Strengthening Disability Inclusion Efforts within Local Health Departments: Successes and Challenges

Public Health Sauk County, Baraboo, Wisconsin (https://www.co.sauk.wi.us/publichealth)

Contributed by Jesse Phalen (jessie.phalen@saukcountywi.gov)

Background

The mission of Public Health Sauk County is to enhance the conditions that support the optimal health and well-being of all people in Sauk County. Sauk County is a rural county in Wisconsin, serving a population of 65,000. We prioritize health equity and believe it is an essential element of all that we do. Here at Public Health Sauk County, we have already implemented some environmental accommodations for participants with disabilities, such as braille room numbers, elevator service, and wide hallways to accommodate walkers and wheelchairs. However, we recognize that we have work to do in strengthening our disability-inclusion efforts. Our goal in applying for this opportunity was that working with NACCHO would increase staff awareness of disability inclusion practices, reveal any ableism in our policies and procedures, sharpen our equity focus, and give us the tools to meet the needs of all participants creatively and proactively.

Project Description

Our action plan was implemented in Sauk County, WI and had three goals. (1) Ensure all Public Health Sauk County staff completed the NACCHO Disability 101 Training. (2) Gain an understanding of the current status of disability inclusion in our local emergency preparedness plans and identify opportunities for future improvement. And (3) recruit and schedule a local person with disabilities to complete an environmental assessment of our department and outreach communication methods with a focus on printed materials. This action plan was led by Public Health Sauk County staff and included partnering with the Sauk County Aging and Disability Resource Center, Local Fire/EMS, and Emergency Management.

Challenges

One challenge was the short timeline for this work, February to July. This made it difficult to coordinate with other agencies. Another obstacle is the ongoing efforts the Wisconsin Department of Health services is going through to revise our PHEP plans, which is expected to be completed in October. During the course of completing the CHII on-site assessment, we realized that some things are out of our control as these fixes would be under the jurisdiction of the local municipality, i.e. missing curb cuts and lack of crosswalk lights or auditory walk signals. We also had a difficult time finding a person to come out and do the site assessment.

Solutions to Challenges

We had hoped to have a resident complete a site assessment, but due to time challenges, this will not occur until August. While we are waiting for the Wisconsin DHS to send updated PHEP plans, we sent our current PHEP plans to the TA team at NACCHO to review. Once we receive the plans from the state, we will edit them as recommended. Regarding the environmental findings beyond our control, we have proposed sending a report of our findings to local municipal leaders, letting them know what we learned from this process.

We did a couple of things to overcome the challenge of finding a participant to do the site assessment. First, we modified the CHII to better suit our needs, taking out sections that weren’t relevant to our services. Additionally, our staff completed multiple physical assessments such as measuring doorways to simplify the task. We also were able to provide (with other funding sources) a $100 gift card for anyone who does the assessment as compensation for their valuable time and input.

Results

This project resulted in all Public Health Staff completing the Disability 101 training, increasing our staff’s knowledge about disability inclusion to improve access to services. This training will also be part of the annual training requirements for all staff. During the process of working through the CHII, we found several things we can easily implement with no cost, for example; propping the door open to our department, adding a “wheelchair only parking” sign to an open area in the waiting room, and swapping out some chairs from another area that have no arms to be more accessible. One individual has agreed to do an onsite assessment in August. We have the capacity and funding to bring in up to five people and will continue our efforts to collaborate with the Sauk County ADRC to recruit people to do this in the near future. In our review of other agencies’ emergency plans, we learned that EMS in our jurisdiction do not have a formal way of tracking residents with disabilities to prioritize care based on needs in the event of an emergency. This seems like a larger undertaking than a local health department can take on alone.
Lessons Learned

We learned that for a project such as this, more time is needed to give the project the attention and time it deserves. We have already seen some areas we know need improving, such as easier entry to restrooms and our own department. Staff indicated that the Disability 101 Training was a good reminder, and with that feedback, we added it to our annual training requirements. We have identified the need for individuals with cognitive and other disabilities to review our outreach materials, and we modified our material pre-testing process to ensure this happens in the future. We believe that once we have used the modified CHII to complete an on-site assessment with a few residents, and we have time to evaluate that tool and how we used it, it could be replicated in other counties or municipalities.

ACKNOWLEDGEMENTS

This publication was supported by funds made available by the Disability and Health Branch, Division of Human Development and Disability, National Center on Birth Defects and Developmental Disabilities at the Centers for Disease Control and Prevention, Cooperative Agreement #5 NU38OT000306-05-00.