.: Resource management, how to account for resource management. For example, hospital equipment. Hospitals only want to have what they will use right away. They are not interested in building a cache or inventory of supplies..

Pam: In a disaster, who is your organization's partner agency? Who will you call first?

Pam: In a disaster, who is your partner agency?

Veolia Rep.: East Bay Para Transit.

Veolia Rep.: We would call East Bay paratransit.

OES&HS Rep.: OES is the organizing department, we activate emergency center, and coordinate other agencies. We are the ones called

OES&HS Rep.: We are OES, we would activate the emergency operations center. We have a 2nd location.

Veolia Rep2.: Partner agency is San Francisco Para Transit. Each manager has a designated call list of providers and patients, and a time line of who to call. Also, we call transportation agencies like BART. We call the providers; they know what happened first. But the general manager GM calls OES first to find out about the situation.

Veolia Rep2.: SF is our partner agency. Each manager in our office has a designated list of people to call. We have a plan and timeline that gets activated.

Our general manager calls the OEC

MTA Rep.: Other agency planners contact the department of parking and traffic requesting specific transit needs. The department designated individuals and backups to send to OES.

MTA Rep.: Planners of the city call us, we have designated people that perform certain roles. We have back-up staff for 12-hour staff.

MTC Rep.: We have a coordinating role- EOC is in the building. Will call each EOC and see what resources are available, and find out what emergency exists. Then find out how much money to request.

MTC Rep.: We have a coordinating role. Our commissioners will talk to Wash. DC to get \$

MTA Rep2.: Will call MUNI and Napoleon's department.

MTA Rep2.: We would call MTA Rep.

MTA Rep.: I have a list of phone numbers with me at all times

Pam: Where are the holes and the good spots? What about training issues?

Pam: Training issues. What about training of drivers?

MTA Rep2.: The drivers have intense basic training that includes disability awareness, civil rights, etiquette, and the functional how to training. There is yearly training, resource books, and videos. Improvement in communicating these messages to drivers.

MTA Rep2.: Drivers have an intense training of how to interact with passengers. We do yearly trainings.

Pam: What about disaster training?

MTA Rep2.: I don't know?

Veolia Rep2.: There is required training. Nothing specific to natural disasters or terrorist attacks. Which agency maps out the required training? Our agency should enforce that training. Training should be mandated. Otherwise, it will not be done to meet the needs of an actual Katrina or London event. A bus caught on fire a week ago. Was the driver trained in this type of event? He was scheduled to have five riders. All but one cancelled. How is the driver supposed to members of any vulnerable population off of the bus in an event like that?

Veolia Rep2.: There is n specific training about natural or terrorist disaster training. We go to forums like this, but there are no mandates to train drivers. Unless it is mandated it will be difficult to train drivers. A few weeks ago there was a bus fire, but luckily no one got hurt. But I asked my OM, do we train drivers about what to do.

Pam: What about levels of training? Is your agency prepared in structure and in staff? What about a Go Bag?

OES&HS Rep.: Personal disaster training, DSW program. Employees need to have a Go Bag. Mentions an outreach program to City and County employees, to keep ready for an emergency.

OES&HS Rep.: We are ramping up this disaster service worker program. Everyone has a badge but there is an outreach to inform city and county workers about what to do during an emergency.

MTA Rep.: Wants to see any city employee as disaster service workers in time of emergency, rather than their normal job. Says that every employee should be trained in NIMS, include governor's staff,

MTA Rep.: The mayor and governor have made a video tape letting people know they must work during an emergency. I think all government workers need to be trained on NIMS.

MTC Rep.: Making something mandatory is not an issue. It must be enforced.

MTA Rep.: But online training of NIMS is not sufficient. More needs to be done.

MTA Rep.: More must be there than simple tests and tabletops,

MTA Rep.: More tabletop exercises and active training is needed.

Veolia Rep2.: agree with MTA Rep.

MTC Rep.: Some UASI technical work groups engage ngo's in emergency preparedness, what is focus? Training drivers with DHS \$ - TSA wants 95% drivers to be terrorism- trained. Problem is difficult to backfill drivers while current drivers get training.

MTC Rep.: After Katrina, more NGOs are now getting involved. The TSA wants transit drivers to get trained. But transit agencies experience difficulty allowing all the drivers to get trained, can't back fill the positions.

Veolia Rep2.: There's not enough drivers to cover training holes, and what about payment for time?

Veolia Rep2.: This is a big problem.

MTA Rep.: Need money for employee time.

MTA Rep.: No \$ for overtime

MTC Rep.: TSA federal requirements, unable to meet due to union labor contracts, money, and time and staffing problems. Formula for reimbursement rate might not meet union rates.

Pam: NGO's, what are the organizations that are crucial?

Pam: What is an important NGO

MTC Rep.: CARD, community agencies.

MTC Rep.: Collaborative Agencies, Responding to Disasters (CARD),,,

MTA Rep2.: Community task forces.

NYS DOT Rep.: I don't know.

MTA Rep.: Red Cross, churches and faith groups.

MTA Rep.: Red Cross, Churches

Veolia Rep2.: We work with social service agencies immediately. Their clients are our clients.

Veolia Rep2.: Social Service Agencies that deal directly with para transit.

OES&HS Rep.: Red Cross, United Way, senior centers are crucial.

OES&HS Rep.: Red Cross is almost like another city department. –senior centers.

MTA Rep.: BOMA and builders.

MTA Rep.: Commercial Building Management Association BOMAR



MTC Rep.: Business Executives for National Security (BENS) was created in last three years to align private sector with public sector in security issues

OES&HS Rep.: San Francisco Interfaith,  
OES&HS Rep.: Interfaith Network

MTC Rep.: GRIP.

MTC Rep.: Greater Richmond Interfaith Program (GRIP) – group of churches that fall into NGO category in Contra Costa County.

Pam: Prediction for success?

Pam: How would your agency respond in a no-notice disaster?

OES&HS Rep.: System in place. Imperfect, but confident in it.

OES&HS Rep.: I think the system would work fairly well.

Veolia Rep2.: not so confident in system, because of the issues already mentioned.

Veolia Rep2.: Not as confident as I would like because of the issues that I mentioned. There is a lot of work. People put this on the back burner. Maybe only 50%-60%

MTA Rep.: Better than most American cities, but not so good as other nations, like England and France. France can have onsite emergency wards, ready for surgery. It's a very different structure of response. Doctors come to the site of emergency, they regularly have mobile units with doctors. England and France in particular are much better prepared. They take the doctors to the site rather than people to the shelter.

MTC Rep.: Increased confidence. People show up more at meetings, and an increased number of exercises

MTC Rep.: I have much more confidence now than in the past.

MTA Rep.: In France, 24 hours a day, there are mobile units with doctors. These are mobilized during an emergency.

John and Pam: Close and thanks. This study opens with focus groups, and will follow with interviews.

MTC Rep.: After Katrina, the staff of MTC changed from 1.5 to 3. There are 8 bridges to move around within the urbanized San Francisco Bay Region. We are not going to evacuate the entire Bay Area, just localized areas within the greater Bay Area.

MTC Rep.: Private businesses don't want the economy to disappear with an evacuation. Seeing how Katrina affected businesses in New Orleans got the business community involved. So there are no plans in ever having a whole city or region evacuate.

MTC Rep.: In early 90's I was told that we could not consider all MTC employees to be disaster workers. This is now being reconsidered. The question is how to apply it to all staff including those who have been MTC employees for years (do we grandfather in all the people who were not disaster workers previously?).

MTC Rep.: The security chiefs consider any emergency planning protected information, even when discussing amongst other agencies. During reviews for funding proposals, the BART security chief handed out the proposal, gave the presentation, and then collected the proposal so that none of the security concerns around the system could be spread. Transportation questions may be different in most areas, but questions of vulnerable populations are the same.

## **Transcript: The San Francisco City & County Stakeholder's Forum**

November 28th, 2007

### Facilitators:

Joanna Fraguli, Mayor's Office on Disabilities (MOD)

Rob Stengel, Mayor's Office of Emergency Management (OEM)

Joshua Lichterman, with the Emergency Management Group, Incorporated, Grass Valley, California, (Consultant to this project, which is funded by the State Department of Social Services)

### Participants:

David Somerville, Treasure Island Development Authority

Jenny Hom with Community Health Services

Kathy Murray with Mercy Housing

Christine Frances, Golden Gate Regional Center, serving persons with developmental disabilities

James Godfrey, URS Corporation

Heidi Lee with the Institute on Aging

Henry Lee, general services agency

Julie Parsons with the mayor's disability council and the department of building inspection

Leon Smith, north and south of market

Patty Clement, Catholic Charities, CYO

Derrick Logan, Glide Community Housing

Richard Lesserson, San Francisco Paratransit

MTA Rep2. SFMTA accessible services

Mary Hennessy, Mayor's Office of Housing, self-help for the elderly

Adam Wynn, San Francisco Human Services Agency

Anisa Williams, providing services to grandparents raising their grandchildren

McSpadden, human services agency, Department of Aging and Adult Services, IHSS

Vince Nadel, Family Services Agency

Victoria Cowan, California Department of Social Services, community care licensing

Noel P., Human Services Agency, care and shelter branch

Nancy Gliss, Human Services Agency

The Salvation Army

Christina Lu, Red Cross

Michael, Red Cross

Milt Yee, The California Department of Social Services

IHSS Public Authority

Michael P., San Francisco Interfaith Council

Sarah Tours, working with adults with developmental disabilities

Diana M., California Department Of Public Health, Licensing And Certification

Terry Z., Glide Foundation

Isabelle M., Glide Foundation

A.L., San Francisco Community Agencies Responding to Disaster (CARD)

Betsy Eddie, Department Of Aging And Adult Services  
Doug P., St. Francis Living Room  
Don Bennett, ON LOOK senior health  
Joe Hickey, Department of Public Health (DPH) Emergency Medical Services  
Jordan Kline, United Way  
Herb Levine: Community Alliance Of Disability Advocates  
Bob Planthold, NERT team leader  
Paul George. City of Berkeley  
Rachelle, Catholic Charities, Treasure Island Supportive Housing  
Vernon Banks, American Red Cross, Bay Area Chapter  
John Renne, at the University Of New Orleans  
April, Department of Public Health (DPH) Health At Home  
Eric Johannson, Institute On Aging.  
David A., Department of Public Health (DPH) community programs  
L. Harris, Gray Panthers  
Ana O., a member of HEAD, a client, (animal rights activists).  
A home care provider representative  
Woody Baker Cohen, American Red Cross

*(The present transcript was made available to the National Study on Carless and Special Needs Evacuation Planning by the San Francisco Mayor's Office)*

### Transcripts:

Joanna Fraguli: those of you who just got in, we have sign-in sheets, sign your name. And we have packets of information. Please leave the large print for those people who need them.

Joshua Lichterman: can I have your attention for a second. If any of you walked in and just sat down, would you please sign in here, find your name on the sheet. And if you are not on the sheet, please sign at the back. There are some blanks, so we can make sure we get everybody. Please take a white card for writing out questions. And if you write out a question, please put your name on it, because we may want to follow up outside this meeting on particularly entertaining questions.

Joshua Lichterman: Does anybody need an assistive listening device? We have them. Okay. My name is Joshua Lichterman. And I am with the emergency management group, incorporated, in grass valley, California. I am the consultant to this project, which was funded by the state department of social services.

Just a few things about the facility; The men's room is that way, the women's room is that way. Exits are marked in the hall down low, which I approve of, as an ex-firefighter. And we are going to start with Joanna Fraguli from the mayor's office on disability and OES&HS Rep.tengel from the mayor's office of emergency management, and then I will proceed with a presentation on this program.

Joanna Fraguli: Good morning, everybody. Come on, who is awake?  
So the very first thing I am going to ask you all is to move forward. It would really help us trying to make -- to do a discussion here. This is going to be a little bit of information sharing, and a lot of, you know, questions and answers. So we call it a forum because we want folks to essentially be able to give us their ideas. First of all, thank you all for being here.

You are all a very integral part of disaster preparedness in San Francisco. And believe it or not, we are actually leading the way nationally on our preparedness efforts when it comes to people with disabilities and seniors. So this is exactly what this session is going to be focusing on. We are only going to be talking not about the general special needs population but about the people with disabilities, any type of disability, and seniors. In your packets you would see my powerpoint presentation, which I have some key points I am going to attach on. Feel free to have questions and provide feedback, and we will be going through. But at this point you don't really need to take notes. Okay? Ready for the presentation, Rob? We didn't expect so many people. We thought the acoustics were going to be better. At the last minute we decided to use a mic.

Okay. The very first effort that we -- actually, let me back up a little bit. The mayor's disability council, which is a body of citizens with disabilities appointed by the mayor to provide feedback and policy recommendations to the mayor regarding disability issues, following the aftermath of Katrina and Rita, formed a committee, subcommittee, called the disability disaster preparedness committee, that was formed in 2002. They decided that really the city needed to take some active steps towards preparing for disasters in regards to people with disabilities. They worked on several projects. We worked on several projects. One of them is emergency shelters, emergency disaster shelters. There was criteria for accessibility, for shelter accessibility checklist that was developed, that took the generic ADA requirements checklist and boiled it down to some of the most basics. We actually went around and surveyed a whole bunch of public buildings, or schools or congregations, that would be effective for efficient sheltering. So they were all put into a database. That database basically has 82 shelter sites that have been identified right now. We have 38 sites that are fully accessible and 37 sites that are partially accessible. As you will see in the PowerPoint, there is a ranking system of one to three, one being fully accessible; two being partially accessible with some minor modifications. It could be there is just one step or one threshold that could easily be mitigated with a small ramp or maybe the doors are too heavy, in which case the doors can remain open or we can arrange for someone to make the doors available and open for people with disabilities. Then we have about 7 shelter sites that are actually not accessible. Even though it sounds like a good beginning, we really still need a lot more sites, and there are a couple of districts that have only one or two shelters. 82 shelter sites in the city doesn't mean much, because at this point we don't know if, you know, any of them will be standing should a big earthquake happen. So we always need your help and your assistance if you have a facility that you think might be appropriate to shelter at least 50 to 100 folks, whether it's a big gym, a congregation facility or whatever, you will need to contact either me or Rob Stengel, and we will put it on the list. We will assess it, and we will put it in our database. It is a very quick and easy way of identifying accessible shelters in the event of a disaster. That is something that other counties now, such as San Mateo and Marin, are including. So if we actually have to evacuate to a different county, there is this sort of cross reference of accessibility in shelters. Again, we are not done. This is just the beginning, right?

The other issue that came up is policy issues. One of the major issues that have been instrumental or problematic for Katrina and Rita disaster survivors is that people with disabilities or people who needed personal assistant services or communication, accommodations, they were sent over to special shelters. So the special shelters were over-impacted, and people with disabilities were not necessarily able to move from one location to another. So we decided that we are not going to do it that way in the city, and hopefully that is a common approach that is spreading throughout the state and the counties. That is partially what we are talking about today. People with disabilities need to be integrated into the general population shelters with all the appropriate accommodations needed for them to be

able to function in the soonest way we can get them there, and we will make do as quickly as we can. Medical shelters are also something needed, because often times we have hospitals or care homes being evacuated. Then you really need to have a facility that is more able to deal with those types of issues, like people on life support, people with significant breathing apparatuses that need electricity or medical support, and people who are also in immediate need of medical attention, such as folks who have been injured severely or are recuperating from a surgery, that are not able to function, and they would typically be in a nursing home or a skilled nursing facility or hospital.

Okay. So this is covering -- one of the shelter policy issues is basically accommodations or a adherence to all of the ADA regulations. Things like service animals are being included in the shelter, in the generic population shelter. People are allergies. We are talking to some of our folks about designating a special area in the shelter that will be kept chemically free so that you can put families together, put people with environmental chemical sensitivities.

In your packets you will also see another document called "tips for assisting people with disabilities." I will talk about this a little more later, but this is something that Rob Stengel and members of the disability disaster preparedness committee prepared, and this gives us a guide for shelter managers or for anyone running a mass shelter operation, on how to assist people with disabilities in the shelter residence. Of course, even though we do have -- even though we have shelters and we have the right policies for them, we need to report to people how we are doing

In the city we have a massive notification system or a siren system where the mayor and, you know, folks from the operations center would announce where the shelters are, help people to proceed in a disaster. However, the problem was that this information was not accessible to people who are deaf and hard of hearing. So the city procured a system called roam secure, or AlertSF we all it here. It will basically provide text based messages to text pagers, text cell phones, so folks who are hearing impaired can get the same impact message that is going out in the general public. Oftentimes in the news following a disaster we do not necessarily have captioning on our TV announcements, and radio is not accessible. So, obviously, that system is particularly helpful. From what i understand, at this point AlertSF does not have a huge capability. So even though we may have more people that need to use it, they are not necessarily able to use it. So part of the problem is to extend the capability of the system and to also spread the word out, especially to folks from the hard of hearing and deaf community. So our office is contracting with another organization to conduct outreach to the deaf and hard of hearing community around AlertSF and help sign folks, register folks for that.

We are also looking at assessing the population for equipment. Perhaps folks who could really make use of the equipment, make use of the system, but don't have the resources available, so that we can sort of connect them with technology. The next issue that we worked on was evacuation. You know what? We still have so far to go.

Evacuation -- no laughing, Bob. Evacuation is like our Achilles heel right now. The council came up with the recommendation that said that all city and county of San Francisco buildings of three stories or more will be equipped with evacuation chairs. And they meet the needs of a variety of people with disabilities. Every person with a physical disability is not, you know, the same. So there are different models that work better for different disabilities.

We put the down payment on that project by allocating 145,000 of our capital improvement budget, we, the mayor's disability council; put do you happen the down payment of \$145,000 for this year to implement in project in our city and county buildings. Unfortunately, this only covers city and county buildings, meaning city hall, library, museum, maybe some health clinics, cultural centers. What happens to the folks, senior buildings and people with disabilities, housing authority buildings, that don't have a lot of people with disabilities? Unfortunately, they are a different entity from the city of San Francisco. So we really need to

think and problem solve in terms of rescue and evacuation, which of course nobody wants to touch at this point. Again, this is not something we are talking about today, but i just wanted you to know kind of the state of where we are.

Transportation issues. That is another issue that we really need your help and your problem solving skills. The city has a large supply of accessible transportation vehicles. Almost all of the muni buses are wheelchair lift equipped. We have over 60 ramp taxis that are available to be deployed and assist in evacuation efforts. We also have paratransit vehicles. However, there has not been so far a collaboration between the Department of Emergency Management, MUNI and MOD about devising a protocol of how to plan. That really needs to be key. Actually, if you think about it, it really works in the sheltering arena, because as folks need to be going through recovery, they need to be transported back to their homes and they need to be transported to different appointments. A person with a disability may have lost their ability to move around due to lack of infrastructure or assistive devices will have a significant problem that needs to be addressed, both in the evacuation and the recovery phase.

The next area that we have identified is disability-specific resources. Okay. There are three types of resources that we have identified. What you see in the different colors here is where we need to go from here. So communication related resources. Those are things like assistive listening devices, American Sign Language, and captioning for folks who are needing access to information into the shelters. So essentially what happens is that we need to develop mou's with our city-approved vendors so those folks can be dispatched in a disaster situation into the various locations where they can facilitate effective communication for people with disabilities.

Then personal assistant services. One of the most common questions we get in the shelter system is what happens to people with significant disabilities who need personal assistant support? We all know that right now in our registries, in our IHSS roles, service workers are family members, and hopefully they will be able to be evacuated in the shelter with their family members. However, there are folks who live independently and rely on personal assistant services from providers outside their family, and we don't know whether those providers are going to be available. We are hoping to develop a process with the department of adult services to be able to kind of create some on-call attendants, some additional training just in time that will be happening in the shelters so that perhaps some of the shelter residents can assist. This is where we are looking to the state to give us some ideas about how to fill that role in the shelter.

The final category that became so important, and we sort of have a good handle on but there is still much more in the legislative and public policy area is disability related products. By disability related products, i mean things like durable medical equipment, wheelchairs, canes, you know, special mattresses, shower chairs, things that people leave behind when they evacuate their homes and things that are yet so instrumental in being able to maintain their health, safety and ability to function and recover. So we started with a small -- you know, we talked about doing stockpiles and going and hitting up all the big corporations and getting stockpiles. But you know how property prices are in San Francisco. Where would you store those things? Who would have them? How would we know we can get them if a part of the city is being impacted?

So one of the things we thought about was to identify all the local vendors in the city and county of San Francisco, map them through a GPS system so we know within each district who the priors are, and also conducting MOU's with those providers so, let's say, we open a shelter at the bill graham auditorium and we need, I don't know, five wheelchairs for folks who left everything behind, or we need a bath seat, there will be a provider nearby that we can have an agreement with and be able to get these supplies. However, the other huge issue is medications. We have folks with something as basic as diabetes, and very special insulin that

they have to take. Unfortunately, we don't have this capacity, because medications are so time sensitive, system specific to the person. We also have people with HIV and AIDs medications who cannot remain without their medications for more than a couple of days. So that is the area that we need some more legislative advocacy and some creative problem solving about figuring out what to do with meds. By the way, all those areas are highlighted because those are the plans that we have. But we don't have the staff to do it. So if anybody wants to volunteer to write MOU's, we will be more than happy to have you put to work. The other area that the disability disaster preparedness committee identified was the disaster service worker training.

Loma Prieta and also hurricanes Katrina and Rita showed us that when you go into a shelter, people with disabilities -- most volunteers don't really know what to expect. So you get some silly things happening, not out of meanness but out of ignorance essentially, lack of education. So Rob has been really wonderful and developed this pamphlet that I talked about for people with various disabilities in the disaster shelters. The last thing I heard, those tips were also included in every start-up kit for shelters through the Red Cross. So it's a huge move forward. Also an active member of our disability disaster preparedness committee has been Red Cross representation. They are very interested in sort of all the disability issues. So last year for the first time we were able to do a shelter drill that the Red Cross ran that a lot of people with disabilities participated in. So it was kind of an interesting learning experience for a lot of the volunteers who had perhaps never been exposed to somebody with a disability. Actually, I think pretty much 90% of the shelter residents, or volunteer residents in that exercise, were people with disabilities. So they went through everything from TBI to a person with a speech impediment to a person with a mobility disability, deaf and hard of hearing, you name it. Deaf and hard of hearing with kids. It was pretty intense. And we look forward to participating again. Then we kind of thought about another different approach. The city has a department operations center that deals with care and sheltering issues when a huge disaster happens. So we decided, you know what, we need to have somebody who really understands disability needs, disability issues, and can provide technical assistance and coordinate all those accessibility, access issues and questions into the whole shelter and care system, whether it's feeding, transportation, you know, sheltering. So we created this disability -- or supportive services unit of the care and sheltering, the disability coordinator, who is the individual who will be communicating with all the different branches of operations and be able to kind of like provide resources and distribute resources. We have the information and will be targeting specific resources to specific needs in the various shelters. Actually, this is established as a policy. Rob did a good job of putting in an initial draft into the actual operations manual. But we still need to develop a training for who that person would be. And actually it will be a number of folks. We are envisioning folks from our office and folks from the department of aging and adult services, because they will have the most direct experience with people with disabilities and seniors. So we are trying to develop a binder full of resources, job descriptions, if dos and don'ts, and go through an intensive training process. Now, having said all that, it is really sad when I am saying we are actually way far further in the game nationally than other jurisdictions, because to me, who has been working on this the past year and a half, I feel oh, my god, we better not have a huge earthquake for at least the next five years, because we are really in trouble. So there is still extensive work to do. We are excited about the state project because hopefully they will be able to fill in some of the gaps, things like a resource binder writing or something like that. We also need advocacy for a disability disaster manager in the city, somebody within the city structure whose primary job would be to do disability disaster. It's amazing what has been done with the collaboration of some of the departments, the volunteer hours of folks from the disability community, and about 10 hours a week of my time for the past year and a half. We would not have been



where we are today At this point we can't just count on volunteers anymore. It really needs to be stepped up

So our contact information is on the last slide. It is the disability disaster preparedness committee. It maps every first Friday of the month from 1:30 to 3:30 at room 421 of city hall. If you need more information, I would encourage all of you to join us, come and give your thoughts, ideas, take charge for one of the projects that remain to happen. And I hope we will see you there. Does anybody have any questions at this point?

Audience member: Is there any possibility that you can change the meeting time?

Joanna Fraguli: If we have enough requests for that, sure. Any other questions?

Audience member: How is the policy out of the mayor's office on disability integrating with the plan for the fire department and for those other entities which are not city and county buildings, for instance, you know, it's good that the city and county is concerned about its buildings, but as you referred to the housing authority, there are other authorities, other agencies responsible. What is the overall integration model for making sure individuals are protected who are not in city and county buildings or receiving city and county services?

Joanna Fraguli: Unfortunately, let me see if I can answer this kind of loudly. Let me know if you guys cannot hear me. Unfortunately, there hasn't been much integration. Remember, this is work that happened with just volunteer hours. So, you know, we totally need you guys to spread the word and to bring more players together. Housing authority should have its own disaster plan. Unfortunately, I don't know where that is. I know that for a couple of the housing authority buildings there has been a model of installing evacuation chairs. Obviously, more of that needs to happen. We need to go into buildings that have elevator assisted evacuation processes in place. That's the new hot thing, especially for new buildings. But unfortunately, it's too much, and we need help. Another question in the back?

Audience member: I work with Mercy Housing, one of the Mercy Housing sites, and participated in preparedness meetings on a voluntary basis. But I am really conscious of kind of the message that is received, you know, everybody is responsible for disaster planning, you guys are going to take care of your own.

That is kind of how the message comes across, and the reality is a lot of organizations haven't been involved. So if we do have a Katrina level disaster, evacuation of senior property with 200 residents who speak four different languages, and if that happens on a weekend and there is only a desk clerk there, we do have a plan, but at the same time, the message is kind of there isn't a whole lot to rely on. What I would propose is, because there are so many partners in housing in this city, mercy housing, ecumenical homes, is to call a meeting with representatives of these different housing units, because you are talking about thousands and thousands of people, and to partner with them, not just to say you guys get a plan and do it, but to somehow have some follow-up. You know, that is just a suggestion.

Joanna Fraguli: that is an incredible suggestion. That is exactly what i mean by collaboration. I don't mean you do your part, we do our part.

Audience member: no, no. I don't mean you in particular. I am saying the message that kind of comes from the city. It is kind of a generalized message, well, we can take care of everybody by telling them they have to do a plan. It's all in the process.

Joanna Fraguli: right, absolutely.

Audience member: I said that in a little flip way, but i didn't mean it as it came out. But i think it is getting the big players, and housing is one area. There might be others. But if you get all those players in for housing, I mean, when you get the number of subsidized housing in the city, it's huge.

Joanna Fraguli: thank you.

Audience Member: My name is Michael Pappas and i am the executive director of the San Francisco interfaith council. I attended a meeting a couple of weeks ago at the presidio and i will echo comments very briefly I made there. There seems to be a confusion and a frustration in the religious community, because houses of worship are being contacted by the city, the mayor's office, sand stone consultants, the red cross, card, and the list goes on. Even the Consulate Corp. The houses of worship in the city are the perfect respite centers for emergency preparedness, and along with the issues of integration and collaboration, i think it's going to be very important to get all of the different players together in one room and say if we are going to be approaching houses of worship, let's do it in a consolidated and unified way, because otherwise it's going to be absolute bedlam if, god forbid, something this happen.

Joanna Fraguli: again, i think a lot of the comments that you are making, both of you actually, have to do with centralization of our resources and of our needs so that everybody is on the same page. You are so right. I couldn't agree with you more. We have so much further to go.

Rob Stengel: I think also to respond -- I'm Rob Stengel with the department of emergency management. I know exactly what you're saying, because it's funny, from the outside it looks uncoordinated or not coordinated at all. The fact is, our office works closely with the Red Cross, closely with card. The consultant actually came out of a contract from our office. So on the inside we're coordinated in doing it, but yet from the outside it looks like there's five different people doing five different things and it's not tied together. That is just an excellent comment, because it means we sort of need to combine our resources a little better.

Audience Member: There is one shelter list and one shelter database, and I -- (inaudible).

Audience Member: I wanted to follow up on the remark about the housing. Just about 11,000 units of city funded housing in the city, and those units house many of the disabled and elderly in the city. The nonprofit housing community is fairly easy to pull together around this subject. So I want to echo that, that I think that would be a great first step for somebody to convene that meeting.

Audience Member: About ten years ago, maybe a little bit after the Loma Prieta, there was a meeting of all the different stakeholders, including housing authority, my program, the ombudsman, mayor's office on disability, at the command center for the fire department. I think it's on Turk street, the building. There was a tremendous kind of city-wide plan going through the fire department and they talked about psychological services, trauma services. They talked about which middle schools, which schools would be used for everybody, not just elderly or disabled. It was a pretty comprehensive plan, and it's ironic that the psalm say'ers who were invited to that, even after Katrina, even after homeland security, has put a lot of funding into it, are kind of out of that process now. Yes, the city agencies can go talk to

other agencies, but it's sort of like the actual first responders of the fire department, the EMS folks, the agencies are kind of out of the loop. And I think, following up on the suggestion to bring the housing authority folks into a larger meeting, we need to reconstitute that original kind of meeting at the command center of the fire department, because I think a lot of city agencies are getting together, but their actual citizens are not really folded into it anymore, the actual nonprofit agencies. And I think if we are going to really make this work in the worst case scenario, we are going to have to kind of revisit what was done right after Loma Prieta. This might be the first step.

Audience Member: I represent Catholic Charities on Treasure Island. I have gone to a number of discussions, and it appears to me that Treasure Island, Yerba Buena Island are never in any of these discussions. We have 176 families. At any time on the island there's 3,000-plus people, and they have disabilities, they have children. There is no collaboration working with the citizens on the island to be included in any disaster preparedness. We just now did a NERT training, and I have just been shocked. I have been working this last year in creating some kind of collaborative effort, and I am going to get with mod to strengthen that relationship.

Rob Stengel: I think it's a good point. We have tried. I have we have gone out and assessed some of the shelter sites on treasure island and I know we are in the process of putting a cache of supplies out on treasure island. I know we have done some work on Treasure Island, but that is not to say more couldn't be done. Again, if you are not feeling it is coordinated, obviously, that's reality. It means there is more work we could be doing. But I know we have been engaged in some discussions with Treasure Island, doing some shelter training and shelter planning, and so forth. But again, I am sure that doesn't mean that everything is perfect and, you know, is self-sufficient sufficient and as prepared as it could be.

Joanna Fraguli: I actually have one more comment to make, and I am hoping this will sort of summarize a little bit of what everybody has been saying. Everybody is looking into plugging into a large, large structure. You know what? In the case of emergency, the large structures fail. Actually, this is going to segue on Rob's presentation, which is going to be really about sort of community-level response. Part of why -- one of the things we learned from the massive disasters is that when we are waiting from the great big -- whether it's the feds, the state, the city, you know, the firefighters will come and rescue everybody. It just doesn't happen. That is why we are moving from large scale response to community-based, balancing-based, neighborhood-based response. You guys, the firefighters are going to be too far away. There's going to be way too many things to do. It's about how we take care of ourselves and each other and our clients. You are all here because you have -- you are interested in your stakeholders and your clients. And you want the organization to be plugged into a larger structure. I would say that the very first step is trying to get hooked up in our disability disaster meeting, because we can look at those issues, and we are going to try to create steps. I am going to be giving a very different status report next year. And it's all up to you to kind of like really seek out and connect with all of us. So don't wait for the big mayor's office to kind of like rescue everybody. It's not going to happen. You will be waiting for a long time. Okay.

Rob Stengel: Sure. I will talk for a few minutes. Obviously, the meeting is focused on emergency planning for seniors and people with disabilities. But nonetheless I thought some of the work that has been going on in San Francisco around community disaster planning probably has some implications for what we may talk about as the meeting progresses up until

noon this morning. What I will talk about is just the community disaster response hub concept.

First I will give you a little bit of background. We actually had a -- I guess back in the spring of this year we had a -- we put together a community disaster planning work group that really represented a cross section of different departments in the city. We were looking at how we could strengthen community preparedness and response in a disaster, you know, how to basically increase the ability for communities to be self-sufficient and to get the resources and the information that they need in a big disaster event. So to a large extent we tried to take into account what is already in place. You know, as people know, if you live in San Francisco, we have a very vibrant NERT program, the San Francisco fire department, I guess for about 14 years or so -- longer than that, I guess -- has offered a program known as the neighborhood emergency response team training, which is to organize San Francisco residents, residents and neighborhoods, into a cadre of trained people who can help each other out, basically neighbor helping neighbor, responding to disasters, help people respond to neighbors and their family, and then they can go help their neighbor across the street or down the street or whatever. We wanted to build on that concept, and we came up with an idea of community disaster response times, because while there is a mechanism, you know, the NERT program that prepares to organize and coordinate individual residents, there really wasn't something for organizations that helps to organize and coordinate organizations in a response. The fact is, you know, some of our basic operating assumptions were, as Joanna had said, following any large disaster event that causes infrastructure damage, communities are pretty much going to be limited initially to a response with only the resources or assets on hand at the time of the event.

Generally, because if there's infrastructure damage, in other words, damage to utilities, damage to communication, damage to transportation systems, it's going to take three days or more before the city gets assistance resources into neighborhoods. But we know that there are already resources and organizations in place in communities to support the needs of disaster victims at the community level. As Michael mentioned, there is the whole interfaith community, synagogues, parishes, we have heard from lots of community-based organizations already. There are retail stores, restaurants, sort of the whole private sector. There are schools that are both public and private, and there's also enabled associations. So the idea of the community disaster response hub was an entity -- we actually took the city and divided it up by emergency districts. San Francisco -- and the NERT program is also modeled along the same sort of grid as these emergency districts in San Francisco. There's ten emergency districts in San Francisco, and we came up with this concept of neighborhood disaster response hubs where we would in essence place one hub in each one of these emergency response districts, with the goal being to put it in place by the end of next year, by the end of 2008. These hubs would actually be city-run facilities, Department Of Public Health is ultimately going to be the lead agency for setting up and for providing the initial staffing of the hubs, because for the most part the hubs are going to be located at community-based public health facilities.

Joanna Fraguli: accessible facilities.

Rob Stengel: But what the hubs will do is they are going to basically provide the community entities that I talked about, whether community-based organizations, congregations, local businesses, neighborhood associations, provide these community entities with a way to plug into the city's larger response structure. The hubs will be a way to help to -- well, as we have up here, the purpose of hub -- I guess we went to the second slide. That's okay. Basically, the hub is going to serve as a sort of central community response structure to -- I guess we're

almost there. Okay. We will run through the purpose of the hub sites. One is to serve as a central community response structure around which to organize communities disaster preparedness. Spoke part of the idea of establishing these hub sites -- again, right now it is still in the conceptual stage. We haven't actually gotten to the implementation point. The idea is once we get these hubs established in communities, they would be a central point within each community around which to organize preparedness.

In other words, it would be a way to bring organizations together. We talked about some of the issues with the housing providers. It would be a way to bring the various community entities together, whether it's feeding programs or housing programs or health services, mental health services, bring those folks together and try to, you know, identify what some of the resources are that people would have in a disaster and what somebody -- to get a sense of what people's response would be, to sort of organize how those folks would respond in a disaster and how resources could be shared to some extent.

The second point is to increase self-sufficiency and problem solving at the community level in a disaster. You know, the idea that the hubs would help communities to meet needs at the neighborhood level, where resources and expertise may already be in place. Third is to serve as the community coordinating point during a disaster. It is thought that the hubs could be a clearinghouse for information in a disaster. It is thought that the hubs could identify, you know, if people have resources and if there are needs in the community, that the hubs could act as kind of like a matching entity, if there is a congregation that is going to be providing shelter and there is a restaurant that has food to donate or grocery store that has food to donate, the hub could help match those two entities, pair those two entities together. Let's see. Maybe the third point would be that hubs would be a standard mechanism for communicating with the emergency operations center during a disaster. So the hubs would be a way of connecting with the emergency operations center on Turk Street that Benson had mentioned for passing out information if community-based organizations had a need to request -- Saint Anthony's dining room has a need for ice because it doesn't have refrigeration capacity or there is a senior center that needs additional cots because it has the ability to shelter another 50 residents from the neighborhood, or if there is a meals on wheels program that needs to be on the list for priority power restoration. The hub can be a place that will communicate that information up to the emergency operations center on Turk Street. In short, again, this is kind of a concept that we are working on developing, but the hub basically becomes a way for plugging community entities, whether community-based organizations or congregations into the overall city response in a disaster. At this point, I don't want to go into a lot more discussion about it. It is something we are actually going to be going out and doing workshops around different districts to give people more information and details about it. But I thought for our discussion this morning, it's useful just to have this, kind of plant the seed in people's minds that there is a plan under way to establish these points in each community in San Francisco that would allow neighborhood organizations, community-based organizations, to sort of plug into the overall city's emergency organization. It would be a way to pass up information to get resources, be a way to help better coordinate what is going on in communities with the city's overall response structure.

Audience Member: I don't mean to be a thorn in your side, Rob, but I understand you have a time line where you are looking at the end of 2008 to get this established. I am interested in hearing about the current status. Specifically, have you identified target sites for each of the ten districts, or have you started reaching out to them and communicating to those sites? And also I am interested in hearing about the process over the next 14 months, and are there ways for community stakeholders to interface with the planning process?

Rob Stengel: Sure. I mean, there is a plan to identify sites. I don't know how many sites -- we were initially looking at, since the department of public health is basically going to be running the sites and providing initial staffing for the sites, we are basically looking at community-based public health facilities. So we tentatively identified sites. I don't know exactly -- that would be more of a public health question, to find out which sites have formally been tapped and identified. But probably places like the Chinatown public health center, the south of market health center, mission neighborhood health center. You know, those would be likely -- those would be in the top tier of prospective sites. The goal was to get these sites identified and on line by the... I said of 2008. There's still a lot of work to be done. There is still this whole hub operations manual we need to develop, there is a staffing plan we need to develop. You know, there is a planning group that met once back in October, I guess, we did have -- it is a small working group. We had the Red Cross and cart was a part of that. I don't know about other organizations that might want to be involved. At the moment, for community input, part of the plan is to go out and do workshops in different communities and to invite community participation to sort of take a look at the plan and to get a sense of how community organizations would want to use the hub sites and to get feedback on the whole sort of the model and concept of operation.

So I think that is probably going to be the best way of getting community input, is through these workshops that we will be doing. The first workshop is actually scheduled for Chinatown, because Chinatown already has this organized Chinatown disaster response committee that is sort of pulled together to develop their own neighborhood plan, neighborhood response plan.

Joshua Lichterman: All right.

Audience Member: I am the DPH Rep here. I am responsible for part of identifying sites. I can tell you a little bit, not necessarily officially, because i am -- we are still in the process, but as far as actual sites, my understanding with the hub is that we are planning on focusing on at least one, maybe two specific districts as a pilot. So as far as identifying specific sites and a lot of the sites we are looking at aren't necessarily facilities, because if we are thinking major earthquake, we are anything open space. So we are looking at not only facilities that would stage things like communication equipment and all that, but also what is the local -- the closest open space that we could potentially take over, set up a care clinic, we have several tents that we could do that. As far as the three potential initial districts that I was told we might pilot, we already have sites identified, more than one, including what facilities we currently run that are going to be there. As far as all the ten districts, we pretty much have a loose identification of sites. But one of the things and one of the things I have put out there and certainly we are driving, is that we don't want to go in there and say, okay, in your neighborhood, Jordan, this is the site, this is what we are going to do. We want to have that process to say, look, community! You tell us what is the church, what is the closest location, what makes sense for your neighborhood? Where are people going to go? What makes sense for you to let us know where to go. So my understanding is it is going to be this collaborative process, where we are going to bring everyone together to kind of make those decisions. My understanding is it is not going to be DPH or the city saying these are the sites we have chosen. We are going to be at the table saying these are the ones we recommend, because it's right across if street from our clinic, or we have the preponderance of staff that might be there off hours. But it's going to be a community process. So that is my understanding on how it's planned to unroll, and we will see how it actually works.

Audience Member: Can I ask, how are you getting information out to the community, the stakeholders within the community, so that they can come to the table? We have -- I represent California community care licensing. And there's at least probably 100 facilities in the city with a capacity of probably over 1500 of vulnerable seniors. So we want to make sure that those providers and licensees are ones that are notified so that they can also come to the table and participate and have input or at least know where these places are. Preference, of course, is sheltering in place, but sometimes that is not going to happen. So how are you disseminating the information out to the community to get full participation?

Audience Member: That level of detail I actually don't know.

Rob Stengel: as I said, the plan is, we have these ten districts in San Francisco. The plan is to go district by district and just hold workshops and to invite as many people as we can. Somehow, we got you here to this meeting today. Just to use mailing lists and word of mouth, and to go through the different stakeholder organizations and let people know, you know, we are out there to talk about this community disaster response hub and we want you to come and learn about it and find out about it and provide your input to it. Obviously, there are certain key organizations -- community care licensing, ombudsman, you know, department of aging and adult services. We are some of the few organizations that have lots of members -- card, groups like that. So we rely a lot on those folks to get the word out to their membership.

Audience member: you gave me my answer. You are looking for state licensing to get the word out to providers, then.

Rob Stengel: yes.

Audience Member: Okay.

Rob Stengel: collectively, among the group of us, we are aware who the stakeholders are, and it is a matter of informing them, informing as many people as possible, interfaith networks and so forth and so on. I think we kind of have a sense of who those folks are, but we may be missing some. You could help us.

Joshua Lichterman: All right. I am going to grab the mic and leap into my part of this, because we are now 43 minutes into the two hours, and we are going to run out of time. So I was hired by the state department of social services as one of a team of three to bring this program to 11 counties. This discussion today was very gratifying to me, because in the late 1970's I chaired the neighborhood self help committee of the governor's task force on earthquake preparedness under Jerry Brown. NERT, CERT, all of those programs are an outgrowth of that committee. What you are doing in San Francisco is indeed leading the nation. A lot of the stuff I am going to talk about I am going to blitz through these slides to get to the real core of the state program. I applaud your bottom-up planning, because my experience as a volunteer firefighter, the emergency responders in big disasters can only get to some of the worst-case situations. The vast majority of disaster area residents are just that. They certainly are not victims. They need to have the resources and the training to survive in place. And those that are fortunate enough to have the transportation to get to a shelter if their home or their facility is so damaged will come and be sheltered, as we will see in these slides.

We went over this already. Basically we have already discussed that we are going to talk about this project, its purpose and its value, and the process that we are going to go through over the next two years to implement it. And how you can participate.

If we have time, this has been a very interactive audience. We may not actually do a formal panel, since you have all already been asking questions. But these are the people who were going to be on the panel, and they are in the audience, and several of them have already spoken. If we could very quickly just go from the back of the room and give your name and the organization that you are representing, then everybody will have a clear idea of who is here. And I think that's probably worth taking five minutes to do. And I am going to pass the mic. Just give your name and your organization and pass the mic.

*Introductions have been omitted, see participant list at the beginning of this transcript*

Joshua Lichterman: Okay. Let's get started. The state has made it very clear that this particular project is focused on people with disabilities and seniors. While there are lots of other populations who are seriously considered vulnerable in a disaster -- children, medically frail, et cetera -- they are not part of what we have been asked to focus on in this project. People with disabilities or seniors certainly are vulnerable until disasters, but they are not incapable of taking care of themselves. My line is that if you have a serious disability, or you are a senior in our society, it is frequently a challenge on a day-to-day basis to exist.

In a large-scale disaster it's downright life-threatening. And Katrina clearly demonstrated that in awful ways. The reason I was so attracted to this project was, I believe from the bottom of my heart and the top of my brain that we can do considerably better here in California than they did in Louisiana, and that FEMA has done all over the country. We can do much better. And I believe the concept that we are presenting here will make a big difference, and I believe the work that you are doing here already is a huge step forward.

And I think that if we provide people with tools, they can be very self-sufficient. So what do we mean by mass care and shelter? We are talking minimum support for people whose normal domiciles are no longer available, because they are flooded out or they have had an earthquake or there has been a fire or there has been a hazardous materials spill in the neighborhood, and their air intakes, if it's a big facility, sucked the material in and they had to be evacuated. There are all sorts of reasons why people's facility or home are no longer available. And the important thing is that we frequently are so focused on the major catastrophic earthquake that we forget that disasters happen all the time. Home care facilities or nursing homes have fires or have major blackouts in a district of a city, and people who are on respirators may have a battery that is good for two hours, and then what? So shelters are important for a variety of different size disasters. And they provide a bridge between an existing life and a new life after the disaster.

One of the issues that this particular project doesn't address but that is of major concern to me is how we house people after major disasters. This country does not have a very good track record. In 1985 there was an 8.2 earthquake in Mexico City. Within two years -- within one year, the Mexican government built 100,000 units of replacement housing. No city in the United States of America has ever come close to doing that. Certainly in New Orleans they haven't built 50,000 units in two and a half years. So the question is, from my perspective, one of the big issues is, how long do you maintain the bridge? If you really lose large quantities of housing, particularly skilled nursing facility housing, where are we going to put those people, or accessible housing? This project doesn't address that, but it certainly is a question that we all need to keep in mind. And with the exception of the fires in southern California a month ago, where nearly one million people were evacuated, and probably 970,000 of those people ended up either with friends, relatives or in hotel rooms, since only



30,000 people were sheltered in public shelters, shelters are not quiet, comfortable places. They are what is available to keep you out of the rain, or to keep you out of the flood waters, to provide you with real basic shelter. However, if people are forced out of their homes, they will indeed seek shelter, and they will come to whatever you have available. Nationally, the American Red Cross has the charter to provide mass care and shelter. So they are the organization that is going to set up a lot of shelters. Some jurisdictions provide additional shelters separate from the Red Cross. CDSS has the state responsibility for providing resources to assist local jurisdictions. And counties and cities operating in an operational area have specific responsibilities as well. So CDSS put this together following Rita and Katrina because they felt that we could indeed do better. And the counties -- I mean, the reason to do it clearly are these. The law, yes.

Joanna Fraguli: civil rights.

Joshua Lichterman: and treating people like people instead of like animals.

Joanna Fraguli: animals have more rights in disasters, i think, than people with disabilities.

Joshua Lichterman: They do now, but they didn't before, correct. So lessons learned have taught us a lot about what we don't have in place. And this new program we believe will start chipping away at those kinds of problems. Licensed and unlicensed facilities now are beginning to have disaster plans. One of the problems that I have in viewing those disaster plans is that in a single county they all rely on the same resources. It may work fine if they have an individual fire. It may not work very well at all if you have a regional disaster. And paratransit is a prime example of that. You may have 25 different homes who are all going to use the same paratransit bus to evacuate their people in a particular disaster. And no one knows what the priority is. It's going to be whoever gets the bus first. So I just talked about this, in terms of the recent fires. But we're talking about large quantities of people. About five million people have disabilities statewide. It's about 15% of the population. But here in San Francisco my colleagues have informed me that it's closer to 20%.

And here is sort of the basic data regarding different kinds of disabilities. I think Joanna mentioned the issue of pharmaceuticals. Again, this is not part of this particular project, but it is a huge problem. Pharmaceuticals in California are delivered on adjust-in-time basis -- a just in time basis. It works fine during normal times. There are three large pharmaceutical distribution houses that serve 80% of the need. They don't have plans. They don't have big warehouses that can be called upon for critical things like insulin. Let's say you're in an earthquake and you are an insulin dependent diabetic, and your house collapses, and you are out on the street. You don't even have your next shot with you, much less two or three days' supply. From my perspective, that is a huge other project that needs to be addressed, and quickly, because there are people who will die from a lack of drugs. So the bottom line is that we really need to have capable staffing to be able to deal with the management of people with disabilities and seniors following evacuations in shelter areas to prevent this. It's very clear that not just in San Francisco but in all 11 of these counties that we are working in, and hopefully statewide, people with disabilities and the elderly will not be segregated. They will be integrated into general populations, and we will have the staffing capabilities to deal with them and to help them in the general population in the shelters. One way of reducing the needs of sheltering large quantities of people is to train people on how to shelter in place and to coordinate carefully with a variety of the providers at the community level, and to provide a very clear understanding before the disaster strikes on what the limitations are of public

sheltering, so that people will be more inclined to learn how to shelter in place. So the project goal is to install this annex in these 11 counties. It's Yolo, Sacramento and San Joaquin in northern California. My four counties are San Francisco, Alameda, Santa Clara and Santa Cruz, and in southern California we have a compatriot doing Ventura, Los Angeles, Orange, and San Diego. These were picked by the state department of social services based on their large populations and high levels of risk -- from earthquake, fire, flood, and other natural and technological hazards. Originally they had hoped to do all counties, and due to budget restraints they were only able to do this pilot for 11. But with the lessons learned in these initial 11, they hope to have this statewide. Can you tell them how long you hope the total process would take to get it out to the rest of the state? I am with CDSS. We have a two-year contract with Tao management to develop the annexes to the mass care and sheltering plans in these 11 counties, and after the products are developed, we will be working with the other counties and be distributing the information to them. He is also going to talk a little bit about a gap analysis that we will be dealing with at the same time.

Joshua Lichterman: we are going to be dealing with agency people and local people just like the mix in this room in all of the counties. We have identified for the 11 counties already this master stakeholder list, which got people like you to meetings like this. And we are hoping to have a draft of the individual county annexes by the end of February. But already there have been several federal declarations in southern California which is going to delay the February 29th deadline being met. When we first got the job and met with the state, we said with these 11 counties there is no way we are going to go for two years without multiple federal declarations of disasters. And you take that in stride. But other activities that we are going to be doing is a gap analysis, looking at what these counties have already performed versus what the state would like to see you have in place, so that we can really focus on the gaps. And there will be some gaps that will not be filled during this two-year project, and they will be -- recommendations will be made to the counties as to what should be done in the future. So these are the basic deadlines on the project, and you have this in your notes. I am not going to read these. So we are not talking about special needs shelters. We are intending to develop plans that integrate the new American Red Cross entry questionnaire. People will be queried as they enter the shelter as to what their needs are so that staff can be found to assist them in the shelter.

Audience Member: Is there a list of questions they are to ask prepared?

Joshua Lichterman: Yes, there is. Clearly, this cannot be done by a team of three consultants and the staffs in the 11 counties without major stakeholder input. The state has developed a draft annex, which you sent that out, right?

Rob Stengel: pretty much. Hopefully everybody got it.

Joshua Lichterman: Which most of you had an opportunity to review. This is a strawman annex. It is just an early draft. San Francisco's annex is going to look very different than Santa Clara's, than Yolo's, than orange county -- certainly than orange county's, because of who you are as San Francisco. You need to understand that while it looks like it's a big, complete document, it is far from complete, and there will be pieces that you, as San Francisco, will drop because you decide that you don't need it, and there will be other pieces that you will emphasize because you are San Francisco, that will be very important to you. And that's why we really are asking for input from the stakeholders, to shape this plan to be an operational plan that will really work for the peculiarities that make you San Francisco.

Audience Member: Thanks.

Joshua Lichterman: So people will seek safety, as I said. And there are people with disabilities and seniors who have no support networks, who just exist out there. And they will need assistance, and they will need transportation to get to the mass care and shelter. And they will need medical assistance, some of them, and they will be weeded out in terms of the medical -- people who really need medical assistance, who are medically vulnerable, will be triaged and sent to facilities that have medical care available. And there are people who have financial needs after a disaster. And those who have the least will be the people who will show up at your shelters, if they can get there. And I'm hoping that we will make plans so that they can get there, and so that we can take care of them. So we have heard what San Francisco has from my colleagues. And here are the improvements that the state would like. This is the form that the state uses. And I realize it's impossible to read -- not the state, but that the American Red Cross is using for intake. But we can get you copies of this. It was in the -- those of you who received the annex, it was in the annex. And the important thing about this form is, when people are going over this form, hopefully it's being done one on one, away from other people, because it asks some questions that I would not want to have broadcast over a microphone.

What the form is seeking is what kinds of problems do people have that they need help on, that they can't exist on their own with, as they enter the shelter. So these are the kinds of support that the state plan is hoping to provide, and this is the concept. Okay. Functional assessment and service teams -- fast. We are talking about developing fast teams at the local level, at the county level. And they will come into the shelter and provide assistance to the American Red Cross shelter staff in dealing with people with disabilities and seniors.

They will also, in the initial hours, if the fast team gets there and there is a shortage of personal assistants for people with disabilities, they can fill in until more people with personal assistants arrive or are procured. The important thing being that the people with disabilities and seniors get the services that they need and the arc staff has the opportunity to serve the rest of the general population that is in the shelter. So here is who serves on these teams. Obviously, from this list it's going to be important to put these teams together well before the date that the earth starts to jiggle, because -- you want me to read them out loud? Okay.

People with expertise in dealing with mental health disorders, developmental disabilities, cognitive disabilities, deaf and hearing disabilities, blind, sight limitation disabilities, aging services and support, including dietary needs, substance abuse issues, nurses able to dispense prescriptions, medications, and address infectious disease control issues, traumatic brain injury issues and other physical disabilities not otherwise covered.

Joanna Fraguli: I think what is also important for San Francisco in general is to address people with psychiatric or cognitive disabilities who are also chronically homeless. That is a huge issue, because the homeless population -- you will see folks not used to being together. So that is another huge issue.

Herb Levine: just a request that we mail philosophy and language, so i really liked your statement about not being victims, but then were not wheelchair dependent, wheelchair users. We don't have mental health disorders. We have mental health disabilities.

Joshua Lichterman: Good point. Thank you.

Audience Member: You don't have anything listed there about service animals.

Joshua Lichterman: Right, true enough. Oops, I missed one. Dental support for lost or damaged false teeth. And for seniors who lose their teeth because they left them in the house that collapsed, let's say it's at night and they are on the bed -- next to the bed, and they evacuate in bathrobes and barefoot and they don't have their teeth. For those of us who do have our teeth, it doesn't seem like a big deal. Let me tell you, it is a huge problem. Try to eat, or just try to feel like yourself.

So this annex will set up a framework for local fast teams and p.a., personal assistant, resources in the shelters. In the long run, we hope that San Francisco and the other bay area counties will all have these teams so that if there's a disaster in Santa Clara that doesn't directly impact San Francisco, some of your teams can go out mutually and help them out. If it is a regional disaster and you are all impacted, then you are going to be calling up to the state with requests for fast teams from other counties that will be delivered to you. I think that that's really one of the constraints here, is that if we are really serious about integrating people with disabilities and seniors into general shelter populations, then we are going to need these kinds of resources to make it happen. And without it, it's going to be a very difficult situation.

Audience Member: Quick question. Do we have a specific idea as far as how the activation will look here in San Francisco for one of these teams.

Joshua Lichterman: What do you mean by that?

Audience Member: How would we go about activating a fast team if we need to get them out to a shelter? Do we have any idea how that activation will occur?

Joshua Lichterman: it's still in the planning process. Statewide, it's still in planning.

Audience Member: Are these fast teams going to be on a voluntary basis? Are they going to be state and county employees?

Joshua Lichterman: it's on a voluntary basis. Some of them will indeed be disaster service workers, just because they will be public servants, but some of them may indeed be from the private sector are.

Joanna Fraguli: CBO staff, that is why we brought so many different people to the table, because all of you have specific expertise in different populations. So it's really important that your staff or yourselves become a resource for those teams.

Joshua Lichterman: and one of the problems again, in terms of the length of service, how long can you expect the volunteer team to volunteer? I'm serious. If you are sheltering people for a month, which is nothing -- what if you're sheltering people for six months? How long -- how are we going to build a fabric of volunteers that will be of service long enough to be valuable?

We always think the disaster is over after the emergency period. You know, the fires are out, we can all go home now. Except home is no longer there. This is a key issue, and I think it will be -- end up being something in terms of mutual aid for a long time.

Herb Levine: two comments. One is, how do you make sure that you have volunteers there? Well, we actually had a model for that in Loma Prieta. The mayor's office of community development called together the contractors and said you will be at the rehousing center at St. Mary's. We were there for quite a long time. So I think we shouldn't underestimate the importance of mandates. And also funders clearly conveying it's okay, you are going to get

paid. You can pay your staff. But suspend your normal activities and go do this. Then there was an example that I heard at our state independent living center meeting of, in essence, a fast team in southern California. It had some important lessons. The independent living centers had agreements with the Red Cross to cooperate, as has historically happened those agreements went by the wayside. They got no access to the centers. So down came somebody who was a governor's representative, brought the independent living center folks into a shelter. Once that happened, you had cooperation and really partnership. So the independent living center folks were stationed at some of these shelters and started working with the Red Cross shelter managers to identify needs.

Joshua Lichterman: so in essence they served as ombudsman, which from my perspective we need lots more of in a variety of situations, but particularly in disasters. Someone to represent us against officialdom, because when people get upset, things fall apart.

Audience Member: I just had one quick comment. One of the things I have learned about in Miami is that nonprofit organizations who receive funding from the government and the united way have to have a continuation of operation plan that is reviewed every single year, or else they don't get their funding. And that is a particularly important point for a group like this.

Rob Stengel: I think actually the department of aging and adults -- I think Betsy instituted that for a number of years here in San Francisco with your providers, through the department of aging and adult services.

Audience Member: Well, from all I have heard so far, this sounds like it's the first baby steps. We are not really very far along. And I would like to push the idea that all of you individually go and take the NERT training. It's three hours a week for six weeks, one day. And at the end of it you have a lot of information that will be helpful in almost any disaster, and you may even be given a kit that you can take home to start you off on your own independent thing. Also, every spring the Red Cross gives a free CPR class. It's huge. And the rest of the time they charge for it.

I think in this case they ought not to. And I advise everybody to take that, too, because you don't know what disaster is going to hit.

Audience Member: I just wanted to make a quick comment, because I think this is somewhat assumed, but i don't see it in annex, is the piece about caring for the responders and being able to be mindful of responders' families, and if they are responding in their own jurisdiction, their homes, their situation, they may also need shelter, so making sure there are pieces in there for the responder.

Joshua Lichterman: Which is why mutually it is really important, because in fact your local teams may indeed be directly impacted as human beings and not be able to respond for that reason.

Jennifer: We got a lot of reports from the southern California fires that during the assessment process there was residency requirements, where people were having to show identification and that kind of thing. Is there any planning to prevent that? Obviously, that creates a lot of problems and excludes a lot of folks who are in need of help in a disaster, and it seems very unnecessary.

Joshua Lichterman: I don't know what the answer to that is.

Woody: from Red Cross. That would not normally be required coming into a shelter. A shelter isn't a place where people, you know, go on a lark to stay. So it is presumed people are from the affected area. Additional assistance that may -- when it comes to recovery, financial assistance, we would look for proof of residency, but obviously ID's are often lost. And there's a lot of backup to that. It happened in southern California. So I guess you would want to do something to prevent it.

Audience Member: In southern California there were a lot of shelters opened up by other cities and organizations that were not Red Cross shelters. So maybe those shelters were asking for some type of resident requirement, but traditionally Red Cross does not.

Audience Member: Very often people don't have ID.

Joshua Lichterman: People don't have ID, and in a city like San Francisco, where you have major conferences going on, you could have an earthquake and you have 50,000 people in town who were from elsewhere, but they would require shelter. So it's unlikely that we would have those kinds of requirements in shelters here. But you're right. After the initial, then you have problems in terms of proving to FEMA that you deserve money because of where you live. That's different. So in addition to doing the planning, we are also going to test. That is, we are going to run tabletops once we have a draft plan for each of the counties, we are going to run tabletops to see how they actually function as an operational document. Then we will write up final recommendations and deliver them to the counties. So since you all got the draft document, this is the table of contents for that document. As I said, this is the beginning of a now year and a half process. It started in July. And the most important thing that I would like from you as a group is for some of you to volunteer to assist us in actually developing this document. I can tell you that at my Santa Cruz meeting, which was about half this size, half of the people volunteered. I am not expecting that many people, but if we got 10 to 15 people who were really committed to helping us draft this document, that would be very helpful. I think this is really important, and I think we can really make a difference in terms of how we deal in general shelter populations with people with specific needs.

Audience Member: Sorry. Could you clarify the purpose and content of the document?

Joshua Lichterman: sure. It's a fairly standard plan, in terms of it's got the authorities of why the state is doing this, and then it lays out what the various planning elements are in terms of various disaster periods, in terms of preparedness in response and recovery and maintenance of the plan. And then it talks about goals and objectives of the process, and the fast team concept, and how it's going to work at the county level, and then how it will work in terms of calling up into the state for additional resources, and the state will obviously then call on the feds, which is the way disasters are organized. But I think that the really key thing, from my perspective, is bottom-up, that in big disasters communities that are well organized at the local-most level, starting with individuals and then community groups, are likely to do the best, because it takes a long time for big government to get organized, get resources together outside of a region, and deliver them to and distribute it to the people who need it, or even to the organizations that need it.

Let me make one other comment. My doctoral dissertation at Berkeley, I suggested that for the first 24 to 72 hours after major disasters people were going to be on their own, and we ought to tell them that, and we ought to give them basic tools so that they can survive. That's

now at the front of every phone book in America. That came out of my dissertation. And I believe this to this day we have to give people the ability to shelter in place whenever possible. Then if they have to come to shelters, we have to help them get there and then we have to provide them with basic services while they are in shelters, regardless of whether they are just in the general population or they are people who use wheelchairs or they are people who can't hear, or they are people who are just in shock because their life suddenly isn't normal. I mean, one of the things that is on none of the lists that you have ever seen following a disaster is "everybody needs a hug." Everybody needs to be reminded that they are human and that the next person in the shelter with them is also human and has gone through a similar experience. I mean, we forget that. And your comment about supporting the responders is really critical. They burn out. In our country we don't do as good a job as people in Europe and in England do about only working 12-hour shifts and then going and sleeping for 12 hours. And the kinds of decisions that get made by people who think they are there because they are really committed, and they haven't slept for 30 hours, are not as good as the decisions they made in the first 12 hours. It's something just we could do better.

Joanna Fraguli: so after, you know, Josh's big philosophical expose here, we are going to go back to the main point. The state wants to develop a plan that is -- you know I'm not really an expert on disaster management. I am not really a disaster geek like many of you are in the room. But what has been so frustrating to me about plans is that none of them are so specific, and we can have all these wonderful plans on the bookshelf and we cannot use them, right?

The disaster kits, nobody knows what to do. So unlike what Josh suggested here, I would invite you all to come to our disaster prep meetings, because this is our core group. They are pretty lonely over there and we certainly need all of your support and your help so that we can actually start designing those fast teams.

Obviously, you have -- we have a resource in the city's disaster service workers. And we can easily find people living in the city most easily get there. We have the disaster -- the community hub program, or concept. We have some other information. So it's a wonderful opportunity to create a wonderful sort of cocktail of everything that we have in place, and in addition to what the city is proposing, and make the San Francisco teams. I don't want to read about it in a book. I don't want to wait for the plan to come out. I just want some people to come up and start working and start putting some procedures in place. You know, we have a standing meeting. If you can't make the standing meeting, our contact information is in your packet. You can personally contact me or Rob, and we will get you connected. Okay. Thank you.

Joshua Lichterman: additional questions?

Audience Member: My packet doesn't have all that in it.

Joanna Fraguli: see me afterwards.

Audience Member: You asked for volunteers to work on the plan. That's different than going to the Friday meetings at mod, isn't it? What are the series of sessions going to look like? How many? What time lines in terms of -- if we do volunteer to work on the county line, what is that going to look like in terms of deadlines and sessions? I think it's different than what you're talking about, Joanna, in terms of the planning process. Clarify it if not.

Joshua Lichterman: you saw what the deadlines were. And there is some flexibility in those deadlines. But my feeling is that the group would meet no more than once every six weeks. And a lot of the interchange, if people have the ability, will be done by e-mail. And we will flesh out the strawman plan and make it San Francisco-specific. And at the same time, I will be working on the gap analysis in terms of comparing what you have in place versus what we think you should have in place. One of the major tools that has changed over my career in emergency management is geographic information systems, which allow decision makers to see where you have resources across your county or your city in place before a disaster so that then once you know what the patterns of damage are and where infrastructure has been damaged, you know where you have resources that are available to you and where you have populations that need those resources. That's a very powerful tool. It used to be that it took a tremendous amount of time to determine those kinds of things after a disaster struck. We now have the tools to do it much more easily, and the ability to map damage much more easily. So having this kind of a plan in place will make a big difference.

Audience Member: Having personally gone through an apartment fire in Oakland a few years ago, and having the local red cross chapter help the tenants go through a two or three day process of going back to the building, kind of hovering around the building, which was no longer habitable and not wanting to leave and not necessarily going to shelters, although some did go to shelters, i have to really suggest that there is a kind of, at the micro-level there is the need to address the psychological trauma of both those smaller disasters as well as the mass disasters. And before coming here, I downloaded some stuff from CDC on psychological trauma counseling, and I think the red cross really does do a good job in that, maybe better than city workers and CBO's will do, because we are not necessarily trained in that kind of trauma counseling.

I really think we need to build that into our team approach, because people are going to have a lot of time on their hands, they are going to be having attachment issues to their home, to their jobs which they normally go to, and there is going to be a lot of down time in these shelters. And we need to consider that. It is not a mental health issue necessarily. It is an issue of real lives being traumatized by these events.

Joshua Lichterman: very good point.

Jul Parsons: thank you. Just a brief cap on what you just said, with respect to tissue of trauma counseling. The inclusion of persons with disabilities in the planning process and the whole shelter system, so that all that time they have on their hands, Nevada a job to do. So including them in the planning process will help identify what kind of jobs they are capable and willing to do in the time of an emergency.

Audience Member: What I have not heard this morning and in the back of my mind, I'm sure in the back of a lot of people's minds in San Francisco, is the issue of language. In San Francisco there's a lot of people with disabilities and a lot of seniors who don't speak English as their primary language, and we need to recognize and incorporate that into our plans.

Joshua Lichterman: true enough.

Joanna Fraguli: so a team in San Francisco, a fast team in San Francisco, would potentially be comprised of somebody from a disability services organization, somebody who is an expert on mental health issues and has worked with the homeless or people in extreme crisis,



and all these people will be at least bilingual in some language or another. There are five San Francisco languages or more. And someone who will be able to sign, and someone who will be able to provide personal assistant services, and somebody who would be interested in doing technical assistant services around civil rights issues. That's a pretty big team.

So, Vincent, you had a question as to how much of a time commitment it is for you to provide feedback on the state's plan and how much -- you know, how that is different from the Friday meetings. I don't see them very different, because what I am hoping -- what we have been doing for the last couple of years now is creating sort of a think tank of people representing organizations serving people with disabilities, CBO's throughout the city, city agencies, and it is an opportunity to think very carefully about how that fast team concept would apply to us and how we would want to make it work in our city, because we know our resources and our differences, our uniqueness, better than anybody else throughout the state of California, or even our consultant. So I would encourage you to join our meetings. We can develop those recommendations and review the plan, and then it is simply a communication issue. But we can start very methodically in very strategic ways and also really start building those relationships and that information exchange.

Audience Member: Change the meeting time! [laughter.]

Audience Member: Do you have a conflict?

Joshua Lichterman: other questions? There is a volunteer form at the back of your packet. If you wrote down questions, I would be very interested in seeing them, so you could give me your card before you leave. Anyone who came in and sat in the back and didn't sign the sign-in sheet, please sign so we will be able to get information out to you in the future, as this process continues. Anything else?

Rob Stengel: well, I guess we're pretty much at the end. I just want to thank everyone for coming. I know people gave up a good chunk of their morning to come over here and listen to the fast team concept. Obviously, the charge for us, the challenge for us, is that if we like the concept and we think it makes sense, is to give it that San Francisco tweak. I think Joanna was very accurate in saying we know the city, we know what resources we have, we know the plans that we already have in place. Is there a way that we can integrate this concept into what we already have? And I think obviously since the fast team is to ensure that seniors and people with disabilities in disaster shelters have access to the services that they need and get the resources that they need to ensure their health and safety is not at risk in this type of shelter environment, the last planning for that I think, as Joanna said, is at the disaster preparedness committee meeting which meets on a monthly basis, which has been meeting the last couple of years, ever since Katrina. That seems to be a catalyst to get this group meeting.

I want to thank people. I appreciate your coming out. This was relevant to varying degrees for folks, I realize. But if nothing else, I think what really is useful today is to kind of pitch that forum, that meeting venue, the first Friday of each month, because people really are concerned about planning issues relative to people with disabilities and the elderly. Again, I would encourage you to come to that forum. The more people we can get, the more ideas we can generate, the more commitment we can -- the more we can catalyze some of these plans. That's it. Thanks. [Applause]

Joanna Fraguli: I need to thank you guys as well. But I always like to end my meetings with homework. So here is your homework. Your task, should you choose to accept it, is write

down on your card one thing that yourself or your organization can contribute to this big picture. And your next charge will be to give mod a call. Our number is 554-6789 or 554-6799 for TTY. And we will get you guys connected. Okay. But write your homework. Thank you.