

## **What to expect from surveyors: Emergency Operations Plan (EOP)**

### Facility leadership interviews will include for discussion:

- Describe what your facility emergency preparedness program is
- Specify hazards that were identified in your risk assessment and how assessment/analysis was conducted
- Describe your patient population at risk during an emergency event
- Strategies to address needs of at risk/vulnerable patient populations
- What services you can provide during emergency
- How your facility plans to continue operations during emergency
- Delegation of authority and succession plans
- Showing the section of plan which addresses/shows locations/use of fire alarms
- Explain arrangements for transportation if need to evacuate

### Facility staff interviews:

- Describe current procedures for containing fires
- Describe and/or demonstrate tracking system used to document locations of patients and staff

### For EOP review and verification:

#### Policies/procedures for:

- Provision of subsistence needs (food, water, pharmaceutical supplies, etc. for patients and staff)
- Adequate alternate energy source to maintain:
  - Temperatures to protect patient health and safety
  - Safe and sanitary storage of provisions
  - Emergency lighting
  - Fire detection, extinguishing and alarm systems
  - Provision of sewage and waste disposal
- Safe Evacuation:
  - Consideration of care needs of evacuees
  - Staff responsibilities
  - Transportation
  - Identification of evacuation location(s)
  - Primary and alternate means of communication with external sources of assistance
- Sheltering in place for patients, staff and volunteers who remain in facility
- Documenting medical record system developed to preserve patient information, protects patient confidentiality of information, secures and maintains availability of records
- Use of volunteers and other staffing strategies
- Facility's role in providing care and treatment at alternate care sites under a 1135 waiver

Surveyors will also ask for/verify:

- Documentation of efforts to contact such officials (local, tribal, regional, State and Federal emergency preparedness) and, when applicable, its participation in collaborative and cooperative planning efforts
- List/documentation for which experts were collaborated with in development/maintenance of EOP
- Exit signs are placed in appropriate locations to facilitate safe evacuation
- Documentation of facility's analysis and response and how facility updated its emergency program based on this analysis
- Will evaluate if policies/procedures align with EOP and risk assessment
- Copies of arrangements and/or agreements with other facilities to receive patients in event your facility is unable to care for them during emergency
- Plan is reviewed/updated annually by looking at documentation of dates of reviews and updates
- All required elements are included

Home Health Agency specifics:

- Record review to verify individualized emergency plans documented as part of comprehensive assessment
- Inclusion procedures included in EOP for staff and patient follow-up as well as mechanism for informing state and local authorities when unable to contact the on-duty staff and patients
- Procedures in EOP to follow-up with on-duty staff and patients to determine service needs in event of service interruption in an emergency

Hospice specifics:

- Staff member interview or leadership to explain procedures in place when unable to contact staff member or patient

Homebound Hospice and Home Health Agencies:

- Will be asked for emergency plan to verify it includes procedures to inform State and local emergency preparedness officials about patients in need of evacuation from their residences due to emergency situation based on patient's medical and psychiatric condition and home environment

End Stage Renal Disease (ESRD) verification specifics:

- Policies and plans in place for obtaining emergency medical assistance
- Process which staff can confirm that emergency equipment is on premises and immediately available
- Will ask to see Emergency Plan to verify it contains list of emergency equipment, written processes/policy on emergency equipment and medications
- Will ask to see procedures/checklist for ensuring all equipment is checked and in working order
- Will check to see that all emergency drugs are not out of date

## **What to expect from surveyors: Communication Plan:**

Surveyors will review plan, ask to see and verify:

Lists with contact information (to be reviewed and updated annually, at minimum):

- Staff
- Entities providing service under arrangement
- Patient's physicians
- Volunteers
- Next of kin, guardian or custodian

Additional contact list with contact information:

- Federal, State, tribal, regional and local emergency preparedness staff
- State Licensing and Certification Agency
- Office of the State Long-Term Care Ombudsman
- State Protection and Advocacy Agency
- Other sources of assistance

Will review Communication Plan to assure that:

- Primary and alternative means for communicating with facility staff, Federal, State, tribal, regional and local emergency management agencies are included
- Communication equipment or systems are listed
- Contains method for sharing information and medical documentation for patients under facility's care, as necessary, with other health care providers to maintain continuity of care including:
  - Patient name
  - Age
  - DOB
  - Allergies
  - Current medications
  - Medical diagnoses
  - Current reason for admission
  - Blood type
  - Advance directives
  - Next of kin/emergency contacts
- Policies/procedures in place to address:
  - How facility will release patient information to include general condition/ location of patients
  - Inpatient facilities must include means to provide information regarding occupancy
- Means of providing information about facility's need, its ability to provide assistance to the authority having jurisdiction, the Incident Command Center or designee is identified
- Method for sharing information from emergency plan and that facility has determined it is appropriate with residents or clients and their families or representative by reviewing plan
- Staff will be asked to demonstrate how emergency plan is shared with residents/ clients and their families/representatives
- Residents/ clients and their families/representatives will be interviewed and asked if they have been given information regarding facility's emergency plan

## **What to expect from surveyors: Training and testing program:**

Surveyors will verify/ask to see:

- Written training and testing program that meets regulation requirements is in place
- Evidence of annual review and update by asking for documentation of review/updates
- Review sample of staff files to verify that staff has received initial and annual emergency preparedness training
- Will interview various staff and ask questions regarding facility's initial and annual training course to verify staff knowledge of emergency procedures
- Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) emergency plans meet requirement for evacuation drills and training
- Copies of facility initial and annual emergency preparedness training offerings
- Documentation of annual tabletop and full scale exercises (which may include, but is not limited to, the exercise plan, After Action Report (AAR), any additional documentation used by facility to support the exercise)
- Documentation of facility's efforts to identify a full-scale community based exercise if they did not participate in one (i.e. date and personnel and agencies contacted and reasons for inability to participate in a community based exercise)
- That facility has the required emergency and standby power systems to meet the requirements of the facility emergency plan/policies/procedures
- Shelter in place and evacuation plans, noting whether facility has emergency power systems or plans in place to maintain safe operations while sheltering in place
- For facilities under construction/renovation: Written plan to relocate emergency power standby system by time construction is completed
- Facility with onsite fuel source maintains it in accordance with NFPA 110 for their generator and has plan for how to keep generator operational during emergency, unless plan is to evacuate
- Full-scale exercise—an operations-based exercise (drill, functional or full-scale exercise) that assesses a facility's functional capabilities by simulating response to an emergency that would impact the facility's operations and their given community
- Drill—coordinated activity to test a single function in a single agency
- Tabletop exercise (TTX)—group discussion (involving key personnel) led by facilitator, using narrated, clinically -relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge the emergency plan.