

Delta County Access & Functional Needs - Backup Power/Equipment Needs

This form below is to assess the number of individuals in the community who are in need of backup power solutions for their home based medical equipment or other equipment to help with their Communication needs, Maintaining Health, Independence, Support and Transportation (CMIST) Resources, please complete this form with their information. It is an "interest only" form and there is no commitment on the part of the individual, or the Program. The information gathered will be shared with Julia Beems, MA; Emergency Preparedness Program Coordinator with the University of Colorado Center for Inclusive Design and Engineering (CIDE).

This information will assist in pursuing funding to purchase equipment needed to maintain an individual's independence and health during a power outage/disaster so they are not reliant on first responders or shared equipment in a power outage/disaster.

If you have questions, you can contact Delta County Emergency Management - Kris Stewart at 970-874-2004 or kstewart@deltacounty.com

**Turn this form back in to the Senior Lunch Program.
North Fork EMS will submit your info for you.**

What County does the individual who needs assistance live in? _____

Name of Individual Needing Assistance: _____ Age: _____

Phone number (individual or their representative/caregiver): _____

Email (individual or their representative/caregiver): _____

What is the individual's access/functional need or medical condition?

Generally speaking - we don't need specific medical history. Example: On Home Oxygen, CPAP, refrigerated insulin, etc.

What equipment does this individual or their family need to help them maintain their CMIST?
(Resources - Communication, Maintaining Health, Independence, Support and Transportation)

Example: Back up power for Home Oxygen, Fridge for medications, CPAP etc.