

Emergency Preparedness (EP): What you need to know

*A presentation by
David Dillivan and Keith Vorhies*

OPTIMIZING YOUR EP PLAN

- **CMS/Survey & Certification Group (SCG)** has been collaborating with the ASPR TRACIE departments to help facilitate informational needs of Home Health Agencies (HHA) for EP compliance.
- HHA's should refer to the resources on the CMS website for assistance in developing emergency preparedness plans.
- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html>



****Internet Search: “SOM APPENDIX Z”****

- EP information is found in the Medicare State Operations Manual (SOM): appendix Z under the tags E 0001-E0044.
- **ONLY** tags 1, 4, 6, 7, 9, 13, 17, 19, 21, 23, 24, 29, 30-34, 36, 37, 39 & 42 apply to Home Health-**please read over each one!**

Four Core Measures: Compliance by 11-15-2017



Risk Assessment and Planning: E0006

- Risk Assessment (RA) needs to be comprehensive using an “all-hazards” approach, focusing on capacities and capabilities.
- All-hazards examples: weather, patient care, power outage, cyber-attack, interruptions of food/water, etc.
- RA needs to be quantifiable or measurable. “Just how likely could the emergency occur.”
- Update emergency plan at least **annually**.



Policies and Procedures: E0013

- Develop and implement policies and procedures (P&P) based on the emergency plan/risk assessment and communication plan (E0029).
- P&P are expected to align with the identified hazards within the facility's risk assessment and the overall EP program.
- P&P needs to be reviewed, updated and “signed off” at least annually.

Communication Plan: E0029

- Develop a communication plan that complies with both Federal and State laws.
- Coordinate patient care within the facility, across health care providers, and with state and local public health departments and emergency management systems.
- Review and update plan **annually**.

Training and Testing Program:

- E0036, E0037 & E0039:
- Develop and maintain training and testing programs, including initial training in policies and procedures.
- All staff including contracted, and volunteers have demonstrated “**knowledge**” of emergency procedures and have been provided training at least annually.
- Conduct drills and exercises to test the emergency plan.



Training & Testing Requirements

Participate in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility-based exercise.

- Conduct an additional exercise that may include, but is not limited to the following:
 - A **second** full-scale exercise that is individual, facility-based.
 - A tabletop exercise that includes a group discussion led by a facilitator, using a narrated, clinically-relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan.



Some FAQs Not Posted

- Real-World Activation of the EP Plan:
 - Means that an agency is exempt from engaging in a community or individual, facility-based full-scale exercise for 1 year (not a calendar) following the activation of the EP plan to an actual emergency.

**Note: documentation needs to be comprehensive and detailed: roles of each staff, phone #'s called, after action report (AAR). AAR demonstrates insights learned to improve the EP plan for future events.

** Surveyor expectations: **READ** and **KNOW** “Survey Procedures” at the end of each E tag. It’s basically what we’re told look at and review!



E0001: EP plan

- Must be comprehensive in meeting health, safety, and security needs of their patient/staff population during an emergency.
- Also must address the coordination with other healthcare facilities and the community as a whole.
- **Surveyor expectations:** Review of the facility's written policies and documentation of the EP plan. Interview with Administration discussing the EP plan.



E0004: EP Review and Updates

- **Surveyor expectations:**
- EP verification through document review.
- Identification of “all-hazards” using the risk assessment.
- Review of the EP plan to verify it contains all the required elements.
- Date and signature of the **annual** review and updates that were made based on the review.



E0006: Risk Assessment (RA)

- Needs to be facility and community based using an all-hazards approach.
- Includes **strategies** for addressing emergency events identified by the RA.
- **Surveyor expectations:** Review of the RA and associated strategies.
- Interview with Administration how the RA was conducted and how it pertains agency wide.

E0007: Patient population & Delegation

- Identifying “at-risk” patients who’s needs are more urgent upon admission.
- **Surveyor expectations:** Review of how the agency documents “at-risk” patients and how it’s individualized to the patient’s needs.
- Review of documentation that details delegations of authority, succession plans and services the agency would provide in the event of an emergency.



E0009: Collaborative Planning

- Facility must document its efforts to contact local, State and Federal emergency officials to engage in collaborative planning for an integrated emergency response.
- Utilize local healthcare coalitions, health department, & emergency management resources.
- **Surveyor expectations:** Review documents that detail when and who was called. Also what was achieved during the call.



E0013: Policies and Procedures (P&P)

- **Surveyor Expectations:**
- Verify that the P&P were developed based on facility and community based risk assessment and communication plan, utilizing an all-hazards approach.
- Verify all P&P have been reviewed and updated with date/signature **annually**.



E0017: Individual Patient Plans

- Natural or man-made emergencies must be included as part of the comprehensive patient assessment.
- Must be individual and could include potential disasters such as: fire, flooding, tornados, electrical; and how and when a patient is to contact local emergency officials.
- **Surveyor Expectations:** Verification that each patient has an individualized EP plan that's documented as part of the patient's comprehensive assessment.



E0019: Inform EP officials of homebound patients

- Must have procedures in place to inform State and local EP officials about patients in need of evacuation from their residences at any time due to an emergency situation.
- Must address when and how this information is communicated to emergency officials and also include the clinical care needed for the patients (e.g., oxygen, paralyzed, language barrier, etc.)
- **Surveyor Expectations:** Verify that the agency's EP plan includes procedures to inform State and local EP officials of evacuation needs. Communicate any equipment the patient may need based on medical, psychiatric condition and home environment.



E0021: Follow up with staff and patients

- Must follow up with on-duty staff and patients to determine services that are needed in the event of an interruption in services during or due to an emergency.
- Outline what facilities the agency has a transfer arrangement with.
- What to do if unable to contact staff or patients.
- **Surveyor Expectations:** Verify that the agency's EP plan includes procedures to follow up with on-duty staff and patients, and the mechanism to inform State and local officials of any on-duty staff or patients they are unable to contact.



E0023: Policies/Procedures for medical documentation

- Documentation system must:
- Preserve patient information.
- Protect confidentiality of patient information, and
- Secure and maintain the availability of records.
- **Surveyor Expectations:** Verify EP plan includes policies and procedures that document the medical record documentation system developed to preserve patient information, protect confidentiality and secures and maintains availability of records.



E0024: Policies/Procedures for Volunteers and Staffing

- Address the use of volunteers in an emergency or other emergency staffing strategies, including the process and role for integration of State and Federally designated health care professionals.
- Include in EP plan a method for contacting off-duty staff during an emergency.
- Have procedures to address other contingencies in the event staff are unable to report to duty.
- **Surveyor Expectations:** Verify EP plan includes policies and procedures for the use of volunteers and other staffing strategies in its emergency plan.



E0029: Development of communication Plan

- The facility must develop and maintain an EP communication plan that complies with Federal, State and local laws, reviewed and updated at least annually.
- EP communication plan should include how the facility interacts and coordinates with emergency management agencies.
- The communication plan should support the coordination of care.
- **Surveyor Expectations:** Verify the facility has a written communication plan, and ask to see evidence that the plan has been reviewed (and updated as necessary) on an annual basis.



E0030: Names and Contact Information

- Must have the names and contact information of:
 - Staff,
 - Entities providing services under arrangement,
 - Patients' physicians,
 - Other [facilities], and
 - Volunteers.
-
- **Surveyor Expectations:** Verify that all required contacts are included in the communication plan. Verify that all contact information has been reviewed and updated at least annually by reviewing the annual reviews.



E0031: Emergency Officials Contact Information

- Must have the names and contact information for:
- Federal, State, tribal, regional and local EP staff.
- Facility must also have contact information for other sources of assistance.
- Information must be readily available and accessible to leadership during an emergency event.
- **Surveyor Expectations:** Verify that all required contacts are included in the communication plan. Verify that all contact information has been reviewed and updated at least annually by reviewing the annual reviews.



E0032: Primary/alternate Means for Communication

- EP plan should include procedures regarding when and how alternate communication methods are used, and who uses them.
- Ensure communication system compatibility. (There are numerous communication system resources within the regulation).
- **Surveyor Expectations:** Verify the communication plan has primary and alternate means for communicating with facility staff, Federal, State, tribal, regional and local emergency management agencies. Look at communication equipment or system listed in the plan.



E0033: Methods for Sharing Information

- EP plan should have a system for sharing information and medical documentation.
- Information necessary to provide patient care must be sent with an evacuated patient and information should be readily available for patients being sheltered in place.
- **Surveyor Expectations:** Verify the communication plan includes a method for sharing information and medical documentation, as necessary, with other health providers to maintain continuity of care. Verify policies and procedures address the means the facility will use to release patient information including the general location of patients.



E0034: Information on Occupancy/needs

- Must have a means to provide information about the Facility's needs and its ability to provide assistance to the authority having jurisdiction.
- **Surveyor Expectations:** Verify the communication plan includes a means of providing information about the facility's needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee.



E0036: EP Training and Testing

- Must develop and maintain an EP training and testing program based on the emergency plan set forth in paragraph (a) of this section, risk assessment, policies and procedures and communication plan.
- Refer to paragraph (a) for the emergency plan, (a)(1) for risk assessment, policies and procedures at paragraph (b) and the communication plan at paragraph (c) of this section.
- **Surveyor Expectations:** Verify the facility has a training and testing program that meets the requirements of the regulation. Verify the program has been reviewed and updated at least annually.



E0037: EP Training Program

- Must develop and maintain an EP training and testing program based on the emergency plan, risk assessment, policies and procedures and communication plan.
- Refer to paragraph (a) for the emergency plan, (a)(1) for risk assessment, policies and procedures at paragraph (b) and the communication plan at paragraph (c) of this section.
- **Surveyor Expectations:** Ask for copies of facility's initial EP training and annual EP training offerings. Interview staff and ask questions to verify staff knowledge. Review a sample of staff training files to verify initial and annual training.



E0039: EP Testing Requirements

- Must conduct exercises to test the emergency plan at least annually.
- Must conduct a tabletop exercise and participate in a full-scale community-based exercise or conduct an individual facility exercise if a community-based exercise is not available.
- **Surveyor Expectations:** Ask for documentation of the annual tabletop and full scale exercises. Ask for documentation of the facility's efforts to identify a full-scale community based exercise if they did not participate in one. Request documentation of the facility's analysis and response and how the facility updated its emergency program based on this analysis.



E0042: Integrated EP Program

- Each member facility of the unified system must be actively involved in the development of the EP program.
- Each member facility of the unified system must demonstrate that it is capable of actively using the unified and integrated EP program and is in compliance.
- Must have integrated policies and procedures that meet the requirements set forth in paragraph (b) of this section, a coordinated communication plan, and training and testing programs that meet the requirements of paragraphs (c) and (d) of this section, respectively.



E0042: Continued

- **Surveyor Expectations:** Verify whether or not the facility has opted to be part of its healthcare system's unified and integrated EP program. Verify the facility was actively involved in the development of the unified EP program. Request documentation verifying the facility was actively involved in annual reviews of the program requirement and updates. Ask for a copy of the entire integrated EP program and all components. Inquire as to how the unified and integrated EP program is updated based on changes within the healthcare system.



Questions?



CUSTOMER DRIVEN. BUSINESS MINDED.