ADDENDUM I

Access & Functional Needs: Zero to Full Competency

Curious how Tier, Stage, and Phase relate? See the Glossary.

Why This Addendum Exists

Chapter 10 tells you what to have and do at each tier of a disruption for a household member with access or functional needs. It does not build the actual caregiving and equipment-management competency that makes those plans real rather than aspirational, especially the “named backup caregiver” Chapter 10’s Tier 1 calls for. This addendum is a skill-building curriculum for exactly that, built from real certifications and training, not just planning checklists.

It’s organized by skill stage, not by disaster duration, following the same structure as the other addenda. As with Addendum A, treat this as general skill-building guidance: the specific care needs of any household member should still come from their own doctor, DME supplier, or care team, not from this addendum.

Four stages: Foundations (basic safe practice), Applied Practice (hands-on competence), Self-Sufficiency (independent, resilient skill), and Mastery & Teaching (able to teach others and operate at community scale). Each stage covers two sub-skill tracks that run in parallel: caregiving, and medical equipment/device management.

Stage 1: Foundations (Awareness)

Goal: know the core safety facts well enough to help without causing injury (to the person you’re helping or yourself), and understand your household’s specific equipment landscape. This stage is readable in a weekend.

Caregiving: Core Knowledge

The core concept at this stage is body mechanics: most caregiver back injuries happen from lifting or transferring someone incorrectly, using the back instead of the legs, twisting while lifting, or attempting a transfer alone that genuinely needs two people. Understand the CMIST framework already covered in Chapter 10 (Communication, Medical care, Independence, Supervision, Transportation), since it's the actual planning model Utah's public health system uses, and it gives structure to what "access and functional needs" actually covers beyond mobility alone.

Medical Equipment: Core Knowledge

The core concept at this stage is knowing your household's specific devices well enough to answer basic questions without searching: exact power draw in watts, battery backup duration, and the manufacturer's own emergency guidance (not generic advice). Chapter 10's equipment-specific notes on CPAP, oxygen, and dialysis are the floor, not the ceiling, of what you should know if your household actually depends on one of these.

Stage 1 Learning Path

Resource	Cost / Format	Notes
Be Ready Utah: Access & Functional Needs	Free, online	beready.utah.gov/family-preparedness/access-and-functional-needs. Already cited in Chapter 10; the CMIST framework's official source.
Your specific device manufacturers' emergency/backup power guidance	Free, from manufacturer	Call or check the manufacturer's site directly for your exact model, not a generic device category.
National Kidney Foundation emergency planning guidance	Free, online	kidney.org. Already cited in Chapter 10, for any household managing dialysis.

Stage 1 Practice Exercises

- **Document your household's exact device specs:** Write down the exact power draw, battery backup time, and manufacturer emergency contact for every powered medical device in your household.
- **Learn the CMIST framework well enough to apply it:** Walk through your own household's plan against all five CMIST categories, not just mobility, since Communication and Supervision needs are easy to overlook.

- **Watch (don't yet perform) a proper transfer technique:** Find manufacturer or PT-produced video guidance on proper transfer technique for your household's specific equipment (wheelchair, hospital bed) before attempting it yourself.

> **Self-Check: Ready for Stage 2?**
>
> You should be able to recite your household's specific device power/battery specs from memory, explain all five CMIST categories, and describe correct lifting body mechanics without looking it up.

Stage 2: Applied Practice (Competent)

Goal: move from knowing the theory to having actually practiced caregiving physical skills under real instruction, and have a real, willing backup caregiver in place, not just a name on paper.

Caregiving: Applied Practice

- **Take the Red Cross Family Caregiving course:** Covers home safety, infection control, medication safety, reading and recording vital signs, and general elder/dependent-care skills; available in classroom and self-study formats through local Red Cross chapters.
- **Practice a real transfer with instruction:** Under supervision (a home health aide, PT, or the care recipient's own care team), physically practice the specific transfer technique your household actually needs, not a generic one.
- **Formalize your named backup caregiver:** Chapter 10's Tier 1 calls for a named backup caregiver; Stage 2 is where that person actually sits down with you, learns the specific care routine hands-on, and confirms in writing they're willing and able.

Medical Equipment: Applied Practice

- **Run a real backup-power test for every device:** Actually run each powered medical device on its backup power source (battery, power station) for its full rated duration at least once, not just assume the rating is accurate. See the Backup Power for Medical Equipment & Caregiving skill guide for device-specific sizing and runtime planning.
- **Practice basic troubleshooting for your specific devices:** Learn your device's common failure points and basic fixes (a clogged CPAP filter, a low-battery warning sequence) directly from the manufacturer's manual.

- **Confirm utility priority reconnection registration:** If not already done from Chapter 10's Tier 1, actually complete your electric utility's medical equipment priority reconnection registration rather than just knowing it exists.

Stage 2 Learning Path

Resource	Cost / Format	Notes
American Red Cross Family Caregiving course	Course fees vary by chapter; some self-study free	redcross.org. Covers home safety, medication safety, and general caregiver skills.
Your device manufacturers' owner/service manuals	Free, from manufacturer	Read in full, not just the quick-start guide, for basic troubleshooting.
A backup power source sized to your specific devices	Cost varies by device wattage	Cross-reference Addendum D's (Energy & Heat) load-math practice for correct sizing.

Self-Check: Ready for Stage 3?

You should have completed the Red Cross Family Caregiving course, have a backup caregiver who has physically practiced your household's specific care routine, and have run a real backup-power test on every critical device. A caregiver named on paper who has never practiced the actual routine is still Stage 1 in practice.

Stage 3: Self-Sufficiency (Proficient)

Goal: genuine independent caregiving and equipment-management competency, the actual skill level Chapter 10's Tier 2 and Tier 3 assume a household has. This stage involves real, substantial coursework.

Caregiving: Self-Sufficiency

- **Complete Certified Nursing Assistant (CNA) training:** Utah CNA programs run roughly 76–100 hours combining classroom, online, and hands-on clinical instruction, offered through Utah Tech University and multiple other providers statewide, leading to registration on the Utah Nursing Assistant Registry. This is a genuinely professional-level caregiving credential, not just an awareness course.

- **Train a second backup caregiver:** One backup caregiver is a single point of failure; Stage 3 is where a second person also learns the specific care routine, so illness or unavailability of the first backup doesn't leave the household without support.
- **Understand your household's specific condition in real depth:** Beyond general caregiving skill, build real working knowledge of the specific condition(s) in your household (from the person's own care team), since generic caregiving competency and condition-specific competency are different skills.

Medical Equipment: Self-Sufficiency

- **Build real device-repair competency for your specific equipment:** Go beyond basic troubleshooting to understanding your device's actual internals (filters, tubing, connectors, common failure points) well enough to keep it running longer without professional service.
- **Understand DME supply chain alternatives:** Research and identify at least one backup DME supplier or equivalent device model, since Chapter 10's Tier 3 assumes the normal supply chain may not be available.
- **Cross-train with Addendum D (Energy & Heat):** A household's device backup-power plan is only as good as the underlying electrical competency behind it; Addendum D's Self-Sufficiency stage is directly relevant here.

Stage 3 Learning Path

Resource	Cost / Format	Notes
Utah CNA certification program	Program fees vary; some facility reimbursement available	utahcnaregistry.com lists approved training programs statewide, including Utah Tech University.
Utah Division of Services for People with Disabilities (DSPD)	Free resources; program eligibility varies	dspd.utah.gov. Already cited in Chapter 10; a real state resource for deeper condition-specific and caregiving support.
Utah Parent Center	Free family resources	utahparentcenter.org. Already cited in Chapter 10; Utah-specific family disability resources.

Northern Utah Note

DSPD and the Utah Parent Center are both real, Utah-specific resources worth engaging with directly rather than relying only on this manual; they're updated more frequently and reflect current state programs and eligibility that a static document can't track.

Self-Check: Ready for Stage 4?

You should hold (or be actively enrolled in) CNA certification or an equivalent professional-level caregiving credential, have a second trained backup caregiver in place, and be able to perform real troubleshooting and basic repair on your household's specific medical equipment without a manual in hand.

Stage 4: Mastery & Teaching (Expert)

Goal: professional-level credentials, the ability to train others, and real community-scale capability. This is the stage Chapter 10's Tier 4 (distributed caregiving, community wellness checks) actually depends on.

Teaching & Certification

- **Pursue Certified DME Specialist (CDME) credential:** A national certification (via the Board of Certification/Accreditation) for durable medical equipment repair, troubleshooting, and home inspection, covering oxygen equipment, transfer systems, enteral feeding supplies, and wound care equipment; requires a high school diploma or equivalent plus a minimum of 500 hours of relevant experience. This is the genuine professional ceiling for the equipment track in this addendum.
- **Train additional caregivers beyond your own household:** Chapter 10's Tier 4 explicitly calls for distributed caregiving across the community, not just within one household; Stage 4 is where you teach the transfer techniques and care routines you've mastered to neighbors, not just your own backup caregivers.
- **Volunteer with DSPD or a related organization:** Beyond personal certification, active volunteer involvement with Utah DSPD or a similar organization builds real community-scale caregiving capacity and connects you to people who may need a trained backup caregiver.

Community-Scale Practice

- **Build the wellness-check system described in Chapter 10's Tier 4:** Chapter 10 calls for a structured, regular wellness-check system for isolated or high-need community members; Stage 4 is where you help design and run it, not just list it as a goal.
- **Build a shared adaptive equipment cache:** Chapter 10's Tier 4 calls for a community-level stock of spare mobility aids and adaptive tools; your Stage 3/4 device competency is exactly what makes a shared cache actually usable rather than a pile of unmaintained equipment. The DIY Assistive Equipment Fabrication skill guide covers building or modifying adaptive equipment when a replacement isn't available at all.
- **Ensure community planning is genuinely inclusive from the start:** Chapter 10's guidance on accessible community shelter design and inclusive planning depends on people with real AFN caregiving competency being involved in community-level disaster planning directly, not consulted after the fact.

Stage 4 Learning Path

Resource	Cost / Format	Notes
Certified DME Specialist (CDME)	Exam and application fees apply	bocusa.org/certification/apply/cdme. Requires 500+ hours of relevant experience.
DSPD volunteer opportunities	Free to volunteer	dspd.utah.gov. Contact directly for current volunteer programs.
CMIST-based community planning frameworks	Free, via Be Ready Utah	beready.utah.gov. Use the same official framework at neighborhood scale rather than inventing a new one.

Self-Check: Have You Actually Arrived?

The real test of Stage 4 isn't a credential stack; it's whether someone outside your own household now has a trained backup caregiver or working adaptive equipment because of something you taught or organized, and whether your neighborhood's wellness-check system has actually caught a real gap at least once.

A Suggested Learning Sequence

The two tracks (caregiving, medical equipment) don't have to move at the same pace, and the relevant depth depends heavily on your household's actual needs. As a rough guide, not a requirement:

- **Weeks 1–2:** Stage 1: document your household's exact device specs, learn the CMIST framework, watch proper transfer technique guidance.
- **1–4 months:** Stage 2: complete Red Cross Family Caregiving, practice real transfers with instruction, formalize and train your named backup caregiver.
- **6–12 months:** Stage 3: complete or enroll in CNA certification, train a second backup caregiver, build real device troubleshooting competency.
- **Ongoing:** Stage 4: pursue CDME certification if equipment work is becoming a real focus, train caregivers beyond your household, and help build your neighborhood's wellness-check system.

At a Glance: Access & Functional Needs Deep Dive

A single-page reference for planning purposes. This does not replace the detailed guidance above; use it to see how the four stages scale, and cross-reference against Chapter 10's tiers, which describe what a household needs to have and do rather than how skilled it needs to be.

Stage	Focus	Key Milestone	Primary Resource
Stage 1: Foundations	Device knowledge and body mechanics, no hands-on requirement yet	Can recite exact device specs and the CMIST framework from memory	Be Ready Utah AFN guidance
Stage 2: Applied Practice	Hands-on caregiving skill and a real backup caregiver	Completed Red Cross Family Caregiving; backup caregiver trained and confirmed	American Red Cross Family Caregiving
Stage 3: Self-Sufficiency	Professional-level caregiving and device competency	Holds or enrolled in CNA certification; second backup caregiver trained	Utah CNA certification
Stage 4: Mastery & Teaching	Professional device credential, community-scale capability	Trained a caregiver outside your household; helped run a wellness-check system	CDME certification, DSPD volunteering