



# Leveraging Community Partnerships in Emergency Planning and Response

Overview and solutions discussed during the 2014 NYC Citizen Corps Special Needs Symposium

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**Introduction**

On February 26, 2014, New York City Citizen Corps conducted its third Special Needs Symposium. The Special Needs Symposium brings together service providers, consumers, advocates, and community stakeholders to address planning for people that require a higher level of support during emergencies. During previous years, the Special Needs Symposium has covered topics such as basic preparedness for individuals with special needs, identifying barriers to emergency planning for people with special needs, as well as exploring potential solutions to these challenges.

This year’s Symposium focused on how service providers can leverage partnerships, both within their agencies and communities to better meet the needs of their clients during an emergency. Panelists were invited to present at the symposium based on their experiences with implementing creative and innovative strategies that capitalized on partnerships and community networks in order to better serve their clients and constituents.

Speakers included Herman Schaffer (NYC Office of Emergency Management), Stella Guarna (NYC Office of Emergency Management), Commissioner Victor Calise (Mayor’s Office of People with Disabilities), Aaron Belisle (NYC Office of Emergency Management), Isabel Ching (Hamilton Madison House), Nora Reissig (New York City Housing Authority), Cheryl Karran (YAI- National Institute for People with Disabilities), and Rev. Don Stiger (Lutheran Healthcare).

## Special Needs in New York City

Opening the symposium, Commissioner Victor Calise of the Mayor's Office of People with Disabilities (MOPD) offered an overview of the current landscape in New York City with regard to people living with disabilities. MOPD serves as the link between the Mayor's Office and the 800,000, approximately ten percent of the population, living with disabilities in New York City. MOPD works with a variety of agencies on a daily basis, including the Office of Emergency Management, Department of Buildings, Department of Parks and Recreation, the Commission on Human Rights, and the Department of Transportation, among others. Since Hurricane Sandy, MOPD has focused on helping affected people with disabilities return to their homes and providing sign language interpreters and other special accommodations to help them navigate recovery assistance programs like Build it Back. MOPD continues to help people with disabilities better understand their insurance policies and flood zone requirements, including the reality that insurance is unlikely to cover the cost of raising their homes and building elevators.

## Solutions to Serving People with Special Needs throughout New York City

This year's Symposium panel brought together individuals from organizations that have developed creative solutions to challenges they have faced in emergencies and have leveraged community resources to great success. The panelists shared brief stories of their work, how they achieved their goals, and shared some best practices that may serve other organizations as well.

### Community Outreach and Communications

**Isabel Ching, Assistant Executive Director for Senior Services, Hamilton-Madison House**

Hamilton Madison House is a voluntary, non-profit settlement house in lower Manhattan that provides a variety of services to 5,000 residents in the Two Bridges and Chinatown areas of lower Manhattan. Their programs include childcare, youth development, senior services, behavioral health, and immigrant and community services.

Ms. Ching described how in the immediate aftermath of Hurricane Sandy, Hamilton Madison House was able to leverage its community networks and assets in order to continue providing services and communicate with its clients. Because most staff and residents reside in lower Manhattan, staff was organized to go door to door to check on residents and non-affected community centers offered the help of their staff. Through coordination with FEMA, certain Hamilton Madison facilities were repurposed to include heating stations and communications centers.

In the days and weeks following Sandy, Hamilton Madison House devised an effective communications strategy to reach residents and provide them with services. Staff used social media in order to solicit volunteers and get meals delivered to residents. Daily emails to residents were sent out with updates and information about what buildings had electricity, when heat and hot water were expected, and when deliveries would be made (pet food, diapers, food, blankets, etc.) Staff worked with the community to understand needs and inform decisions such as where deliveries should be made. Finally, engagement with the community led to an increasing pool of volunteers who assisted as these efforts continued.

#### **Specific Strategies:**

- Social media used by staff to solicit volunteers and get meals delivered.
- Staff went door to door to assess needs and communicate with residents.
- Staff sent daily email updates with information about utilities/outages and resources available.
- Coordinated with FEMA to set up a heating station for residents and community members.
- Partnered with non-affected community centers to use resources and staff.

#### **Agency Staffing and Internal Procedures**

##### **Cheryl Karran, Senior Coordinator - Medicaid Service Coordination, YAI- National Institute for People with Disabilities**

YAI is a nonprofit organization that serves 20,000 people with developmental disabilities throughout New York City and New Jersey. YAI is a large agency with about 5,000 staff that work together through a decentralized structure. Ms. Karran described the large cultural and systemic shift that took place in YAI since Hurricane Sandy.

During Hurricane Sandy a large portion of YAI's residents had to be evacuated. As a result, YAI's many programs were brought together to address the various issues related to the evacuation and as a result, several new emergency policies were put into place. New protocol included an internal alert system as well as updated staffing procedures that allowed staff to work from places that were closer to their homes. YAI also implemented a new tracking system that aggregated patient data in a more organized and accessible way. The tracking system made use of a platform that YAI was already using on a daily basis to ease the transition during emergencies.

While these new policies were a critical component of improving their emergency planning, Ms. Karran underscored the importance of the cultural shift that occurred at YAI. The expectation that each staff member becomes an essential part of the response is now consistently reinforced through hiring and training.

**Specific Strategies:**

- Created new internal alert system that uses email, fax, and text.
- Created protocol to allow staff to work from places closer to their homes when there are challenges to arriving to normal work place.
- Implemented new user-friendly database with aggregated and accessible information about all patients.
- Created an “all hands on deck” culture which has informed work responsibilities, training, and staffing decisions.

**Building Trust to Better Serve Residents****Nora Riessig, Director of Family Services at New York City Housing Authority (NYCHA)**

The New York City Housing Authority is the largest housing authority in the country. It is comprised of 334 developments, 2,597 residential buildings, 180,000 families, 400,000 residents, and 3,330 elevators. As Ms. Riessig described, one of the biggest challenges in addressing the needs of residents during emergencies is to understand who their residents are. Residents are required to go through annual recertification process and while 50,000 people report having a disability only basic voluntary information is collected about the nature of the that disability (NYCHA is legally restricted from mandating the collection of such information).

Since Hurricane Sandy NYCHA has developed a voluntary registration form where people can disclose more information about their disabilities however, NYCHA has recognized that it will need to build trust among its residents first in order to collect such information. As part of this process NYCHA is trying to promote the incentives for disclosing this information, such as their ability to individually reach out to residents with special needs before, during, and/or after an emergency event. Before Sandy’s landfall, NYCHA staff knocked on the doors of every resident that had reported a mobility disability or dependence on life-supporting equipment, as well as 3,000 senior residents. During the days after Sandy, NYCHA staff continued to knock on the doors of 19,000 residents living in Zone A.

As NYCHA continues to encourage the voluntary disclosure of this information an increasing number of residents are self-reporting their disabilities. Approximately 50,000 more residents have disclosed information about their disabilities since Sandy.

**Specific Strategies:**

- Develop additional voluntary means of collecting information about residents and their special needs.

- Conduct more personal outreach in order to build trust among NYCHA administrators and residents.
- Coordinate with the Department for the Aging to see how many NYCHA residents were getting case management.
- Encourage and develop the cultural shift within NYCHA where staff could be employed to do more direct outreach.

## Coalition Building

### **Rev. Donald A. Stiger, Senior Vice President for Mission and Spiritual Care, Lutheran HealthCare**

The South Brooklyn Interfaith Coalition for Health and Wellness is a consortium of 37 faith-based organizations founded by Lutheran HealthCare to help improve health status and outcomes among communities throughout Brooklyn. These 37 organizations together bring over 150 congregations to the coalition.

During the panel, Rev. Donald Stiger discussed the challenges in creating a unified agenda and setting priorities and goals among different faith groups. By singling in on the health disparities documented throughout Brooklyn, the Coalition has been able to show faith leaders that there are benefits to their congregations by joining the efforts of the larger coalition. The Coalition has also expanded its reach by working with partners that fall outside of the faith-based community. Rev. Stiger noted that while a large portion of the community will turn to their faith leaders to assist with social, economic, and health problems, clergy are often ill-equipped to address these issues unless they can pull from a broader network of public and private partners.

### **Specific Strategies:**

- Recruit and engage partners outside of faith-based communities.
- Unite diverse agendas by setting tangible goals for the entire coalition.
- Engage volunteers to carry our mission (only one position within the coalition is funded and staffed).
- Focus on the community-based structure although the coalition and partners may have larger scope.

## Challenges, Considerations, and Strategies from Service Providers throughout New York City

During the second half of Symposium, attendees assessed the challenges, considerations, and strategies within their own agencies. Below is a summary of challenges that were identified by participating agencies about their internal challenges. Considerations and strategies were offered through the day’s discussion.

Challenges	Considerations	Strategies
<b>How to get communities involved in emergency preparedness for people with special needs</b>	<ul style="list-style-type: none"> <li>• Fewer opportunities are available for community-based interaction</li> <li>• Undocumented community can be isolated and untrusting of government</li> </ul>	<ul style="list-style-type: none"> <li>• Expand reach by using language skills through existing resources</li> <li>• Leverage faith-based reach</li> <li>• Engage community boards to disseminate messages</li> <li>• Social media campaign</li> <li>• Allow agenda to evolve to meet the changing needs of a community</li> </ul>
<b>Increase communication with hard of hearing and deaf communities</b>	<ul style="list-style-type: none"> <li>• There is limited access to ASL interpreters</li> <li>• “Door to door” technique does not work without proper resources such as trained volunteers with the ability to interpret for deaf/hard of hearing people</li> </ul>	<ul style="list-style-type: none"> <li>• Provide as much written material as possible</li> <li>• Develop penalties for organizations that don’t engage hard of hearing/deaf communities</li> <li>• Engage more advocacy groups to create inclusive materials for the deaf/hard of hearing</li> <li>• Increase awareness around adaptive equipment</li> <li>• Increase sensitivity training for law enforcement</li> </ul>
<b>Access to Dialysis Services</b>	<ul style="list-style-type: none"> <li>• Geographic/mapping considerations regarding site locations and transportation routes</li> <li>• How to engage clients before an emergency using surveys, social media, communications, etc.</li> <li>• 311 is accessible to deaf and hard of hearing people through TTY (text telephone) relay systems</li> </ul>	<ul style="list-style-type: none"> <li>• Increase agency communication ahead of any possible disasters to recipients of dialysis</li> <li>• Address organizations’ continuity of operations (COOP) planning. Provide information about where patients can go if their sites are shut down</li> <li>• Engage more people in preparedness planning during dialysis when they are present in the centers</li> </ul>

Challenges	Considerations	Strategies
<b>Volunteer Management</b>	<ul style="list-style-type: none"> <li>• How to work with unaffiliated versus affiliated volunteers</li> <li>• How to work with different levels of training among volunteers</li> <li>• How to coordinate efforts with other community-based coalitions such as the long term recovery groups</li> </ul>	<ul style="list-style-type: none"> <li>• Identify and engage volunteer groups ahead of time</li> <li>• Build your own volunteer corps</li> <li>• Identify the specific skills and roles where volunteers can be used by your organization/center</li> </ul>
<b>How to replace clients durable medical and accessibility equipment after a disaster</b>	<ul style="list-style-type: none"> <li>• Need to conduct a needs assessment among clients</li> <li>• What is the process for referring clients to organizations/agencies that can address their need?</li> </ul>	<ul style="list-style-type: none"> <li>• Make needs assessments part of emergency preparation</li> <li>• Use database to collect information about client needs</li> <li>• Connect clients to independent living centers</li> <li>• Distribute resource guides as part of emergency preparation</li> <li>• Post disaster, use unmet needs, long term recovery groups, community-based agencies, public and citywide agencies</li> </ul>
<b>How to increase transportation support for clients</b>	<ul style="list-style-type: none"> <li>• Language requirements for clients</li> <li>• How to engage family, volunteers, and other resources to assist in transportation</li> </ul>	<ul style="list-style-type: none"> <li>• Make reviewing transportation contracts part of the agency's emergency plan</li> <li>• Add more transportation vendor contracts</li> <li>• Increase focus and outreach on personal preparedness and planning</li> </ul>

## Conclusion

### Planning Committee

NYC Citizen Corps would like to thank the following individuals and organizations for contributing to the success of *the 2014 Special Needs Symposium: Leveraging Community Partnerships in Emergency Planning and Response*:

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**NYC Citizen Corps**, coordinated by the NYC Office of Emergency Management, is part of the national Citizen Corps initiative to bring together local leaders from community organizations, government, the private sector, and volunteer programs. NYC Citizen Corps promotes grassroots emergency preparedness and volunteerism, enabling New Yorkers to prepare for, respond to, and recover from disasters.

To learn more about NYC Citizen Corps, visit [www.nyc.gov/citizencorps](http://www.nyc.gov/citizencorps).

***Disclaimer:*** *The concepts, challenges, and solutions presented in this document were solely provided by attendees of the 2014 Special Needs Symposium. The information provided does not reflect the views or opinions of NYC Citizen Corps or other sponsoring New York City agencies.*



Attendees exploring challenges and solutions during the Symposium’s breakout session



Symposium Panelists from left:  
 Rev. Don Stiger, Lutheran Healthcare  
 Nora Reissig, NYC Housing Authority  
 Aaron Belisle, NYC Office of Emergency Management  
 Cheryl Karran, YAI – Nat. Institute for People with Disabilities  
 Isabel Ching, Hamilton-Madison House



Large group discussion among attendees during breakout session