Cover

Images of fingers reading Braille, a collection of items for a baby and child, and a man in a wheelchair exiting a wheelchair van with a lift.

Know Plan Prepare

A Personal Planning Tool for Individuals who have Access and Functional Needs

You and your family can be ready for emergencies.

Visit mass.gov/KnowPlanPrepare

DPH seal

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Image of a man, woman, and 2 children

Emergencies can happen at any time. Planning ahead and being prepared can lead to better outcomes for you and your family.

This tool can be used individually or with family members or caregivers. It can help you think about what you need to support your daily living activities during and after a disaster. Once you have identified your needs, we recommend that you:

* Create a family or individual emergency plan
* Create an emergency preparedness kit
* Develop a contact list

Visit our website to find out how to prepare an emergency kit and build your family or individual emergency plan. mass.gov/KnowPlanPrepare

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Image of two men using ASL with each other

**Communication**

Write down information about your communication needs. These might include things like a pad of paper and pen, hearing aids, portable magnifying glass, a communication board or book, or other assistive tools. Consider different ways of getting emergency notifications, such as TV, radio, the internet, mobile apps, etc.

Includes blank lines for people to enter their own information

Image of a hand holding smartphone and the Show Me for Emergencies app displayed on the phone

Show Me for Emergencies is a free mobile app that can assist people with communication challenges during emergencies. Point your smartphone’s camera at this code for more information.

Image of a QR code that directs users to <https://www.mass.gov/service-details/show-me>

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Image of a young girl using an inhaler

**Medical Needs / Maintaining Health**

Write down information about your medications (including dosage, time of day you take it, and what it is for). Include information about related supplies and any ongoing treatments you need. For example, what medication or recurring medical services do you use? Do you have allergies or other health conditions?

Includes blank lines for people to enter their own information

If you require oxygen, do you have a spare tank or a way of contacting the supplier in an emergency? If you have to evacuate from your home, what will you need for your daily living activities?

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Image of a person’s legs with sneakers including one which is a prosthesis

**Independence**

Write down information about assistive equipment, prosthetics, and durable medical equipment (DME) you use to function independently. Do you have enough supplies to last 72 hours? Where would you get extra supplies? For example, do you have extra batteries for portable devices, a manual wheelchair in case your powered chair is damaged, or extra eye glasses? Do you need extra feeding tubes, diapers, formula, bandages, etc? List any supplies:

Item Supplier/Phone Number

Includes blank lines for people to enter their own information related to item, supplier/phone number

If you have a service animal, be sure to include their supplies in your emergency preparedness kit!

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Image of an older woman in a wheelchair receiving assistance from another person

**Service / Support**

Write down information about your support network. Include anyone that needs to be on your contact list to assist you during a disaster. For example: family and close friends, Personal Care Attendant (PCA), others. Remember to include any supports you may need for psychological or emotional needs. Do you need help managing panic or PTSD reactions, or help with completing a multi-step process?

Name Relationship Phone Number

Includes blank lines for people to enter their own information related to name, relationship, and phone number

Plan with your support network before a disaster so they know you will need their assistance. Do they know where your emergency kit is? Can they operate any assistive devices you have? If you have a plan for psychological emergencies such as a Wellness Recovery Action Plan (WRAP), do your support people know what it is and how to use it?

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Image of a public bus with a deployed access ramp

**Transportation**

Write down information about your transportation needs. Do you have access to private transportation? Do you use mass transit or an accessible vehicle?

Transportation Company Phone Number

Includes blank lines for people to enter their own information related to transportation company and phone number

Do you have maps that show alternate routes in case main roads are closed, or your usual method of public transportation becomes inaccessible?

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Back cover

**After filling out this tool,** put it in a waterproof document bag and keep it in your emergency preparedness kit along with copies of other important documents (such as your medical information, copies of identification, financial information, etc.).

For more guides and resources, visit our website (mass.gov/KnowPlanPrepare) or point your smartphone’s camera at this code:

Image of QR code directing users to <https://www.mass.gov/know-plan-prepare>

Massachusetts Department of Public Health

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