

CHECKLIST FOR CMS EMERGENCY PREPAREDNESS RULE COMPLIANCE

Deadline: November 15, 2017

I. Risk Assessment and Emergency Planning

- Conduct Risk Assessment
 - Select risk assessment tool/method
 - Identify likely risk factors that will cause greatest disruption to facility operations
 - Environmental risk factors (e.g. hurricane, flooding, earthquake, bioterrorism)
 - Facility-level risk factors (e.g. equipment failure, active shooter, medical surge, cyberattack)
- Develop Emergency Preparedness Plan
 - Develop strategies for addressing emergency events identified by risk assessment
 - Analyze the patient population's specific vulnerabilities in emergencies
 - Develop plan for the facility's continued operation in an emergency
 - Delegation of authority and succession plans
 - Determine what services the facility will be able to offer during each type of emergency
 - Plan for facility cooperation and collaboration with local, tribal, regional, State, and Federal emergency officials and systems
- Establish framework for reviewing and updating annually

II. Policies and Procedures

- Devise strategies for meeting staff and patient subsistence needs (whether they evacuate or shelter in place)
 - Individual needs (e.g. food, water, medical and pharmaceutical supplies)
 - Alternate sources of energy to maintain facility operation (e.g. safe and sanitary storage of provisions, emergency lighting, sewage and waste disposal)
- Staff responsibilities
- Develop shelter-in-place procedures
- Plan safe evacuation from the facility
 - Identify destinations appropriate for various risks and arrange for them to receive patients
 - Communication strategies and contingencies
 - Transportation strategies and contingencies
- Develop system for tracking the location of on-duty staff and sheltered residents during and after an emergency, or documenting transfer to other locations

- ___ Plan for receiving patients from other facilities or as directed by emergency management officials
- ___ Develop secure system for accessing and utilizing medical documentation
- ___ Establish framework for reviewing and updating annually

III. Communication Plan

- ___ Develop protocol for coordinating patient care within the facility, across healthcare providers, and with public health departments and with emergency management agencies and systems
 - ___ Establish communication channels with other providers to/from which patients might be transferred
 - ___ Establish communication channels with emergency management officials and systems
- ___ Document primary and alternate means for communicating with the following, to ensure continuation of resident care:
 - ___ Key facility personnel
 - ___ Key personal at other facilities
 - ___ Emergency management officials
 - ___ State officials
- ___ Create secure system for sharing resident information and medical documentation with providers as necessary to maintain continuity of care (NOTE: HIPAA requirements are not suspended during emergencies)
- ___ Develop protocol for providing emergency response information and updates to residents and their families or representatives
- ___ Establish framework for reviewing and updating annually

IV. Training and Testing Program

- ___ Develop training program for all staff, individuals providing services under arrangement, and volunteers, consistent with their expected roles
 - ___ Create training curriculum in emergency preparedness program
 - ___ Initial training program for existing personnel
 - ___ Training program for onboarding process
 - ___ Annual training program
 - ___ Create system for maintaining documentation of trainings and making them available as resources on a continuing basis
 - ___ Devise system for demonstrating staff knowledge of emergency procedures
- ___ Develop testing program
 - ___ Conduct exercises to test the emergency plan at least annually, including unannounced staff drills
 - ___ Design and execute a full-scale exercise
 - ___ Design and execute an additional exercise (full-scale or table-top)
 - ___ Develop review system

- ___ Rubric for analyzing the facility's performance in exercises
- ___ Maintain documentation of all drills, tabletop exercises, and live emergencies
- ___ Revise the facility's emergency preparedness plan, as needed
- ___ Establish framework for reviewing and updating annually

V. Emergency and Standby Power Systems

In addition to the EP rule's four principal components, outlined above in §§ 1-4, the rule also requires implementation of standby emergency and power systems by certain provider types, including LTC facilities

- ___ Locate the generator in compliance with national standards
- ___ Implement emergency power system inspection, testing, and maintenance requirements in compliance with various national standards
- ___ Plan for maintaining operation of emergency power systems during emergency, including fuel storage
- ___ Establish policies and procedures for providing auxiliary electrical power to power-dependent residents during an emergency or for evacuating such residents to alternate facilities

VI. Integrated Health Care System

If a LTC facility is part of a health care system consisting of multiple separately-certified health care facilities that elects to have a unified and integrated emergency preparedness program, the LTC facility may choose to participate in the system's coordinated emergency preparedness program

A unified and integrated emergency preparedness program must achieve the following:

- ___ Demonstrate that each separately certified facility within the system actively participated in developing the program
- ___ Take into account each separately certified facility's unique circumstances, patient populations, and services offered
- ___ Demonstrate that each separately certified facility is capable of actively using the program and is in compliance with the program
- ___ Be supported by and include, utilizing an all-hazards approach —
 - ___ A documented community-based risk assessment
 - ___ A documented individual-facility-based risk assessment for each separately certified facility
- ___ Include the following, meeting the requirements discussed above in §§ 2-4:
 - ___ Integrated policies and procedures
 - ___ A coordinated communication plan
 - ___ Training and testing programs