



Special Needs Instructions



Special Needs Registration Instructions

- 1) Read over the registration form enclosed. **Print legibly and answer ALL questions DO NOT LEAVE ANY BLANKS.** If your form is missing information (correct phone number, address, driving directions starting from US 90 and state road 41). We may not be able to contact you or mail you important information. If all information requested is not provided, we return incomplete registrations.
- 2) **Mail your registration form to: Columbia County Special Needs Evacuation Program 263 NW Lake City Avenue, Lake City, Florida 32055. You can also e-mail the special needs form to Shayne_morgan@columbiacountyfla.com. Please put in the subject line Special needs registration.** Fax is an option as well for submitting special needs forms, but it IS NOT ENCOURAGED. If you need to fax an application in, the fax number is (386) 752-9644. After your form has been received and approved, your information will remain in our registry for up to one year. Registration is FREE, voluntary and confidential.
- 3) **Keep your registration information current! REGISTRATION INFORMATION REMAINS IN THE DATABASE FOR ONE (1) YEAR FROM THE DATE OF RECEIPT.** Residents are responsible for renewing their special needs registration by June 1 each year. The first week of June all non-renewed special needs applications will be purged from the database. Home health care agencies may renew the application for their clients if that is an option.
- 4) **Keep the Special Needs Information enclosed for your records and return the new form to our office. The Special Needs registry is updated annually. Registrants can request a new form to be mailed to them by contacting the Emergency Management Office at (386) 758-1383 or logging onto www.columbiacountyem.com.**



Columbia County Emergency Management Special Needs Registration Form

Updated June 2017 – Received By Emergency Management: DATE: _____

Last Name: _____ First Name: _____

Phone Number: _____ Cell Phone Number: _____

Physical Address: _____ City/State/Zip: _____

Do you live in a mobile home (Y or N): _____ Sex (M or F): _____ Date of Birth: (MM/DD/YY) _____

TYPE OF SHELTER: SPECIAL NEEDS _____ REGULAR _____ HOSPITAL _____

Do you have transportation to the shelter? (Yes or No) _____

If not, what are your transportation needs? Ambulance _____ Van with Wheelchair lift _____ Regular Car or Van _____

DISCHARGE PLAN: Where will you go if you cannot go back to your home?

Name/Relationship Address, City, State Phone Number

Physician Name: _____ Physician Phone: _____

Name of person who will accompany patient to the special needs shelter

Phone Number: _____ Cell Phone Number: _____

Caretaker Name: _____ Caretaker Phone: _____

Next of Kin: _____ Next of Kin Phone: _____

Next of Kin Address: _____ Next of Kin Address: _____

MEDICAL DIAGNOSIS/CONDITION: _____

Check all of the following disabilities that apply:

___ Arthritis, Severe ___ Back Injury ___ Blind/Vision Impaired

___ Breathing Difficulty ___ Deaf/Hearing Impaired ___ Diabetes

___ Dialysis ___ Heart Condition ___ Incontinence

___ Mental Illness (Specify) _____

___ Oxygen Support ___ Paralysis, Complete ___ Paralysis, Partial

___ TDD Equipment (Y or N) ___ Can you walk unassisted (Y or N) _____

Any other special or exceptional needs that are not listed _____

ONLY APPROVED SERVICE ANIMALS (DOG/PONY) ARE ALLOWED IN SHELTERS. ARRANGEMENTS FOR ANY PETS MUST BE MADE BY THE OWNER.

DIRECTIONS TO YOUR HOME: _____

HOME HEALTH CARE AGENCY: _____ **DATE:** _____

Consent for information to be released to Columbia County Emergency Management for disaster operations:

SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____



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COLUMBIA COUNTY SPECIAL NEEDS PROGRAM

Special Needs Evacuation Packing List

If you request transportation to a Special Needs shelter, you need to bring with you personal items, medications and other supplies for daily use while you stay at the shelter. **BEFORE** transportation arrives to take you (and your caregiver, if applicable) to a shelter, you need to have the following items packed and ready, enough to last at least 48 hours:

Shelter Packing List

1. **Medications and Medical Supplies** – Daily Prescriptions (Two-week supply. Your pharmacy records may not be available for days.) Oxygen bottle and or concentrator, Glasses, Hearing Aids, Walker, Wheelchair, Etc.
2. **Important Papers** – Personal Identifications, Family Phone Numbers, Copies of Prescriptions, Doctor's Name and Phone Number.
3. **Personal Items** – Toothbrush, Paste, Soap, Towel, Etc.
4. **Comfort Items**- Blankets, Sleeping Bag & Pillow, Lightweight Folding Chair.
5. **Extra Clothing**- Comfortable clothing.
6. **Special Dietary Foods** – (If you have a special diet).
7. **Entertainment Items** – Books, Magazines, Cards and Games.
8. **Flashlight, Batteries, Radio with Batteries.**

* Have these items packed and ready **BEFORE** transportation arrives for you. An evacuation process is swift and starts well in advance of a disaster!

Frequently Asked Questions:

What happens in case our area is threatened by a hurricane or storm and evacuations are issued?

Approximately 24-48 hours before a hurricane impacts our area, Emergency Operations Operators make phone calls to make evacuation arrangements to all Special Needs Registrants who have expressed a transportation needs to a shelter on their registration forms. These evacuation calls are made to the telephone numbers indicated on registration forms.



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Make sure you have provided our office with your correct and current telephone number. At the time you are called, if you accept transportation assistance, the operator will confirm your physical home address and pick up time and location are arranged. You must pack and be ready to leave when transportation arrives to take you to the shelter.

When making evacuation plans, please keep the following in mind:

- Hurricane Season starts June 1 and ends November 1. Register for the Special Needs Program or confirm or update your existing registration information before the season starts so our office is able to contact and help you.
- Discuss your evacuation plans with local and out-of-town relatives or friends.
- Determine what your medical needs are by consulting with your healthcare providers.
- Shelters only provide temporary and basic accommodations. They are not clinics or hotels.
- Space and time are critical during an evacuation. Bring only the necessary supplies to the shelter. Be packed and ready to evacuate when transportation arrives to pick you up.

What supplies should I pack to bring to the shelter?

You are responsible for packing and bringing the following necessary personal items to accommodate your needs for at least 48 hours:

- Medications/Medical Supplies: daily prescriptions (Two-week supply).
- Oxygen and or concentrator, glasses, hearing aids, walker, wheelchair, etc.
- Important Papers: personal identification, family phone numbers (local and out of area), copies of prescriptions, doctor's name and phone number.
- Personal Items: comfortable, extra clothing, toothbrush, paste, soap, towel, etc.
- Comfort Items: blankets, sleeping bag, pillow, lightweight folding chair.
- Entertainment Items: books, magazines, cards and games.
- Special Dietary Foods (Optional): If you require a special diet, bring non-perishable food and a can opener.

Who can I bring with me to the special needs shelter

Special needs clients are requested to bring a caregiver with them to the special needs shelter.

Nurses are on hand in the Special Needs Shelter, but they cannot provide individual care to each resident



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What if I refuse or decline evacuation transportation assistance at the time an operator calls?

If you decide to stay home and refuse assistance for any reason, you may not be contacted or offered transportation assistance at a later time. However, you will be contacted for the next incident which requires an evacuation.

What if I will be transporting myself to the shelter?

Before going to the shelter, make sure you check local media advisories for shelter information such as shelter opening times and locations. Do not forget to pack your shelter supplies.

What if I need special transportation because I am unable to move or walk and need a wheelchair or stretcher?

You should inform the operator so that an appropriate vehicle arrives to pick you up. Evacuation staff needs your written authorization to enter your residence to move you. (If your condition calls for this type of evacuation assistance, make sure to read and sign this authorization section found on the bottom of your Special Needs Registration Form.)

What if I did not express a transportation assistance need on my registration form and need transportation to a shelter?

After all persons who have expressed a transportation need on their forms have been contacted, operators will make an effort to call persons who have not expressed this need.

What happens when I arrive at the shelter?

An intake interview will be held with the patient. A health history will be taken and other forms will be filled out as necessary. **To help ensure accountability for shelter staff, all patients must also sign out before leaving the shelter.**

What happens after a hurricane or storm conditions pass?

Once weather and other conditions are considered to be safe by local officials, shelter occupants can return to their homes. Transportation is provided to those without transportation access.

Make appropriate arrangements for your pets before an evacuation. You are responsible for making arrangements and preparing a pet survival kit for your pet (water, food, carrier, and vaccination/identification papers.) Check with Columbia County/Lake City Animal



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shelter or your local pet clinics, kennels, etc. for possible care for your pet. PETS ARE NOT PERMITTED IN PUBLIC SHELTERS. SERVICE ANIMALS (DOGS, PONIES) ARE PERMITTED IN THEIR WORKING CAPACITY.

THE SPECIAL NEEDS SHELTER

A special needs shelter is a temporary emergency facility that is capable of providing special medical or nursing care, which does not necessitate an acute care setting (hospital, assisted living facility). Eligible persons that are desiring special care sheltering are encouraged to pre-register with Columbia County Emergency Management.

Sheltering of any type should always be on an as-needed basis. There is not any privacy in a shelter, Columbia County does NOT have a pet friendly shelter. Residents have to make their own plan when it comes to sheltering pets. ONLY SERVICE DOGS AND PONIES are allowed as working service animals in sheltering. If you can make arrangements to stay with friends or family that is the way to go, you will experience a lot more comfort in a shelter. All sheltering operations are dependent on the staffing of shelters that are made available.

SPECIAL NEEDS SHELTER ELIGIBLE CITIZENS: Columbia County residents who fit into any of the following categories, regardless of age, are eligible for the special needs shelter:

1. Unable to administer their own frequently required or daily injectable medications.
2. Requires daily or more frequent dressing changes because of moderate or copious drainage, such as ulcers, fistulas, etc.
3. Needs assistance with ostomy management, and indwelling catheters of any kind (n/g tube, colostomy bags, etc.)
4. Activities of daily living are so restricted by immobility that their basic needs must be met by others and those people are unavailable for this emergency.
5. Requires daily assessment of unstable medical condition by professional nursing personnel, i.e. cardiac, diabetic, etc.
6. Cardiac or respiratory conditions which require special equipment such as oxygen, apnea monitors, or nebulizer machines, etc.



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7. Terminal illness, yet ambulatory, in need of professional assistance in administering heavy doses of pain medication.
8. All others deemed necessary by a triage nurse.

Persons in the following categories will not be eligible for care in the special needs shelter:

1. Persons requiring hemodialysis procedures more than two (2) times per week. Individuals must check their own facility regarding arrangements for such situations.
2. High risk pregnancy within four (4) weeks of estimated due date of delivery or in active labor. Ordinary pregnancy should get instructions from their obstetrician.
3. Persons in sudden acute medical or emergency condition.
4. Bedridden persons and persons that require a hospital type bed who, for medical reasons, cannot use cots for emergency bedding and persons requiring a Hoyer lift for transfers.
5. Persons who, for medical reasons, require continuous air conditioning.
6. Oxygen dependent persons requiring oxygen 4 liter flow and higher.