

4. Ability Self-Assessment



Use this checklist to think about your abilities and what type of help you will need in an emergency. Everyone should read the General Issues section. Then review all the specific sections that apply to you.

Ability Self-Assessment • General Issues

Yes	No	N/A	Do you know where all the fire alarms and extinguishers are in the places where you are regularly?
Yes	No	N/A	• Can you activate the fire alarms?
Yes	No	N/A	• Can you work a fire extinguisher?
Yes	No	N/A	• Have you practiced?
Yes	No	N/A	Do you know where the gas and water shut-offs are at your home?
Yes	No	N/A	• Can you get to them and use the needed tool to turn them off?
Yes	No	N/A	• Do you have instructions and tools available so other people can turn off the utilities if needed?
Yes	No	N/A	Do you have a standard telephone (one that does not need electricity) and do you know where it is?
Yes	No	N/A	Do you know the location of ALL the exits in places you are regularly?
Yes	No	N/A	• Have you evaluated your ability to use them?
Yes	No	N/A	• Have you practiced using these exits?
Yes	No	N/A	Can you make an inaccessible exit accessible by using a portable ramp? If yes, have you considered getting one?
Yes	No	N/A	Have you thought about how you will evacuate if you can't use your own vehicle?
Yes	No	N/A	Have you thought about how you may be able to help others in an emergency? (For example, if you have no or low vision you might be able to guide people through darkened spaces. If you are a calm person you might be able to help others avoid panic.)
Yes	No	N/A	Have you checked with your local city to see if they have a registration for people with disabilities?
Yes	No	N/A	Have you planned for what you will do if your service animal becomes confused, frightened or disoriented? Are there other ways you can get around? (For example, by using sighted guides or members of your support team who can offer emotional support.)

Travel

In hotels/motels/cruise ships and other lodgings:			
Yes	No	N/A	Do you think about whether you want a room on a higher floor, perhaps with a view, or on a floor where evacuation is easier for you?
Yes	No	N/A	Do you tell the staff that you will need help if there is an emergency and tell them what kind of help you may need?
Yes	No	N/A	If you have a significant hearing loss, do you ask for a room with visual alarms that are tied to the fire alarm system, doorbells and telephones?
Yes	No	N/A	Do you check the location of all exit routes (usually posted on the back of the guest room door)?
Yes	No	N/A	Do you track escape routes by counting the number of doors between your room and the emergency exit? Maps may be confusing unless you check them out before you need them.
Yes	No	N/A	If you use self-administered medical treatments, do you carry enough equipment and fluids in case there is a delay when you are traveling?

Evacuating a Site After Usual Business Hours

Determine your risks if you are sometimes in a building after usual working hours (when there are fewer people around to help you).			
Yes	No	N/A	Can you contact other people after hours, including staff in the security or emergency control center?
Yes	No	N/A	Do you know how to reach emergency personnel in case of an emergency?

Sight

Yes	No	N/A	If you rely on sound clues to get around (such as the hum of the copy machine by an elevator), will you be able to get yourself to safety if they are missing? You can't count on these clues if the electricity goes off or alarms are blaring.
Yes	No	N/A	Are there signs with raised and Braille characters that designate exits, direction to exits, and information on exit routes? Are floors designated by raised and Braille numbers or letters, including floor level signs in stairwells?
Yes	No	N/A	<ul style="list-style-type: none"> • Can you read the emergency signs in print or Braille?

Emergency Preparedness: Taking Responsibility for Your Safety*Tips for People with Disabilities and Activity Limitations*

Yes	No	N/A	If you wear contact lenses, do you either keep glasses with you or keep clear goggles in your emergency supply kit in case smoke, dust or fumes become painful or dangerous?
Yes	No	N/A	Can you use the two-way communication devices installed in the elevators and areas of refuge/rescue assistance?
Yes	No	N/A	Have you taught your support team how to serve as “sighted guides” if needed?
Yes	No	N/A	Have you marked your utility shut-off valves at home with fluorescent tape or large print or Braille labels?

Hearing

Yes	No	N/A	Have you practiced having people communicate emergency information to you?
Yes	No	N/A	Does your building have two-way communication devices installed in the elevators and areas of refuge/rescue assistance?
Yes	No	N/A	• Have you practiced using them to make sure the system works?
Yes	No	N/A	Do you know the locations of text telephones or amplified telephones?
Yes	No	N/A	Do emergency alarm systems have audible and visible features (visual strobes)?
Yes	No	N/A	Are newer types of displays (TV monitors or scrolling text signs) available at your workplace? Will they work if the power goes out?
Yes	No	N/A	• Do you know their locations?
Yes	No	N/A	Do you have a portable communication device (PDA, pager, laptop, portable TTY)?
Yes	No	N/A	• Does it have a battery backup? (When buying a portable device consider one that uses standard off-the-shelf batteries.)
Yes	No	N/A	If available, do you know how to use text-messaging to access emergency information?
Yes	No	N/A	How will you communicate if there is no interpreter or if your hearing aids are not working?
Yes	No	N/A	• Do you carry paper and pens with you?

Deaf-Blind

Yes	No	N/A	Do you have a support team? Since the audible alarms or flashing lights won't work for you, it is critical that you have a support team.
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Speech

Yes	No	N/A	Have you determined how you will communicate if you do not have use of your usual communication device?
Yes	No	N/A	Do you keep with you a copy of a word or letter board, paper and pens, and pre-printed phrases usable in an emergency?

Memory, Judgment, Learning and Understanding

Yes	No	N/A	Have you practiced how to communicate your needs?
Yes	No	N/A	Have you thought about how you might react in an emergency and how you will cope with any unhelpful reactions? Prepare your support team to help you with these planned strategies.
Yes	No	N/A	Have you prepared emergency information in a way that is easy for you to understand? You may want to break down the information into a step-by-step outline. This will help you remember what to do during a disaster.
Yes	No	N/A	Does your Emergency Health Information (see page 16) explain the best method to help you?

Assistive Device Users

Yes	No	N/A	What will it take to get your wheelchair or other equipment out of the building?
Yes	No	N/A	Have you told your support team how to operate and safely move your equipment if necessary?
Yes	No	N/A	Have you labeled equipment with simple instruction cards on how to operate it (for example, how to “free wheel” or “disengage the gears” of your power wheelchair)? Attach the cards to your equipment. Laminate them for durability.
Yes	No	N/A	• Do you keep a copy of these instructions with you and have you shared copies with your support team?
Yes	No	N/A	Have you thought about your options if you are not able to evacuate with your assistive device?

Physical/Mobility

Yes	No	N/A	Do you know the location of all exits and have you thought about your ability to use them?
Yes	No	N/A	Will you be able to independently evacuate from the site? How long will it take you?
Yes	No	N/A	• Will you need someone to help you walk down stairs quickly?
Yes	No	N/A	• Would it be faster if you used an evacuation device or were carried?
Yes	No	N/A	Do you know where all evacuation devices (used for people who can't go up and down stairs on their own) are stored? Have you practiced using them?
Yes	No	N/A	Can you get in and out of evacuation devices by yourself or do you need help?
Yes	No	N/A	If you absolutely had to, could you bump down the stairs on your buttocks, crawl, etc.? Will you need something to strap on to protect your buttocks, gloves to protect your hands, etc.?
Yes	No	N/A	Do you know where emergency assembly areas and areas of refuge/rescue assistance are located?
Yes	No	N/A	Can you activate a fire alarm?
Yes	No	N/A	Can you give quick instructions about how to safely carry you if needed?
Yes	No	N/A	• Have you included any areas of vulnerability/concern regarding how to remove you safely from your chair?
Yes	No	N/A	Is it realistic for you to ask to be lifted in your chair (how much does it weigh with you in it)?
Yes	No	N/A	Is there a lightweight device you can use if you cannot evacuate with your wheelchair, respirator, or other power device?

Allergies, Multiple Chemical Sensitivities, Respiratory Conditions

Yes	No	N/A	Do you carry supplies with you based on your worst days:
Yes	No	N/A	• Industrial respirator with gas-mist filters?
Yes	No	N/A	• Masks?
Yes	No	N/A	• Gloves?
Yes	No	N/A	• Inhaler?
Yes	No	N/A	• Nicotine gum you can offer to smokers who will want to smoke around you?

Emergency Preparedness: Taking Responsibility for Your Safety

Tips for People with Disabilities and Activity Limitations

Yes	No	N/A	
			Does your Emergency Health Information (see page 16) clearly explain your sensitivities and reactions and the most helpful treatments as well as those that are harmful? You may not be able to describe your needs, so be specific. Other conditions (disorientation, aphasia, panic) may be diagnosed and treated as something other than chemical sensitivity.