Building Monitors should be aware of persons with disabilities in their areas and ensure that all such persons are successfully evacuated during an emergency. Appropriate evacuation procedures should be prearranged between the disabled individuals and the people assigned to assist them. Report immediately any person with disabilities that you were unable to evacuate.

NOTE: Individuals who have an unobservable disability may or may not self-identify before an emergency. Such disabilities may include arthritis, a cardiac condition, chronic back problems, asthma, a learning disability, etc. These persons may need additional help during emergency situations. All persons who feel that they may need special assistance should notify appropriate key departmental persons so that arrangements can be made in advance to meet their needs.

**General Guidelines:**

All exit corridors and stairwells are the gathering assembly points for persons with disabilities. These are the safest areas during an emergency. Persons with disabilities are advised to proceed to them immediately. Emergency Response Personnel are trained to check all exit corridors and exit stairwells first for any stranded persons.

If there is no imminent danger and there are difficulties evacuating the person, place him/her into/or next to the stairwell. Be certain someone stays with the person.

**No one should attempt to use an elevator to evacuate during an emergency-use the stairs instead.**

**Specific Recommendations:**

**Visually Impaired Persons:** Tell the person the nature of the emergency and offer your arm for guidance. This is the preferred method when acting as a “sighted guide”.

As you walk, tell the person where you are and where obstacles are located. When you reach safety, orient the person to the location and ask if further assistance is needed.

**Hearing Impaired Persons:** Campus buildings are equipped with audio-visual alarm systems. If needed, an alternate notification method, such as writing a note, may be used.

**Persons Using Crutches, Canes or Walkers:** In evacuations, these individuals should be treated as if they were injured. Carrying options include using a two-person, lock-arm position or having the individual sit on a sturdy chair (preferably with arms) which is then lifted and carried.

**People Who Use Wheelchairs (Non-ambulatory):** Most non-ambulatory persons will be able to exit safely without assistance if they are on the ground floor. If you are assisting a non-ambulatory person, be aware that some people have minimal ability to move and lifting them may be dangerous to their well being. Some individuals have very little upper trunk and neck strength.

Non-ambulatory persons with respiratory conditions should be immediately removed from area with smoke and/or toxic vapors.

Note: Non-ambulatory persons’ needs and preferences vary. Always consult with the person as to his/her preference regarding:

- Ways of being moved.
- The number of people necessary for assistance. If carrying a person more than three flights, a relay team will be needed.
- Whether to extend or move extremities when lifting because of pain, braces, etc.
- Whether a seat cushion or pad should be brought along.
- Being carried forward or backward on stairs.
- Aftercare should they become separated from their wheelchair.

Remember to check the intended route for obstructions before transporting the individual. Delegate others to bring the wheelchair. When the wheelchair is left behind, remove it from the stairwell and place it so it does not obstruct the egress of others. Reunite the person with their wheelchair when it is safe to do so.

Wheelchairs have many moveable or weak parts, which were not constructed to withstand the stress of lifting (i.e. the seat bar, feet plates, wheels, movable arm rests, etc.) If the chair is battery powered, remove the batteries before moving it. Make sure that the foot rests are locked and that the motor is off. If a seatbelt is available, secure the person in the chair.

**Considerations for People with Disabilities**