

Running head: SPECIAL NEEDS EVACUATION REGISTRY

Executive Analysis of Fire Service Operations in Emergency Management

An Analysis of Evacuation Registration Programs
for Special Needs Individuals in Knox County

Thomas E. Simkins

Galesburg Fire Department, Galesburg, Illinois

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CERTIFICATION STATEMENT

I hereby certify that this paper constitutes my own product, that where the language of others is set forth, quotation marks so indicate, and that appropriate credit is given where I have used the language, ideas, expressions, or writings of another.

Signed: _____

Abstract

The problem was there was no system to identify or locate individuals with special evacuation needs prior to an emergency in Knox County. The purpose of the research was to examine successful evacuation registration programs nationwide and determine their applicability to Knox County. A literature review and survey answered three questions using descriptive research: 1) what resources are available to identify individuals with special evacuation needs in Knox County? 2) what criteria or information is collected by other special needs registries? 3) what is the target population for an evacuation registration program in Knox County? The results found several organizations tracking special needs individuals, identified criteria used in model programs, and applied these criteria to the population in Knox County.

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Introduction

As a result of natural and man-made disasters that have struck not only the United States, but the world in recent years, the need for officials to plan for large scale evacuations has been highly prioritized by government officials on the federal and state levels. As a result, local emergency managers have been tasked with preparedness responsibilities for response to these potential disasters, as well as the smaller, more routine incidents that challenge the evacuation capabilities in their communities. In particular, persons with limitations or “special” needs must be identified and located prior to these incidents so that these individuals are not left behind in the wake of the disaster.

In Knox County, Illinois, Emergency Management Agency (EMA) officials had no mechanism in place to identify or locate potential victims with special needs in the case of a local evacuation. Although some individuals, businesses, and organizations may track certain populations with specific limitations, these tracking lists or systems are not consistent, comprehensive, or readily available to emergency response or EMA personnel.

The purpose of the research was to examine the criteria used by successful evacuation registry programs for special needs individuals nationwide, identify local tracking systems currently in place, and define what persons fit the special needs category in Knox County.

Using descriptive methodology, the research focused on three questions:

- 1) What resources are currently available to identify and locate potential evacuees with special needs in Knox County?
- 2) What criteria or information is collected by other organizations in special needs registries?
- 3) What is the target population for an evacuation registration program in Knox County?

A survey will be used to gather information for questions #1 and #3, while a literature review will serve as the basis for answering question #2.

Background and Significance

In the aftermath of catastrophes such as the September 11, 2001, attacks on New York City, the tsunami in Thailand, the devastating earthquake in Indonesia, the volcanic eruptions in New Guinea in 2004, and the enormous impact of Hurricanes Katrina and Rita on the Gulf Coast of the United States just last year, the need for improved evacuation planning across the globe has become sorely evident in the 21st century. These disasters, as well as many other incidents on state and local levels in the U.S., have prompted the federal government to take action. In addition to the ever-present potential threats of natural disaster, local incidents involving the movement of airborne hazardous materials due to air, highway, or rail transport accidents, and leaks from industrial fixed site locations may provide officials a short window of opportunity to save lives by encouraging or mandating evacuation (Bea, 2006).

Initial conclusions drawn by the Department of Homeland Security (DHS) in its 2006 National Plan Review highlight a number of glaring deficiencies in the nation's ability to respond to these emergencies. Among these, significant weaknesses were found in evacuation planning, an "area of profound concern." In particular, functional annexes did not adequately address special needs populations. The review recommends that the federal government provide guidance to states and local officials on incorporating disability-related demographic analysis into emergency planning and develop a consistent definition of the term "special needs." To promote these recommendations, legislation signed by President Bush (2003) and mandated by the U. S. Congress through House Resolution 2360 (2006) requires as a prerequisite for DHS

grant dollars, that all states and large urban areas conduct a self-assessment plan for the complete evacuation of residents, including special needs groups for residents of hospitals, nursing homes, and those without access to transportation in advance of and after disasters.

In an independent study, Gibney, Reece, and Wright (2006) estimate that up to 20% of the citizenry of a typical community would require extra help during a disaster. This is reflected by the findings of Waldrop and Stern (2003) in the national statistics of the 2000 U.S. Census Bureau showing roughly 50 million people, 19.3% of the general population, having some form of disability. With typical preparation efforts concentrating on the general population, the often overlooked individuals that are unable to self-evacuate can pose a daunting logistical nightmare for response personnel. While large scale disasters and emergencies attract national attention and influence legislature at the federal and state levels, it is the more common, smaller local events that county and city officials must be prepared to mitigate. Such is the case in Knox County in Illinois, where the Emergency Management Agency has been charged with preparation responsibilities.

Knox County is located in the west-central part of Illinois, approximately 35 miles east of the Mississippi River. The area is largely agricultural in nature and lies level to gently rolling. The county encompasses 716 square miles and is home to approximately 54,000 persons (U. S. Census Bureau, 2006). Of these, over age 5, more than 9,000 (17%) list some form of disability. There are no major rivers with a history of producing flash floods that flow through the county, although seasonal flooding on Spoon River in the southeastern portion of the county occasionally causes concern for crop damage. The risk of hurricanes and large wild land fires are virtually non-existent.

There are three major threats that could potentially test local evacuation plans. The area is included in what is commonly known as “tornado alley,” an area in the Central Plains of the U.S. that experiences a much higher number of tornadoes than any other (Burroughs, 1989). Illinois ranks seventh nationally in the frequency of tornadoes, experiencing an average of 26 per year since 1950, with a high of 107 tornadoes in 1974 (Disaster Center, 2006). The area is also situated on the northern border of the New Madrid Fault, the area with the greatest risk of earthquake potential east of the Rocky Mountains. Damaging earthquakes are much less frequent here than in California, but when they do occur, the damage is usually far greater due to the underlying geology (University of Memphis, 2006).

The third threat is a man-made one. The railroad industry is deeply rooted in Knox County. In fact, the county seat, Galesburg, was named by the U.S. Congress in 2003 as the official site of “The National Railroad Hall of Fame”. Plans are currently underway for the construction of a \$60 million site for this project which will further link Galesburg with the railroad industry. The Burlington Northern Santa Fe Railroad (BNSF) is currently the largest employer in the county, supplying jobs to approximately 1300 area residents, a number that will surely rise in the coming years (Landis, 2006). This can be attributed to the renewed use of rail transportation due to rising energy prices, a national shortage of truck drivers, and a booming trade with China and other Asian countries. The Galesburg yard is the second largest in the BNSF system, second only to Kansas City, Missouri. With seven rail lines entering the city and approximately 150 trains going through the yards on a daily basis, Galesburg is a major hub in the rail industry.

Unfortunately, the recent and future expansion of Galesburg’s role in both passenger and freight service translates to an increased risk for rail accidents within Knox County. Given the

wide array of hazardous materials shipped through the county daily, the potential for disaster or localized emergency requiring the evacuation of area residents is a major concern for KCEMA officials. Indeed, there has been a history of small-scale evacuations due to rail incidents in the county within the past 25 years.

Compounding this problem is the existence of a large number of “at-grade” rail crossings. This is especially true in Galesburg, where a large majority of north-south streets are intersected by railroad tracks. In addition, the city storm drainage system, commonly known as Cedar Fork, parallels the BNSF tracks throughout the central part of the city, allowing the potential for rapid spread of spilled material downstream. Many target occupancies with special needs individuals are located in nearby areas, including high-rise occupancies, hospitals, and nursing homes.

As with most any other area in the U.S., there exists countless potential events that may require evacuation of a population. Among these are accidents at fixed site facilities that can lead to large scale evacuations. In Knox County, examples would include facilities for the storage of bulk flammable liquids, tank farms for agricultural products such as anhydrous ammonia, and businesses with large quantities of toxic gases such as chlorine. The area is also served by a busy interstate highway system. With I-74 bisecting the county north and south and Route 34 dividing the county east and west, a constant supply of hazardous materials flows through the region daily. In today’s society, evacuation needs in response to acts of terrorism by biological, incendiary, nuclear, chemical, or etiological agent must also be taken into account. Though the area would not appear to be a high profile one in regards to terrorist activity, it is not out of the question.

Although the potential for evacuating large numbers of special needs persons is higher in the urban areas, facilities in these areas are more apt to maintain a means of accounting for individuals during a disaster. However, in the rural areas of the county, which are also prone to severe weather and transportation related accidents, identifying and locating individuals can be more difficult. It is these individuals that would appear to be most in need of registering themselves with KCEMA officials.

In the mid 1990's, the Knox County Board placed the administration of emergency management under the direction of the City of Galesburg Fire Department (GFD). Chief John Cratty is currently the Director of the Knox County Emergency Management Agency (KCEMA). The author, GFD Battalion Chief of Operations, also serves as the Assistant Director of KCEMA. As per Illinois Compiled Statute 3305 (Illinois General Assembly, 2006), the KCEMA is required to formulate an Emergency Operations Plan (EOP). One of the required elements in this EOP is Annex #7 dealing with evacuation planning and transportation of individuals during emergencies (Cratty, 2006). At this time, there has been some planning for transportation of individuals, mainly through a listing of potential transport providers, such as local bus companies, handicapped accessible vans, etc. There is also a listing of hospitals, nursing homes, schools, and other businesses or organizations that may have contact with individuals that would be challenged by an evacuation. However, there is no mechanism or system in the EOP for quickly identifying or locating specific individuals that would require assistance to successfully remove themselves from harm's way or maintain a viable lifestyle in the days or weeks following an event.

With this in mind, the author chose to study this problem with the intent of setting in motion the groundwork for an eventual voluntary registration program for special needs

individuals in Knox County. The research questions should help to reveal any current work previously done in the County and eliminate the need to totally re-invent the wheel. By identifying specific criteria, the program would focus on the individuals and groups truly in need of assistance and prioritize the actions of the KCEMA during an event in the county.

This applied research is in line with the objectives of the United States Fire Administration. Regardless of the hazard, the risk to persons in the community will be greatly reduced through a preplanning system of identifying and locating individuals with special needs. These plans will also lessen the risk to the very young and the elderly, groups with special needs due to their diminished ability to rescue themselves as noted by Belles (1991). In addition, the author was able to gather much information recently in the class “Executive Analysis of Fire Service Operations in Emergency Management” at the National Fire Academy. Information such as assessing community risk and developing resources will help in readiness planning, while role-playing exercises in disaster simulations will prove their worth on the operational level when this plan comes to fruition.

Literature Review

The Literature Review will examine methods used by others to identify and locate individuals with special needs, who these people are, and how that may differ in Knox County, Illinois. The discussion will focus on the research questions previously stated.

Question #1: What resources are available to identify potential evacuees with special needs in Knox County? Where does one begin to look for special needs individuals? As one would expect, assistance in identifying special needs individuals comes from the organizations or businesses that come in contact with them because of their limitation or disability. Often this comes in the form of community services, some of which are under government control.

The National Organization on Disability (2002) suggests contacting national disability organizations such as the National Council on Disability, the National Council on Independent Living, and the Office of Disability Employment Policy. These organizations can provide potential links to state or community-based resource and advocacy centers managed by and for people with physical, mental, cognitive, or sensory limitations. Part of the work of state vocational and rehabilitation agencies is to introduce volunteer and public service organizations to their clients, many of whom have special needs. These agencies can be found online through the website of the Federal Consumer Information Center. Also, most state governments have a cabinet position in the Governor's office for dealing with the Federal Council on Disability.

The California Department of Rehabilitation (1997) finds that community centers are often a primary means of making contact with disabled individuals. They believe these entities should be encouraged to develop their own disaster response plans, including the identification of special needs individuals routinely served by the agency. The County Department of Social Services may have an in-home support program that deals with various populations, most of whom have some form of limitation, on a daily basis. Local transit companies may also maintain a roster or regular list of clients who require special transportation needs (Basler, 2006). City governments often provide handicapped citizens with transportation on specially equipped buses or so called "handi-vans." These are an excellent source of locating special needs individuals.

Among the simplest and most direct means to locate special needs individuals is by looking through the Government pages in the local phone book and conducting online searches. Another prime source would be to contact the local veterans groups, such as the American Legion, the Veterans of Foreign Wars, and the Veterans Administration. These groups may

track personnel who have been injured in military service as well as identifying other specific needs of their membership.

Organizations that make home visits can be another good source of information. Home health care providers such as the Visiting Nurses Association, Meals on Wheels and community hospice personnel are in daily contact with persons with limitations and may also be able to help with registration and publicizing the program (Gibney & Wright, 2003). Local church congregations and service organizations like Kiwanis Club, Women's Club, and Rotary Club may be aware of specific community members with disabilities. The Good Samaritan efforts of the local Red Cross and Salvation Army put these organizations in constant contact with depressed members of society, often with economic limitations as well as those of a physical or emotional variety. In addition, special education teachers and various professionals including occupational, physical, and speech therapists who serve people with disabilities may have useful information.

In planning for special needs populations, it is important to remember that "one size does not fit all." Child care facilities, schools, and youth correctional centers could provide information should that particular age group be included in the special needs category. Visitors to the area, especially transients, can often be found in shelters and rescue missions. While these individuals pose a unique tracking problem, a method must be devised to account for their safety and potential removal during an evacuation.

Correctional facilities also pose a unique challenge to emergency response personnel. Fortunately, the penal system has been proactive in requiring emergency evacuation plans in most of its facilities. Roger Fitzpatrick, Fire Safety Officer of the Henry C. Hill Correctional Facility in Galesburg, Illinois, makes yearly updates to the evacuation plan of that facility

(personal communication, July 10, 2006). Due to the logistics problems associated with moving a large number of incarcerated inmates, defend-in-place strategies would be employed in most situations; however, with the railroad system running adjacent to the facility, an evacuation strategy must also be in place.

Elderly high-rise facilities can be a haven for special needs individuals. These buildings have become attractive for older citizens due to economic and social reasons; however, they can put an increased burden on emergency responders. In addition to the normal non-ambulatory population, the ability of usually capable individuals to self-rescue in multi-floor structures is significantly decreased. It is imperative that building managers maintain an updated, prioritized list of residents should an evacuation be necessary (National Safety Council, 2005).

At some point in most everyone's life, the need to visit a medical facility arises. This is often a routine occurrence for individuals who are found to need assistance during evacuations. Hospitals, clinics, doctor's offices, and other medical facilities typically maintain large data bases on their patients. Unfortunately, this information may not be available to outside individuals or organizations due to government regulations concerning privacy issues.

Critical information that was once funneled to emergency response officials may now be accessible only through the voluntary permission of the patient. The Health Insurance Portability and Accountability Act (HIPAA) of 1996 imposed new rules on medical providers concerning the sharing of a patient's medical information. Since it is somewhat difficult for providers to understand the many various provisions of this new document, many have erred on the side of limiting what they will share with other agencies. However, according to HIPAA regulations on privacy and disclosure in emergency situations, health care workers are allowed to share patient information in some situations (Department of Health and Human Services, 2005). Under

notification guidelines, “health care providers can share patient information as necessary to identify, locate, and notify family members, guardians, or anyone else responsible for the individual’s care of the individual’s location, general condition, or health.” It is also unnecessary for provider’s to obtain permission from the patient for sharing information with disaster relief personnel that are authorized by law to assist in responding to the emergency. At this time it does not appear that these allowances translate to the sharing of information absent a pending disaster, though legislative efforts to do so are on the horizon.

Sandy Pemberton, Administrative Assistant for Business and Professional Services at OSF St. Mary Medical Center in Galesburg, conveys that hospital personnel are unable to share patient information, unless the patient has given consent. She states that OSF would be willing to provide consent forms to patients for voluntary participation in a Special Needs Registration at the time of hospital registration.

The Bush Administration is currently conducting forums for the purpose of creating a Nationwide Health Information Network (Privacy Rights Clearinghouse, 2006). The key element in this strategy is to provide the foundation for an interoperable standards-based network for the secure exchange of health care information. There are many profound challenges to this plan, mainly in the areas of security and confidentiality. These will be weighed against the potentially vast benefits of assisting emergency management officials and health care teams as they respond to events like the recent Gulf Coast hurricanes. With communication systems impaired or non-existent, it is important to obtain as much information upfront as possible.

Question #2: What criteria or information is collected by other organizations in special needs registries? The term “special needs” may be defined differently in each local community, but in large part the term applies to “people with disabilities or limitations who are vulnerable or

at risk and cannot always comfortably or safely use some of the standard resources offered in disaster preparedness, relief, recovery, or mitigation” (National Council on Disability, 2005). This includes a variety of individuals, including those who are challenged by visual, hearing, mobility, cognitive, emotional, and mental limitations. In addition, individuals on life-support systems, people who use service animals, and those who are medically or chemically dependent would fit the special needs category. In general, a broad definition is necessary to ensure nobody is left behind. Emergency evacuation planning must embrace the idea that everyone should survive.

Kailes (2005) argues that the term “special needs” is so widely applied to such an “extremely broad” group that the term has become almost “meaningless”. She advocates more respectful terms that divide populations into more “precise and discrete groupings”. However, it is her perception that efforts by disability groups to change the use of the term special needs have not been successful to this point in time.

Clark (2005) found that in Sioux City, Iowa, the main focus was placed on mobility impaired individuals; secondary criteria were medical conditions such as hearing or visual impairment as well as requiring oxygen or other life support systems. This was found to be largely the case in most voluntary special needs registration programs currently in use, although a variety of information was sought in the actual registration cards or forms sent out to the target populations by the different organizations. All systems collected personal data such as the name, address, phone number, e-mail address, sex, social security number, and date of birth. Some forms asked for the weight and height of the responder.

Most forms provided a list of possible responses with each question. The type of living facility the special needs individual occupied was a question found on all forms with some

variation in selections. Kane County Office of Emergency Management ([KCOEM], 2006) in Illinois lists choices for this response as mobile homes, single family dwellings, apartment/condo, and recreational vehicle. The Sheriff's Department of Albany County, New York (2006) added high-rise, group homes, and retirement homes choices to their registry. Not surprisingly, officials in Monroe County, located in the Florida Keys, also listed boats and campgrounds to their list (2004). Other Florida emergency managers in Hernando County (2006) asked if the registrants lived in an evacuation zone.

Information regarding the potential transportation and shelter needs of participants was sought in most all cases. Options ranged from not needing assistance with transportation to the choice of moving to regular shelters, special needs shelters, homes of family or friends, hospitals, or nursing homes as designed by officials in Oconee County, South Carolina (2006). Other organizations assessed transportation needs differently, using the terms ambulatory, bedridden, and requiring stretcher transport. The need for a wheel-chair lift equipped vehicle or ambulance, the ability to transfer from a wheelchair to a seat, and the use of canes, walkers, or crutches was sought as well by the KCOEM. One unique question, found on the registration card for Monroe County Florida, asked for what category storm, ranging from 1 to 5, the individual would require assistance.

Several forms provided room for emergency contact information such as the names and telephone numbers of health providers, relatives, or caregivers. Some went so far as to provide the opportunity for input concerning special instructions from the individual's physician, nurse, or case manager. Questions regarding the use of home healthcare, hospice, or other organization making visits to the home were supplied. Some special needs programs demonstrate a concern

for tracking the presence of pets in the registrant's home. Though several registries had no questions concerning pets, others queried respondents as to animals in their care.

Special needs programs target individuals with many different limitations. The registry card for Miami-Dade Office of Emergency Management ([MDOEM], 2006) lists the hearing and visually impaired, colostomy, seizure, and dialysis patients, as well as those suffering from a variety of afflictions such as Alzheimer's, Parkinson's, muscular dystrophy, cystic fibrosis, dementia, emphysema, and chronic obstructive pulmonary disease . Other criteria listed for eligibility include cardiac and stroke, as well as knee or hip replacement. Emergency managers also sought response on the presence of oxygen in the home, noting the type of unit, amount used per day, liter flow, and whether nebulizers or respirators were used.

Additional tracking for medication use was also done by most of the programs evaluated. Albany County, New York, officials asked if medications were self-administered, intravenous, or required refrigeration. Other special equipment requiring the use of electricity was tracked by the agencies as well as any special diet requirements of the special needs individual. One additional category noted by MDOEM dealt with potential language barriers. The application there was available in Creole, English, and Spanish.

Question #3: What is the target population for an evacuation registration program in Knox County? With no special needs program in place, the literature review for this research question is limited. However, a review of Knox County demographics and history reveals some insight as to what special needs groups beyond those found in question #2 can be found in the area. For instance, a large number of mental institutions are located in Galesburg. The Department of Public Health opened the Galesburg State Research Hospital in 1949. With the abolishment of this department in 1961, the hospital came under the control of the Department of

Mental Health and the facility eventually became known as the Galesburg Mental Health Center (Illinois State Archives, 2006). As new direction evolved in the field of mental health, the center was closed in the 1980's and the mentally-handicapped population was scattered throughout the community. Smaller group homes with assisted living sprang up to house the developmentally disabled individuals in the community, but others were boarded in private residences. It is unclear whether there is a tracking mechanism in place to locate this population during an evacuation.

The Henry Hill Correctional Facility, located on the west edge of Galesburg, has the potential to create a challenge should the evacuation of the facility become necessary. The evacuation of correctional facilities during Hurricane Katrina presented a huge logistical problem for the Louisiana Department of Corrections (2006). The evacuation of 7,600 inmates from the Orleans and Jefferson Parishes was a safe and efficient process due to prior planning efforts within the department. Hurricane evacuation studies by the National Oceanic and Atmospheric Administration in the Apalachee Bay Region of Florida (1997) take specific note of the proper attention that must be given to correctional facilities as listed in their vulnerability analysis of special needs population. People in correctional facilities are considered a special needs population due to their incarceration. The necessity for hand and leg constraints as well as armed guards requires special planning and additional resources. Regulations requiring special provisions, such as those for federal prisoners, must also be met.

A look at the current Knox County Emergency Operations Plan shows limited language or planning in regards to special needs groups. In the Evacuation Annex (Cratty, 2006) there is only one line of concern that is found: "Special provisions may be used for evacuating the

disabled, elderly, and persons in institutions.” This statement is very broad and serves little to assist in clarifying exactly who these people are and where to locate them in a disaster.

Catherine Holland, Executive Director at Stone-Hayes Center for Independent Living in Galesburg, is an advocate for forming a special needs registration program in Knox County. She is of the opinion that a large share of special needs individuals could be identified through known facilities, such as the group homes for the developmentally disabled, nursing homes, high-rise residences, or local day care providers (personal correspondence, July 5, 2006). Holland emphasized the particular need for nursing homes to conduct evacuation planning as evidenced by the poor performance of these facilities and lessons learned during Hurricane Katrina. While no unique populations or criteria to identify special needs individuals exist in Knox County, she believes the greater challenge for a registration program in the county could be outside Galesburg in the smaller communities and rural areas, where the lack of service programs and group living arrangements make these individuals harder to find. In these areas, the Director feels an aggressive media blitz through public service announcements may be the best solution to getting the word out on the registration program.

Procedures

The study used a descriptive methodology to characterize and compare the criteria for special needs individuals nationally and in Knox County. The study also attempted to reveal any groundwork currently in place for identifying and locating special needs individuals within the county. Based on information gathered from the literature review, the author developed a survey to elicit response from organizations or businesses in the county to answer the research questions in hopes of forming the foundation for an eventual evacuation registration program.

Respondents were asked to answer questions about their organization, in relation to the tracking of special needs individuals, how the information was maintained, and if the information could be shared with KCEMA. Two questions related to the organization's planning for transportation of the special needs persons during an evacuation. Respondents were provided with yes/no or multiple choice type answers to these questions in order to standardize data. In addition, respondents were asked to provide their opinion in comment form as to any individuals, groups, or criteria they felt would be unique to planning efforts for evacuation in Knox County.

A cover letter was attached to each survey to explain the need and purpose of the study, provide directions and contact information for completing and returning the survey, and assure respondents that responses would be kept confidential. Respondents were asked to provide contact information in order for KCEMA to identify participating agencies when the eventual registration program is formulated. The author was reluctant to include any language that would bias response as to the definition or criteria for the term "special needs". However, for clarification purposes, he felt that some examples should be provided so that respondents would gain an understanding of who typically would fall into the category. A copy of the cover letter and survey can be found in Appendix A.

Based on the information gleaned in the literature review on research Question #1, 59 organizations and businesses were selected as survey recipients based on the potential for them to be in contact with special needs individuals. These included area hospitals, clinics, nursing homes, churches, high-rise residences, home service and health care organizations, transportation agencies, military organizations, community centers, and local law enforcement. Additionally, surveys were mailed to social service groups and living centers, as well as government agencies that could have some contact with special needs individuals.

There were some limitations to the survey. Only the relatively large churches in the area were included as the author felt this would be most representative of the faith-based organizations and the area church listing was quite lengthy. Small doctor's offices were also not included in the survey for similar reasons and the belief that most would be bound by HIPAA regulations and therefore not be able to provide much information. Schools and child-care facilities were also not included in the survey. The author felt that although children would be a major population to figure into emergency plans, this information could be obtained through the office of the Regional Superintendent of Schools and be easier to track through that database. In addition, the study would be somewhat biased by the respondent's background and experience with disabled persons, as well as their interpretation of the term "unique" in Question #8. A listing of survey recipients can be found in Appendix B.

The cover letters and surveys were mailed in sealed envelopes on June 12, 2006. A self addressed stamped envelope was included in each packet to facilitate and expedite return to the author at the Galesburg Fire Department. It was requested that the survey be returned by June 28, 2006.

Results

Of the 59 surveys that were mailed, 34 (58%) were returned to the author. Five more were returned as "not deliverable as addressed, unable to forward" by the postal system. In at least two of these, it is felt that the organization no longer existed.

Question #1: What resources are currently available to identify and locate potential evacuees with special needs in Knox County? In the 34 surveys collected, 20 (59%) marked that the organization they represented did not track or maintain a list of persons with special needs.

Conversely, 14 (41%) of the organizations or businesses did maintain some type of tracking mechanism for special needs individuals. Nine of these 14 respondents (64%), used computers for tracking people, 10 (71%) maintained a paper file system, and 5 (36%) of the organizations used both. There were no institutions found to use mapping systems to assist in tracking special needs persons.

The size of the list maintained by the different organizations was divided into 4 possible response categories. None had list of less than 10 names. Six of the 14 entities (42%) tracked between 11 and 50 persons, six more had lists of 51-200 individuals, and two (14%) marked that they maintained contact with over 200 special needs individuals. Eleven of the participating organizations (78%) tracked person within Knox County and 9 (64%) of these included individuals from outside the county. Only 3 of the 14 (21%) dealt solely with Galesburg people and one (7%) attempted to maintain a listing of transients to the area.

On the question of sharing roster information, 8 of the 14 (57%) felt they could share their lists with KCEMA officials. The regulations on privacy were the reasons listed for the 2 (14%) organizations who noted they could not share the information. An additional four others (28%) were not sure how HIPAA rules would effect their sharing of information.

The 14 organizations that tracked special needs groups were evenly split as their planning efforts to assist these persons during an evacuation, with 7 (50%) of the organizations having done some form of special needs planning and the other 7 having no plans for assisting these people. Of those with plans, 5 had taken transportation needs into consideration through various means of conveyance including local bus providers and vans from their own organization or a local church. One organization had only the local ambulance service listed for transportation of

over 200 residents during an evacuation. Survey responses for closed-ended questions #1 through #7 can be found in Appendix C.

Question #2: What criteria or information is collected by other organizations in special needs registries? As presented in the literature review, there are many categories of special needs individuals. The criteria used by successful programs across the nation are various, but the basic underlying description of a special needs person focuses on the inability of that individual to rescue or remove himself or herself from a harmful situation without assistance by another.

The criteria used by organizations in evacuation registration programs include:

- Physical impairment (bedridden, wheel-chair bound, walker or cane assisted)
- Developmental (cognitive) disability
- Mental or emotional impairment
- Visual handicap
- Hearing impairment
- Medication or chemical dependency
- Machine or equipment dependency (oxygen, dialysis, etc.)
- Pet issues
- Transportation limitations
- Economic barriers

Other information is collected by these programs to support operational plans in the event an evacuation was necessary. These include the name, address, and housing type of the special needs individual, as well as any language barriers that must be addressed.

Question #3: What is the target population for an evacuation registration program in Knox County? Responses to the open-ended questions #8 and #9 were varied and a reflection of

the particular organization's role and mission in the community. Some of the responses were not necessarily on target with answering the actual question, but offered general information in regards to their own situation and planning efforts. Several respondents expressed the difficulty in maintaining updated lists due to the dynamic client base they experienced. Another concern voiced by some of the organizations was the legal requirement for them to develop emergency plans in order to qualify for state and federal grant money. These organizations expressed a desire for future planning and training with KCEMA.

A majority of the open responses noted the high number of developmentally disabled individuals residing in the county. Most of the organizations identifying this group noted that these persons were normally found in group homes where there was some degree of planning for their safety during an evacuation, usually involving transportation by company vans. A large share spoke of the presence of an ever-growing elderly population and the special needs they would require.

Respondents also identified other special needs individuals in Knox County. These included vision and hearing impaired persons, medication dependent individuals and those relying on machines to stay alive or maintain a living style. A large share of the responses noted a client base of persons with emotional and mental limitations, while physical inabilities were less of a factor. Other criteria that was listed as unique to the county or not listed by the author in the survey directions included persons suffering from Post Traumatic Stress Disorder, individuals with Degenerative Eye Disease, the homeless population, and those that are economically distressed to a point requiring evacuation assistance. The prison population at Henry Hill Correctional Facility was also mentioned in one of the returned surveys.

Discussion

The results of the study were in line with what has previously been done in evacuation registration programs for special needs persons across the country. For the most part, Americans require assistance during evacuations for the same basic reasons, regardless of where they live. On the other hand, the criteria differ somewhat from region to region due to the inherent nature of the climate, potential threat of natural or man-made disaster, or the population itself.

Emergency management officials in Florida and the Gulf Coast area have designed their evacuation programs in response to lesson learned during the recent hurricanes (MDOEM, 2006 & Monroe County, 2004). In addition, these communities have a large elderly population as well as a growing Hispanic community. The influx of mobile home parks and other housing options that are vulnerable to hurricane and storm damage is also a growing concern for those tasked with emergency planning as demonstrated in the criteria sought in their registration programs. In California, the threat of earthquakes, wildfire, and mudslides in often remote geographical areas continues to challenge and focus authors of evacuation response plans (California Department of Rehabilitation, 1997). Meanwhile, the Department of Homeland Security (2006) has sharpened national planning efforts in places like New York City, where the ever-present danger of terrorist action in a congested urban environment has government officials stepping up evacuation planning efforts to deal with the massive needs of the general population and the special needs community.

In comparison, the potential for natural disaster and corresponding need for evacuation planning in Knox County appears small. However, the daily threat posed by man-made calamity is real given the growing expansion of the railroad and highway system in the area and KCEMA officials must prepare for this eventuality. The study did not find any hidden or unique group of

special needs individuals that would require an evacuation registration program to be much different than models ones examined. On the other hand, the study confirmed a concern for the safety of the large population of developmentally disabled persons within the county. Though this group is, for the most part, a known quantity that can be readily identified, there are individuals located outside the registered group homes that would be challenged during an evacuation. These persons come in daily contact with a number of different entities within the county through their residential arrangement, work, and participation in specially targeted programs and the potential to track them is good.

As the population of Knox County ages (U. S. Census Bureau, 2006), a growing number of elderly individuals must be accounted for during emergencies. Perhaps, as cited by Holland, the most difficult to identify or locate will be those living at home in the small communities or rural areas of the county. Many of these older citizens will be on medications or relying on electricity to keep life support equipment running. Getting to these individuals in a time of crisis would seem to be the most difficult for KCEMA and emergency response personnel. Those living in managed group facilities in Galesburg appear to be in less danger due to tracking systems and emergency plans that include evacuation and transportation already in place. As suggested by the National Organization on Disability (2004), the study found that many of the area organizations that routinely have contact with disabled and older individuals maintain a list of clients; however, due to privacy regulations in many cases, these lists are presently unavailable to KCEMA officials. On the whole, there is no comprehensive city or county-wide system for identifying and locating individuals that could be summoned up in an emergency. Upon examining the successful programs of voluntary registration that are in place elsewhere, such may be the best solution for creating an evacuation registry in Knox County.

The author feels that a small evacuation within the city of Galesburg could be managed without extreme difficulty and that the safety requirements of the special needs population could be met. However, a larger scale evacuation of several square miles would challenge the response system in place. It appears that organizations have a good handle on who and where to find the special needs persons in the community, but the limited degree of logistical planning for a larger scale evacuation involving the transportation and relocation of residents, many with special needs, from several facilities to area shelters has not been sufficiently planned. This information gathered in the study will be a valuable resource in creating an evacuation registry in the future. The study has also created a renewed awareness as to the role of KCEMA in the community, as well as sparked new networking possibilities by those tasked with the responsibility of emergency planning throughout the area.

Recommendations

Much of the groundwork for identifying and locating special needs individuals has been laid by the businesses, organizations, and agencies within the county. It is the responsibility of KCEMA to take the next step to synthesize what is already in place into a dynamic, county-wide registry to be placed in the Emergency Operations Plan, ready in case an evacuation is necessary. This will not be easy or quick work, but the various programs already in place throughout the country, attest to the possibility of success and the value such an undertaking could mean to the residents of Knox County. Based on the study, the author recommends KCEMA take a leadership role in initiating the following action:

- Form a local task force of stakeholders including, but not limited to, those with tracking mechanisms in place. This would include representatives from area government,

hospitals, home health care, law enforcement, ambulance service, churches, schools, social service agencies, disability organizations, high-rise housing, and transportation entities.

- Define the term “special needs person” as it applies to Knox County.
- Examine model evacuation registration programs for special needs individuals and formulate hard copy and on-line registration forms. Create a special website for KCEMA for registration, education, and special notices to the public.
- Create a database to house registrant information. This database must be secure but easily accessible during an evacuation.
- Gather available lists of special needs individuals currently on file with organizations or businesses that responded to survey
- Send out registration cards to organizations, businesses, and housing units recognized in the study.
- Create public service announcements through local radio and TV stations explaining the Evacuation Registration Program.
- Conduct tabletop exercises with task force members to evaluate evacuation response to a local emergency.
- Update database and evaluate Registration Program on a periodic basis as decided by task force.

With the realization of a functioning evacuation registration program, there will be an on-going need to enter new registrants and update existing information. This will be a time-consuming and challenging undertaking. Future studies on the performance of voluntary

registration programs for special needs individuals during actual evacuations will attest to the value and success of these endeavors.

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Appendix A

Survey on Evacuation Information for Special Needs Persons (Cover Letter)

Galesburg Fire Department

150 South Broad Street
Galesburg, IL 61401

June 12, 2006

Dear Sir or Madam,

With the seemingly continuous onslaught of natural and man-made disasters that have swept across the land in recent years, the need for local officials to step up their efforts in emergency planning is unprecedented. As Battalion Chief of Operations and Training with the Galesburg Fire Department who also serves as the Assistant Emergency Management Director for Knox County, it is my mission to advise Chief John Cratty on the state of our readiness to respond to these incidents. An area that we are focusing on currently is evacuation planning, particularly in regards to identifying and locating individuals with disabilities or special needs who may need assistance during emergencies. It is this project for which I am requesting your help today.

We have developed a survey in an attempt to answer the following two questions:

1) What resources are currently available to identify potential evacuees with special needs in Knox County? 2) What is the target population for an evacuation registration program in Knox County? We would greatly appreciate your assistance in completing the enclosed survey/questionnaire and returning it in the enclosed stamped envelope by June 28th if at all possible. Your responses will be kept confidential. The data will be used to develop a voluntary evacuation registry for Knox County. I also plan to use this information for an applied research paper as part of my class requirements in the National Fire Academy's Executive Fire Officer Program.

Thank you for spending your time to assist us with this valuable research today in hopes that we will be better prepared for emergency management tomorrow.

Sincerely,

Thomas E. Simkins
Battalion Chief
Galesburg Fire Department

309-345-3756 (office)
309-299-6959 (cell)

Appendix A (cont'd)

Survey on Evacuation Information for Special Needs Persons

Galesburg Fire Department/
Knox County Emergency Management Agency

Special Needs Survey

Name of your Organization/Business _____

Address _____

Phone _____

Contact Person _____

Part I *Questions #1-7 are designed to identify what systems may already be in place for tracking area residents who may be at risk and require evacuation assistance during a disaster or local emergency.*

1. Does your org/business track or maintain a list of persons with special needs?
Yes _____ No _____ (If no, please go to Part II)
2. If yes, what form is this in?
Computer based _____ Paper file _____ Map based _____
3. Approximately how many individuals are on this list?
1-10 _____ 11-50 _____ 51-200 _____ 200+ _____
4. These individuals are from (check all that apply):
Galesburg only _____ Knox County _____ Outside Knox County _____
Transient _____
5. Could this information be shared with the Knox County Emergency Management Agency? Yes _____ No _____ Not sure _____

If not, what is restricting this information-sharing?

6. Does your org/business have a plan for assisting these individuals with evacuation during a disaster or local emergency?
Yes _____ No _____

7. If yes, does this plan involve transportation needs?

Yes _____ What type of transportation is planned? _____

No _____

Part II *This part of the survey will be used to help determine the target population for a pre-incident registration program for people requiring evacuation assistance during a disaster or local emergency.*

There are many types of individuals who may require assistance during and after an emergency evacuation. Typically, this includes persons with physical limitations such as the non-ambulatory, wheel-chair bound, visually or hearing-impaired, etc. Others may have medical limitations such as a dependency on medications or specialized equipment. Evacuation for some may be compromised due to mental or emotional difficulties or the presence of pets.

8. Does your organization/business have contact with any individuals or groups that would be considered unique to Galesburg or Knox County in regards to assistance during evacuations? If so, please list:

9. Are there any criteria (others than those noted above) that should be considered as part of an evacuation registration program for individuals with special needs for Knox County? If so, please list:

Thank you for assisting us with this survey. Your cooperation will enable us to move forward in our efforts in regards to emergency evacuation planning in Knox County.

Please place this survey in the self-addressed stamped envelope and return by June 28, 2006.

Appendix B

Recipient List, Special Needs Survey

American Legion Post 285	571 E North St	Galesburg, IL 61401
American Legion Post 381	546 Illinois Rt 41	Abingdon, IL 61410
American Legion Post 727	131 W Pine St	Oneida, IL 61467
American Legion Post 749	1395 Knox Highway 9	Knoxville, IL 61448
American Red Cross, WIC	143 E Main St	Galesburg, IL 61401
Azer Clinic	872 W Dayton St	Galesburg, IL 61401
Bethel Baptist Church	1196 N Academy St.	Galesburg, IL 61401
Bridgeway Center	2323 Windish Dr	Galesburg, IL 61401
Care Center of Abingdon	801 W. Martin St.	Abingdon, IL 61410
Carver Community Action Agency	235 E Main St	Galesburg, IL 61401
Catholic Social Services	292 N. Chambers St.	Galesburg, IL 61401
Central Congregational Church	60 Public Square	Galesburg, IL 61401
City Bus	567 S Farnham St	Galesburg, IL 61401
City of Galesburg Human Services	150 E. Simmons St.	Galesburg, IL 61401
Cottage Home Options	427 E Fremont St	Galesburg, IL 61401
Cottage Hospital	695 N Kellogg St	Galesburg, IL 61401
Cottage Medical Group	834 N Seminary St	Galesburg, IL 61401
Dept of Human Services	477 E. Main St.	Galesburg, IL 61401
First Christian Church	301 N. Broad St.	Galesburg, IL 61401
First United Methodist Church	120 N. Kellogg St.	Galesburg, IL 61401
Galesburg Clinic	3315 N Seminary St	Galesburg, IL 61401
Galesburg Orthopedic and Rehab	1960 N. Henderson St.	Galesburg, IL 61401
Galesburg Police Dept	150 S Broad St	Galesburg, IL 61401
Galesburg Rescue Mission	435 E Third St	Galesburg, IL 61401
Galesburg Towers	1384 N Henderson St	Galesburg, IL 61401
GHAS	2175 Windish Dr.	Galesburg, IL 61401
Gordon Behrents Sr. Center	2015 Windish Dr	Galesburg, IL 61401
Ill Dept of Rehabilitation	256 S Soangetaha Rd	Galesburg, IL 61401
Immaculate Heart of Mary Church	2401 N. Broad St.	Galesburg, IL 61401
KCCDD	2015 Windish Dr	Galesburg, IL 61401
Kensington Apts	311 E Simmons St	Galesburg, IL 61401
Knox Co Health Dept	1361 W Fremont St	Galesburg, IL 61401
Knox Co Law Enforcement Ctr	152 S Kellogg St	Galesburg, IL 61401
Knox County Hearing Center	975 N Henderson St.	Galesburg, IL 61401
Knox County Housing Authority	255 W Tompkins St	Galesburg, IL 61401
Knox County Nursing Home	800 N Market St	Knoxville, IL 61448
Lifeline Services	575 N Kellogg St	Galesburg, IL 61401
Lutheran Social Services	427 E. Fremont St., Apt. B	Galesburg, IL 61401
Marigold Nursing Home	275 E. Carl Sandburg Dr.	Galesburg, IL 61401
OAKS	176 N Farnham St	Galesburg, IL 61401
OSF Home Care	3333 N Seminary St	Galesburg, IL 61401

OSF Medical Group	100 N Monroe St	Abingdon, IL 61410
OSF Medical Group	104 S Broad St	Knoxville, IL 61448
OSF St Mary Medical Center	3333 N Seminary St	Galesburg, IL 61401
Prairieland Hospice Foundation	1640 N Henderson St	Galesburg, IL 61401
RFMS Inc	115 E South St	Galesburg, IL 61401
Rosewood Care Center	1250 W. Carl Sandburg Dr.	Galesburg, IL 61401
Safe Harbor	1188 W Main St	Galesburg, IL 61401
Seminary Estates & Villas	550 E Carl Sandburg Dr	Galesburg, IL 61401
St Mary's Square Living Center	239 S Cherry St	Galesburg, IL 61401
Stone-Hayes	39 N Prairie St	Galesburg, IL 61401
The Salvation Army	320 N Kellogg St	Galesburg, IL 61401
Trinity Lutheran Church	304 E. Ferris St.	Galesburg, IL 61401
Veterans Administration Clinic	387 E Grove St	Galesburg, IL 61401
Veterans Affairs	975 N Kellogg St	Galesburg, IL 61401
VFW	1001 Michigan Ave	Galesburg, IL 61401
Visiting Nurses Assoc. Services	150 E Simmons St	Galesburg, IL 61401
Western Ill Home Health Care	FAXED	Galesburg, IL 61401

Appendix C

Results of Special Needs Survey

1. Does your org/business track or maintain a list of persons with special needs?

Yes	14	41%
No	20	59%

2. If yes, what form is this in?

Computer Based	9	64%
Paper File	10	71%
Map Based	0	0
Both Computer and Paper	5	36%

3. Approximately how many individuals are on this list?

1-10	0	0
11-50	6	42%
51-200	6	42%
200 +	2	14%

4. These individuals are from (check all that apply):

Galesburg Only	3	21%
Knox County	11	78%
Outside Knox County	9	64%
Transient	1	7%

5. Could this information be shared with the Knox County Emergency Management Agency?

Yes	8	57%
*No	2	14%
*Not Sure	4	28%

*Due to Health Insurance Portability Accountability Act (HIPAA) Regulations

6. Does your org/business have a plan for assisting these individuals with evacuation during a disaster or local emergency?

Yes	7	50%
No	7	50%

7. If yes, does this plan involve transportation needs?

Yes	5	71%
No	2	29%

Vans (2), Local Buses (2), Ambulance (1)