



**Township of Minden Hills Emergency Response Plan**  
(Public Education Supplements)

TOWNSHIP OF MINDEN HILLS

*Dear Neighbors:*

*The Township of Minden Hills recognizes that emergency preparedness is a vital component of any concerted disaster response effort. We also recognize that, as is the case in many major natural disasters, the need for emergency assistance very often exceeds public resources. We know from the experiences of others that those who fare best in the first few days following a major disaster are those who have properly anticipated their need for an emergency plan and life-sustaining supplies.*

*The Township urges you to use the information contained in this material to help you prepare yourself, your family, and your neighbors for a major emergency.*

*If you would like to learn more about disaster preparedness or the Township of Minden Hills Emergency Management Program, please contact the Township at 705-286-1260.*

*Other family emergency planning tips are also available at the Emergency Management Ontario website [www.emergencymanagement.ontario.ca](http://www.emergencymanagement.ontario.ca)*

*Sincerely,*

*Reeve*

*Township of Minden Hills*

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## SUPPLEMENT A

### USING THIS GUIDE TO DESIGN A PERSONAL EVACUATION PLAN FOR PERSONS WITH DISABILITIES

This Guide is arranged by disability category. Use the Personal Emergency Evacuation Planning Checklist to check off each step and add the appropriate information specific to the person for whom the plan is being built.

Once the plan is complete, it should be practiced to be sure that it can be implemented appropriately and to identify any gaps or problems that require refinement so that it works as expected. Then copies should be filed in appropriate locations for easy access and given to the assistants, supervisors, co-workers, and friends of the person with the disability; building managers and staff; and municipal departments that may be first responders.

The plan should also be reviewed and practiced regularly by everyone involved. People who have a service animal should practice the evacuation drills with their service animals.

The importance of practicing the plan cannot be overemphasized. Practice solidifies everyone's grasp of the plan, assists others in recognizing the person who may need assistance in an emergency, and brings to light any weaknesses in the plan.

While standard drills are essential, everyone should also be prepared for the unexpected. Building management should conduct unannounced as well as announced drills and vary the drills to pose a variety of challenges along designated evacuation routes, such as closed-off corridors/stairs, blocked doors, or unconscious people.

Practice and planning do make a difference. During the 1993 bombing of the World Trade Center, a man with a mobility impairment was working on the 69th floor. With no plan or devices in place, it took over six hours to evacuate him. In the 2001 attack on the World Trade Center, the same man had prepared himself to leave the building using assistance from others and an evacuation chair he had acquired and had under his desk. It only took 1 hour and 30 minutes to get him out of the building this second time.

Emergency evacuation plans should be viewed as living documents. With building management staff, everyone should regularly practice, review, revise, and update their plans to reflect changes in technology, personnel, and procedures

### **GENERAL INFORMATION**

Most people will, at some time during their lives, have a disability, either temporary or permanent, that will limit their ability to move around inside or outside a building and to easily use the built environment.

Disabilities manifest themselves in varying degrees, and the functional implications of the variations are important for emergency evacuation. One person may have multiple disabilities, while another may have a disability whose symptoms fluctuate. Everyone needs to have a plan to be able to evacuate a building, regardless of his or her physical condition.

While planning for every situation that may occur in every type of an emergency is impossible, being as prepared as possible is important. One way to accomplish this is to consider the input of various people and entities, from executive management, human resources, and employees with disabilities to first responders and other businesses, occupants, and others nearby. Involving such people early on will help everyone understand the evacuation plans and the challenges that businesses, building owners and managers, and people with disabilities face. The issues raised in this *Guide* will help organizations prepare to address the needs of people with disabilities, as well as others, during an emergency.

This *Guide* was developed using five general categories of disabilities. It addresses the four elements of “standard” building evacuation information that apply to everyone but that may require modification or augmentation to be of use to people with disabilities. Most accessibility standards and design criteria are based on the needs of people defined by one of the following five general categories:

#### The Five General Categories of Disabilities

- Mobility impairments
- Visual impairments
- Hearing impairments
- Speech impairments
- Cognitive impairments

#### The Four Elements of Evacuation Information That People Need

1. Notification (What is the emergency?)
2. Way finding (Where is the way out?)
3. Use of the way out (Can I get out by myself, or do I need help?)
  - a. Self
  - b. Self with device
  - c. Self with assistance
4. Assistance (What kind of assistance might I need?)
  - a. Who
  - b. What
  - c. Where
  - d. When
  - e. How

#### **Who Will Provide the Assistance?**

*Anyone in the Office or Building*

People with mobility impairments who are able to go up and down stairs easily but have trouble operating door locks, latches, and other devices due to impairments of their hands or arms can be assisted by anyone. A viable plan to address this situation may be for the person with the disability to be aware that he or she will need to ask someone for assistance with a particular door or a particular device. It is important to remember that not everyone in a building is familiar with all the various circulations paths everywhere in the building and that they may have to use an unfamiliar one in the event of an emergency.

**Specific Person(s) in the Office or Building**

- ✓ Friend or co-worker
- ✓ Relative
- ✓ Supervisor
- ✓ Building staff
- ✓ First responders

**How Many People Are Necessary to Provide Assistance?**

*One Person*

When only one person is necessary to assist a person with a mobility impairment, a practical plan should identify at least two, ideally more, people who are willing and able to provide assistance. Common sense tells us that a specific person may not be available at any given time due to illness, vacation, an off-site meeting, and so on. The identification of multiple people who are likely to have different working and traveling schedules provides a more reliable plan.

*Multiple People*

When more than one person is necessary to assist a person with a mobility impairment, a practical plan should identify at least twice the number of people required who are willing and able to provide assistance. Common sense tells us that one or more specific people may not be available at any given time due to illness, vacation, off-site meetings, and so on. The identification of a pool of people who are likely to have different working and traveling schedules provides a more reliable plan.

**What Assistance Will the Person(s) Provide?**

*Minor Physical Effort*

Offering an arm to assist the person  
Opening the door(s)

*Major Physical Effort*

Operating a stair-descent device  
Participating in carrying a wheelchair down the stairs  
Carrying a person down the stairs

*Waiting for First Responders*

Waiting with the person with the impairment for first responders would likely be a last choice when there is an imminent threat to people in the building. While first responders do their best

to get to a site and the particular location of those needing their assistance, there is no way of predicting how long any given area will remain a safe haven under emergency conditions.

This topic should be discussed in the planning stage. Agreement should be reached regarding how long the person giving assistance is expected to wait for the first responders to arrive. Such discussion is important because waiting too long can endanger more lives. If someone is willing to delay his or her own evacuation to assist a person with an impairment in an emergency, planning how long that wait might be is wise and reasonable.

### ***Where Will the Person(s) Start Providing Assistance?***

#### *From the Location of the Person Requiring Assistance*

Does the person providing assistance need to go where the person with the mobility impairment is located at the time the alarm sounds? If so, how will he or she know where the person needing assistance is?

- Face to face
- Phone
- E-mail/text
- Visual
- Other

#### *From a Specific, Predetermined Location*

- Entry to stairs
- Other

### ***When Will the Person(s) Provide Assistance?***

- Always
- Only when asked
- Other

### ***How Will the Person(s) Providing Assistance Be Contacted?***

- Face to face
- Phone
- E-mail/text
- Visual
- Other

## GENERAL CATEGORIES OF DISABILITIES

### **Mobility Impairments**

#### *Wheelchair Users*

People with mobility disabilities may use one or more devices, such as canes, crutches, a power-driven or manually operated wheelchair, or a three-wheeled cart or scooter, to maneuver through the environment. People who use such device have some of the most obvious access/egress problems. Typical problems include manoeuvring through narrow spaces, going up or down steep paths, moving over rough or uneven surfaces, using toilet and bathing facilities, reaching and seeing items placed at conventional heights, and negotiating steps or changes in level at the entrance/exit point of a building.

#### *Ambulatory Mobility Disabilities*

This subcategory includes people who can walk but with difficulty or who have a disability that affects gait. It also includes people who do not have full use of their arms or hands or who lack coordination. People who use crutches, canes, walkers, braces, artificial limbs, or orthopedic shoes are included in this category. Activities that may be difficult for people with mobility disabilities include walking, climbing steps or slopes, standing for extended periods of time, reaching, and fine finger manipulation.

Generally speaking, if a person cannot physically negotiate, use, or operate some part or element of a standard building egress system, like stairs or the door locks or latches, then that person has a mobility impairment that affects his or her ability to evacuate in an emergency unless alternatives are provided.

#### *Respiratory Impairments*

People with a respiratory impairments can generally use the components of the egress system but may have difficulty safely evacuating due to dizziness, nausea, breathing difficulties, tightening of the throat, or difficulty concentrating. Such people may require rest breaks while evacuating.

#### *Visual Impairments*

This category includes people with partial or total vision loss. Some people with a visual disability can distinguish light and dark, sharply contrasting colors, or large print but cannot read small print, negotiate dimly lit spaces, or tolerate high glare. Many people who are blind depend on their sense of touch and hearing to perceive their environment. For assistance while in transit, walking, or riding, many people with visual impairments use a white cane or have a service animal. There is a risk that a person with a visual impairment would miss a visual cue, such as a new obstruction that occurred during the emergency event, that could affect egress.

Generally speaking, if a person cannot use or operate some part or element of a standard building egress system or access displayed information, like signage, because that element or information requires vision in order to be used or understood, then that person has a visual impairment that could affect his or her ability to evacuate in an emergency unless alternatives are provided.

#### *Hearing Impairments*

People with partial hearing often use a combination of speech reading and hearing aids, which amplify and clarify available sounds. Echo, reverberation, and extraneous background noise can distort hearing aid transmission. People who are Deaf or hard of hearing and who rely on lip

reading for information must be able to clearly see the face of the person who is speaking. Those who use sign language to communicate may be adversely affected by poor lighting. People who are hard of hearing or deaf may have difficulty understanding oral communication and receiving notification by equipment that is exclusively auditory, such as telephones, fire alarms, and public address systems. There is a risk that a person with a hearing loss or deafness would miss an auditory cue to the location of a dangerous situation, affecting his or her ability to find safe egress.

Generally speaking, if a person cannot receive some or all of the information emitted by a standard building egress system, like a fire alarm horn or voice instructions, then that person has a hearing impairment that could affect his or her ability to evacuate in an emergency unless alternatives are provided.

#### *Speech Impairments*

Speech impairments prevent a person from using or accessing information or building features that require the ability to speak. Speech impairments can be caused by a wide range of conditions, but all result in some level of loss of the ability to speak or to verbally communicate clearly.

The only “standard” building egress systems that may require a person to have the ability to speak in order to evacuate a building are the emergency phone systems in areas of refuge, elevators, or similar locations. These systems need to be assessed in the planning process.

#### *Cognitive Impairments*

Cognitive impairments prevent a person from using or accessing building features due to an inability to process or understand the information necessary to use those features.

Cognitive impairments can be caused by a wide range of conditions, including but not limited to developmental disabilities, multiple sclerosis, depression, alcoholism, Alzheimer’s disease, Parkinson disease, traumatic brain injury, chronic fatigue syndrome, stroke, and some psychiatric conditions, but all result in some decreased or impaired level in the ability to process or understand the information received by the senses.

All standard building egress systems require a person to be able to process and understand information in order to safely evacuate a building.

#### *Other Impairments and Multiple Impairments*

In addition to people with permanent or long-term disabilities, there are others who have temporary conditions that affect their usual abilities. Broken bones, illness, trauma, or surgery can affect a person’s use of the built environment for a short time. Diseases of the heart or lungs, neurological diseases with a resulting lack of coordination, arthritis, and rheumatism can reduce a person’s physical stamina or cause pain. Other disabilities include multiple chemical sensitivities and seizure disorders. Reduction in overall ability is also experienced by many people as they age. People of extreme size or weight often need accommodation as well.



It is not uncommon for people to have multiple disabilities. For example, someone could have a combination of visual, speech, and hearing disabilities. Evacuation planning for people with multiple disabilities is essentially the same process as for those with individual disabilities, although it will require more steps to develop and complete more options or alternatives.

## SERVICE ANIMALS

Service animals assist people with disabilities in their day-to-day activities. While most people are familiar with guide dogs trained to assist people with visual impairments, service animals can be trained for a variety of tasks, including alerting a person to sounds in the home and workplace, pulling a wheelchair, picking up items, or assisting with balance.

The AODA **Accessibility for Ontarians with Disabilities Act, 2005 (AODA)** defines a service animal as: *"...any animal individually trained to do work or perform tasks for the benefit of a person with a disability."*

Service animals do not have to be licensed or certified by provincial or local government. Under the AODA, they are permitted in private facilities that serve the public, including shelters, hospitals, and emergency vehicles; in provincial and local government facilities; and in the workplace.

Only under the following rare and unusual circumstances can a service animal be excluded from a facility:

- ✓ The animal's behavior poses a direct threat to the health or safety of others.
- ✓ Ont. Regulation 562 Health Protection and Promotion Act: Where food is manufactured, processed or stored (see Reg. for complete details. This regulation does not include where food is served.
- ✓ Dog Owners Liability Act. Local municipal laws restricting certain breeds may supersede certain service animals
- ✓ The animal would pose an "undue hardship" for an employer. Such instances would include a service animal that displays vicious behavior toward visitors or co-workers or a service animal that is out of control. Even in those situations, the public facility, province or local government, or employer must give the person with a disability the opportunity to enjoy its goods, services, programs, activities, and/or equal employment opportunities without the service animal (but perhaps with some other accommodation).

A person with a service animal should relay to emergency management personnel his or her specific preferences regarding the evacuation and handling of the animal. Those preferences then need to be put in the person's evacuation plan and shared with the appropriate building and management personnel.

People with service animals should also discuss how they can best be assisted if the service animal becomes hesitant or disoriented during the emergency situation. The procedure should be practiced so that everyone, including the service animal, is comfortable with it.

First responders should be notified of the presence of a service animal and be provided with specific information in the evacuation plan. Extra food and supplies should be kept on hand for the service animal.

## **BUILDING AN EVACUATION PLAN FOR A PERSON WITH A MOBILITY IMPAIRMENT**

### **OCCUPANT NOTIFICATION SYSTEMS**

*No Special Requirements.* People with mobility impairments can hear standard alarms and voice announcements and can see activated visual notification appliances (strobe lights) that warn of danger and the need to evacuate. No additional planning or special accommodations for this function are required.

Locations of exit signs and directional exit signs are specified by model codes. Usually the signs are placed above exit doors and near the ceiling.

Supplemental directional exit signs may be necessary to clearly delineate the route to the exit. Exit signs and directional exit signs should be located so they are readily visible and should contrast against their surroundings.

### **USE OF THE EXIT**

#### **Can People with Mobility Impairments Use the Exit by Themselves?**

Is There a Direct Exit to Grade (or a Ramp)?

A person using a wheelchair is able to travel unassisted through it to a public way (if elevation differences are involved, there are usable ramps rather than stairs).

A person using a wheelchair is able to travel unassisted through that portion of the usable EXIT necessary to reach an area of refuge.

An area of refuge serves as a temporary haven from the effects of a fire or other emergency. People with mobility impairments must be able to travel from the area of refuge to the public way, although such travel might depend on the assistance of others. If elevation differences are involved, an elevator or other evacuation device might be used, or the person might be moved by another person or persons using a cradle carry, a swing (seat) carry, or an in-chair carry. Training, practice, and an understanding of the benefits and risks of each technique for a given person are important aspects of the planning process.

#### **Can the Person with a Mobility Impairment Use Stairs?**

Not all people with mobility impairments use wheelchairs. Some mobility impairments prevent a person from using building features that require the use of one's arms, hands, fingers, legs, or feet. People with mobility impairments may be able to go up and down stairs easily but have trouble operating door locks, latches, and other devices due to impairments of their hands or arms. The evacuation plans for these people should address alternative routes, alternative devices, or specific provisions for assistance.

#### **Are There Devices to Help People with Mobility Impairments Evacuate?**

*Can the Elevators Be Used?*

Although elevators can be a component of a usable EXIT, restrictions are imposed on the use of elevators during some types of building emergencies. Elevators typically return to the ground floor when a fire alarm is activated and can be operated after that only by use of a “firefighters” keyed switch.

This may not be true in the event of non-fire emergencies requiring an evacuation. In the last several years, however, building experts have increasingly joined forces to carefully consider building elevators that are safer for use in the event of an emergency.

Here again, good planning and practice are key elements of a successful evacuation.

*Are Lifts Available?*

Lifts generally have a short vertical travel distance, usually less than 10 feet, and therefore can be an important part of an evacuation. Lifts should be checked to make sure they have emergency power, can operate if the power goes out, and if so, for how long or how many uses. It is important to know whether the building’s emergency power comes on automatically or a switch or control needs to be activated.

*What Other Devices Are Available?*

Some evacuation devices and methods, including stair-descent devices and the wheelchair carry, require the assistance of others.



**BUILDING AN EVACUATION PLAN FOR A PERSON WITH A VISUAL IMPAIRMENT**

**OCCUPANT NOTIFICATION SYSTEMS**

No Special Requirements. People with visual impairments can hear standard building fire alarms and voice announcements over public address systems that warn of a danger or the need to evacuate or that provide instructions. Therefore, no additional planning or special accommodations for this function are required.

**WAY FINDING**

**For People with Disabilities, Which EXITS Are Usable, Available, Closest, and Appropriate?**

Exits should be marked by tactile signs that are properly located so they can be readily found by a person with a visual impairment from any direction of approach to the exit access.

The location of exit signage and directional signage for those with visual impairments is clearly and strictly specified by codes. The requirements include but are not limited to the type, size, spacing, and color of letters for visual characters and the type, size, location, character height, stroke width, and line spacing of tactile letters or Braille characters

## USE OF THE WAY

### **Can People with Visual Impairments Use the EXIT Path by Themselves?**

An EXIT path is considered a usable circulation path if it meets one of the following criteria:

A person with a visual impairment is able to travel unassisted through it to a public way.

A person with a visual impairment is able to travel unassisted through that portion of the usable circulation path necessary to reach an area of refuge.

An area of refuge serves as a temporary haven from the effects of a fire or other emergency. A person with a visual impairment must be able to travel from the area of refuge to the public way, although such travel might depend on the assistance of others. If elevation differences are involved, an elevator might be used, or the person might be led down the stairs.

### **Will a Person with a Visual Impairment Require Assistance to Use the EXIT Path?**

Not all people with visual impairments are capable of navigating a usable circulation path. It is important to verify that a person with a visual impairment.

Can travel unassisted through the exit access, the exit, and the exit discharge to a public way. If he or she cannot, then that person's personal emergency evacuation plan will include a method for providing appropriate assistance.

Generally only one person is necessary to assist a person with a visual impairment. A practical plan is to identify at least two, ideally more, people who are willing and able to provide assistance. Common sense tells us that a specific person may not be available at any given time due to illness, vacation, off-site meetings, and so on. The identification of multiple people who are likely to have different working and traveling schedules provides a much more reliable plan.

## **BUILDING AN EVACUATION PLAN FOR A PERSON WITH A HEARING IMPAIRMENT**

### OCCUPANT NOTIFICATION SYSTEMS

#### **Visual Devices for the Fire Alarm System**

People with hearing impairments cannot hear alarms and voice announcements that warn of danger and the need to evacuate. Many codes require new buildings to have flashing strobe lights (visual devices) as part of the standard building alarm system, but because the requirements are not retroactive many buildings don't have them. In addition, strobes are required only on fire alarm

Systems and simply warn that there may be a fire. Additional information that is provided over voice systems for a specific type of emergency such as threatening weather event, or that directs people to use a specific exit, are unavailable to people with hearing impairments.

It is extremely important for people with hearing impairments to know what, if any, visual notification systems are in place. They also need to be aware of which emergencies will activate the visual notification system and which emergencies will not. Alternative methods of notification need to be put into the emergency evacuation plans for people with hearing impairments so they can get all the information they need to evacuate in a timely manner.

Personal notification devices are also coming on the market. Such devices can be activated in a number of ways, including having a building's alarm system relay information to the device. Information can be displayed in a variety of forms and outputs.

Another option is the use of televisions in public and working areas with the closed caption feature turned on.

## **BUILDING AN EVACUATION PLAN FOR A PERSON WITH A SPEECH IMPAIRMENT**

### **OCCUPANT NOTIFICATION SYSTEMS**

*No Special Requirements.* People with speech impairments can hear standard alarms and voice announcements and can see visual indicators that warn of danger and the need to evacuate. Therefore, no additional planning or special accommodations for this function are required.

## **BUILDING AN EVACUATION PLAN FOR A PERSON WITH A COGNITIVE IMPAIRMENT**

Cognitive impairments prevent a person from using or accessing building features due to an inability to process or understand the information necessary to use the features. Cognitive impairments are caused by a wide range of conditions, but all result in some decreased level of ability to process or understand information or situations.

All standard building egress systems require the ability to process and understand information in order to safely evacuate.

Possible accommodations for people with cognitive impairments might include the following:

- Providing a picture book of drill procedures
- Color coding fire doors and exit ways
- Implementing a buddy system
- Using a job coach for training

### **OCCUPANT NOTIFICATION SYSTEMS**

*No Special Requirements.* People with cognitive impairments can hear standard alarms and voice announcements and see visual indicators that warn of danger and the need to evacuate. However, the ability of a person with a cognitive impairment to recognize and understand a fire alarm or other emergency notification systems and what they mean should be verified. If the person does not recognize and understand alarms, then plans for assistance need to be developed.

## WAY FINDING

### *Is Identification of Which Means of Egress Are Available/Closest Necessary?*

No Special Requirements. However, the ability of a person with a cognitive impairment to find and use the exits should be verified. If the person is not able to recognize and use them without assistance, then plans for assistance need to be developed.

Simple floor plans of the building indicating the location of and EXIT routes should be available in alternative formats such as single-line, high-contrast plans. These plans should be given to visitors when they enter the building so they can find the exits in an emergency. Signs in alternative formats should be posted at the building entrances stating the availability of the floor plans and where to pick them up.

Building security personnel, including those staffing the entrances, should be trained in all accessible building evacuation systems and be able to direct anyone to the nearest usable circulation path.

### *Is Identification of the Path(s) to the Means of Egress Necessary?*

No Special Requirements. However, the ability of a person with a cognitive impairment to find and use the exits should be verified. If the person is not able to recognize and use the exits without assistance, then plans for assistance need to be developed.



## PERSONAL EMERGENCY EVACUATION PLANNING CHECKLIST



Name:		Primary Location:
Building (home, office, etc.):		Primary Phone:
Address:		Cell Phone:
Floor:		E-mail:
Service Animal:	<input type="checkbox"/> Yes <input type="checkbox"/> No	

### OCCUPANT NOTIFICATION

Type of Emergency	Method or Device for Notification
Fire:	
Earthquake:	
Flood:	
Storm:	
Other (Specify)	
Other (Specify):	

	YES	NO	N/A	Comments
Are there emergency notification devices (alarms, etc.) appropriate for this person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does this person know the location of each emergency notification device/system and understand its	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does this person know how to sound the alert for emergencies (manual pull box alarms, public address systems, radio,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If telephones are used to report emergencies, are emergency numbers posted near telephones, on employee notice boards, or in other conspicuous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a way for a person with a hearing or speech impairment to report an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the communication system also serves as an alarm system, do all emergency messages have priority over all non-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a unique signal (sound, light, and header) to indicate an emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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**WAY FINDING**

	YES	NO	N/A	Comments
Is there a usable way out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Where is it? (List all and indicate nearest.)				
Where is the established outside meeting place?				
Is the usable EXIT path clearly marked to show the route to leave the building or to relocate to some other space within the building in an emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If a person exiting a doorway or turning a corner could inadvertently be directed into the path of a moving vehicle, is a safeguarding device with a warning sign in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the stairs in the EXIT path lead anywhere but out of the building, are doors, partitions, or other effective means used to show the correct route out of the building?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do doors used to connect any room to an EXIT path have proper maneuvering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Can the doors be easily unlatched?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do exterior EXIT paths (balcony, porch, gallery, and roof) meet the preceding four requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the exterior circulation path have guardrails to protect open sides of walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is the exterior EXIT path smooth, solid, and a substantially level travel surface?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Does the exterior EXIT path <i>not</i> branch off and head away from the public way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is each exit marked with a clearly visible sign reading "EXIT" in all forms (visual, tactile, Braille)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is every doorway or passage that might be mistaken for an exit marked "NOT AN EXIT" or with an indication of its actual use in all forms (visual, tactile, Braille)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are signs posted and arranged along EXIT paths to adequately show how to get to the nearest external exit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do the signs clearly indicate the direction of travel in all forms (visual, tactile, Braille)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do brightly lit signs, displays, or objects in or near the line of vision <i>not</i> obstruct or distract attention from exit signs, particularly for people with low vision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**USE OF THE WAY**

	YES	NO	N/A	Comments
Are EXIT paths always free of obstructions, including furniture and equipment, so everyone can safely exit the building during an	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are people <i>not</i> required to travel through a room that can be locked, such as a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do all interior doors, other than fire doors, readily open from the inside without keys, tools, or special knowledge and require less than 5 pounds of force to unlatch and set the	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are exit signs <i>not</i> obstructed or concealed in any way, particularly for people with vision impairments who need to find and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are exit doors kept free of items that obscure the visibility of exit signs or that may hide visual, tactile, or Braille signage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is the emergency escape path clear of obstacles caused by construction or repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Do objects that stick out into the circulation path, such as ceiling fans and wall cabinets, <i>not</i> reduce the minimum height and width of the EXIT path?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are usable EXIT paths at least 36 inches wide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the EXIT path is not substantially level, are occupants provided with appropriate stairs or a ramp?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Do building EXIT paths lead to a public way, that is?**

Directly outside or to a street or walkway?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
To an area of refuge and from there to a public way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
To an open space with access to the outside?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
To streets, walkways, or open spaces large enough to accommodate all building occupants likely to use the exit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**TYPE OF ASSISTANCE NEEDED**

	YES	NO	N/A	Comments
Can the person evacuate himself or herself with a device or aid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
What is the specific device or aid?				
Where is the device or aid located?				
Does the person need assistance to evacuate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
What does the assistant(s) need to do?				
Does the assistant(s) need any training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Has the training been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Where will the assistant(s) meet the person requiring assistance?				
When will the person requiring assistance contact the assistant(s)?				

**Number of Assistants Needed**

How many assistants are needed?
How will the assistant(s) be contacted in an emergency?

Name	Phone	Cell Phone	E-mail
Assistant 1			
Assistant 2			
Assistant 3			
Assistant 4			
Assistant 5			
Assistant 6			

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**SERVICE ANIMAL**

	YES	NO	Comments
Has the person discussed with emergency management personnel his or her preferences with regard to evacuation and handling of the service	<input type="checkbox"/>	<input type="checkbox"/>	
Has the person thought about under what circumstances a decision may have to be made about leaving the service animal behind?	<input type="checkbox"/>	<input type="checkbox"/>	
What is the best way to assist the service animal if it becomes hesitant or disoriented?			
Do first responders have a copy of the detailed information for the service	<input type="checkbox"/>	<input type="checkbox"/>	
Where are extra food and supplies kept for the service animal?			

## SUPPLEMENT C

### COMMUNITY EMERGENCY PREPAREDNESS:

#### RESIDENTS EMERGENCY RESPONSE TIPS

- ✓ EMERGENCY FIRST AID
- ✓ SEARCH AND RESCUE BASIC TIPS
- ✓ UTILITIES AND EMERGENCIES
- ✓ EMERGENCY COMMUNICATIONS and CONTACT INFORMATION

### GETTING STARTED

#### First Aid, Medical, and Psychological Concerns

1. After a major disaster, ambulances and emergency vehicles may not be able to travel freely on the streets and roads of our County, the 9-1-1 telephone system may not operate, and the local hospitals may not be capable of treating patients. Therefore, injured people in each neighborhood may need to be treated and cared for on the spot until they can be moved to a health care facility. Because functioning hospitals may be crowded or overwhelmed, any immediate treatment given to the injured will ease suffering and potentially prevent the development of more serious problems or complications.
2. Significant preparations can be made before a disaster to identify people in your neighborhood with special medical problems that will need unique attention. Experience shows that the majority of disaster-related injuries require only immediate first aid attention.

#### Search and Rescue

1. One of the most important things neighbors can do for each other after a disaster is to try to account for one another. The police and fire departments may not be able to get to all neighborhoods quickly. Some residents may be trapped in their houses or apartments because of injury or structural damage. There may be a significant need to locate and extricate victims if fires become a threat. In addition, only after missing persons are located and cared for can their family members, friends and loved ones get on with other disaster related tasks.
2. Searching damaged structures can be extremely dangerous. Entering severely damaged buildings should only be performed after the rescuer has assessed the safety hazards and determined that their efforts can lead to saving another's life.

#### Safety and Utilities

1. Disasters create many safety hazards. Damaged electrical lines and structures must be quickly identified and mitigated to prevent deaths and injuries. Again, the police, fire department and utility companies may not be able to get to neighborhoods quickly to mitigate the utility hazards.

2. Residents cannot control all hazards, but many can be anticipated and the damage reduced. People need to learn how to shut down propane or heating oil delivery systems, and secure or shut off electrical panels.

### **Communications**

1. Communication is a critical need after a disaster. Telephone lines may be down and/or central circuits either damaged or overloaded. Cellular telephone systems may be available, but are likewise susceptible to overload. Alternate means are needed, as the 9-1-1 system may be down, making it difficult to communicate with police, fire or paramedics. Concerned family members and neighbors will want to check on each other. Government agencies will need to assess the situation in each area to determine the requirements for public works assistance or emergency medical, fire or police aid.
2. Within the County of Haliburton there are many ham radio operators, most of whom are trained in emergency communications through practice drills or membership in organizations. The radios which these individuals own will permit communication with the Township Emergency Operations Center (E.O.C.). The E.O.C. will pass vital messages to the police and fire departments, as well as other County or Municipal services.

### **Shelter, Water, and Food**

1. Experts warn that everyone must be prepared to be self-sufficient for at least 72 hours after a major disaster. Government and private help might not get to every neighborhood immediately. Some of the homes in your neighborhood may be uninhabitable, or some people may not want to remain in their damaged homes. Water may not be readily available and some people may be low on food. Public shelters may be opened within hours of the event, but this will not happen in every neighborhood.
2. At a minimum, every family should identify a central place where all members can gather together, assess their needs, and information as to the disposition of family members who maybe staying with family/friends or reporting to a shelter.

### **Damage Assessment**

Two kinds of damage assessment are required after an emergency. There is an immediate need to determine which structures may be damaged, which may contain injured victims, and which may pose further hazards. Within a few hours of the disaster, the Township will attempt to determine the extent of damage in order to request appropriate assistance and estimate preliminary damage. There is a pressing need for accurate damage estimation because it allows for the Township to request additional disaster assistance if needed.

Damage Assessment team members should have knowledge of structural types and behaviors, and be trained in damage assessment techniques. Individuals with construction and/or engineering experience can provide valuable assistance in the area of damage assessment.

## **SPECIAL NEEDS**

### **Before the Disaster**

- Identify all children who may be home alone at certain parts of the day, the elderly who may need assistance after a disaster, and people with disabilities, who will certainly need help. Make and maintain a list of all the neighborhood inhabitants with special needs.
- Identify the nearest potential reception or evacuation centers for your neighborhood. Check out how accessible they are for mobility-impaired people. Write all the information down on a resource list.
- Contact any special, more accessible facilities to which people with disabilities can go for shelter and assistance. Locate pharmacies, or grocery stores with pharmacies, in the vicinity that could provide replacement prescriptions or medical hardware after a disaster.

### **After The Disaster**

In the confusion after a major disaster, people with special needs may get left behind. Elderly people, small children, and those with disabilities may need extra help. People with low incomes may not have the resources to provide alternate shelter for themselves or to purchase food.

- Inform rescuers about any trapped people. Tell all hearing and visually-impaired people what has happened.
- If any person has been deprived of life support equipment by the loss of electricity, or has been separated from necessary medication, help them deal with that.

Assist all people with special needs in learning about shelters that are opening. If evacuation is necessary for any of them, help them do it. Contact their family members or friends about their condition and destination

## HOME PREPAREDNESS SUPPLY CHECKLIST

- Flashlight with batteries
- Money, including roll of quarters
- Portable radio with batteries
- Personal hygiene items
- Extra batteries (alkaline are best)
- Toilet paper
- 3 gallons of drinking water per person & pet
- Pen and paper
- Non-perishable food for three days
- Pet food, leash Manual can opener
- First aid kit including: gauzes, pads, bandages, scissors, tape, antiseptic,
- Duct tape, Whistle
- Record of prescription medications
- Prescription and non-prescription medications, thermometer, first aid manual
- Bag to carry items during evacuation
- Car emergency kit (food, water, medical conditions/pharmacy
- walking shoes
- Fire Extinguisher (ABC type)
- Large plastic garbage bags
- Tools, including crescent wrench, Crowbar
- Water purification tablets or chlorine
- Fireproof box for documents
- Heavy shoes, extra clothing, gloves
- Important phone numbers: out of town contact, doctor, hospital

### Special Needs:

- Extra pair of eye glasses
- Extra batteries for hearing aid
- Special arrangements for life support equipment
- Manual wheelchair for power chair users

### Before The Disaster

- ✓ Make sure that you have a battery-powered radio or TV for monitoring news broadcasts. Learn the dial locations of local radio stations that are part of the Emergency Alert System.
- ✓ You should have a bicycle or access to one. If that is not possible, identify people in the neighborhood with bicycles, and make arrangements to borrow them. Messengers can use the bicycles to relay information to and from Emergency responders.
- ✓ Encourage people to identify contacts outside of their area codes. Because long

distance phone lines may work and be less jammed after an emergency, it could be easier to reach someone in another region or province. These contacts can relay information to friends and family.

- ✓ Do not use phones immediately after an emergency except to report an emergency to the authorities.
- ✓ Texting takes far less bandwidth and because of cell phone traffic, may be the best means to communicate with family or authorities

### **After The Disaster**

- ✓ Monitor TV and radio broadcasts for information about the disaster and the status of local hospitals, shelters, roads, and other important details.
- ✓ Once the initial crisis period is over, people should attempt to call out-of-town contacts. Before that, they should not tie up the phone lines.
- ✓ If phone service is out, contact the nearest ham radio operator to relay messages about families in the neighborhood to their out-of-town relatives and friends.

## **SHELTER, WATER, AND FOOD**

### **Before The Disaster**

- ✓ Designate a neighborhood post-emergency meeting place. This should be a large open area or building unlikely to be damaged in an emergency.
- ✓ Identify your potential reception or evacuation shelter and become familiar with when and how it will be set up.
- ✓ Identify persons in your neighborhood with vehicles that can transport people to shelters. These may be the same vehicles used for medical transport, but use them only after medical transport has ended.
- ✓ Determine who will care for any children that could be left alone after a disaster where they will be cared for. These will include children whose parents are performing post emergency duties.
- ✓ Learn the disaster plans and policies of nearby child care centers.
- ✓ Ensure that you have an adequate post-emergency water supply.

### **After The Disaster**

- ✓ Meet with your neighbors at the designated meeting place. Use this as a "command post" to determine the problems and needs of your neighborhood: People missing, people injured, and homes damaged.
- ✓ Determine how many people in your neighborhood need shelter. Monitor shelter openings nearby and arrange transportation for those who need it.
- ✓ Remind neighbors going to a shelter to leave a note on their whereabouts. They should also bring medications, blankets, and other comfort supplies if they are going to a shelter

## **FIRST AID GUIDELINES**

Emergency resources from your local fire, paramedic, and police departments will be focused primarily on assessing the needs of the entire community. The largest life hazards, such as schools and churches, will most likely receive all the immediate attention. Isolated broken bones



and lacerations (cuts) at various households will be a low priority.

We strongly suggest that all injured people be transported to the hospital as soon and safely as possible. Private automobiles or trucks should be considered a viable option due to the initial lack of ambulances following a major disaster

### **Bleeding: Wounds**

The best way to control bleeding is with direct pressure over the site of the wound. Do not attempt to apply a tourniquet yourself; leave that to a professional.

- Use a pad or sterile gauze, if available.
- A sanitary napkin, clean handkerchief, or even your bare hand, if necessary, will do.
- Apply firm, steady direct pressure for 5 to 15 minutes. Most bleeding will stop within a minute.
- If bleeding is from a foot, hand, leg or arm, use gravity to help slow the flow of blood.
- If there are no broken bones, elevate the limb so that it is above the victim's heart.

### **Bleeding: Head Injuries**

If there is bleeding from an ear, it can mean that there is a skull fracture.

- Special care must be taken when trying to stop any scalp bleeding if there is a suspected skull fracture. Bleeding from the scalp can be very heavy even when the injury is not too serious.
- Always suspect a neck injury when there is a serious head injury. Keep the neck and head still.
- Pay special attention to the patient's airway. Emergency rescue breathing might have to be performed.
- Keep the airway open (see Rescue breathing section).
- When stopping the bleeding, don't press too hard.
- Do NOT give the victim any fluids, cigarettes or other drugs. They may mask important symptoms

### **Bleeding: Internal**

- Warning signs include:
  - Coughing or vomiting blood or passing blood in urine or stool
  - Cold, clammy, pale skin, rapid, weak pulse, dizziness.
  - Have the victim lie down and relax. Stay calm and keep the victim warm.
  - DO NOT let the victim take any medication or fluids by mouth until seen by a doctor who permits it
- Seek immediate medical attention.

### **Broken Bones**

- Breathing. Give Rescue Breathing if needed.
- Bleeding. Apply direct pressure over the site.
- Warning signs include:
  - Shock symptoms like pale or bluish, cold, clammy skin, rapid weak pulse, overall weakness, and rapid, shallow breathing.
  - Keep the victim calm and comfortable.

- DO NOT try to push the broken bone back into place if it is sticking out of the skin. Do apply a moist dressing to prevent the bone from drying out.
- DO NOT try to straighten out a fracture. Let a doctor or trained person do that. If you must move or transport the victim, immobilize or stabilize the fracture as best you can.

## **Burns**

### Thermal (Fire) Burns

- Cool the burn with running water to stop the burning process.
- Remove garments and jewelry. Cover the victim with clean sheets or towels.
- Seek immediate medical attention.

### Chemical Burns

- Remove victim's affected clothing.
- Wash burned areas with cool water for at least 20 minutes.
- For chemical burns of the eye: Flush eye with water for 20 minutes.

## **Electric Shock**

- Do not touch a person who has been in contact with electrical current until you are certain that the electricity is turned off. Shut off the power at the plug, circuit breaker or fuse box.
- If the victim is in contact with a wire or a downed power line, use a dry stick to move it away. If the ground is wet, do not approach.
- Check for breathing. If the victim's breathing is weak or has stopped, open the airway. If after a few seconds the victim is still not breathing, immediately begin Rescue Breathing.

## **Rescue Breathing for Adults**

- Put your hand on the victim's forehead. While holding the forehead back, gently pinch the nose shut with your fingers.
- To open the airway, put your other hand under the victim's jaw, and lift the chin until it points straight up.
- Take a deep breath. Open your mouth wide. Place it over the victim's mouth. (For neck breathers, pinch nose and mouth and breathe into neck opening.) Blow air into the victim until you see the victim's chest rise.
- Remove your mouth from the victim's. Turn your head to the side and watch the chest fall while listening for air escaping from the victim's mouth.
- If you hear air escaping and see the chest fall, Rescue Breathing is working. Continue until help arrives.
- Check the victim's pulse (see Heart Attack section.)
- Repeat a single breath every 5 seconds (12 breaths per minute). Wait for chest deflation after each breath.
- If the victim vomits, turn the victim on his/her side and sweep the mouth clear of vomit using two fingers.



## SEARCH AND RESCUE TIPS

- People who will do the searching should become familiar with basic guidelines for search and rescue
- Agree on a method by which people can indicate that they are all right, and that their homes do not need to be searched.
- Use pieces of white cloth tied to front doors.
- Searchers should check the homes of anyone who is missing, any homes displaying a HELP sign, and homes not displaying a white flag.
- Designated persons should check on people with special needs. Either give them the aid they may require, or inform a member of the special needs team of the location and need of any individual.
- Keep a list of people who are unaccounted for.
- Keep a log of all the homes searched. Record each address, whether it was OK or needed help, and what kind of help was given. Also include the date the search was conducted.
- Mark each building that has been searched, so it does not have to be searched again.

## BASIC GUIDELINES FOR LIGHT SEARCH AND RESCUE

1. Never conduct a search and rescue alone. Work with a partner. Plan your search. Do not wander without a pattern.
2. Before you enter each building, feel the top and bottom of the front door with the back of your hand. If it is hot, do not enter. If it is cool, cautiously open the door. Repeat this process every time you come to a closed door.
3. Check the doorjamb, the wall, and the ceiling for cracks and splinters. If the house appears unsafe, do not enter.
4. Enter the house low, preferably on your knees. Be alert. Be aware that there may be aftershocks.
5. While still in the entry way, sniff for the odor of natural gas. If you do smell gas, open the front and back doors and as many windows as you can, without going inside, to provide ventilation. Enter the house only when the smell of gas is gone.
6. While still in the entry way, loudly call out, "Is anyone here?" Listen for a response. If someone answers, ask them to tell you where they are, and what type of help they need. If you don't hear anything, call out that anyone trapped should make some kind of noise. Pause occasionally during the entire search to listen for cries, moans, and thumping and/or banging and other indicators of someone needing help.
7. If it is dark, slowly sweep each room with your flashlight before going in. Check the floor and the ceiling of the area you are in for hazards-holes, fallen beams, or glass
8. Systematically search each room. Stay with your partner and communicate often.
  - a. Pay careful attention to areas under beds, behind furniture, inside closets, under stairs, and inside bathtubs and showers.
  - b. If it is dark, keep in contact with the wall. It is easy to become disoriented. Should

you become confused about your location, following the wall will eventually lead you back to the original door.

9. If you find an injured person, determine, to the best of your ability, the nature of her/his injuries. If no spinal injuries are evident, move the victim to the first aid providers for assessment.
10. Mark the front of each building when you finish to let others know you have searched it.
11. If your attempts to rescue others are obviously beyond your physical capacity or skill, and might jeopardize your life, we recommend these rescues be left for the professionals. Sometimes it takes wisdom and courage to wait for help.

## PRELIMINARY DAMAGE SURVEY FORM

ADDRESS: \_\_\_\_\_

### TYPE OF DAMAGE

- Fire
- Broken oil or propane lines
- Power lines down
- Apartments off foundations
- Houses off their foundations
- Apartments with collapsed walls
- Houses with collapsed walls or ceilings
- Front doors blocked or jammed
- Toppled or cracked chimneys
- Homes with windows broken
- Trees fallen on houses
- Fallen trees
- Items Blocking the Street
- Large cracks in streets, driveways, or lawns
- NOTES:

\_\_\_\_\_  
\_\_\_\_\_

## **POST-DISASTER INSTRUCTIONS**

If you are OK, check on the other people in your home or immediate area. If someone is injured, quickly go to the street and call for help or place a "HELP" sign in your window, then return to assist the injured person. Do not attempt to move a severely injured person by yourself.

If you have lost electrical power, find and use a flashlight. Do not strike a match or use a flame.

Make a quick sweep through your home or location for the following:

Check for gas leaks. If you smell gas, shut your gas off at the tank. Open your windows, alert others in your building that there is a gas leak, and get out of your building. Propane is lighter than air and will ventilate through open doors and windows. Do not strike a match or flip any electrical switches. Use a flashlight to see.

Check the water heater in your home. If it appears damaged, turn off the water. Depending on the type of water heater it is, turn off the propane or electricity. Always turn off the propane before flipping any electrical switches.

Shut off your water and electricity if pipes or wiring are damaged. Always shut off the propane before the electricity.

Retrieve your emergency supplies and put on protective shoes and clothing. Remember, after a large disaster there will be substantial broken glass scattered around. When moving debris, wear work gloves and safety goggles.

If you have a problem with any of the above or need any other type of assistance, go to the street and call for help, or place a "HELP" sign in your window. If you and your family are all right, place an "OK" sign in your window.

## **SUPPLEMENT C**

### **Emergency Preparedness Quick Check for People with Disabilities/ Special Needs.**

#### **MOBILITY**

- Tire patch kit or can of seal-in-air product to repair flat tires on your wheelchair or scooter.
- Supply of inner tubes.
- Pair of heavy gloves to protect your hands while wheeling or making way over glass or other sharp debris.
- Latex-free gloves for anyone providing personal care to you.
- Spare deep-cycle battery for motorized wheelchair or scooter.
- A lightweight manual wheelchair for backup to a motorized wheelchair, if feasible.
- Spare catheters (if applicable)
- An emergency backup plan that will ensure any life sustaining equipment/apparatus is operable in the event of a power outage.

- Any other contingency supplies unique to your special

### VISION

- Extra white cane, preferably a cane that is longer in length.
- Talking or Braille clock or large-print timepiece with extra batteries.
- Extra vision aids such as an electronic travel aid, monocular, binocular or magnifier
- Extra pair of prescription glasses (if you wear them)
- Any reading devices or assistive technology to access information /portable CCTV devices.
- Any other contingency supplies unique to your special needs.

### HEARING

- Extra writing pads and pencils for communication.
- Flashlight, whistle or noisemaker. Pre-printed key phrases you would use during an emergency.
- Assistive devices — unique to your needs (e.g. Hearing aid, pager, personal amplifier, etc.)
- Portable visual notification devices that allow you to know if a person is knocking on the door, ringing the doorbell, or calling on the telephone.
- Extra batteries for assistive devices.
- A CommuniCard (produced by The Canadian Hearing Society) that explains your hearing loss and also helps identify how rescuers or assisters can communicate with you during an emergency.
- Any other contingency supplies unique to your special needs.

### HIGH-RISE SAFETY

- Building superintendent's name and phone number.
- Who sits on the Building Safety Committee?
- Who the floor monitors are.
- Who conducts evacuation drills and how often.
- Location of fire extinguishers, automated external defibrillator units, and oxygen tanks.
- Location of emergency evacuation device(s).

### SERVICE ANIMALS

- Minimum of 3-day supply of bottled water and pet food.
- Potable water and food bowls.
- Paper towels and can opener.
- Medications with a list identifying reason (e.g. medical condition), dosage, frequency and contact information of prescribing veterinarian.
- Medical records including vaccinations.
- Leash/harness
- Muzzle if required.
- Blanket and favourite toy.
- Plastic bags.
- Up-to-date ID tag with your phone number and the name/phone number of your veterinarian (microchipping is also recommended)

- Current photo of your service animal in case they get lost or separated from you.
- Copy of licence (if required).

### **NON-VISIBLE DISABILITIES**

1. If stressful situations adversely affect your ability to understand information or follow instructions—consider preparing a list of instructions in advance that you think you might need in an emergency.
2. Prepare personal emergency contact list of key people aware of your non-visible special needs and minimum three days' supply of all needed medications, medical supplies and special equipment.  
(e.g.—ventilator for asthma, nitro lingual spray for heart, epinephrine pen against allergic reactions/anaphylactic shock, etc.)
3. Detailed list of all prescription medications including dosage, frequency taken and specific medical condition being controlled or treated.
4. Medical ALERT identification.
5. Any other contingency supplies unique to your needs.

### **SENIORS WITH SPECIAL NEEDS**

- Supply of food items appropriate to your disability or dietary restrictions.
- Supply of assistive devices needed, such as canes, walkers, lightweight manual wheelchair, hearing aids, breathing apparatus,
- Blood glucose monitoring devices, etc.
- Prescription eyewear and footwear (if required).
- Supply of extra medications and vitamin supplements.
- Personal disability-related list of all your needed medical supplies and special equipment.
- Copies of all medication prescriptions.
- Extra dentures (if required) and cleaner.
- Latex-free gloves (to give to anyone providing personal care to you)
- Any other contingency supplies unique to your special needs

**Remain Calm**

**Information listed is based on content from Emergency Management Ontario's Emergency Preparedness Guide for People with Disabilities/ Special Needs.**