>> Captioner is here.

>> Welcome to the webinar.

>>

>> Can captioning come on briefly and let us know -- okay, there you are.

So now I'm going to hide the chat box.

And I'm going to hide the participants, so I've asked -- they're muted anyway.

I'll ask you to drop out if you don't mind and I will start -- let's see if I can stretch this a little bit.

Stretch the captioning.

I'm going to start the recording and I'll have you two introduce yourselves and get started.

So I won't -- once I start the recording, I won't be talking.

I'll just have you introduce yourselves after you hear the recording has begun, and then we'll just run with it.

>> Audio recording for this meeting has begun.

>> John, can you start over?

>> Yeah, I can.

>> We were at the end of our presentation.

>> I can actually edit that out, so if you want to start --

>> sorry, I didn't know that.

Okay.

Can you edit out bloopers, like if we have a blooper?

>> I can take stuff out.

If you'll repeat where you made the mistake, yes, I can take out a piece.

I'll try to make notes as we go.

>> I'll try not to make a blooper.

>> I think you'll be fine.

>> Okay.

I'm going to get started.

Welcome, everyone, to making chronic self-management programs welcoming for everyone.

My name is Angela Weaver, and I'm the project coordinator for the Oregon office on disability and health, housed at Oregon Health Sciences University.

And I'm also a master trainer on the chronic disease self-management program.

With me here today is --

>> I'm Carla Waring, and I will be copresenting with Angela today.

I have a masters degree in rehabilitation administration from the University of San Francisco, I provide tech did assistance and training for the Northwest ADA center as their Oregon state partner.

>> So because we're also captioning this and we'll have a transcript, I'm -- we're going to do our best to tell you what slide we're on as we move forward from here.

We're on slide three, and I just want to give a special thanks to the CDC who funds our office, the Oregon office on disability and health, and we've been funded since 1994.

And also some of our key partners that made this webinar possible, so the Oregon health authority's office on health promotion and chronic disease prevention, as well as the Northwest ADA center region 10, which is within the center for continuing education in rehabilitation at the University of Washington.

Karla, do you want to tell us more about the ADA network?

>> Sure.

The Northwest ADA center is part of the ADA national network and is funded by the national institute on disability, independent living, and rehabilitation within the department of health and human services.

One important component to the ADA national network is our hotline.

You can call this number anywhere in the United States, depending on your area code, will connect you to the closest regional center.

Northwest Ada center is region 10 and we serve Oregon, Washington, Idaho, and Alaska.

During the presentation today, I will be providing you more information about Northwest ADA centers activities and guidance to support you reaching out and working with people with disabilities.

I want to take a moment to go over the agenda.

I'm on slide five.

The first thing we're going to do is we're going to talk about disability in health data, and set the stage for why this information that we're sharing today is important.

Next, Carla is going to do an introduction to the ADA and highlight the ADA Title II, then we're going to talk about workshop recruitment, as well as where you hold your workshops and talk about facilities and physical access, as well as logistics, communication, and environmental considerations when you're hosting a workshop.

Carla is going to talk to us about service animals and we're also going to talk about disability etiquette, and at the end we're going to have several slides that will tell you where you can get additional resources and where there are handouts available on our website.

In a moment I'm going to be sharing with you some data that demonstrates health disparities between people with disabilities and people without disabilities.

This data will help set the stage for why chronic disease self-management programs and other evidence-based programs are very important and beneficial for all people experiencing chronic conditions, but especially people with disabilities.

It's important to know that when we're looking at disability data, that the data typically shows us that people with disabilities are more likely to experience poor health, secondary conditions, which are any conditions that are the result of their primary disabling condition, as well as early death.

But this doesn't mean that people with disabilities should be considered sick or ill, or that they cannot be healthy.

It's also important to note it's not necessarily the disability itself that causes the health disparities, but a multitude of environmental, attitudinal and social barriers that people with disabilities experience on a daily basis.

And this includes everywhere, like where they live, work, learn, play, pray, and receive care.

The data I'm going to be sharing with you is from the behavioral risk factor surveillance system survey, or what we call BRFSS.

The data will be from the 2015 survey, that was conducted statewide.

A little bit about the BRFSS, it's a population-based telephone survey for adults 18 and over conducted at the state level.

In 2011, they started contacting people on cell phones and not just land lines, so that really added a great benefit to the survey.

However, the one limitation to the survey is that it does not capture people living in supported or institutional settings, such as nursing homes, prisons, residential programs, etc.

So it only captures people living in the community.

The information that's obtained through the BRFSS survey is dem graphical information, health status, information about chronic conditions, health behaviors, and health risks.

If you're interested in more data, especially the BRFSS data I'm going to be sharing today, at the end of the presentation I'll share the website for our office, and there's a lot more data you can access there.

So the first slide I'm showing you is slide number eight.

And with this slide and with all the slides that are going to follow that show data, the red bar represents people with disabilities and the green bar represents people without disabilities.

And again, this is Oregon specific data.

So with this slide, we look at health status.

And what we see is half of the number of respondents with disabilities in Oregon reported their current health status as excellent, very good, or good compared to Oregonians without disabilities.

Here we see, when we look at the slide number nine, that looks at exercise, we see about a 20% difference between people with disabilities and people without disabilities who indicate they had exercised in the last 30 days.

And that's with the people with disabilities exercising less.

And I just wanted to share with you the BRFSS question that the respondents were asked.

The question was, during the past month, other than your regular job, did you participate in any physical activity or exercises such as running, golf, gardening, or walking?

This slide demonstrates self-reported BMI, and it's slide number 10.

A BMI of 25 or greater is overweight, and a 30 or higher is obese.

With this chart we see a 10% difference with less people with disabilities reporting being at a normal weight as compared to people without disabilities.

We also see a 6% difference with less people with disabilities reporting being overweight than people without disabilities.

And lastly and most importantly, we see people with disabilities self-reporting, we see 16% reporting a BMI of 30% or greater compared to people without disabilities.

So we see that that's the biggest disparity when we look at this chart.

And it is within the obese BMI.

This is important to note, because as many of us know, there are multiple chronic health conditions associated with BMI, especially when we look at the chronic health conditions related to being obese or severely obese.

Which as we know, those include heart disease or stroke, high blood pressure, some cancers, and diabetes, to name a few.

So speaking of diabetes, this slide, slide number 11, shows us the health disparities of people living with diabetes.

So here we see around 13% more people with disabilities indicating living with diabetes compared to people without disabilities.

And this is very important to note as well, because this shows us the data that really concerns the CDC, which is our funder, and why they've made it a top priority area for all the CDC funded offices in the country, which there are 19 offices that the CDC funds on disability and health nationally.

So lastly, we're going to look at current smoking status.

Here we see a 10% difference in the number of people with disabilities who smoke compared to people who don't smoke.

And again, a health risk behavior with a multitude of negative health consequences, of course including many chronic conditions.

Slide number 13.

So when we were talking about insuring our self-evidence -- our evidence-based workshops and programs are inclusive, who are we wanting to make sure we include?

It's pretty much everyone.

We want to make sure people with and without disabilities are included, people with functional impairments, particularly seniors, who don't always identify as having a disability, so as we age, we acquire disabilities, most of us will within our lifetime, if we live long enough.

Then we're also including a person with a chronic condition that may be related to their disability or not.

And why is this information important?

Why do we want to share this with you as lay leaders and others involved with chronic disease self-management programs?

Well, it's important because first of all, as we saw from the data, people with disabilities are disproportionately affected by chronic conditions, people with disabilities are also living longer, and again, anyone who lives long enough will acquire a disability.

And we want to make sure that everyone who needs these programs are able to access them.

And this ultimately helps expand your reach and of course it's the right thing to do.

And lastly, giving -- providing equal access is the law under the ADA.

Carla is going to share with us more information about the ADA.

>> Thanks, Angela.

I'm on slide 15.

I'm going to spend a few minutes to explain the Americans with Disabilities Act.

And how it provides you a road map on how to create an inclusive and welcoming workshop for everyone.

Specifically people with disabilities.

The ADA is a federally civil rights law that prohibits discrimination against people with disabilities in the areas of employment, transportation, state and local government, public accommodations, and telecommunications.

There is no ADA police, it is a complaint-driven law, signed by the first President Bush on July 26th, 1990.

Because it's almost three decades old, there are many helpful government organizations, resources, and fact sheets available to provide support and resources that can help you follow the ADA.

There are three ways a person can qualify for protection under the ADA.

Number one, having a physical or mental impairment that substantially limits one or more major life activities.

Examples of major life activities include caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, learning, and working.

Or a person with a record of an impairment even if he or she does not currently have a disability, or a person who does not have a disability but is regarded by others as having a disability, an example may be a person with severe facial scarring.

Slide number 17.

There are hundreds of types of disabilities.

While one person may have multiple disabilities, another may have a single disability with symptoms that fluctuate there.

Are some disabilities that are less obvious, such as diseases of the heart or lungs, neurological, or arthritis that may reduce physical stamina, decrease coordination, or cause pain.

Most architectural design standards are based on the needs of people defined by one of the following four general categories.

There are two types of mobility disabilities.

Some people have severe mobility disabilities, and use a power-driven or manual-operated wheelchair or scooter to maneuver through their environment.

People who use wheelchairs encounter some of the most obvious access problems, including maneuvering through narrow spaces, going up or down steep paths, moving over rough or uneven surfaces, making use of toilet and bathing facilities reaching and seeing items placed at conventional height, and negotiating steps or abrupt changes in levels.

Ambulatory mobility category includes people who walk with difficulty, or who have a disability that affects gait or balance.

People who use crutches, canes, walkers, braces, or artificial limbs to assist them in walking are included in this category.

Visual.

This category includes people with partial vision or total vision loss.

Some people with a visual disability can distinguish between light and dark, sharply contrasting colors, or large print.

But may not be able to read small print, negotiate dimly it will spaces, or tolerate high glare and may have color-blindness.

Hearing.

People in this category use a variety of methods to compensate for their inability to hear sound.

Those with partial hearing loss may depend on hearing aids or lipreading.

Some people who are totally deaf also use lipreading or use American Sign Language.

Cognitive and hidden disabilities.

There are many other disability conditions that are not apparent from an individual outward appearance.

These usually involve cognitive or learning disabilities and may affect understanding, communication, or behavior.

People with these types of disabilities may have difficulty navigating facilities particularly where the signage system is unclear or complicated.

Slide 18.

The ADA is comprised of five sections or titles that address discrimination in different areas of our society.

Tight title I covers employment, Title II covers state and local government, Title III covers places of public accommodation or businesses, like Fred Meyer.

Title IV covers telecommunications, and Title V covers mislaneus legal or procedural components.

Title II and Iiii are the most relevant for someone planning a workshop or event that is inclusive to people with disabilities.

Slide 19.

Many of you work in a state entity or get public funds to operate your workshop.

I'm going to talk about Title II of the ADA that address estate and local government programs.

Here are some highlights.

Make reasonable modifications of policies, practices, and procedures to avoid discrimination.

An example of this would be to allow a service animal attend the workshop even if you have a no-pet policy.

Secondly, provide auxiliary aids and services to ensure effective communication.

What I mean by effective communication is, whatever is written or spoken must be as clear and understandable to people with disabilities as it is for people who do not have disabilities.

Number three, ensure that individuals with disabilities are not excluded because buildings are inaccessible.

Throughout tooted a presentation we'll be providing you tools and examples on how to ensure your workshop is accessible and barrier-free.

Slide 20.

Auxiliary aids and services.

Cover title organizations must provide auxiliary aids and services in order to communicate effectively with people who have communication impairments.

ADA used that term to refer to ways to communicate with people who have hearing, visual, or speech disabilities.

The key to communicating effectively is to consider the nature, length, complexity, and context of the communication.

What is effective communication is person specific.

Always make sure to ask a person with a disability what is their preferred way to communicate.

Slide 21.

We don't have time to go all -- to go over all the different types of auxiliary agent services, that would be another webinar in itself.

However, I want to share with you some examples and resources on where to get more information.

Example for people who are blind or have some vision law includes providing audio recordings, large print, or braille.

Make sure your flyers are written -- make sure your flyers or written communication can be read by people who use computer screen reading programs and software.

Another option is using a qualified reader.

A qualified reader means someone who is able to read effectively, accurately, and impartially using any necessary specialized vocabulary.

For people who are deaf or have some hearing loss, some auxiliary aids and services may include providing a qualified sign language interpreter, using computer real time captioning, this is similar to court reporting in which a transcriptor types what is being said and what we are using today for this webinar.

Finally, consider providing important workshop information in all types of formats.

Audio and printed form.

Slide 22.

Because of technology is moving fast, there is some really wonderful advances in the relay service option.

TTY has been around for a while, and it is a free nationwide telecommunication relay service, which uses communication assistance or relay operators who serve as liaisons between people who have hearing or speech disabilities and use a text telephone.

There is also a free internet-based relay service operated by sprint.

This service is for deaf and heard of hearing individuals that allows them to place relay calls over the internet via their computer or laptop.

There is no need for traditional TTY equipment.

The web interface handles the conversation.

Also there is video relay service.

This is a free subscriber-based program for people who use sign language and have video phones, smartphones, or computers with video communication capabilities.

And lastly, I want to share with you this program called speech-to-speech.

It is good for a person who can hear but has speech disability.

Speech-to-speech allows a speak-disabled person to voice his or her conversation.

A specially trained STS operator repeats the words of the person with a speech disability to the other person.

No special equipment is needed to use the service.

You can use one of these types of technologies to get more information simply call Oregon relay, dialing 7-1-1 or the toll-free number will connect you with a relay operator who can assist you.

I recommend checking out the website, they have little videos to help you understand how each program works.

Recently I called and talked to a relay operator who was very helpful.

>> Moving to slide 23, we're going to move into recruitment and logistics of conducting a workshop.

And I just want to say with the information that Carla provided, as we move through these slides from this point on, I think we'll see where some of the auxiliary aids and services that Carla pointed out can be really helpful on the recruitment end, where others could be also very beneficial for the workshop themselves.

So with recruitment, and some of these things I'm sure are going to be familiar to everyone, so just a review and highlight, when it comes to recruitment, one of the ways to make sure your recruitment information is accessible and reaching a large number and variety of potential workshop attendees, is by using a variety of outlets or means of communication.

So, for example, direct phone calls to help with recruitment, Oregon relay service, or video relay service that Carla talked about, direct emails, posting things on your website or partner's website, accessing local radio stations, and of course either your newsletter or partners' newsletters.

There's slide number 24.

Then another thing that is really beneficial to getting individuals to attend the workshops is getting direct referrals from partnering agencies or health care providers.

So, for example, centers for independent living have pure specialists that could refer people to your local workshop, so if you let them know they can let their constituents know about your workshop.

Then of course other disability advocacy or support groups, letting them know about your upcoming workshop.

Disability service agencies, a lot of them have their own consumer base database for recruitment, and would be happy to share your information.

Then of course local mental health networks and then medical providers.

And for those of you maybe not familiar, in Oregon there are two groups that meet on a regular basis that are working on the closed loop referral system for our chronic disease self-management program.

And one group you could join is the Oregon self-management quarterly meeting, and you can find information on this group through the Oregon health authority.

And then the other group is called the regional evidence-based health promotion and self-management education coalition, and that group can be accessed through Jan McManus with the Multnomah County aging and disability services division.

And if you want more information on those, you can contact me after the webinar as well.

Information about places to post flyers, other information we'll find on slide 25.

And again, these are just some ideas.

Maybe some you've thought of and some might be new to you.

Again, disability service agencies would be more than happy to post flyers about your workshop, medical clinics, local pharmacies, another good place sometimes people don't think about is durable medical equipment stores.

Local churches, food banks, I know some grocery stores have community bulletin boards, like Fred Meyer.

And then also to advertise online.

You can advertise on Craigslist, in a local disability community newsletter, through maybe a local University, again, newspapers and then your Facebook page or your partners' Facebook page.

For those of you that don't know about it that are in and around the Portland area, the City of Portland's disability program has a wonderful online newsletter, and that's their logo right there that we are sharing on this slide, and they are wonderful at helping get information out to the community about upcoming events.

Next I want to spend a few minutes talking about recruitment flyers themselves.

So on this slide, which you can't see the number, but it's 26, on this slide, I have two examples of a flyer with a similar information highlighting the same workshop.

And I'm going to give you a moment to look them over and see if you can tell a few differences between the two.

So then for slide 27, what I'm going to do is I'm going to go through a list, and there are quite a few bullet points.

I'm not actually with each bullet point switching slides, I'm going to stay on slide 27, I'll tell you when I switch to slide 28.

Let's look at a few things that help make a recruitment flyer or other materials accessible.

One of the very first things is to keep the font type consistent.

You'll see on the slide we have a little bit of variation, but not a lot.

I know sometimes when people are going to put together a flyer they think I get to be creative and use fancy colors and fonts, and underline, and italics.

And really, to make sure that your flyer is accessible to people with visual impairments or possibly cognitive impairments, it's important to be concise and clear.

One way you can do that is keep your font type consistent.

And you don't, again, don't want really hard or fluffy or hard-to-read fonts.

You want your font size to be no less than 14 font.

So you don't want to have fonts down around nine, eight, even 10.

You want to have no or minimal underlying or italics.

One of the reasons for minimalizing your underlining is that when you post these flyers on your website or even include them in emails, they get confused possibly as a link.

So people will try to click on them as a link, and then italics depending on the font style you're using, can be difficult to read.

You also want to make sure your information is really clear.

You don't want to have run-on sentences, and where people have to guess, what is it that you're trying to tell them.

Another thing that you want to have on your flyer is an accommodation request, and you want to have that information and you want to provide it with a deadline.

And I'll -- I have another slide that will show that a little clearer.

If you look in the right-hand corner it says accommodation request, with a question mark.

Then you want to give the person that they would contact their contact information, if they do want to request an accommodation, and you want to let them know when you need to know, when they need to let their need be known by, and in this case it was September 29th.

So that's the information you want to include.

You also want to include visuals that depict a person with a disability, so the people with disabilities feel the flyer speaks to them, and it's just a way to make sure you're definitely more inclusive.

You want to look at appropriate color schemes, you don't want blue and green combinations in case there's someone with color-blindness, and there's actually a wide range of different color-blindness, blue and green is one of the most common.

So you wouldn't want to have a green background with blue font.

You also need to make sure there's high contrast.

I see this actually a lot with printed materials, brochures, and flyers, that you have a background that's really dark, like even a black, and then it has green, kind of a forest green font.

So that does not have high contrast, and that can be difficult for people to read.

Again, you want to use plain language and short sentences, and you want to have an active voice.

You want to speak directly to the viewer, so they feel like it's speaking to them and it's clear, and it's encourages them to take an action.

Which in this case is to sign up for the workshop.

You want to make sure that the information is accessible on websites, and is available in multiple formats.

So if you are going to post information on a website it's good to have it in a word version, PDF, and also use ALT text boxes.

At the end of the -- of this presentation we have information on how to make sure your information on your website is accessible.

So this here, again, is an example of the wording that you can use when you're offering to provide an accommodation for someone.

So this is the wording you would use.

As an example, again, you want to make sure you have the name of the organization or person responsible, all their contact information, and the date that you require the accommodation by.

And the reason the date is important is because if you're an agency hosting the event, you might need time to ensure that you have the accommodation lined up.

So, for example, if someone needs interpreters, that can take several days to get lined up, or if you even have them lined up ahead of time, the cancellation policy might be a week or two out.

So you definitely want to give a date when you feel that's reasonable, and Carla, when is that typically, is that like two weeks to 10 days, something like that?

>> Yeah.

>> Okay.

So, yeah, that's important too, or if there's any other accommodations that person might request, it gives you and the hosting site time to ensure that you can provide that.

Then these are some handy accommodation checklists that you can use during the registration process.

So it might not be you yourself if you're the lay leader, but maybe the agency that's hosting the event.

And you might not need to use all of this information on there.

Again, this will be available on our website.

You can download this and use the parts that are most helpful for you and your agency and your event.

So this is two pages, so this is page one of two, and I'm on slide 29.

And what we have there is information about scheduling, if you want to try to get ideas of when the participants are available if you haven't really scheduled one yet, but you're trying to get a sense of when it's -- would be best for capturing the most people to attend.

You can ask about transportation, what kind of transportation will they be taking to and from the workshop, child care, you can ask if you're able to provide child care, if there's any needs around that.

And then at the bottom of the form we see interpreters, we have sign language interpreters or other language interpreters.

And then on the page 2 on slide 30, we see other alternative formats that the person may want to request, large print, and I won't read all those, those are the ones that Carla went through as well with some of her auxiliary aids.

Another good thing to think about is alternative seating, and we'll look at a few slides that represent that as well.

But someone may feel more comfortable sitting close to the door.

Maybe they need -- they feel more comfortable sitting in the front next to the presenter.

Any mobility needs that they have, again, Carla went over quite a few of those, and we'll touch on those in a little bit as well.

Dietary needs, if you are going to be providing meals, or refreshments, it's great to know about dietary restrictions ahead of time.

Environmental allergies, we'll talk more about that as well.

But it might be nice to have a fragrance-free workshop just in general as a practice.

But some people may have severe allergies to certain environmental scents.

And preferred method of conduct.

Again, phone, email, text, what works best for them.

Okay.

>> Thanks, Angela.

I'm on slide 31.

Planning ahead is key to making people feel included.

Here are some key concepts when planning where to hold your workshop.

Consider your audience and what places they are already at.

Such as local community centers who are open to the general public.

These places are most likely familiar with ADA accessible standards and perhaps have an ADA coordinator that you can discuss your workshop and audience.

Even if it's a brand-new building, make sure to conduct a site visit prior to your class.

The next slide is a copy of a very simple accessibility checklist you can use.

Also, many people with disabilities use and rely on public transit.

So try to be close to a bus line or on a bus line.

Your participants may be arriving by a friend, paratransit, Uber, or a Lyft ride.

Be sure to have a safe, curbside drop-off area.

Finally, really look to see if there is adequate disabled parking spots that are close to the building entrance and look out for obvious barriers, from the parking lot, to the workshop room.

Slide 32 shows a simple checklist for accessibility to use at your site visit.

This checklist is on the OODH website and you can download it from their website.

Facility and physical access, slide 33.

Looking at existing signage, depending on the location of your workshop room, you may want to add more signage and navigational ways to get to the workshop room.

Also, let the receptionist staff know about your workshop so they can provide additional support or assistance on where the disabled parking is, accessible restrooms are located, water fountains, or other built-in features.

Most importantly, identify where the accessible restroom is located.

Ideally you would want it to be on the same floor that your workshop is on.

If not, know where the accessible restrooms are located and add signage on how to get there.

Slide 34.

When looking at your workshop room, keep in mind accessible route of travel.

This is a term used by the ADA standards, and this is looking at coming from the parking lot into the building and eventually into the workshop room.

You can capture these items if you use an accessible checklist.

Here are some quick and easy measurements to consider and be aware of.

The accessible doorway provides at least a 32-inch clear width space to enter and exit.

A clear pathway is 36 inches wide and this is for both outdoors, like a sidewalk, and indoors, getting around the tables inside the workshop room, or tables where refreshments or resources are located.

Also, think about having raised tables for people using wheelchairs.

A raised table measurement is 28-34 inches above the floor.

Move chairs to keep an open space for wheelchairs to roll under the table, and like you see in this picture, a quick and affordable solution is to raise a table by purchasing bed risers from either target or bed, bath, and beyond.

So hopefully you can see the raised tables and how this gentleman is able to comfortably be at the table and also have room for his service animal.

A tip when you're looking at the workshop room and space is imagine if you use your -- you're in a wheelchair, could you get into the room and move around safely and comfortably?

Or better yet, if you know a person with a mobility disability, ask them to go on the site visit with you.

Good advice.

And I just want to say here too before we go to the next slide, in my experience in conducting workshops that people that utilize scooters, especially really could benefit from a raised table.

So that might be just something to be aware of, hopefully they would ask you and they would tell you about that, but typically anyone that use as scooter needs a raised table.

And that's why these checklists, the accommodation checklist and the site visit checklists are so important to use, because you can discover this information one from the participant, and also when you're doing the site visit at the location.

You can be prepared to make adjustments or modifications.

>> I'm on slide 35, and we're going to move into some of the logistics around the workshop as well.

So one of the things you can do is plan a session zero, and I know some of you viewing this have done that.

But especially important for a session zero could be to get to know your participants as a group, and this is helpful before it begins so you can get to know their specific needs and accommodations that might be a place where if someone hadn't requested anything, that it would be apparent, that would be -- it could be very helpful.

Another thing to do is offer assistance before the workshop begins, and help people complete the forms they need to fill out.

So I have found, maybe you have as well, that this really helps with time management, it gets redundant when you have to say a little blurb about the importance of filling out the forms, the persons come in and give them a one-on-one, but it can really help avoid the class starting late.

And then of course you would also do your overall introduction about the forms, but just having people start them when they come in can be really helpful.

Lastly, to be aware of the constraints around paratransit, so Carla talked about how a lot of people use public transportation and paratransit, and I have found too that people with disabilities often do utilize paratransit to come to the workshops will, and because of that, they sometimes don't have a say in when they arrive or leave.

So paratransit or a door-to-door service gives riders a pickup and drop-off window of when they're going to be providing the ride, and that can really vary on either end by about 30 minutes or so.

So it's just good to have that understanding.

And people typically share that with you if they have to leave early or they think they're going to arrive late.

Another important point is to avoid early morning events.

So some people that have physical disabilities particularly getting ready in the morning and getting ready for their day can be really time consuming.

So not having an 8:00 workshop, but "Something's Gotta Give" later in the morning, 10:00 or on, can be helpful.

Another thing is to make sure you take all your scheduled breaks, that's really important for everyone, but can be really important for people with disabilities for various reasons.

Another thing is to give clear directions when you are giving directions to like the restrooms or water fountains, or other important things like maybe the door that they can go in and out of, and just avoid pointing and just saying over there.

So make sure you say you want to go out the door, you're going to turn right, go down a hall, and the drinking fountain is on your left.

Something like that, so you want to make sure you give clear directions.

>> I'm on slide 37 now.

So we're going to talk about communication.

So the living a healthy life with chronic condition is of course available as a book, but it's also available as an mp3, which last time I checked was $19 and in a CD form, which is $26 from bold publishing.

One thing we reck -- bull publishing.

One thing we recommend is having several of these available for your attendees.

So they cost pretty much the same as a book, and these are great for people with visual impairments, cognitive impairments and people that will they're just getting older and just reading in general can be difficult for various reasons.

So to have these available you immediately have an accommodation on hand.

Another good point is know where to get interpreters or CART reporters, and CART stand for communication access real time translation.

So we are using LNS captioning for this webinar, that's -- they're located in Portland but can do captioning anywhere in the state.

There's other reporting -- captioning companies as well.

Another thing is to prepare your staff for using the TTY or relay calls, which is 7-1-1, and easy way to do that would be maybe to see those videos, Carla, have the staff watch a video so just in case they get a call from a relay operator, they're not surprised.

And they know what that means.

Another thing is even though the living a healthy life with chronic conditions book itself is not available in alternative print, last we check the the leader manuals and master trainer manuals can be obtained from Stanford, which I know has been -- Stanford University, they broke off -- anyway.

And accessible electronic formats for producing large print and/or braille.

Another thing you dock if you're looking for entepreneur Oregon City or CART, some good groups to contact are for the department of human services aging and people with disability offices, the centers for independent living in your area, and local colleges that have disability student services, they might be able to help you.

So there's plenty of resources out there that hopefully your community, you can access.

Communication in the workshop, and again, some of these are things as leaders that we do anyway, but it's important to verbalize all agendas, posters, and when you're brainstorming.

Invite individuals who identify as being hard of hearing or low vision to -- everything just kind of went -- off.

John?

Okay.

So I'm going to start this slide over.

Slide 38.

>> We've lost our captioner.

They're back.

So go ahead.

I can cut this out.

>> John, can I go back to slide 37 and do that over?

>> Go back like you never did it.

Yeah.

>> Okay.

We're going to start here.

>> For slide 37, we're going to talk about communication.

As we know, the living a healthy life with chronic conditions book for the participants is available in book form, but it's also available as an mp3 for $19, and in CD form for $26 from bull publishing.

And it's a good idea to have several of these available.

If you do, you already have a great accommodation for people with visual impairments and/or cognitive impairments and others that might find it easier to listen to the information in the book rather than reading it.

Another important thing to note is to know where you can get interpreters and CART reporters.

CART stand for communication access real time translation.

And again, that's what we're demonstrating here with this webinar.

So there are multiple captioners available, the one we're using is LNS captioning in Portland.

And if you need help finding interpreters or CART reporters, the thing to do is to contact the department of human services aging and people with disabilities offices in your area, you can contact center for independent living if you have one in your area, as well as local colleges or Universities have disabilities student services, and they would probably have good information of where you can find these accommodations.

Another point is to prepare staff who will be taking the registrations of workshop participants.

For how to use the TTY and the relay calls.

And Carla, would you say probably the best way to do that would be to watch the video as you demonstrated earlier?

>> Right.

Yeah.

Have them get on the website, the Oregon relay service, and they can see a variety of videos that can help them understand what a relay call would look like and sound like.

>> That would be great.

Okay.

Then lastly the leader manuals and the master trainer manuals can be obtained from Stanford in accessible electronic formats, and then that you can take that electronic format and produce large print and/or braille.

So the living a healthy life with chronic conditions from what I understand is still not available in large print or braille, but the leader manuals and master trainer manuals can be.

Slide number 38, talking about communication in the workshop, so for all of us that are lay leaders, these tips and points are probably what we're doing anyway, but it's just nice to review them.

So one thing that's important to do of course is verbalize all agendas, posters, and brainstorming.

Again, for people with visual impairments as well as hearing impairments.

Invite individuals who identify as hard of hearing and/or low vision to sit in front of the room.

And ensure that participants speak loudly.

I know this happens in every workshop I conduct, people self-identify, and if they're in the back of the room on the first day, by the second class they'll be up in the front.

So if people don't self-identify and you have someone in the back that keeps raising their hand and saying they can't hear you, you of course can suggest they sit in the front of the room.

And then of course if you do have people that have hearing impairments or are hard of hearing, then you want to encourage all the participants to speak loudly.

And I know I do a lot of workshops at senior centers, so people of course as we're aging, we lose some hearing, so there's always one or two people in the group that could benefit from people speaking loudly.

And of course you want to speak slowly and clearly, and as much as possible face the participants when you're speaking.

That helps with anyone that could benefit from lipreading, as well as helps project your voice outward.

Looking at the environment itself, if you're providing refreshments it's to are to know -- important to know what ingredients are in the food.

That can be helpful for people that have food allergies.

Also make sure that the food is accessible to people with mobility impairments.

So if you are using a counter or a table to display your refreshments, make sure they're pulled to the front and easily accessible by anyone that has a wheelchair.

So they can reach the food that's on the table.

Avoid wearing perfume, cologne, or heavily scented products.

Some participants may be sensitive to perfumes and chemicals and can suffer potentially serious health consequences triggered by exposure to scented products.

And I know I personally have analogy to perfumes and colognes, so it's just a good idea maybe even at the first class to just make that standard, say when we come back to the class, please be aware not to wear perfumes, colognes, and heavy scented products.

Along those lines you want to hold the workshop in a room with good ventilation.

And this is especially important if the room has recently been clean the with harsh chemicals.

I know this happened with me in one of my workshops at a senior home, they were storing the bleach and other cleaning products in a cabinet in the back of our room, and when they came in with all those cleaning supplies, we were not in a well-ventilated room, so that bleach smell really filled up the room and was irritating to quite a few people.

So look for a training room that is big enough to move tables around.

The we can think about back on what Carla shared with being accessible with a path of travel, and/or having service animals.

You want to make sure they can get to their seat, the restrooms and tables where you might have refreshments, handouts, or other resources.

Another thing that sometimes we don't think about but is equally important is try to minimalize -- minimize external noises.

Such as traffic or simultaneous classes.

Again, some of the workshops I've done in different locations will have like expandable wall, but they'll expand that goes between the workshop I'm putting on and then another class that will be offered at the same time.

And when that is a class like dance, or something that has music and a lot of movement and noise and laughter, that can be really disruptive.

So that's something that I -- when I go into a workshop and I see my space and there's an expandable wall I immediately talk to the host agency and say what's going to be happening on the other side of this wall, because I need an environment that's very quiet.

And a few times it has been really disruptive and I've had to conduct a workshop practically yelling over some of it when we weren't able to accommodate another classroom for one of the classes.

So something to be thoughtful about.

>> I want to spend a few slides on service animals.

If you have done an accommodation, a reasonable accommodation checklist when you're registering folks to your workshop, you're going to know if somebody has a service animal.

So if you know you have a service animal or maybe two service animals coming to your workshop, make sure your staff knows or the host agency knows the service animals are welcome at the workshop.

Service animals come in a variety of sizes and breeds, and the ADA does not require a person to carry proof of identification, license, certification, or require the dog to wear a vest.

Although some do this, it is the handler's preference, not the ADA law.

You may need to modify your policies to allow service animal at your workshop and you cannot ask a handler to pay an extra surcharge to have the animal there.

If you know you're having all service animal at the workshop, also provide trash cans near the relief areas.

And also although tempting, do not distract, pet, feed, or interact with a service animal without asking the handler first.

Remember, a service animal is a well-trained working animal, not a pet.

Slide 41.

A common question we get on the ADA hotline is how can you be sure it is a service animal?

Especially when it's not obvious.

Most of us are familiar with guide dogs for the blind, but some people with disabilities have a legitimate service animal when their disability is hidden.

An example of this might be a person with PTSD or a seizure alert dog.

According to the department of justice, you can't ask a person about their specific disability but you can ask two questions.

When it isn't obvious that this is a service animal.

The first question is, is this a service animal that is required because of a disability?

And that is a yes or no response.

And the second question, what work or task has the animal been trained to perform for you?

The work or task a dog has been trained to provide must be directly related to the person's disability.

And the person with a disability needs to be able to answer these questions readily and having these answers for you and that you can make a decision if it is actually a service animal.

Service animals whose sole function to provide comfort or emotional support do not qualify as a service animal under the ADA.

And this is where it gets tricky.

Here will two excellent publications that I have listed on this slide that can help you understand more about service animals' rights and handlers' responsibilities.

As always, you can call the ADA hotline with questions or clarification.

>> Slide 42 talks a little bit about etiquette.

And there are some good resources available on our website that you can use as well, so I'm not going to go into a lot of detail.

But it's really important to use appropriate and/or depending on what you're talking about, people first language.

Some examples are, you would want to say a person who uses a wheelchair and you would not want to say a person confined to a wheelchair.

You would want to say, "a person with a disability," you would not want to say "a handicapped person."

Another example is, you would say "joe has cerebral palsy."

Not "joe suffers from sell bral palsy."

These are a few examples and handouts at the end have more details.

Another thing is do not make assumptions about prefd formats or means of communication.

Always ask people.

I think that makes sense, but you just -- you don't want to make any assumptions.

Another thing is that some older people may not know what to ask for.

So again, as we're all aging and we acquire disabilities, because it's new, we might not even be aware of some of the things available to us.

So, for example, if somebun is having difficulty reading, as they're abling because of their eyesight, they might not know to ask for the book on CD.

So those are just good things to remember.

And then also do not ask personal questions without being invited to do so.

Good etiquette.

Slide number 43, so last we here before we move into resources, just to wrap up here, making incluesivity part of your job.

So just make it part of your everyday job and not a special way of doing things.

Just incorporate it into your usual processes and it just becomes habit.

Another thing is communication access shouldn't be a surprise cost.

Make it part of your budget every time.

So set aside money for interpreters if you would need those, have a budget available for that, work with maybe the hosting agency or the agency that has your license.

Another thing is like we talked about having the CDs available, and one thing too with the CDs, we -- most often we lend those out to the workshop participants during the workshop, and then they return those back.

So if that is an expense above your means, at least you have them available.

Also, another thing you can do is look for tax breaks and corporate sponsorship.

And I'll let Carla talk more about that.

>> Maybe not right now, though.

In a minute.

Okay.

I am the next slide, slide 44.

So looking at some resources, again, there's several tools for planning accessible workshops, and they can be found on our website, which is the first link there.

Also OHSU has a great public event disability access accommodation request procedure, so if you want some language and some ideas on policies and procedures, that's a great resource there.

Again, if you want to look at making sure your printed materials are accessible, then again, OHSU has a great publication guide.

And lastly, I put a link here, maybe some of you have already seen this, but there's a great video out of New York on how to include participants with disabilities in your workshop.

>> Now I'm going to talk to you and share with you some resources that might be helpful.

If you happen to be a small or private business, not a state or local government agency, there are two federal tax incentive programs available to encourage compliance with ADA.

One is a tax deduction to remove physical, structural, and transportation barriers and another is a tax credit to not only remove physical barriers, but also provide assistance and credit for when you provide auxiliary aids and services such as sign language interpreters.

So the first two resources on this slide have more information about these programs.

Also, the ADA national network has developed many helpful fact sheets as well as our office Northwest ADA center on a variety of topics related to the ADA.

And this third bullet is a link to our website that has many, many accessible checklists for site surveys, so that's another option for you to use as well as the one that OODH has on their website.

And finally, a Planned Parenthooding guide for making temporary events accessible for people with disabilities.

It is an excellent publication on planning temporary events.

So it's just another resource to get more in depth in what we've been talking about today.

This slide, number 46, covers some auxiliary aids and services, resources, and again, there are fact sheets, guide to auxiliary aids and services is a wonderful fact sheet that goes into a lot of detail on the different types of communication resources that you can provide your participants.

Oregon relay program, I can't say enough about this group, great, great information on their website, and also talking with them, they're very approachable and will explain how their program works.

And then we didn't get in a lot of time to talk about accessible websites, but it is still an important piece to make sure that your website is accessible for people who do use screen reading software.

And this is a link to a good publication as well as calling our office to get more information and we can send you about this accessible website and how to make sure your website is accessible.

Slide 47 has an information about the Northwest ADA center, how to reach us, either by our phone number, the 1-800-949-4232, or going on our website and looking at our fact sheets, resources, projects, and contacting us for specific information and questions.

Slide 48 is my contact information at the ADA center, and as an Oregon partner, I'm available to talk with you and provide technical assistance.

My direct number is on this slide as well as the 800 number that's available Monday through Friday, 8:30 to 4:30.

All right.

And this is my contact information.

The Oregon office on disability and health.

>> The last link there at the bottom is our website that has the resources we talked about that are also available.

And we'd like to say thank you so much for joining us, and we hope this information was very helpful, it's really important to note that little steps go a long way in making people with disabilities feel included.

So on behalf of Carla and I, we wish you the best of luck in making your workshops accessible to all.

Thank you.

>> Audio recording for this meeting has ended.