Community Action
Guide
VERSION 2.0

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Community Action Guide

VERSION 2.0

COMMUNITY ENGAGEMENT INITIATIVE
FOR DISABILITY ACCESS

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Center on Community Accessibility

The Center on Community Accessibility (CCA) is program of the Oregon Institute on Disability & Development at Oregon Health & Science University (OHSU). The goal of the Center is to promote the health and well-being of people with disabilities through an approach that examines the interactions between individuals and the social and built environments.

An earlier version of the Community Action Guide[1] was developed with the assistance of the Oregon Office on Disability & Health's Community Living Work Group and the Oregon Disabilities Commission (ODC) Local Concerns Task Force. The Local Concerns Task Force was established to develop strategies to increase accessibility in Oregon's rural areas and to inform the ODC about rural concerns and issues through local town hall meetings. The Oregon Office on Disability and Health (OODH), a collaboration between OHSU and the Department of Human Services, Public Health Division, is a program of the CCA. The Center on Community Accessibility would like to thank the members of the OODH Community Living Work Group and the Oregon Disabilities Commission Local Concerns Task Force for their contributions to this document.

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[1]Authors: Drum, C., Goff, T., Horner-Johnson, W., Pobutsky, A., Ritacco, B., Weaver, A

Introduction

"Knowledge which is unable to support action is not genuine."

–Rudolph Virchow, 1879

The concept of community has different meanings. Community may be about a shared place. It may be about people who have common interests or experiences and community may be about people living, working, and playing in that shared place.

The ability to participate in a community happens at many different levels. It happens when a family goes shopping or to the movies. It happens when a person who is sick goes to see his doctor. It happens when a student gets on the city bus to take a class at the community college. It happens when a worker heads off to the office in the morning and home again in the evening, and it happens when a group of concerned citizens attend a neighborhood meeting to voice their concerns.

The ability to participate in their communities contributes to the physical, emotional, and spiritual well-being of the community members. However, among people with disabilities participation in community life is a different experience. People with disabilities have fewer opportunities to participate in their communities. And when they do participate, they report less satisfaction in comparison to people without disabilities (Kinne, Patrick, & Doyle, 2004; US DHHS, 2001; NOD/Harris, 1994,2000).

People with disabilities have less access in several key areas of community life. They may encounter barriers to a variety of public places, such as restaurants, stores, and movie theaters, transportation, employment, education, housing, recreation, and health care. Reduced access results in greater levels of social isolation (NOD/Harris, 2000, 2002, 2004; Diab & Johnston, 2004; Cardinal & Spaziani, 2003; Downs, Wile, Krahn & Turner, 2004).

The Community Action Guide developed by the Center on Community Accessibility (CCA) describes a process to include people with disabilities in community planning. The process is called the Community Engagement Initiative, or CEI. CEI engages representatives of the disability community and members of the community infrastructure to work together to improve access to the community for people with disabilities.

Community Participation - A process that involves community members as active representatives in both the decision-making and policy development processes of their society. Participation promotes action, which may lead to change (CDC, 1997).

Inside this Guide

The guide was designed for use by a variety of different groups. Grassroots organizations, advocates, community leaders, and representatives of state or local agencies may all find effective strategies for improving access for people with disabilities. The Community Action Guide outlines the principles underlying community engagement and strategies for successful engagement. It's a practical, hands-on guide that includes step-by-step descriptions of the community engagement process, checklists for conducting successful events, tools for assessing the access in a given community, examples of how the CEI process has been applied, and a wealth of resources.

Benefits of CEI

Bringing together people from the disability community and community leaders provides opportunities for new relationships and ongoing dialogue. New working relationships can lead to changes that benefit everybody. This action guide offers strategies for working together to strengthen that shared community.

Community Engagement - The process of working collaboratively with groups of people who are affiliated by geographic proximity, special interests, or similar situations with respect to issues affecting their well-being (CDC, 1997).

What is Community Engagement?

Overview

The community engagement process described in this guide—the **Community Engagement Initiative**—is a method to increase accessibility for people with disabilities. People may use CEI to identify strengths and needs in their communities and to plan for action and change to solve issues of local concern. CEI may also serve as a general model that can be adapted to address other social issues important to a community. Individuals from grassroots organizations and leaders in the community may use this model to provide a structure for working together to promote change within their community.

Principles of Community Engagement

The Centers for Disease Control and Prevention (CDC) (1997) define community engagement as the process of working with groups of people related by location, interest, or similar issues that affect their well-being. Community engagement is also called community development and the CDC has offered guiding principles to those involved in the community engagement process.

The CDC explains that before a community engagement effort begins, organizers should do the following:

- Define the purposes or goals of the engagement effort and the populations and/or communities to be engaged.

- Become knowledgeable about the community where the engagement will occur. Learn about the community's economy, political structures, cultural influences, demographic trends, history, and experience with and perception of past engagement efforts.

The CDC identifies the important elements of a successful community engagement. Organizers should:

- Develop community support by building trust, establishing relationships, and gaining commitment to the engagement process.

- Respect the community's right and responsibility to identify both the issues and the strategies for addressing the issues.

The CDC outlines principles to guide a successful community engagement. They include the following:

- A mutual and equal partnership with the community is necessary to create positive change.

- Community engagement in an environment of respect for diversity is more effective.

- Bringing together and using community assets and building capacity are important to sustaining effort.

- The individual or organization engaging the community must be flexible enough to meet the changing needs of the community and be prepared to give the community the power to determine the direction.

- Collaboration between the engaging organization and the community is a long-term commitment.

The Center on Community Accessibility (CCA) incorporated these principles in developing the CEI. They serve as a sound basis to meet the needs of diverse community members and to build healthier communities.

Collaboration – to cooperate or work together to remove the barriers to participation in the community.

The Three Phases of the Community

Engagement Initiative

The community engagement method in this guide consists of three phases and their supporting activities. The phases may take place within a community as separate activities or may be integrated with one another.

The three phases are:

1. **A Town Hall Meeting**
2. **A Community Infrastructure Meeting**
3. **Community Resource Mobilization**

Each of the phases is described in greater detail below:

Phase 1:
Town Hall Meeting
Engage people with disabilities, family members, and advocates to elicit strengths and barriers in community and prioritize issues.

REPORT BACK

INVOLVE COMMUNITY

COMMUNITY ENGAGEMENT INITIATIVE

Phase 3:
Resource Mobilization
Facilitate organizational strategies (e.g. task force, coalition, collaboration); provide technical assistance and support

ENACT CHANGE

Phase 2:
Change Agent Meeting
Bring together representatives of town hall meeting with community infrastructure to discuss facilitators and barriers, identify resources, and foster concrete action to improve community access.

PHASE 1: Town Hall Meetings

The first phase is conducting the town hall meeting. The town hall is made up of people with disabilities, families and friends, advocates and others with an interest in accessibility issues. The purpose of the town hall meeting is to provide people with disabilities, family members and others with an opportunity to:

- Identify the physical and social access barriers that exist within their community

- Identify strengths of the community

- Prioritize access issues to be addressed

Action Steps

The town hall meeting begins with a brief introduction of the purpose of the meeting and a review of the agenda.

Through a facilitated discussion, the participants identify community strengths, needs, and resources on the access issues in key areas of community access. Key areas of community access include:

- Accessing public places

- Transportation

- Employment

- Education

- Housing

- Recreation

- Healthcare

Communities may choose to focus on all areas of access or focus more intensively on one or two key areas. The participants then prioritize the access issues. Careful notes are taken throughout the process. Later, the issues will be organized and presented for discussion during the second phase of CEI – the upcoming community infrastructure meeting.

The town hall meeting is also an opportunity to identify representatives to attend the community infrastructure meeting and to participate in mobilization activities, ensuring the local perspective.

Suggested Strategies for Implementing a Successful Town Hall Meeting

Implementing a Town Hall meeting involves several steps from identification and recruitment of participants to facilitating the discussion. The following list includes key elements involved in planning a Town Hall meeting.

- Carefully plan outreach efforts. Identify agencies and organizations that serve people with disabilities. These may include centers for independent living (CILs), group homes, senior centers, parent groups, assisted living facilities, and disability service providers.

- Recruit participants by disseminating meeting notices to disability organizations or through organizations' list serves.

- In communities where there is no CIL, advertising may work. Place notices with local media; post flyers in locations frequented by people with disabilities; and recruit through agencies that deliver services to people with disabilities.

- Reimbursing participants for transportation costs may aid recruitment.

- Scheduling one town hall meeting on Friday and one on Saturday bridges the gap between those who can attend as part of their jobs and those who can only attend when they are not working. Results from each meeting can be combined.

- Schedule meetings for two hours to balance sufficient time for discussion while avoiding fatigue among participants.

- Provide refreshments.

- Choose meeting locations for physical accessibility, central location, and proximity to public transportation.

- Choose facilitators who are comfortable with disability issues and familiar with the community development model.

- Ask questions to determine specifics of community assets and barriers, such as location, frequency, etc. Maps may be useful for plotting assets and barriers. **(See Table 3.1 pg. 18, Tools Section for example)**

- Always start with identifying community assets.

- Ask probing questions to determine if the community has current or planned activities to address local barriers.

- Facilitators who have knowledge about available resources may help to build the capacity of the participants to address barriers.

- Prioritize the issues. What is most important to the community? What should be addressed first?

- Identify participants who can provide local perspective to serve as representatives in the infrastructure meeting.

PHASE 2:
Community Infrastructure Meeting

The purpose of the community infrastructure meeting is to increase participants' awareness of community participation barriers encountered by people with disabilities. It's also an opportunity for community leaders to confirm the issues or to provide more perspective on them. In developing a shared understanding of the barriers and discussing ways to address them, the community infrastructure is better able to address them.

The community infrastructure meeting is made up of elected officials, business leaders, service providers, planners and others, including invited members from the town hall meeting.

The Three Objectives of the Meeting Are:

1. Describe and discuss the barriers identified during the town hall meeting.

2. Identify possible resources to improve community accessibility.

3. Promote action on identified barriers.

Action Steps

Recruit community leaders from the key areas of community access targeted in the town hall meeting. Invite representatives from the town hall meeting to share local perspective on the community's strengths and barriers. The meeting should follow a standard format with sign-in, introductions, a brief description of the Community Engagement Initiative, review of the agenda, and a slide presentation.

The slide presentation serves to frame the discussion. It includes a disability community profile and strengths and barriers identified in the town hall meeting. An example of a slide presentation begins on page 24.

During the meeting, the discussion is guided toward identifying possible community resources available to resolve the issues prioritized during the town hall meeting. At the end of the meeting, participants are asked to form workgroups to address the issues. Workgroups may join existing networks, if available, or create new alliances, task forces, coalitions, or action committees.

The results of the community infrastructure meeting are summarized and sent to anyone who is interested. The summary should include:

1. Agreement that the barrier exists;

2. Refinement or modification of the barrier, if needed; and

3. Identification of community resources to resolve the issue or an agreement to resolve/solve the issue.

Suggested Strategies for Implementing a Successful Community Infrastructure Meeting:

The following list includes suggestions for planning a community infrastructure meeting:

- Conduct the meeting two to three weeks following the town hall meeting.

- A weekday meeting, which includes a catered working lunch, has proven successful.

- Allocate two and a half hours for the meeting.

- Extend personal invitations to governmental and service change agent representatives and decision makers including mayors, city planners, the local school board, transportation providers, and disability service providers. Participation rates are typically high.

- For successful engagement, it is helpful to invite at least one representative from each of the seven key areas of community access.

- Prominently displaying sponsorship may increase participation.

- Use governmental and service directories and websites to obtain contact information.

- Incorporating extant data on disability prevalence, education, employment, and health status into the slide presentation helps build content. (See page 24.)

- Incorporating photographs and maps into the presentation lends a sense of reality to the issues.

- Physical access barriers are easier to represent visually in the presentation than policy and attitudinal barriers.

- For some community infrastructure members, the meeting is their first exposure to disability issues.

The infrastructure meeting serves as a natural process for confirming, refuting or reframing issues and concerns. For example, in one community, people with disabilities identified the lack of accessible computer workstations as a barrier; a community college representative identified the college's workstation as a resource. The barrier, which was at first thought to be physical, was reframed as a lack of communication about the available resource.

PHASE 3:
Community Resource Mobilization

The purpose of the community resource mobilization process is to bring together networks of community members to:

1. Develop solutions to address the identified barriers

2. Take action to remove or change those barriers.

Action Steps

Different organizational strategies may be used to address the issues identified during the town hall meeting and infrastructure meeting. Examples of organizational strategies that a community may choose include forming alliances, task forces, or linking with existing institutions. (See Table 3.1, page 18.)

Providing technical assistance and support to the emerging groups is important to sustaining the effort.

Suggested Strategies for Successful Resource Mobilization:

We provide these suggestions to mobilize community resources.

- Get commitments on the spot!

- Create a reasonable time frame to complete the overall goal.

- Identify existing resources and help community members connect with them.

- Break the goals into manageable parts.

- Identify a person responsible for each part. This helps sustain momentum.

- Determine where jurisdiction falls for each issue. For example, if lack of curb cuts on Main Street has been identified as a barrier to people with disabilities, understanding who has jurisdiction over the curb cuts, e.g. the city, county, or state, will allow the appropriate agency to be involved.

- Establish new groups or committees within existing organizations to accomplish goals.

- Designate volunteer field coordinators, including representatives of both the town hall and infrastructure meetings, to help sustain momentum and encourage ongoing dialogue.

- Establish new grassroots organizations to accomplish goals.

Sharing information with the community contributes to a sense of individual empowerment and community competency, so identifying ways to keep community members informed throughout the process is valuable.

The strategies suggested - here provide the basis for implementing the CEI process smoothly. Some may find that modifications are helpful, depending upon the particular community. With sufficient planning throughout each phase, organizers will find that the CEI method allows communities to plan for real action and change.

Tools

There are many tools available for use in the community engagement process.

The Center on Community Accessibility uses a variety of tools to both identify and address access barriers for people with disabilities.

The tools include the following:

- Checklist of Practical Strategies for Implementation of the Community Engagement Initiative (covers the town hall meeting and the community infrastructure meeting)

- Facilitators' Guide for the Town Hall Meeting

- Facilitators' Guide for the Community Infrastructure Meeting

- The Geographic Information System (GIS) and its application

- The Community Specific Chart

- Tools for Measuring Access

- Organizational Strategies

- A Sample Slide Presentation

To Organize CEI

The Checklist of Practical Strategies is a handy tool planners may use to organize the phases of the Community Engagement Initiative (CEI). It is organized in chronological order to provide a framework of the tasks leading up to each meeting.

The Facilitators' Guide for the Town Hall Meeting and the Facilitators' Guide for the Community Infrastructure Meeting include general suggestions for ensuring successful meetings and suggestions for guiding the discussions.

Each of the tools is described in greater detail in this section.

Checklist of Practical Strategies for Implementation of Community Engagement

This checklist is designed to use in planning a community engagement effort.

Three Months Prior to Phases 1 and 2 of the Engagement

- ☐ Contact collaborative partners

- ☐ Recruit facilitators for both meetings

- ☐ Set date and time for each event

- ☐ Select and reserve accessible meeting sites close to public transportations; set up contract, if necessary

- ☐ Obtain price quotes on food

- ☐ Identify sign language interpreters, Braille services and providers of assisted listening devices

PHASE 1: Town Hall Meeting

Two Months Prior to the Town Hall Meeting

- ☐ Post flyers announcing event and identifying procedure for requesting accommodations such as alternate formats

- ☐ Publicize meeting through local media and local disability organization listservs

- ☐ Meet with facilitators (orientation)

- ☐ Gather background information from community

One Month Prior to the Town Hall Meeting

- ☐ Send out letters of invitation to participants; include agenda

- ☐ Arrange for note takers

- ☐ Prepare any maps and visuals that will be used

- ☐ Order food for event

- ☐ Arrange services of sign language interpreters, if needed

- ☐ Place orders for Braille or assisted listening devices, if needed

□ Provide for other accommodations, if needed

□ Develop the agenda

One Week Prior to the Town Hall Meeting

□ Call participants as a reminder

□ Prepare registration table materials and agenda

□ Meet with facilitators to prepare for meeting

Meeting Day

□ Set up registration table with sign-in sheet, pens, name tags

□ Provide laptop computers for note takers (2), or tablets and pens

□ Arrange room for meeting and lunch

□ Place signs to direct participants to meeting room

PHASE 2: Community Infrastructure Meeting

Two Months Prior to the Community Infrastructure Meeting

□ Invite representatives of local and county government, service providers and service organizations; utilize listservs, email and personal phone calls, include agenda for meeting

□ Use community level indicator matrix to identify participants

□ Send out flyers

□ Take photos of areas of need identified in the Town Hall meeting

□ Summarize information from Town Hall meeting

One Month Prior to the Community Infrastructure Meeting

□ Develop slide presentation for meeting using summary and photos

□ Meet with facilitators to go over summaries

One Week Prior to the Community Infrastructure Meeting

□ Confirm attendance with phone calls

☐ Order lunch for meeting

☐ Arrange for note takers

☐ Meet with facilitators to prepare for meeting

Meeting Day

☐ Set up registration table with sign-in sheet, pens, name tags

☐ Laptop computer for note takers (2), or tablets and pens

☐ Arrange room for meeting and lunch

☐ Place signs to direct participants to meeting room

FACILITATOR'S GUIDE: For Implementation of Phase 1- The Town Hall Meeting

General Suggestions to Ensure a Successful Town Hall Meeting:

☐ Before the event, participate in development of the agenda and questions needed to guide the discussion. Use the opportunity to determine ground rules, questions to be used to identify very specific barriers, and how barriers will be prioritized, e.g. simple majority vs. using stickers to identify barriers important to each individual.

☐ During the event, encourage and maintain a supportive environment for participation by community members who may not be used to speaking in public settings. Look around the room and leave enough time for people who may be hesitant to speak up before moving on. Use reflective listening to help draw people out and to clarify the point they are trying to make if it seems unclear.

☐ Observe the representation or over-representation of people with particular types of disabilities, and encourage participation from individuals experiencing less-represented disabilities.

☐ Keep the discussion focused on local issues. Be prepared for people to bring up broader state and federal issues, and try to localize these to a level where the project can have more of an impact. For example, Medicaid reform is often discussed as a problem for people with disabilities. The facilitators could shift this discussion to inquiries about willingness of local physicians to accept Medicaid/reimbursement rate.

☐ If the discussion gets off topic, redirect to the topic at hand, or ask the person to hold onto that idea if it pertains to a later portion of the agenda.

☐ Be mindful of the time constraints and politely remind people of the need to move on when people get into too much detail or length with stories, without diminishing the validity of the person's contribution. You might say, "You seem to be really interested in [particular issue being discussed]. Would you be willing to stick around a few minutes after the meeting to discuss this further? Let's get some other input on [current issue] now."

☐ Facilitators who are skilled at helping participants classify barriers as structural, attitudinal or policy barriers contribute to the understanding of the complexity of some barriers. An attitudinal barrier may be more difficult to address than a structural barrier, such as lack of a curb ramp from the parking lot to the sidewalk.

Suggestions for Guiding the Discussion:

☐ Introduce the facilitators, participants and purpose of the meeting.

☐ Communicate logistics including location of the restrooms, scheduled breaks, lunch or refreshments or other pertinent information.

☐ Introduce the ground rules for the discussion.

☐ Frame the discussion. Talk about what participants at other town hall meetings have identified, share statistics, and discuss broad issues. Post and describe the key areas of community life, including transportation, education, employment, housing, accessing public places, recreation, and/or health care.

☐ Guide the discussion to identify the best things about the community. A substantive list of positives from the community may be the tone for a positive and constructive meeting. Here are examples of questions that may be used to get information about the community in general or in relation to a specific domain, the health care access domain.

- What do you like about your community?

- What works in your community?

- What are the best things about access in your community?

☐ Guide the discussion to identify specific barriers in each of the community access domains. Here are some examples of probing questions from the health care domain:

- Do you have any difficulties getting into and around your doctor's office or other health care facilities?

- Do you have any difficulties with accessibility of examination tables or other health care equipment?

- Have you had any problems with policies or rules of your health care

provider? Is it hard to obtain the reasonable accommodations you need to access health care services? Give examples.

- Have you found that the level of accessibility varies in different types of health care services you access: routine, chronic, or emergency care?

☐ Guide the prioritization of the barriers.

☐ Community engagement is most effective when facilitators are able to shift the focus from state or national concerns to issues of local concern.

☐ There may be over-representation of one or more disabling conditions. Facilitators who encourage participation from people experiencing less-represented disabilities may obtain valuable information about a community's strengths and barriers.

☐ Facilitators who encourage participation by community members not used to speaking in public settings increase the effectiveness of the community engagement effort.

☐ Facilitators who can promote a sense of empowerment are effective in engaging participants.

☐ Summarize the meeting: "This is what you told us." Identify solutions to the barriers. Here are some examples from the health care domain:

- What ideas do you have for ways to work with health care providers?

- What responsibility does the patient have?

- What responsibility does the provider have?

☐ Share closing remarks, including next steps, announcements, or other opportunities to share information or get involved.

FACILITATOR'S GUIDE: For Implementation of Phase 2- Community Infrastructure Meeting

General Suggestions for a Successful Community Infrastructure Meeting:

Framing the discussion around a PowerPoint, which has been prepared ahead of time, provides structure to the meeting. For more information about the content of the PowerPoint, see PowerPoint tool in this section.

Suggestions for Guiding the Discussion:

☐ Introduce facilitators, participants, representatives of the town hall meeting, purpose of meeting, and hopes for accomplishments.

☐ Communicate logistics including location of restrooms, scheduled breaks, availability of refreshments and other pertinent information.

☐ Present demographic information.

☐ Present the best aspects of the community as identified by the participants of the town hall meeting.

☐ Present identified barriers in each of the community access domains. Provide opportunity for the community infrastructure to provide more information on the existence of barriers. The use of pictures and GIS maps in the PowerPoint presentation contribute to an understanding of the issues.

☐ Ask probing questions to get more information about perceived barriers. **Examples include:**

- Are you currently addressing the identified barrier? Are there resources already in place? If yes, who is the contact?

- Are there plans to address the barrier? Has it been budgeted?

- If there are no plans to address the barrier, why not?

- Are there opportunities to form or join work groups or committees? Where does a citizen bring concerns regarding this issue? How does a citizen get involved in the process of change? See organizational strategies tool.

☐ Summarize the meeting.

☐ Discuss next steps.

Organizational Strategies

Over time, several organizational strategies have emerged to address the issues identified during the Town Hall meeting. Table 3.1 summarizes these strategies.

Alliances tend to be informal groups working at grassroots levels. More formalized arrangements, on the other hand, may take advantage of existing institutional structures to improve services. A great deal of variance in each of these types of structures is possible. Groups may shift from one strategy to another as they grow and become more established, or as tasks are completed and need change.

Table 3.1 provides a summary of different combinations of collaborations that vary in duration, number of participants, types of meeting, frequency of contact, and level of assistance needed from the outside agency.

Two principles sustain the momentum in removing barriers:

1. Recognizing the emerging organizational structures

2. Providing support to them.

Table 3.1. - Organizational Strategies for Resource Mobilization and Relationship to the Center on Community Accessibility (CCA) Level of Participation

ORGANIZATIONAL STRUCTURE	DURATION	PARTICIPANTS	MEETING TYPE	CONTACT FREQUENCY	LEVEL OF CCA PARTICIPATION
Alliances	Short-term	Small Numbers	Ad-hoc	Informal contact (i.e., phone, e-mail); frequent meetings	High
Task Forces, Coalitions, Action Committee	Intermediate	A network of a variety of groups and people	Semi-Formal	Regularly scheduled meetings, loose hierarchy	Intermediate
Existing Institutional Arrangements	Long-term	Extensive Network	Formal	Regularly scheduled meetings, formal hierarchy	Low

Source: Drum, C., Goff, T., Horner-Johnson, W., Pobutsky, A., Ritacco, B., Weaver, A. (2002). Community Action Guide: A process for improved community accessibility. Portland, OR: Center on Community Accessibility, Oregon Institute on Disability & Development, Oregon Health & Science University.

Geographic Information Systems

A Geographic Information System, or GIS, is a system of computer hardware and software that can store, analyze and present information tied to a spatial location. For example, using GIS both demographic and geographic data can be mapped, overlaid, queried, and analyzed.

Researchers have recommended GIS as a way to provide contextualization (Luke, 2005). Contextualization is a broad picture of the community. The use of GIS mapping provides a framework for looking at issues that are of significance to a community.

The Center on Community Accessibility (CCA) incorporated GIS maps into presentations for both the town hall meetings and community infrastructure meetings. Examples of how CCA used the GIS maps are included in the slide presentation on page 25. Community strengths and barriers were mapped and layered with other geographical features, such as the location of health care clinics or public transportation routes and with demographic information, such as percentage of people with disabilities. When the strengths and barriers are mapped, the relationship between the data and strengths and barriers may be more easily visualized and more fully understood.

Maps may be customized for an individual community or for a specific issue within a community. GIS maps provide the greater context in which to view strengths and barriers.

Other information that may be relevant to a specific community and may be mapped include

- U.S. Census data, such as socioeconomic statistics

- Housing data, such as public housing units

- Education data, such as student enrollment

- Public assistance data, such as Medicaid statistics

- Crime statistics, such as reported crimes

- Health services, such as hospital locations or immunization rates

- Economic information, such as employment and unemployment rates
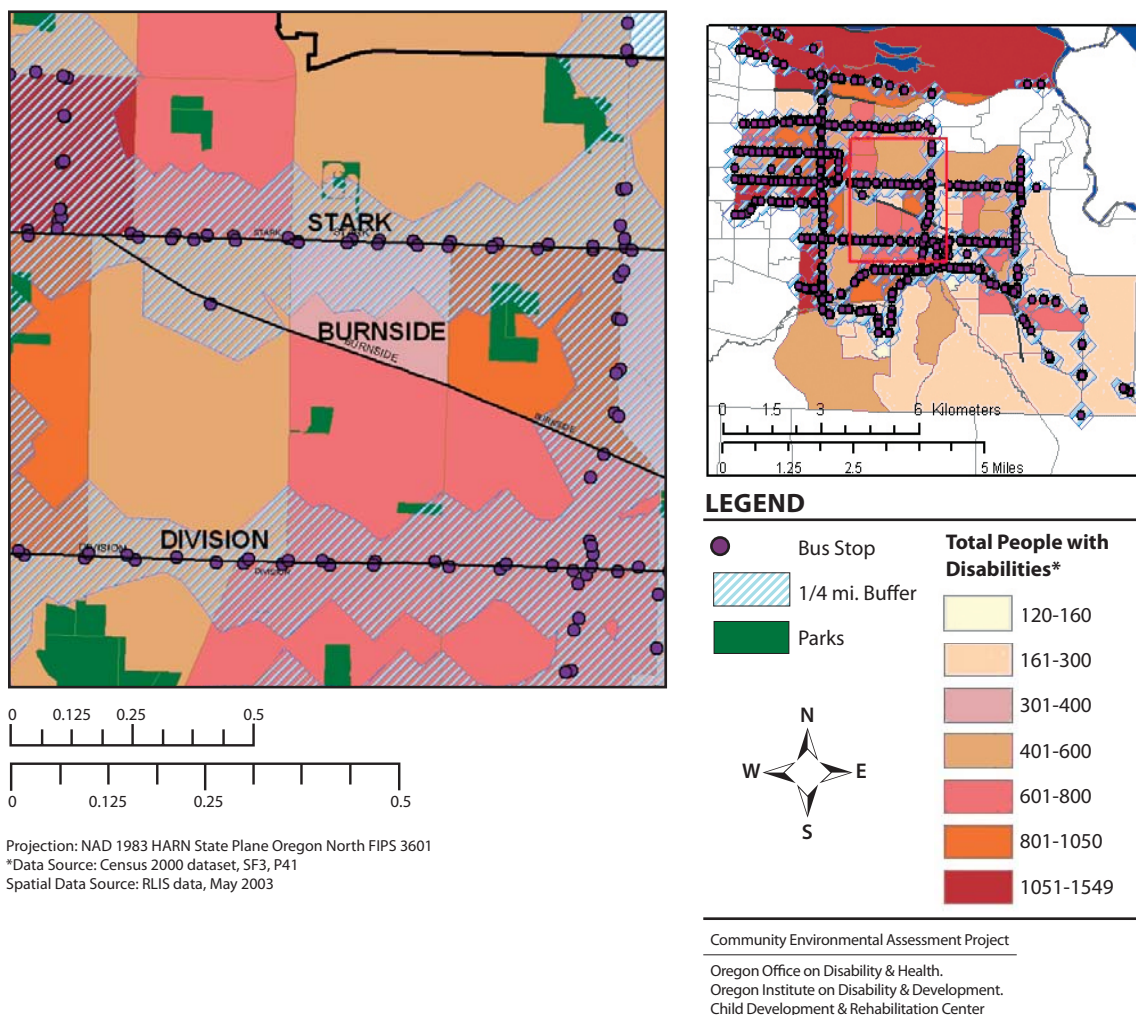
Usefulness of GIS

The Geographic Information System is valuable tool that integrates technology and data. It's especially useful for:

- Incorporating data from a variety of sources

- Generating custom maps that display only the attributes wanted

- Changing maps as new questions or patterns emerge

- Mapping, modeling, querying, and analyzing large quantities of data all held together within a single database

Not all members of the community will have the same experience in mapping community strengths and barriers, so for some audiences, this may not be an effective tool.

For others, especially those from the community infrastructure, fully understanding the strengths and barriers of a community in relation to knowledge about the community as

Buffer of Quarter Mile From Bus Stops

Projection: NAD 1983 HARN State Plane Oregon North FIPS 3601
*Data Source: Census 2000 dataset, SF3, P41
Spatial Data Source: RLIS data, May 2003

LEGEND

● Bus Stop

▨ 1/4 mi. Buffer

■ Parks

Total People with Disabilities*

	120-160
	161-300
	301-400
	401-600
	601-800
	801-1050
	1051-1549

Community Environmental Assessment Project

Oregon Office on Disability & Health.
Oregon Institute on Disability & Development.
Child Development & Rehabilitation Center

a whole may play a big role in changing or removing barriers.
Used in this way, GIS may be a very valuable tool.

An example of a GIS map that uses three layers of data:

    a. The number of people with disabilities, represented by shades of brown.

    b. The location of bus stops for the mass transit lines, represented by blue dots.

    c. The quarter mile buffer zone represented by diagonal blue lines.

This GIS map allows community planners to visualize the current location of mass transit routes and stops in relation to the concentration of people with disabilities in the community.

Community Specific Chart

The Community Specific Chart is an organizational tool for community engagement planners. The chart organizes the strengths and barriers of a community identified by the participants of a town hall meeting. It also provides space to record the response of the participants of the infrastructure meeting to each specific barrier.

The chart may be used by the planners to frame the discussions in both the town hall and infrastructure meetings. It may also be used to organize and synthesize information from the town hall meeting and to develop the slide presentation for the infrastructure meeting.

Table 3.2 is a generic community specific chart. The names of people, places and communities have been removed and information from several locations has been used to create a description of Anytown, Oregon. The left hand column lists the key areas of community life discussed in Section 1 of the Community Action Guide.

The second column provides the identified strengths—the services and features of the community that have been identified by people with disabilities as accessible or usable.

The third column provides a list of the barriers encountered by those with disabilities. For the purposes of a community infrastructure meeting, these would include specific identifiers and, perhaps, be located on a map.

The final column on the right has additional information usually gained from the community infrastructure meeting. It may include city plans for improvement, resources, contact names, or other information useful for planning meetings.

Table 3.2.	Community-Specific Chart: Strengths and Barriers		
DATE: November 5, 2005	**PLACE:** City Hall, Room B Anytown, Oregon	**COMMUNITY INFRASTRUCTURE PARTICIPANTS:** Names	
Environment	**Community Strengths**	**Barriers**	**Supplemental Information**
Public Places	The library is very accessible. Sidewalks are accessible in the downtown area.	Most stores in the historic area of town have a small step at the threshold and are inaccessible to people in wheelchairs.	Sidewalk improvements, including curb cuts, are planned for the south side of town next year.
Transportation	Call-a-Ride is a good service for people with disabilities. The east/west bus routes are good.	Signs with Braille are needed at bus stops. There are too few benches at bus stops. The bus driver doesn't call out stops for people with visual impairments	Call-A-Ride Accessibility Committee meets the first Monday of the month at 7pm at City Hall, Room A. The public is invited to attend and provide input.
Employment	The local Independent Living Center has a benefits planner to assist people with disabilities in making employment decisions which won't hurt their benefits.	There are fewer employment opportunities in Anytown for people with disabilities. The fixed bus route doesn't serve the outskirts of the city where the biggest employer is located.	There is a One Stop Career Center at the Community College in town. Hours are Monday through Friday from 8am to 5pm. They partner with employers and Vocational Rehabilitation.
Education	Anytown School District has a good transition program in place for students aged 18-21.	Classes at the Community College are not affordable to many people with disabilities.	n/a
Housing	The ramp at the apartments on Eight Avenue is very accessible.	The landlord at the Generic Apartments won't modify the "no animals" policy to allow a service animal. Housing is not affordable. There is a long waiting list for HUD Section 8 housing.	City Administrators have a town hall meeting planned for next summer. Affordable, accessible housing is the topic. The local newspaper will advertise the date and location of the meeting at the end of May. More information may be obtained by calling City Hall.
Recreation	Some parks have good accessible trails. The Acme Fitness Center is accessible and has supportive staff.	There are not many accessible recreation activities listed on the community bulletin board. There is no lift at the neighborhood pool.	n/a
Health Care	The Health Care Facility on First Street has a height adjustable exam table.	The door at the Medical Clinic on Second Avenue is too heavy for some people to open. Some doctors don't provide sign language interpreters for medical appointments.	n/a
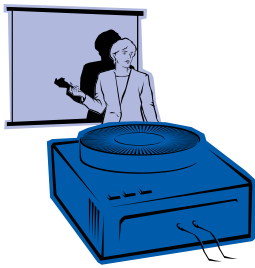
Use of the Slide Presentation

A slide presentation is a valuable tool for use during the community infrastructure meeting. It can provide context on community issues and presents the information synthesized from the town hall meeting in a concise and organized manner. It also serves to focus the discussion around identified strengths and barriers in a specific community.

The presentation may include disability information specific to the community, including the prevalence of disability in the community, the education and employment rates for members of the community with disabilities, and information on health status.

The use of GIS maps within the slide presentation allows people in the position to initiate change to more fully understand the relationship of community strengths and barriers to community demographics, geography, and location of services.

The presentation may include direct quotes, which capture the core of the strengths or barriers, or the strengths and barriers may be summarized in bullet points under the key areas of community access. Issues may also be clarified by including photos of the barriers and GIS maps that link the barrier to a spatial location and image.

The slide presentation - should capture the core of a community's strengths and barriers.

Sample Side Presentation

Slide Presentation

Community Infrastructure Meeting

Key Areas of Community Access

- Public places
- Transportation
- Employment
- Education
- Housing
- Recreation
- Healthcare

Extant Data

Disability Prevalence *

- About 30.5% of the non-institutionalized U.S. population have a disability.
- About 30.0% of the non-institutionalized Oregon population have a disability.
- About 30.6% of the non-institutionalized population of Multnomah County have a disability.
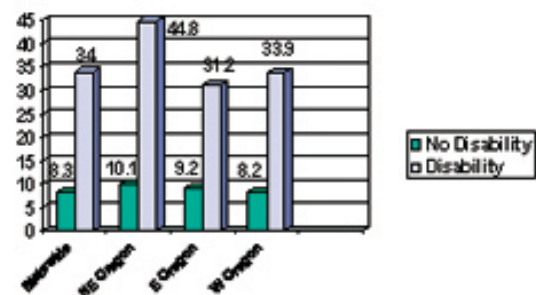
* 2000 US Census data, ages 16 – 65.

Lower Income Oregonians
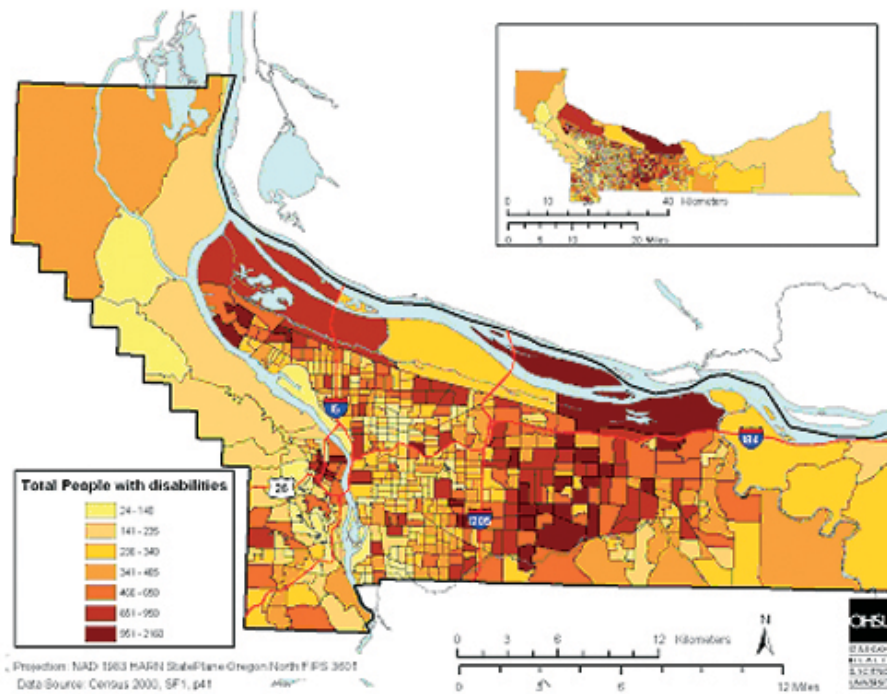Percent With Income <$20K/Year
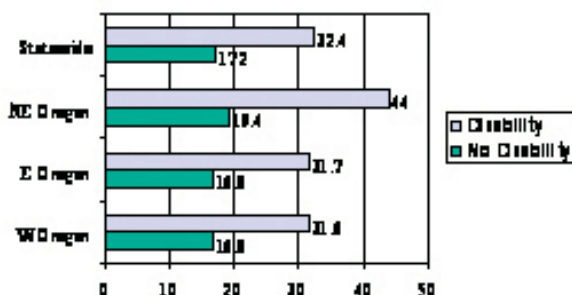
Health Status
Percent of Oregonians Who Report That Their Health Is Fair or Poor
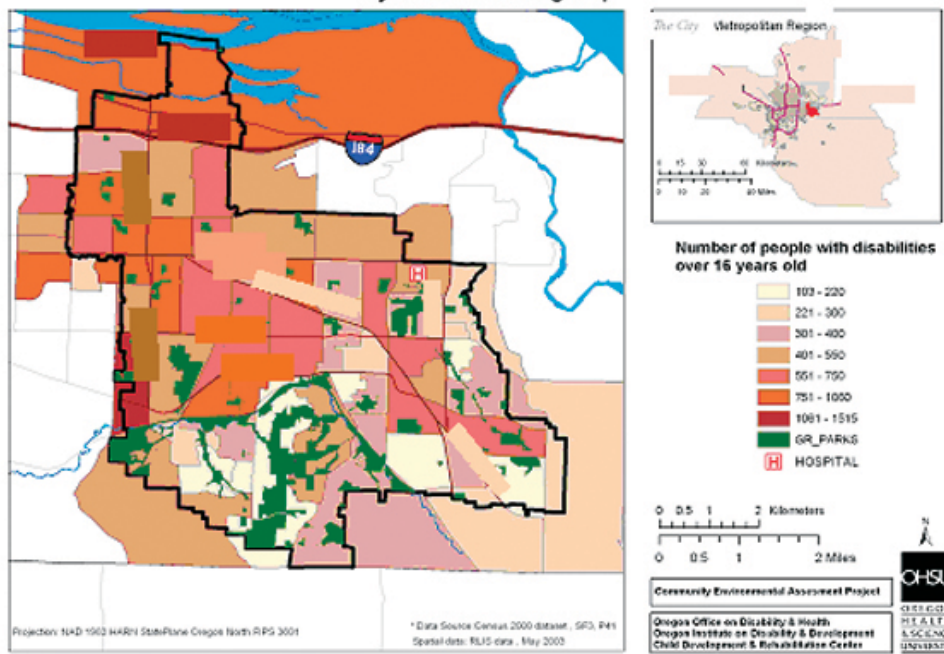
These slides are enlarged to show detail

Total Number of People with Disabilities in *the County*

PEOPLE WITH DISABILITIES OVER 16 YEARS OLD IN *The City*
By census block group

Sample Side Presentation

Community Assets
Identified by Town
Hall Participants

Best Things About *The City*

Recreational activities are good in the City.

The City Park is good.

East County ILR and other services are strong and helpful.

Aging and Disability Services, YMCA and other health facilities are good.

Health facilities are accessible.

Sidewalks are accessible.

Public Places

◆ "It would be nice to have more Braille and large print menus in restaurants."

◆ "When restaurant staff have to read the menu to me, they don't read it from top to bottom. They skip around, making it hard for me to know what is on the menu."

Community Barriers
identified by Town
Hall Participants

City transit on *NE Boulevard*
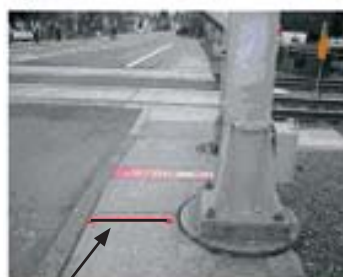
Sidewalk Narrows

Second Curb

NOTE: This is an example of how GIS can be used during a Community Infrastructure meeting to demonstrate the locations of identified assets and barriers. The green dots on the map correspond to photos taken in the community.

Physical Barrier

No Curb Cut   Sidewalk Narrows

Housing

- For people with a low income, affordability is a big issue.
- There is about a two to three year waiting list for HUD housing.
- A participant suggested that even though the wait is long, people should get on the wait list.

Transportation

- East/West bus routes are more developed and offer good service. North/South bus routes are less developed and limit travel.
- Once a rider gets out to *The Avenue* there are few bus connections.
- "Bus routes linking *The Community College* are good."

Employment

- The job market is the problem. "Unemployment is hard for everyone, especially for people with disabilities."
- "There are less employment opportunities in the community area for the disabled population."
- Some participants thought there were more job opportunities in *The City* and the west side area than in community.

Education

- I have had some difficulties accessing the restrooms near my classes."
- "Many accessibility issues in public school have been going on for last ten years."
- The community has a transition program for high school students with disabilities ages 18 – 21.

Recreation

- A dance program is available from 7 – 9 pm at *The Park and Recreation Dept.* The dances are the first Friday of every month and cost $3.50.
- An exercise facility is scheduled to open at *Community Facility.* The facility will be staffed by a professional trainer.
- *Outdoor Program* can provide recreation resources for people with disabilities.
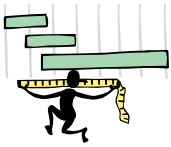
Additional Tools Measure Access

A variety of tools have been developed to measure the participation of individuals with disabilities in the community. Four of these tools are the Community Participation and Perceived Receptivity Survey (CPPRS), the Community Health Environment Checklist (CHEC), the Outpatient Healthcare Usability Profile (OHCUP), and the Accessible Parking Checklist. Each is briefly described below.

Community Participation and Perceived Receptivity Survey

The CPPRS (Bricout & Gray, 2006) is a survey designed to answer two questions from the perspective of people with disabilities: Is the community accessible? Is it welcoming? The survey is a valid and reliable measure of participation levels in the community and provides additional information on the perception of individuals with mobility impairments regarding how they have been treated at various locations within the community. The tool measures community accessibility on a personal level.

The Community Health Environment Checklist

The CHEC measures aspects of community accessibility from an environmental perspective. The tool includes items that evaluate the receptivity of the community environment to persons with mobility impairments and assesses the environmental barriers that affect community participation. The CHEC is designed to be both brief and simple to use. It has 65 items that can be administered in about ten minutes.

The Outpatient Healthcare Usability Profile

The OHCUP (Drum, Berardinelli, & Davis, 2007) was developed at the Rehabilitation & Research Training Center on Health and Wellness. The tool is designed to measure the usability of healthcare facilities for each of three groups of persons: those with mobility, sensory, and cognitive disabilities. Usability means that a person with a disability could use a facility even though that facility doesn't meet all the technical requirements of accessibility under the ADA.

Accessible Parking

The Accessible Parking Checklist was developed by the Center on Community Accessibility and is based on the requirements of both the Americans with Disabilities Act and Oregon Code. It provides an example of a tool that may be used to measure access in a specific area. It is also an example of how a tool might be developed to meet a specific community need. The Accessible Parking Checklist has had limited field-testing. Organizers of community engagement efforts to increase accessibility for people with disabilities may also find or develop other tools to organize efforts, identify barriers, or measure access. They may modify existing tools to meet a specific purpose, and ultimately, they may find the tools that best suit their needs for a given community.

Experiences Applying CEI In Oregon

Since 1999, we have implemented the Community Engagement Initiative (CEI) in eight communities in Oregon:

- Beaverton
- Bend
- Cornelius
- Eugene
- Gresham
- Klamath Falls
- Ontario-La Grande
- Salem
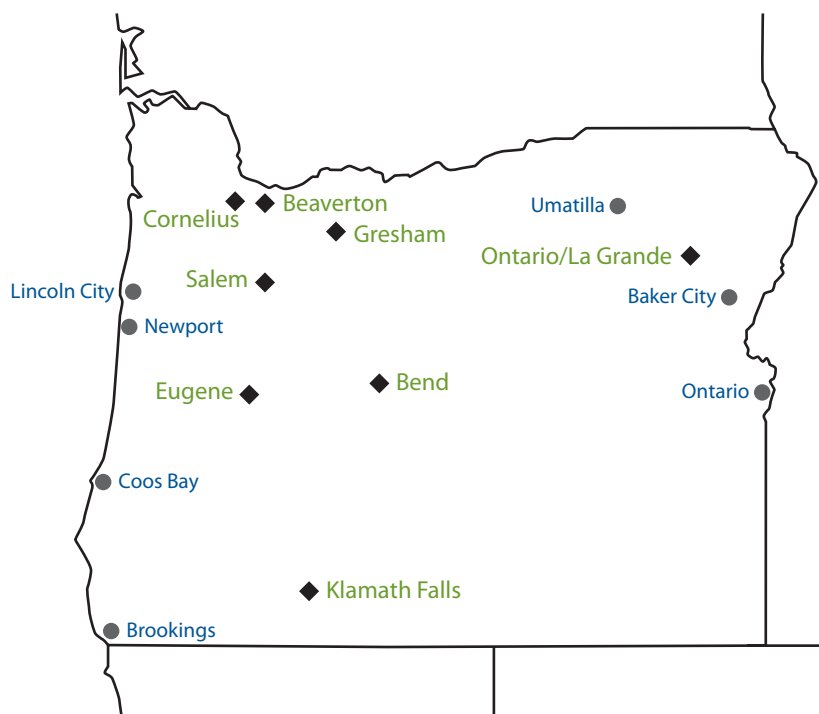
Of these communities, two were rural settings and five were urban. CEI was implemented twice in the city of Gresham to see if repeating the process in one city would result in even greater access. We tried another variation, as well. A town hall meeting was conducted in Ontario and followed by an infrastructure meeting in La Grande. This allowed the Center on Community Accessibility (CCA) to look at the effects of the process over a greater rural area. More recently, we assisted another organization in implementing CEI in Cornelius, Oregon.

We also participated in a similar community development process conducted by the Oregon Disabilities Commission (ODC) prior to our developing the CEI. We assisted the ODC in conducting community engagement with the communities of Baker City, Brookings, Coos Bay, Newport, Lincoln City, Ontario, and Umatilla, Oregon.

Community Engagement Findings

What did we find? The Community Engagement Initiative has proven to be effective in identifying community barriers for people with disabilities. Our findings are presented in Table 4.1, which shows the number of barriers in each area of access that people with disabilities identified in their communities.

Overall, the most barriers were identified in the areas of healthcare, housing, transportation, and public places.

The data showed that each community is unique, and for some communities, one area of access may present more barriers than others. By identifying the issues of local concern, the Center on Community Accessibility ensured that the engagement was relevant to each community.

Barriers – physical, attitudinal, or policy restraints that prevent an individual from receiving the goods or services desired.

Table 4.1. - Number of Barriers Identified in Each Key Area of Access Across Communities							
	HOUSING	**TRANSPORTATION**	**EDUCATION**	**EMPLOYMENT**	**PUBLIC PLACES**	**RECREATION**	**HEALTHCARE**
Beaverton	4	1	1	3	3	2	4
Bend	7	2	4	4	2	5	5
Eugene	3	5	3	4	7	0	3
Gresham	6	3	4	2	8	3	2
Klamath Falls	6	5	4	3	5	0	6
Ontario/ La Grande	1	9	8	2	2	2	9
AVERAGE	4.5	4.2	4	3	4.5	2	4.8

Lesson Learned

The Center on Community Accessibility found that CEI varied from community to community. Population size, local economy, education, and income levels were some of the factors that contributed to the differences. Other factors contributed as well. Some of these included the city administration's view of supporting services, personal communication styles, the local history of collaboration, and the influence of disability advocates in the community.

Other important lessons learned from the experiences include:

- Communities vary in their stages of readiness for change. Some communities are very ready to change, and others are not. For some communities including people with disabilities in community development is a change.

- Disability advocates vary in how united and empowered they are.

- From community to community and individual to individual, infrastructure leaders vary in their levels of awareness regarding disability issues and how amenable they are to including people with disabilities in the community development process.

- Increasing the participation of people with disabilities in city planning develops over time.

- CEI may foster greater networking among people with disabilities.

- Adequate resources are needed to sustain momentum.

Rappaport (1981) describes a movement in community from a focus on deficits to a focus on rights and empowerment. CEI is most effective when disability advocates are cohesive and empowered, when infrastructure leaders are aware and engaged, and when the two groups are engaged in a mutually respectful dialogue on an ongoing basis.

The success of the CEI process lies in its ability to empower communities and individuals to effect change

An Alternative Approach to CEI

The Center on Community Accessibility (CCA) explored an alternate strategy for improving access for people with disabilities. Instead of offering a community development process, CCA decided to offer grants to communities for access projects.

The Planning Process

Extensive planning and research went into developing a request for proposals (RFP) process and application. Through telephone and Internet research, CCA identified the answers to these questions:

- For which organizations or agencies would the grant be appropriate?

- For whom would the $10,000 award be significant enough to warrant the investment of the time it would take to apply?

- Who was the contact person within each organization with the decision-making power to respond?

CCA found that an organization or agency for which the RFP was appropriate fell into one of two categories—either a grassroots agency that serves people with disabilities or a state, county, or local governmental agency. Databases were developed for each of the two categories, and where possible, contact names or key staff positions were identified.

Grassroots organizations were identified by using databases created from conference and workshop lists, newsletter lists, and Internet searches for local agencies of national organizations.

CCA targeted government agencies and departments from cities within Oregon with a population of less than 4,000. However, through various website postings, the application was made available to all state, county, and local agencies.

Designing the Application

Design of the grant application was given great consideration. It was designed to be easy to read and easy to complete. The RFP was made up of three sections— the application itself, an application guide, which provided further guidance in

responding to the questions, and a sample of a completed application to serve as a model for applicants. During the design phase, CCA determined that customizing the application for each group—creating one for the grassroots organizations and one for the government agencies—would provide clarity. Thus, two versions of the RFP were developed, allowing CCA to provide relevant examples in the sample application section (Appendix B and C). A cover sheet included the purpose of the RFP, submission guidelines, contact information for technical assistance, and contractual language.

Items in the application were crafted to incorporate the key elements of the Community Engagement Initiative—obtaining input from people with disabilities, bringing together representatives of the disability community and community infrastructure to foster action, and mobilizing resources to improve accessibility.

The RFP encouraged organizations to identify barriers to accessibility across the keys areas of community access, including Public places, transportation, employment, education, housing, recreation, healthcare, government programs and service, and technology.

It elicited proposals for solutions to the barriers identified, guiding respondents through the community engagement steps and creating a six-month timeframe for completion of the work.

The RFP was posted on state agency and association websites (State Department of Education, League of Oregon Cities, and Councils of Government), distributed through listservs, and mailed to approximately 800 disability organizations and state and local government entities.

A team reviewed the applications for clarity, faithfulness to the CEI principles, and simplicity. The evaluation team consisted of project members and researchers familiar with barriers to accessibility in the community. A review form was created allocating points for each question. Each member of the team evaluated the applications for consistency using the review form.

Please refer to Section 8, Appendix B and C for sample RFPs and applications.

Summary of Proposals

In response to the request for proposals, the CCA received 53 applications. Grassroots organizations serving people with disabilities submitted 23 applications, and state, county, and city government agencies or departments submitted 30 applications. Organizations across the state identified physical, attitudinal, and policy barriers across the key areas of community access.

Proposals from Grassroots Organizations

Applicants from the grassroots organizations identified barriers in the following access areas: public places, transportation, employment, education, housing, recreation, healthcare, technology, funding, faith-based organizations, and government. Both

physical and attitudinal barriers were identified, and proposals included the development of educational materials and training for various entities, the purchase of equipment or technology to increase access, and removal of physical barriers in existing facilities to increase accessibility.

Proposals from State, County, & City Agencies or Departments

Applicants from agencies such as state, county, and city agencies and departments identified physical, attitudinal, and policy barriers in the following areas of access: government programs and services, parks and recreation, public places, healthcare, employment, education, and technology.

While many agencies proposed the removal of physical barriers to existing facilities, others proposed the provision of training, the development of educational materials to increase accessibility, the purchase of equipment to increase access, and the development of a specialized loan fund to benefit people with disabilities.

Funded Projects

Four projects from the 53 applications were selected for funding - two from grassroots organizations and two from government organizations. Projects were selected to reflect the areas of community access identified and prioritized in the applications themselves— access to recreational and employment opportunities, and access to government programs and services. The four funded projects are described below.

Grassroots Project: Increasing Access to Temporary Events

Central Oregon Resources for Independent Living (CORIL), an independent living center located in central Oregon, proposed increasing accessibility of regional temporary events for people with disabilities. Representatives from CORIL sponsored meetings with organizations serving people with disabilities, and individuals from those organizations identified physical, attitudinal, and policy barriers to participation in temporary events.

Using the information gathered at these meetings, representatives of CORIL developed a professional presentation and accompanying educational and resource materials for event planners in central Oregon. The materials included a list of accessibility talking points and provided event planners with areas of consideration in planning accessible events. The information was well received. In evaluating the presentation, 100 percent of the participants agreed or strongly agreed that they planned to use the knowledge gained during the presentation to increase the accessibility of their events.

Teams of people with disabilities attended various temporary events in 2005 throughout the central Oregon area. Using the materials developed by CORIL, they evaluated access to the events.

Outcomes

Within the six-month time frame, several outcomes were documented by the project:

- A process for disseminating accessibility information through the city public events permit office was established.

- A local home improvement retailer began to carry rubber cord bridges, which events organizers can purchase to increase accessibility for people with mobility disabilities.

- A newly formed coalition adopted the promotion of temporary event accessibility and will disseminate accessibility information annually.

- CORIL established an assistive listening device lending library from which event planners may borrow to increase access for people who are hard of hearing at venues throughout the area.

- At the conclusion of the project, a newspaper article in the local paper touted the project, praising accessibility changes at temporary events.

The teams of people with disabilities reported accessibility improvements at several events. They reported more accessible parking than had been provided in years past; more accessible restrooms were provided than in prior years; the accessible restrooms were placed in locations that were more accessible; and policy changes allowing vendors with disabilities to part near their vendor booths were implemented.

Grass Roots Project: Increasing Access to Parks

Independent Living Resources (ILR) in Portland proposed a project to increase the accessibility of outdoor recreation activities for people with disabilities by collaborating with representatives from city, county, state, and federal parks and recreational agencies.

With input gathered from people with disabilities through an online/mail-in survey and technical assistance from the Northwest ADA & IT Center and the U.S. Access Board, collaborators developed and field tested a checklist of recreation accessibility guidelines that outdoor recreational area managers could use to assess their sites.

After the completion of subsequent development phases, the intent was to later provide the results of the accessibility assessments to the public so that people with disabilities can make informed decisions about visiting recreational areas.

Outcomes

Outcomes of the project included the following:

- New partnerships with city, county, state, and federal agencies were formed.

- Two individuals were trained and one was certified to assess outdoor trails for accessibility.

- A local city park was evaluated for the accessibility of trails. The trail manager committed to increasing access in future trail improvement projects.

- Project evaluation indicates that 75% of project participants have used the knowledge gained to make accessibility changes.

- Project evaluation indicated that 100% of the participants intend to make changes in accessibility.

The project continues to thrive beyond the timeframe of the cooperative agreement with CCA. Phase two is currently under way.

County Project: Increasing Access to Employment Opportunities

Community Solutions for Clackamas County, an organization that provides employment services for individuals who are managing mental health issues, identified attitudinal and policy barriers to the hiring of people managing mental health issues and proposed a project to reduce those barriers among employers throughout the county.

With input from individuals in the program, the National Alliance for the Mentally Ill, the Oregon Department of Vocational Rehabilitation Services, and the county mental health department, the agency developed an educational CD-ROM/DVD to be used in conjunction with informational sessions for employers. Partnering with agencies and organizations in the Portland metropolitan area, the agency disseminated the information through various print and broadcast outlets, reaching employers in the four-county area.

Outcomes

Documented changes included the following:

- New community partnerships were formed.

- Six clients of the agency's program were hired.

- Six new customers contracted with the agency's in-house business, resulting in ongoing funding for the agency and continued employment for clients.

- Seventy-five percent of those in a position to hire, manage, supervise or train employees indicated intent to use the knowledge gained.

The project coordinator from community solutions received positive anecdotal feedback from employers on the value of the educational CD-ROM/DVD. For example, one employer noted how the video provided visualization of the Community Solutions program and how real people from the program perform on the job. The employer credited the video with triggering her thinking about the fit between current job openings and potential employees from Community Solutions. The employer hired two individuals.

City Project: Access to Governmental Services

Union, a small city in eastern Oregon, received funding to address physical and policy barriers to citizen participation. Following a process of gathering information from citizens with disabilities, the town renovated an historic City Hall building that previously had limited access for individuals with disabilities.

The city increased access to information and services by increasing physical access to the police department, the City Council chambers, and the City Records office. Renovation included moving the Police Department and Fire Chief's office to the first floor, installing an accessible front door, widening a hallway, and installing an accessible dual-height payment window. City ordinances were reviewed and revised, as needed, to increase access by removing policy barriers to participation.

Outcomes

The project outcomes included the following:

- Physical access to the front office of the city hall was improved for people with mobility disabilities. An accessible door was installed.

- The inside handles to the doors of the City Council chambers and the police department were replaced with accessible hardware.

- An accessible payment window was installed.

- The police department was moved to an accessible floor.

- The city administrators documented intent to apply accessibility knowledge gained from the project to a future library remodel project.

- The city administrators have documented intent to apply accessibility knowledge gained from the project to improve access to restrooms in the city park.

- Seventy-eight percent of those involved in the project indicated intent to use knowledge gained from the project to improve access for citizens with disabilities.

Before and After - photos from the project illustrate accessibility improvements (see pg. 39).

Before:

- The old, narrow, front door was not automatic and heavy. Opening the door and getting through was difficult for those with mobility devices and limited upper extremity strength.

- The bulletin board was placed outside the lobby, subject to the elements. The board itself and the information posted on it was up too high.

After:

- An electric button controlled door was installed, flush with the front of the building. Buttons were placed both inside and outside the door for accessible entry.

- A new bulletin board was placed inside the building entrance with brochures, information and public notices were available at a lower height.

- The door and hallway were widened to allow for adequate wheelchair entry and turnaround space.

Lessons Learned from the Granting Process

The Center on Community Accessibility realized valuable lessons from the grant process. Because extensive research and planning went into the development of the process, the response rate was high. Funding of limited-duration projects provided both the resources and the structure needed to sustain momentum. Additionally, by framing the awards as cooperative agreements, CCA was able to meet the individual needs of each of the funded projects and to measure outcomes.

Other lessons learned from the process included:

- Both grassroots organizations and governmental agencies and departments were successful in increasing access for people with disabilities.

- A limited duration of six months provided the structure necessary to sustain momentum, but it may be insufficient for increasing access. CCA found subcontract extensions necessary in two cases.

- Applicants provided feedback on the RFP process, stating that they found the application both easy to understand and easy to complete.

- Institutional requirements may slow the process. For example, subcontract management and Institutional

    - Review Board processes may

    - Not be familiar to the funded

    - Organizations.

- Project activities and products were readily identified, but CCA was also successful at identifying outcomes.

- Cultural differences and communication styles warrant consideration.

- Physical distance from the funding agency can present barriers.

- Feedback from applicants indicated that responding to the well-designed RFP was an educational process.

The four projects provided an opportunity to explore community engagement from both the grassroots and governmental perspectives, and each was successful in increasing accessibility for people with disabilities in different areas of access.

Ultimately, the project reached its goals because it provided the structure, resources, and educational component necessary to enact change. CCA found the use of the grant process to be a highly effective strategy for increasing accessibility for people with disabilities.

Conclusion

The purpose of the Community Action Guide is to share information that can help communities use a community engagement process themselves. The goal is to provide a blueprint for communities to empower themselves for change.

We have found the Guide to be an effective tool for facilitating networking and encouraging action around access issues in Oregon. Some of the outcomes of the community engagement process to date include:

1. The development of an alliance that received funding to start a new Center for Independent Living.

2. Training of city officials (at their request) on accessibility issues, particularly sidewalk access.

3. Development of a city task force to retrofit all cross-walk signals with larger, more accessible buttons.

These are simply a few examples of ways in which communities have responded to the needs raised in town hall meetings and applied the resources identified through community infrastructure meetings.

Oregon communities have a long-standing tradition of responding to issues and allocating resources on a local basis. Historically, these processes have sometimes overlooked the needs of Oregonians with disabilities. The overall goals of the community engagement process described in the Community Action Guide are to increase awareness in Oregon communities about disability issues and facilitate local action that increases the physical and social accessibility of Oregon communities.

In this new century, we believe communities must work locally to meet the needs of all citizens. The difficulty in realizing that vision increases the challenge; it should not cause us to close our eyes to where we need to go.

Appendix

Appendix A

Bibliography

Appendix B

Appendix B includes a complete Request for Proposal application packet for grassroots disability organizations.

Within each packet, there are three sections:

1. The application
2. An application guide
3. A sample of a completed application

Appendix C

Appendix C includes a complete Request for Proposal application packet for government agencies and departments.

Within each packet, there are three sections:

1. The application
2. An application guide
3. A sample of a completed application

Appendix A

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A

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Appendix B

Community Accessibility Funding Opportunity

This packet contains the funding application and information to assist you in completing the application. It includes:

1. Funding Opportunity Application

2. Funding Opportunity Application Guide

3. Funding Opportunity Sample of a Completed Application

Submission Deadline: The application must be post-marked or faxed to (insert organization name) by **5:00 p.m.** on (**date**).

A committee will review applications.

The award decision will be based upon:

- Significance of the accessibility project

- Quality of the project design

- Inclusion of a well-defined timeline for project completion

- Extent to which the application is complete

- Geographic location and other technical considerations

Contact Person:

Name:

Address:

Phone:

Email Address:

This application is available in alternate formats.

Purpose of Funding Opportunity

The purpose of this funding opportunity is to increase community accessibility for people with disabilities. We anticipate making approximately two (2) awards of a maximum of $10,000* each to individual grassroots organizations. Submit only one application per organization, please.

Community accessibility can be understood in terms of freedom from barriers. People with disabilities often encounter barriers that inhibit or prevent them from getting the goods and services they want. The fewer the perceived barriers there are, the more a community may be considered accessible. Barriers can occur in nearly all areas of life—health care, education, transportation, recreation, etc. Barriers can be a result of attitudes, policies, and/or the built environment.

ADA Answers Northwest may provide resources and support to you as you develop a plan to gather input from people with disabilities. They may be reached at 503-494-3281 (Voice/TTY) or at davichar@ohsu.edu. Please indicate you are calling in reference to this notice.

There are additional organizations throughout Oregon that may be able to provide support as you gather input from people with disabilities, as well. Call (insert organization contact person) for information regarding these resources.

The successful applicant(s) will enter into a contract with Oregon Health and Science University (OHSU). Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate the start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

> **OHSU reserves the right** to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal;

> **OHSU reserves the right** to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and

> **OHSU reserves the right** to cancel the solicitation, if such cancellation would be in OHSU's interest.

*Dollar amount includes both direct and indirect rates.

1. Funding Opportunity Application

The purpose of this funding opportunity is to increase community accessibility for people with disabilities. Approximately two (2) awards of a maximum of $10,000 each will be made to individual grassroots disability organizations.

Submission Deadline: Completed applications must be post-marked or faxed to our office by 5:00 p.m. (insert date).

Questions and completed applications should be directed to: (insert contact person and contact information)

PART 1: Applicant Information

QUESTION 1: Identify the organization that will be responsible for administering the contract. *(1 point)*

QUESTION 2: Please list a contact person, address, phone number, TTY number, fax number and email address. *(1 point)*

PART 2: Identification of the Barrier

QUESTION 3: In which general area are you proposing to improve community accessibility? (check one) *(1 point)*

☐ Health Care   ☐ Transportation

☐ Employment   ☐ Education

☐ Parks & Recreation and Public Places   ☐ Housing

☐ Government Programs/Services   ☐ Technology

☐ Other: (please describe) _____

QUESTION 4: Please identify the type of barrier(s) you are going to address. (check one or more) *(2 points)*

☐ Attitudinal Barrier

☐ Policy Barrier

☐ Physical Barrier/Technological Barrier

QUESTION 5: Briefly describe the type of barrier(s) you checked in question #4. (one paragraph) *(5 points)*

PART 3: Description of the Overall Action Plan

In questions 6 through 10, describe your overall Action Plan to decrease or remove the barrier(s) to community accessibility that you have identified in question #5. You will be asked to address the following components of the action plan for the point value specified: *(Total: 55 points)*

- What you hope to accomplish and how you plan to use the resources to decrease or remove the barrier(s) in the time allowed *(15 points)*

- How you will get input from people with disabilities *(5 points)*

- How you will get input from relevant department or agency staff *(5 points)*

- How you will use the information from people with disabilities and relevant staff to accomplish your plan *(5 points)*

- How you will measure your accomplishments *(10 points)*

- Timeline *(15 points)*

QUESTION 6: Please describe what you hope to accomplish and how you plan to use the resources to decrease or remove the identified barrier(s) in the time allowed. (one paragraph) *(15 points)*

QUESTION 7: Please describe how you plan to get input from people with disabilities. (one paragraph) *(5 points)*

QUESTION 8: Please describe how you will get input from relevant department or agency staff. (one paragraph) *(5 points)*

QUESTION 9: Please describe how you will use the information gathered from people with disabilities and relevant department or agency staff. (one to two paragraphs) *(5 points)*

QUESTION 10: Briefly describe how you will measure your accomplishments.
(one paragraph) *(10 points)*

QUESTION 11: Please describe how you will complete the action plan within the six months allotted. (one to two paragraphs or a table) *(15 points)*

> **NOTE:** You are strongly encouraged to refer to the explanation of question #11 in the Application Guide section.

PART 4: Technical Assistance

QUESTION 12: Please indicate support needed. (no points)   Once the contract is made, staff members from the Center on Community Accessibility are available to provide support as needed throughout the process. Indicating the need for support will **NOT** affect your eligibility nor will it influence CCA's decision in awarding the funds. (Please check as many supports as necessary.)

☐ Refining the action plan

☐ Getting the plan started

☐ Conducting meetings with the disability community

☐ Evaluating accomplishments in removing or reducing barrier(s)

☐ Identifying disability-specific resources

☐ Other: _____

Applicants will be notified of their application status within fourteen (14) days of the submission deadline.

The successful applicant(s) will enter into a contract with OHSU. Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

Approximately two (2) subsequent funding opportunities will be offered to city, county and state organizations, departments or agencies.

OHSU reserves the right to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal;

OHSU reserves the right to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and

OHSU reserves the right to cancel the solicitation, if such cancellation would be in OHSU's interest.

2. Funding Opportunity Application Guide

This section provides further explanation and direction to be used in filling out the application. Its purpose is to provide clarification for each of the questions. Questions are in the same order as they appear on the application. Please do not submit this section.

For further clarification on any of the questions, please contact (insert contact information). General program information and answers to specific questions can be provided. Contact with CCA is not required, nor does it guarantee success of the application.

PART 1: Application information

QUESTION 1: Identify the organization, department or agency that will be responsible for administering the contract. *(1 point)*

Further Explanation: Eligible entities include grassroots organizations that serve people with disabilities.

QUESTION 2: Please list a contact person, address, phone number, TTY number, fax number and email address. *(1 point)* This section is self-explanatory.

PART 2: Identification of the Barrier

QUESTION 3: In which general area are you proposing to improve community accessibility? *(1 point)*

> **Further Explanation:** Where does the barrier that you will address occur? (check one)

☐ Health Care

☐ Employment

☐ Parks & Recreation and Public Places

☐ Government Programs/Services

☐ Other: (please describe) _____

☐ Transportation

☐ Education

☐ Housing

☐ Technology

QUESTION 4: Please identify the type of barrier(s) you are going to address. (check one or more) *(2 points)*

☐ Attitudinal barriers may be, but are not limited to, a lack of awareness of "people-first" concepts and language or diminished customer or community relations due to lack of sensitivity toward people with disabilities.

☐ Policy barriers may be, but are not limited to, unclear or absent policies around alternate format or other accommodations for people with disabilities.

☐ Physical barriers may be, but are not limited to, meeting places or customer service areas that are difficult to access. Technological barriers may include, but are not limited to, lack of web accessibility and absence of real-time captioning.

QUESTION 5: Briefly describe the type of barrier(s) you checked in question #4. (one paragraph) *(5 points)*

> **Further Explanation:** What is the barrier, and why is it an attitudinal, policy or physical/technological barrier? How does it limit accessibility in your workplace or community?

PART 3: Description of the Overall Action Plan

In questions 6 through 10, describe your overall Action Plan to decrease or remove the barrier to community accessibility that you have identified in question #5. You will be asked to include the following components of the action plan for the point value specified. *(Total: 55 points)*

- What you hope to accomplish and how you plan to use the resources to decrease or remove the barrier(s) in the time allowed *(15 points)*

- How you will get input from people with disabilities *(5 points)*

- How you will get input from relevant department or agency staff *(5 points)*

- How you will use the information from people with disabilities and relevant staff to accomplish your plan *(5 points)*

- How you will measure your accomplishments *(10 points)*

- Timeline *(15 points)*

QUESTION 6: Please describe what you hope to accomplish and how you plan to use the resources to decrease or remove the identified barrier(s) in the time allowed. (one paragraph) *(15 points)*

> **Further Explanation:** What steps will you take to accomplish your purpose?

QUESTION 7: Please describe how you plan to get input from people with disabilities. (one paragraph) *(5 points)*

> **Further Explanation:** We believe input from people with disabilities is an important part of the planning process. One way to get input is to hold a meeting and invite people with disabilities to come out and discuss what they perceive as barriers and what they would think the best way to remove the barriers would be.

QUESTION 8: Please describe how you will get input from relevant department or agency staff. (one paragraph) *(5 points)*

> **Further Explanation:** We also believe that staff, both within and outside of your agency or department, can provide ideas and perspectives important to the planning process. While it is easy to include staff within your agency or department, we want to encourage you to consider staff from other departments such as transportation, recreation, employment, etc. While it may not seem like staff from other departments would fit within the planning process, our experience has shown good ideas and collaboration can come from including a variety of perspectives.

QUESTION 9: Please describe how you will use the information gathered from people with disabilities and relevant department or agency staff. (one to two paragraphs) *(5 points)*

> **Further Explanation:** This section asks you to explain how you will use the information you have collected in your overall action plan. How will the information be used to make improvements in attitude, policy or the built environment?

QUESTION 10: Briefly describe how you will measure your accomplishments. (one paragraph) *(10 points)*

> **Further Explanation:** Typical measures might include, but are not limited to, the completion of evaluations before and after the training event, documents before and after the intervention showing changes in policies or procedures, or before-and-after photos showing changes in the built environment.

QUESTION 11: Please describe how you will complete the action plan within the six (6) months allotted. (one to two paragraphs or a table) *(15 points)*

Further Explanation: This is a timeline for your action plan. It may be in paragraph form or presented as a table. Please note that while the scope of the project may cover six months from start-up to conclusion, implementation of the action plan should take place in months two through five. Month one will be used for start-up. The Oregon Office on Disability and Health will use the sixth month to reach closure on the project.

MONTH 1	MONTH 2	MONTH 3	MONTH 4	MONTH 5	MONTH 6
START-UP	IMPLEMENT PLAN	IMPLEMENT PLAN	IMPLEMENT PLAN	IMPLEMENT PLAN	COMPLETION
Meet with core staff; Meet with CCA staff	Meet with people with disabilities; meet with relevant staff from within or outside of agency	Conduct activities to remove barrier(s)	Conduct activities to remove barrier(s)	Evaluate accomplishments; Report accomplishments to CCA	CCA receives and discusses final report; reach closure

PART 4: Technical Assistance

QUESTION 12: Please indicate support needed. *(no points)*

NOTE: Once the contract is made, staff members from the Center on Community Accessibility are available to provide as much or as little support as needed throughout the process. Indicating the need for support will NOT affect your eligibility nor will it influence CCA's decision in awarding the funds. Please check as many supports as necessary:

☐ Refining the action plan

☐ Getting the plan started

☐ Conducting meetings with the disability community

☐ Evaluating accomplishments in removing or reducing barrier(s)

☐ Training

    (If your action plan involves training, we may be able to provide training on disability awareness, Americans with Disabilities Act, or other relevant trainings.)

☐ Identifying disability-specific resources

☐ Other: _____

Applicants will be notified of their application status within fourteen (14) days of the submission deadline.

The successful applicant(s) will enter into a contract with OHSU. Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work

with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

Approximately two (2) subsequent funding opportunities will be offered to city, county and state organizations, departments or agencies.

> **OHSU reserves the right** to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal.;
>
> **OHSU reserves the right** to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and
>
> **OHSU reserves the right** to cancel the solicitation, if such cancellation would be in OHSU's interest.

3. Funding Opportunity
Sample of a Completed Application

The purpose of this funding opportunity is to increase community accessibility for people with disabilities. Approximately two (2) awards of a maximum of $10,000 each will be made to individual grassroots disability organizations.

Submission Deadline: Completed applications must be post-marked or faxed to our office by 5:00 p.m. (insert date).

Questions and completed applications should be directed to: (insert contact person and contact information)

The example presented here is intended only as guidance and is not intended as a limitation

PART 1: Applicant Information

QUESTION 1: Identify the organization that will be responsible for administering the contract. *(1 point)*

The Organization for People with Disabilities

QUESTION 2: Please list a contact person, address, phone number, TTY number, fax number and email address. *(1 point)*

Jane Doe, Executive Director
The Organization for People with Disabilities
1234 Main Street City, OR 90000
503-999-9999 (phone)
503-999-9990 (fax)
doej@tofpwd.org

PART 2: Identification of the Barrier

QUESTION 3: In which general area are you proposing to improve community accessibility? (check one) *(1 point)*

[x]	Health Care	[ ]	Transportation
[ ]	Employment	[ ]	Education
[ ]	Parks & Recreation and Public Places	[ ]	Housing
[ ]	Government Programs/Services	[ ]	Technology
[ ]	Other: (please describe) _____		

QUESTION 4: Please identify the type of barrier(s) you are going to address. (check one or more) *(2 points)*

[x] Attitudinal Barrier

[x] Policy Barrier

[ ] Physical Barrier/Technological Barrier

QUESTION 5: Briefly describe the type of barrier(s) you checked in question #4. (one paragraph) *(5 points)*

Serving people with disabilities, we commonly hear concerns regarding the interactions between doctors and people with disabilities. Hospital staff aren't aware of sign language interpreter services, have not allowed service animals into offices or exam rooms, have difficulty assisting patients with mobility limitations, are not familiar with the telephone relay service, and often to do not provide medical forms in alternate format. These barriers limit access to health care.

PART 3: Description of the Overall Action Plan

In questions 6 through 10, describe your overall Action Plan to decrease or remove the barrier to community accessibility that you have identified in question #5. You will be asked to include the following components of the action plan for the point value specified. *(Total: 55 points)*

- What you hope to accomplish and how you plan to use the resources to decrease or remove the barrier(s) in the time allowed *(15 points)*

- How you will get input from people with disabilities *(5 points)*

- How you will get input from relevant department or agency staff *(5 points)*

- How you will use the information from people with disabilities and relevant staff to accomplish your plan *(5 points)*

- How you will measure your accomplishments *(10 points)*

- Timeline *(15 points)*

QUESTION 6: Please describe what you hope to accomplish and how you plan to use the resources to decrease or remove the identified barrier(s) in the time allowed. (one paragraph) *(15 points)*

> **Further Explanation:** What steps will you take to accomplish your purpose?

We hope to increase awareness for health care providers and their staff around serving people with disabilities. We will use the resources to develop, produce and disseminate a brochure on serving patients with disabilities and intend to schedule several training sessions on disability awareness for clinic staff over the course of two months. At the training sessions, we will disseminate the brochure to health care providers and their staff members. In addition, the resources will also be used to locate a "Frequently Asked Questions" sheet that we can provide to our organization members. It will contain tips for people with disabilities on how to be good patients. Then the brochure for health care providers and the FAQ sheet will be mailed to all organization members on our mailing list. We'll provide a cover letter on how our members might use the information to share with their own health care providers.

QUESTION 7: Please describe how you plan to get input from people with disabilities. (one paragraph) *(5 points)*

Further Explanation: We believe input from people with disabilities is an important part of the planning process. One way to get input is to hold a meeting and invite people with disabilities to come out and discuss what they perceive as barriers and what they would think the best way to remove the barriers would be.

Because we serve people with disabilities, we are familiar with some of the concerns around health care. We will invite people with disabilities to participate in a meeting to prioritize the concerns and to develop ideas for the brochure.

QUESTION 8: Please describe how you will get input from relevant department or agency staff. (one paragraph) *(5 points)*

Further Explanation: We also believe that staff, both within and outside of your agency or department, can provide ideas and perspectives important to the planning process. While it is easy to include staff within your agency or department, we want to encourage you to consider staff from other departments such as transportation, recreation, employment, etc. While it may not seem like staff from other departments would fit within the planning process, our experience has shown good ideas and collaboration can come from including a variety of perspectives.

Jane Doe, our organization's Executive Director, will invite representatives from the two largest health care clinics in town to participate in the meeting we organize for people with disabilities. At the meeting, we will identify training needs for clinic staff.

QUESTION 9: Please describe how you will use the information gathered from people with disabilities and relevant department or agency staff. (one to two paragraphs) *(5 points)*

Further Explanation: This section asks you to explain how you will use the information you have collected in your overall action plan. How will the information be used to make improvements in attitude, policy or the built environment?

The information obtained from the meeting with representatives from the health care field and members of our organization will be compiled and prioritized. We will then use it to develop the brochure on serving patients with disabilities and to identify training topics.

QUESTION 10: Briefly describe how you will measure your accomplishments. (one paragraph) *(10 points)*

> **Further Explanation:** Typical measures might include, but are not limited to, the completion of evaluations before and after the training event, documents before and after the intervention showing changes in policies or procedures, or before-and-after photos showing changes in the built environment.

In addition to producing the brochure, we will develop an evaluation that will be used following each training session to assess knowledge gained.

QUESTION 11: Please describe how you will complete the action plan within the six (6) months allotted. (one to two paragraphs or a table) *(15 points)*

> **Further Explanation:** This is a timeline for your action plan. It may be in paragraph form or presented as a table. Please note that while the scope of the project may cover six months from start-up to conclusion, implementation of the action plan should take place in months two through five. Month one will be used for start-up. The Oregon Office on Disability and Health will use the sixth month to reach closure on the project.

MONTH	AGENCY/PERSON	ACTIVITY	GOAL
Month One: Start-up	Organization's Project Team	Meet with CCA staff; Identify key clinic staff for program	Start-up Activities
Month Two: Implement Plan	Contact CIL, Assisted Living Center, Clinic Staff	Set up meeting; Meet with individuals with disabilities	Identify barriers to service, needs of individuals
Month Three: Implement Plan	Parks and Recreation, Clinic Staff, CCA Staff	Provide staff training on issues around disabilities (CCA); Meet with Community Parks and Recreation department	Gain awareness of disability issues; Identify community opportunities for wellness classes; Explore potential for future classes based on input from disability community
Month Four: Implement Plan	CIL, Assisted Living Center, Clinic Staff	Distribute survey; Collect survey; Review Survey; Set up resource pin-up board in clinic waiting room	Gain insight into ways to improve services for people with disabilities; Compile suggestions for services and training; Prioritize training needs; Identify resources for training
Month Five: Implement Plan	Clinic Staff	Training for current staff Evaluate training Amend employee manual ; Check enrollment figures at Park and Rec classes	Schedule, complete, and review first training; Print training manual Increased enrollment in wellness programs
Month Six: Completion	CCA, Clinic Manager and project team	Finalize report to CCA	CCA receives and discusses final report

PART 4: Technical Assistance

QUESTION 12: Please indicate support needed. *(no points)*

NOTE: Once the contract is made, staff members from the Center on Community Accessibility are available to provide as much or as little support as needed throughout the process. Indicating the need for support will NOT affect your eligibility nor will it influence CCA's decision in awarding the funds. Please check as many supports as necessary:

☐ Refining the action plan

☐ Getting the plan started

☐ Conducting meetings with the disability community

☐ Evaluating accomplishments in removing or reducing barrier(s)

☒ Training

   (If your action plan involves training, we may be able to provide training on disability awareness, Americans with Disabilities Act, or other relevant trainings.)

☐ Identifying disability-specific resources

☒ Other: *Developing a training evaluation*

Applicants will be notified of their application status within fourteen (14) days of the submission deadline.

The successful applicant(s) will enter into a contract with OHSU. Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work with the agency to identify ways to capture meaningful outcomes and remain

B

within the approximate six-month time frame.

Approximately two (2) subsequent funding opportunities will be offered to city, county and state organizations, departments or agencies.

> **OHSU reserves the right** to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal.;

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> **OHSU reserves the right** to cancel the solicitation, if such cancellation would be in OHSU's interest.

Appendix C

Community Accessibility Funding Opportunity

This packet contains the funding application and information to assist you in completing the application. It includes:

1. Funding Opportunity Application

2. Funding Opportunity Application Guide

3. Funding Opportunity Sample of a Completed Application

Submission Deadline: The application must be post-marked or faxed to (insert organization name) by **5:00 p.m.** on (**date**).

A committee will review applications.

The award decision will be based upon:

- Significance of the accessibility project

- Quality of the project design

- Inclusion of a well-defined timeline for project completion

- Extent to which the application is complete

- Geographic location and other technical considerations

Contact Person:

Name:

Address:

Phone:

Email Address:

This application is available in alternate formats.

Purpose of Funding Opportunity

The purpose of this funding opportunity is to increase community accessibility for people with disabilities. We anticipate making approximately two (2) awards of a maximum of $10,000* each to individual city, county, or state governmental units, departments or agencies.

Community accessibility can be understood in terms of freedom from barriers. People with disabilities often encounter barriers that inhibit or prevent them from getting the goods and services they want. The fewer the perceived barriers there are, the more a community may be considered accessible. Barriers can occur in nearly all areas of life—health care, education, transportation, recreation, etc. Barriers can be a result of attitudes, policies, and/or the built environment.

ADA Answers Northwest may provide resources and support to you as you develop a plan to gather input from people with disabilities. They may be reached at 503-494-3281 (Voice/TTY) or at davichar@ohsu.edu. Please indicate you are calling in reference to this notice.

There are additional organizations throughout Oregon that may be able to provide support as you gather input from people with disabilities, as well. Call (insert contact person) for information regarding these resources.

The successful applicant(s) will enter into a contract with Oregon Health and Science University (OHSU). Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate the start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

   OHSU reserves the right to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal;

   OHSU reserves the right to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and

   OHSU reserves the right to cancel the solicitation, if such cancellation would be in OHSU's interest.

*Dollar amount includes both direct and indirect rates.

1. **Funding Opportunity Application**

The purpose of this funding opportunity is to increase community accessibility for people with disabilities. Approximately two (2) awards of a maximum of $10,000 each will be made to individual city, county, or state governmental units, departments or agencies.

Submission Deadline: Completed applications must be post-marked or faxed to our office by 5:00 p.m. (insert date).

Questions and completed applications should be directed to: (insert contact person and contact information)

PART 1: Applicant Information

QUESTION 1: Identify the organization, department or agency that will be responsible for administering the contract. *(1 point)*

QUESTION 2: Please list a contact person, address, phone number, TTY number, fax number and email address. *(1 point)*

PART 2: Identification of the Barrier

QUESTION 3: In which general area are you proposing to improve community accessibility? (check one) *(1 point)*

☐ Health Care

☐ Employment

☐ Parks & Recreation and Public Places

☐ Government Programs/Services

☐ Other: (please describe) _____

☐ Transportation

☐ Education

☐ Housing

☐ Technology

QUESTION 4: Please identify the type of barrier(s) you are going to address. (check one or more) *(2 points)*

☐ Attitudinal Barrier

☐ Policy Barrier

☐ Physical Barrier/Technological Barrier

QUESTION 5: Briefly describe the type of barrier(s) you checked in question #4. (one paragraph) *(5 points)*

PART 3: Description of the Overall Action Plan

In questions 6 through 10, describe your overall Action Plan to decrease or remove the barrier(s) to community accessibility that you have identified in question #5. You will be asked to address the following components of the action plan for the point value specified: *(Total: 55 points)*

- What you hope to accomplish and how you plan to use the resources to decrease or remove the barrier(s) in the time allowed *(15 points)*

- How you will get input from people with disabilities *(5 points)*

- How you will get input from relevant department or agency staff *(5 points)*

- How you will use the information from people with disabilities and relevant staff to accomplish your plan *(5 points)*

- How you will measure your accomplishments *(10 points)*

- Timeline *(15 points)*

QUESTION 6: Please describe what you hope to accomplish and how you plan to use the resources to decrease or remove the identified barrier(s) in the time allowed. (one paragraph) *(15 points)*

QUESTION 7: Please describe how you plan to get input from people with disabilities. (one paragraph) *(5 points)*

QUESTION 8: Please describe how you will get input from relevant department or agency staff. (one paragraph) *(5 points)*

QUESTION 9: Please describe how you will use the information gathered from people with disabilities and relevant department or agency staff. (one to two paragraphs) *(5 points)*

QUESTION 10: Briefly describe how you will measure your accomplishments. (one paragraph) *(10 points)*

QUESTION 11: Please describe how you will complete the action plan within the six months allotted. (one to two paragraphs or a table) *(15 points)*

NOTE: You are strongly encouraged to refer to the explanation of question #11 in the Application Guide section.

PART 4: Technical Assistance

QUESTION 12: Please indicate support needed. (no points) Once the contract is made, staff members from the Center on Community Accessibility are available to provide support as needed throughout the process. Indicating the need for support will **NOT** affect your eligibility nor will it influence CCA's decision in awarding the funds. (Please check as many supports as necessary.)

☐ Refining the action plan

☐ Getting the plan started

☐ Conducting meetings with the disability community

☐ Evaluating accomplishments in removing or reducing barrier(s)

☐ Training

   (If your action plan involves training, we may be able to provide training on disability awareness, Americans with Disabilities Act, or other relevant trainings.)

☐ Identifying disability-specific resources

☐ Other: _____

Applicants will be notified of their application status within fourteen (14) days of the submission deadline.

The successful applicant(s) will enter into a contract with OHSU. Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

Approximately two (2) subsequent funding opportunities will be offered to city, county and state organizations, departments or agencies.

OHSU reserves the right to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal.;

OHSU reserves the right to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and

OHSU reserves the right to cancel the solicitation, if such cancellation would be in OHSU's interest.

2. Funding Opportunity Application Guide

This section provides further explanation and direction to be used in filling out the application. Its purpose is to provide clarification for each of the questions. Questions are in the same order as they appear on the application. Please **do not** submit this section.

For further clarification on any of the questions, please contact (insert contact information). General program information and answers to specific questions can be provided. Contact with CCA is not required, nor does it guarantee success of the application.

PART 1: Application information

QUESTION 1: Identify the organization, department or agency that will be responsible for administering the contract. *(1 point)*

> **Further Explanation:** Eligible entities include, but are not limited to, the Health Department, Human Services, Transportation, Public Safety, Housing, Planning, Development or other departments or agencies.

QUESTION 2: Please list a contact person, address, phone number, TTY number, fax number and email address. *(1 point)* This section is self-explanatory.

PART 2: Identification of the Barrier

QUESTION 3: In which general area are you proposing to improve community accessibility? *(1 point)*

> **Further Explanation:** Where does the barrier that you will address occur? (check one)

☐ Health Care   ☐ Transportation

☐ Employment   ☐ Education

☐ Parks & Recreation and Public Places   ☐ Housing

☐ Government Programs/Services   ☐ Technology

☐ Other: (please describe) _____

QUESTION 4: Please identify the type of barrier(s) you are going to address. (check one or more) *(2 points)*

☐ Attitudinal barriers may be, but are not limited to, a lack of awareness of "people-first" concepts and language or diminished customer or community relations due to lack of sensitivity toward people with disabilities.

☐ Policy barriers may be, but are not limited to, unclear or absent policies around alternate format or other accommodations for people with disabilities.

☐ Physical barriers may be, but are not limited to, meeting places or customer service areas that are difficult to access. Technological barriers may include, but are not limited to, lack of web accessibility and absence of real-time captioning.

QUESTION 5: Briefly describe the type of barrier(s) you checked in question #4. (one paragraph) *(5 points)*

> **Further Explanation:** What is the barrier, and why is it an attitudinal, policy or physical/ technological barrier? How does it limit accessibility in your workplace or community?

PART 3: Description of the Overall Action Plan

In questions 6 through 10, describe your overall Action Plan to decrease or remove the barrier(s) to community accessibility that you have identified in question #5. You will be asked to include the following components of the action plan for the point value specified. *(Total: 55 points)*

- What you hope to accomplish and how you plan to use the resources to decrease or remove the barrier(s) in the time allowed *(15 points)*

- How you will get input from people with disabilities *(5 points)*

- How you will get input from relevant department or agency staff *(5 points)*

- How you will use the information from people with disabilities and relevant staff to accomplish your plan *(5 points)*

- How you will measure your accomplishments *(10 points)*

- Timeline *(15 points)*

QUESTION 6: Please describe what you hope to accomplish and how you plan to use the resources to decrease or remove the identified barrier(s) in the time allowed. (one paragraph) *(15 points)*

Further Explanation: What steps will you take to accomplish your purpose?

QUESTION 7: Please describe how you plan to get input from people with disabilities. (one paragraph) *(5 points)*

> **Further Explanation:** We believe input from people with disabilities is an important part of the planning process. One way to get input is to hold a meeting and invite people with disabilities to come out and discuss what they perceive as barriers and what they would think the best way to remove the barriers would be.

QUESTION 8: Please describe how you will get input from relevant department or agency staff. (one paragraph) *(5 points)*

> **Further Explanation:** We also believe that staff, both within and outside of your agency or department, can provide ideas and perspectives important to the planning process. While it is easy to include staff within your agency or department, we want to encourage you to consider staff from other departments such as transportation, recreation, employment, etc. While it may not seem like staff from other departments would fit within the planning process, our experience has shown good ideas and collaboration can come from including a variety of perspectives.

QUESTION 9: Please describe how you will use the information gathered from people with disabilities and relevant department or agency staff. (one to two paragraphs) *(5 points)*

> **Further Explanation:** This section asks you to explain how you will use the information you have collected in your overall action plan. How will the information be used to make improvements in attitude, policy or the built environment?

QUESTION 10: Briefly describe how you will measure your accomplishments. (one paragraph) *(10 points)*

> **Further Explanation:** Typical measures might include, but are not limited to, the completion of evaluations before and after the training event, documents before and after the intervention showing changes in policies or procedures, or before-and-after photos showing changes in the built environment.

QUESTION 11: Please describe how you will complete the action plan within the six (6) months allotted. (one to two paragraphs or a table) *(15 points)*

Further Explanation: This is a timeline for your action plan. It may be in paragraph form or presented as a table. Please note that while the scope of the project may cover six months from start-up to conclusion, implementation of the action plan should take place in months two through five. Month one will be used for start-up. The Oregon Office on Disability and Health will use the sixth month to reach closure on the project.

MONTH 1	MONTH 2	MONTH 3	MONTH 4	MONTH 5	MONTH 6
START-UP	IMPLEMENT PLAN	IMPLEMENT PLAN	IMPLEMENT PLAN	IMPLEMENT PLAN	COMPLETION
Meet with core staff; Meet with CCA staff	Meet with people with disabilities; meet with relevant staff from within or outside of agency	Conduct activities to remove barrier(s)	Conduct activities to remove barrier(s)	Evaluate accomplishments; Report accomplishments to CCA	CCA receives and discusses final report; reach closure

PART 4: Technical Assistance

QUESTION 12: Please indicate support needed. *(no points)*

NOTE: Once the contract is made, staff members from the Center on Community Accessibility are available to provide as much or as little support as needed throughout the process. Indicating the need for support will NOT affect your eligibility nor will it influence CCA's decision in awarding the funds. Please check as many supports as necessary:

☐ Refining the action plan

☐ Getting the plan started

☐ Conducting meetings with the disability community

☐ Evaluating accomplishments in removing or reducing barrier(s)

☐ Training

(If your action plan involves training, we may be able to provide training on disability awareness, Americans with Disabilities Act, or other relevant trainings.)

☐ Identifying disability-specific resources

☐ Other: _____

Applicants will be notified of their application status within fourteen (14) days of the submission deadline.

The successful applicant(s) will enter into a contract with OHSU. Once the contract is established, the recipient will be expected to begin work within thirty (30) days of the award date. CCA staff will provide technical assistance and support once the award is made, which may include documenting progress using Geographic Information Systems (GIS), where applicable. Additionally, CCA will facilitate start-up of the plan. CCA staff members want to establish and maintain a positive and mutually beneficial working relationship with everyone involved in the project.

We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work

with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

Approximately two (2) subsequent funding opportunities will be offered to city, county and state organizations, departments or agencies.

> **OHSU reserves the right** to seek clarifications of each proposal and the right to negotiate a final contract in the best interest of OHSU, considering cost effectiveness and the level of time and effort required for completion of the proposal.;

> **OHSU reserves the right** to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and

> **OHSU reserves the right** to cancel the solicitation, if such cancellation would be in OHSU's interest.

3. Funding Opportunity
Sample of a Completed Application

The purpose of this funding opportunity is to increase community accessibility for people with disabilities. Approximately two (2) awards of a maximum of $10,000 each will be made to city, county, or state governmental units, departments or agencies.

Submission Deadline: Completed applications must be post-marked or faxed to our office by 5:00 p.m. (insert date).

Questions and completed applications should be directed to: (insert contact person and contact information)

The example presented here is intended only as guidance and is not intended as a limitation

PART 1: Applicant Information

QUESTION 1: Identify the organization that will be responsible for administering the contract. *(1 point)*

The Public Health Clinic

QUESTION 2: Please list a contact person, address, phone number, TTY number, fax number and email address. *(1 point)*

Jane Doe, Office Manager
The Public Health Clinic
1234 Main Street City, OR 90000
503-999-9999 (phone)
503-999-9990 (fax)
doej@thepublichealthclinic.com

PART 2: Identification of the Barrier

QUESTION 3: In which general area are you proposing to improve community accessibility? (check one) *(1 point)*

[x] Health Care   [ ] Transportation

[ ] Employment   [ ] Education

[ ] Parks & Recreation and Public Places   [ ] Housing

[ ] Government Programs/Services   [ ] Technology

[ ] Other: (please describe) _____

QUESTION 4: Please identify the type of barrier(s) you are going to address. (check one or more) *(2 points)*

[x] Attitudinal Barrier

[x] Policy Barrier

[ ] Physical Barrier/Technological Barrier

QUESTION 5: Briefly describe the type of barrier(s) you checked in question #4. (one paragraph) *(5 points)*

Lack of knowledge is a barrier to the quality healthcare we wish to provide to all patients who visit our clinic. Some of our staff members have expressed an interest in learning more about various disabilities and about how to serve people with disabilities.

For example, questions often arise around sign language interpreters, service animals, how to assist patients with mobility disabilities, receiving calls through the telephone relay service, and providing medical forms in alternate formats such as large print for patients who have vision impairments.

PART 3: Description of the Overall Action Plan

In questions 6 through 10, describe your overall Action Plan to decrease or remove the barrier to community accessibility that you have identified in question #5. You will be asked to include the following components of the action plan for the point value specified. *(Total: 55 points)*

- What you hope to accomplish and how you plan to use the resources to decrease or remove the barrier(s) in the time allowed *(15 points)*

- How you will get input from people with disabilities *(5 points)*

- How you will get input from relevant department or agency staff *(5 points)*

- How you will use the information from people with disabilities and relevant staff to accomplish your plan *(5 points)*

- How you will measure your accomplishments *(10 points)*

- Timeline *(15 points)*

QUESTION 6: Please describe what you hope to accomplish and how you plan to use the resources to decrease or remove the identified barrier(s) in the time allowed. (one paragraph) *(15 points)*

> **Further Explanation:** What steps will you take to accomplish your purpose?

Our staff members have identified their own lack of knowledge about serving individuals with disabilities as a barrier that limits accessibility to clinic services. We hope to increase staff knowledge. We intend to use the resources to provide in-service training to our staff, implement changes in our training manual based on the project feedback, and create a resource pin-up board that will promote wellness activities for persons with and without disabilities.

QUESTION 7: Please describe how you plan to get input from people with disabilities. (one paragraph) *(5 points)*

> **Further Explanation:** We believe input from people with disabilities is an important part of the planning process. One way to get input is to hold a meeting and invite people with disabilities to come out and discuss what they perceive as barriers and what they would think the best way to remove the barriers would be.

We researched disability organizations in our area by going to the website for Centers for Independent Living. We called our local Center for Independent Living (CIL) and found they are very active in the community. They suggested we also contact a nearby Assisted Living Center. We plan to get input from people with disabilities by working with the CIL to develop a simple, quick survey that can be used to find out what our clinic can do to improve services for people with disabilities. Both the Center for Independent Living and the Assisted Living Center will distribute the survey to their clients for us.

QUESTION 8: Please describe how you will get input from relevant department or agency staff. (one paragraph) *(5 points)*

> **Further Explanation:** We also believe that staff, both within and outside of your agency or department, can provide ideas and perspectives important to the planning process. While it is easy to include staff within your agency or department, we want to encourage you to consider staff from other departments such as transportation, recreation, employment, etc. While it may not seem like staff from other departments would fit within the planning process, our experience has shown good ideas and collaboration can come from including a variety of perspectives.

Our clinic staff will invite representatives from the Assisted Living Center, the Center for Independent Living, and a representative from the local Parks and Recreation Department to participate in a meeting where we can gather input. Together we will compile a list of available wellness or exercise classes for the resource board and come up with topics for future training opportunities. These trainings will be listed on the resource board and in mailings by the participating agencies.

QUESTION 9: Please describe how you will use the information gathered from people with disabilities and relevant department or agency staff. (one to two paragraphs) *(5 points)*

> **Further Explanation:** This section asks you to explain how you will use the information you have collected in your overall action plan. How will the information be used to make improvements in attitude, policy or the built environment?

After meeting with representatives from the CIL and the Assisted Living Center and after collecting the surveys, office staff will compile the suggestions. The entire project staff will then prioritize the ideas. We will use this information to identify training needs and schedule the first training.

Information on wellness and exercise classes developed in collaboration with the Parks and Recreation Department will be used to put together the resource board. The board will be placed in the clinic waiting room and will contain information relating to wellness and exercise classes available to people with disabilities. It will be updated by the receptionist once a month.

QUESTION 10: Briefly describe how you will measure your accomplishments. (one paragraph) *(10 points)*

> **Further Explanation:** Typical measures might include, but are not limited to, the completion of evaluations before and after the training event, documents before and after the intervention showing changes in policies or procedures, or before-and-after photos showing changes in the built environment.

We will ask staff to fill out a short training evaluation to assess what knowledge they have gained. Because we anticipate making policy changes to our new employee training manual to better serve people with disabilities, the office protocol will be documented in the new manual. Additionally, in collaboration with the Parks and Recreation district, we will put together a list of wellness and/ or exercise classes that we can provide to all our patients, including our patients with disabilities. This information will be posted and updated each month on the resource pin-up board in the waiting room of the clinic. We will be able to provide documentation of change in three ways: evaluations of training, changes in the employee manual, and enrollment figures. Training evaluations will assess new information learned by the participants by asking if their knowledge on the topic increased as a result of attending the training. The sensitivity training will be included in a new version of the employee handbook. The Parks and Recreation district will provide enrollment figures for the next term to determine if the resource board is generating an increase in attendance in the classes.

QUESTION 11: Please describe how you will complete the action plan within the six (6) months allotted. (one to two paragraphs or a table) *(15 points)*

> **Further Explanation:** This is a timeline for your action plan. It may be in paragraph form or presented as a table. Please note that while the scope of the project may cover six months from start-up to conclusion, implementation of the action plan should take place in months two through five. Month one will be used for start-up. The Oregon Office on Disability and Health will use the sixth month to reach closure on the project.

MONTH	AGENCY/PERSON	ACTIVITY	GOAL
Month One: Start-up	Health Clinic Manager	Meet with CCA staff; Identify key clinic staff for program	Start-up Activities
Month Two: Implement Plan	Contact CIL, Assisted Living Center, Clinic Staff	Set up meeting; Meet with individuals with disabilities	Identify barriers to service, needs of individuals
Month Three: Implement Plan	Parks and Recreation, Clinic Staff, CCA Staff	Provide staff training on issues around disabilities (CCA); Meet with Community Parks and Recreation department	Gain awareness of disability issues; Identify community opportunities for wellness classes; Explore potential for future classes based on input from disability community
Month Four: Implement Plan	CIL, Assisted Living Center, Clinic Staff	Distribute survey; Collect survey; Review Survey; Set up resource pin-up board in clinic waiting room	Gain insight into ways to improve services for people with disabilities; Compile suggestions for services and training; Prioritize training needs; Identify resources for training
Month Five: Implement Plan	Clinic Staff	Training for current staff Evaluate training Amend employee manual ; Check enrollment figures at Park and Rec classes	Schedule, complete, and review first training Print training manual Increased enrollment in wellness programs
Month Six: Completion	CCA and Clinic Manager and project team	Finalize report to CCA	CCA receives and discusses final report

PART 4: Technical Assistance

QUESTION 12: Please indicate support needed. *(no points)*

NOTE: Once the contract is made, staff members from the Center on Community Accessibility are available to provide as much or as little support as needed throughout the process. Indicating the need for support will NOT affect your eligibility nor will it influence CCA's decision in awarding the funds. Please check as many supports as necessary:

☐ Refining the action plan

☐ Getting the plan started

☐ Conducting meetings with the disability community

☐ Evaluating accomplishments in removing or reducing barrier(s)

☒ Training

(If your action plan involves training, we may be able to provide training on disability awareness, Americans with Disabilities Act, or other relevant trainings.)

☐ Identifying disability-specific resources

☐ Other: _____

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We anticipate the contract lasting approximately six (6) months. We understand that some outcomes may take more than six months to accomplish. We will work with the agency to identify ways to capture meaningful outcomes and remain within the approximate six-month time frame.

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OHSU reserves the right to reject any or all proposals, if such rejection would be in the interest of OHSU to do so; and

OHSU reserves the right to cancel the solicitation, if such cancellation would be in OHSU's interest.

If you would like to receive this information in an alternative format
(computer disk, large print, audio, or Braille) -

Please Contact:

> **The Center on Community Accessibility**
> **Oregon Institute on Disability & Development**
> **Child Development and Rehabilitation Center**
> **Oregon Health & Science University**
> **P.O. Box 574**
> **Portland, OR 97207-0574**
>
> **503-494-3331**
> **ccaproject@ohsu.edu**
> **http://www.ohsu.edu/oidd/cca**

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