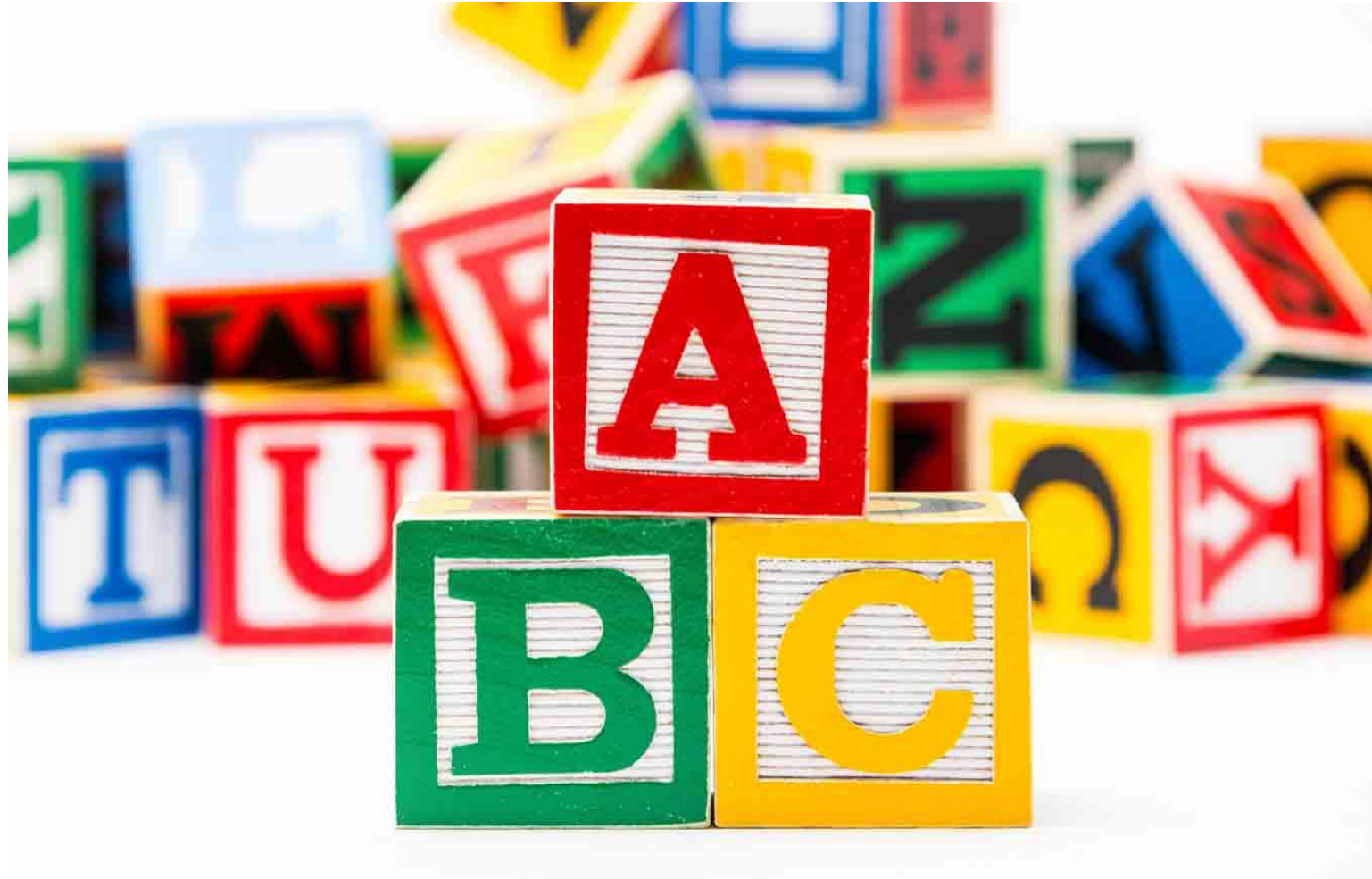


EMERGENCY PREPAREDNESS: THE 9TH CONDITION OF PARTICIPATION for a Rural Health Clinic

Fall, 2017



Back to the Basics – How we got Here



Why do we have these new Emergency Preparedness Rules?

The difference between an Emergency and a Disaster is often Preparation.

Our Disaster Recovery Plan Goes Something Like This...



Out with the Old



The prior regulations required RHCs to prepare for emergencies via three provisions:

1. Training staff in handling emergencies;
2. Placing exit signs in appropriate locations; and
3. Taking other appropriate measures consistent with the conditions of the area where the clinic is located.

The New Emergency Preparedness Plans Must be implemented by 11/15/2017



Compliance Deadlines for RHCs

Facilities are expected to be in compliance with the requirements by 11/15/2017.

In the event facilities are non-compliant, the same general enforcement procedures will occur as is currently in place for any other conditions or requirements cited for non-compliance.

Source: CMS MLM Webinar

CMS will follow the normal inspection schedule for RHCs. There will not be special inspections for Emergency Preparedness.



CRITICAL DECISION SUPPORT

BEFORE, DURING AND AFTER CRISIS

FIRESTORM is the nationally recognized leader in Crisis Management

RULE READY?

If you are a Health Care Provider and unprepared for the
2017 Emergency Preparedness Rule,
you will be out of compliance in exactly:



[Resources](#) | [Contact Firestorm](#)

Assessment &
Analysis



Planning &
Intelligence



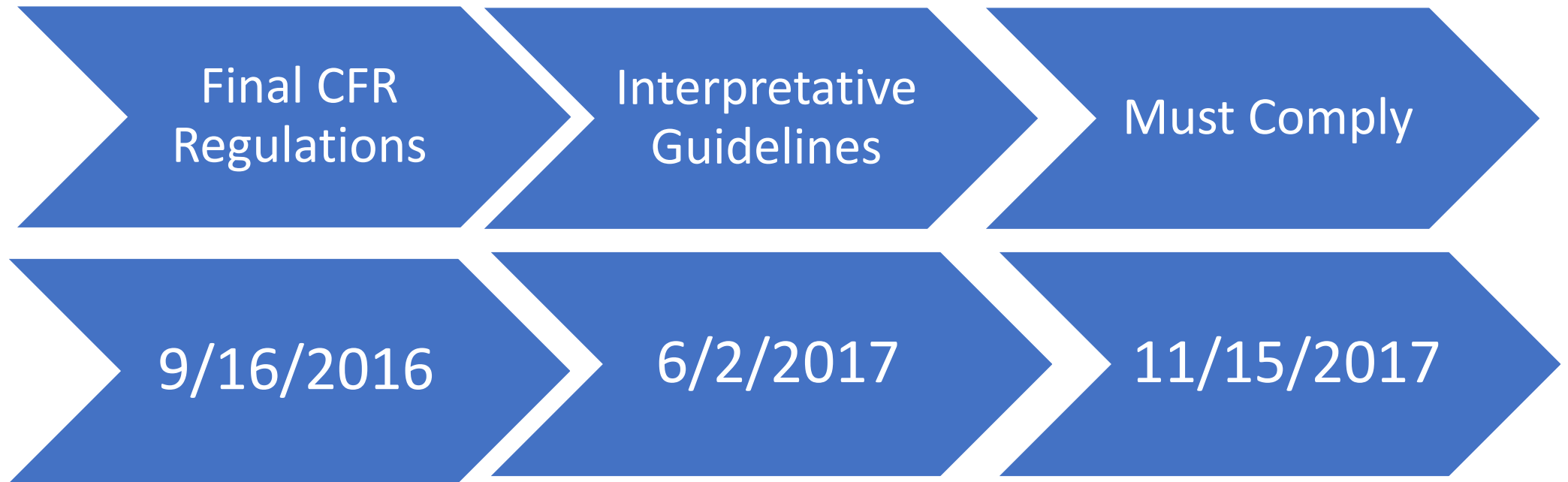
Training & Testing



Crisis Mgmt &
Communication



Emergency Preparedness Timeline



Final EP Regulation (186 PDF) <https://www.gpo.gov/fdsys/pkg/FR-2016-09-16/pdf/2016-21404.pdf>

Emergency Preparedness (EP) Regulations Website

<https://www.cms.gov/medicare/provider-enrollment-and-certification/surveycertemergprep/emergency-prep-rule.html>

The screenshot shows the CMS.gov website page for the Emergency Preparedness Rule. The header includes navigation links (Home, About CMS, Newsroom, FAQs, Archive, Share, Help, Print) and a search bar. The main navigation menu features categories like Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education. The breadcrumb trail reads: Home > Medicare > Survey & Certification - Emergency Preparedness > Emergency Preparedness Rule. The left sidebar lists various links under 'Survey & Certification - Emergency Preparedness', with 'Emergency Preparedness Rule' highlighted. The main content area is titled 'Emergency Preparedness Rule' and contains the following text:

Emergency Preparedness Rule

Survey & Certification- Emergency Preparedness Regulation Guidance

Guidance for Surveyors, Providers and Suppliers Regarding the New Emergency Preparedness (EP) Rule

On September 8, 2016 the Federal Register posted the final rule *Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers*. The regulation goes into effect on November 16, 2016. Health care providers and suppliers affected by this rule must comply and implement all regulations one year after the effective date, on November 16, 2017.

Purpose: To establish national emergency preparedness requirements to ensure adequate planning for both natural and man-made disasters, and coordination with federal, state, tribal, regional and local emergency preparedness systems. The following information will apply upon publication of the final rule:

- Requirements will apply to all 17 provider and supplier types.
- Each provider and supplier will have its own set of Emergency Preparedness regulations incorporated into its set of conditions or requirements for certification.
- Must be in compliance with Emergency Preparedness regulations to participate in the Medicare or Medicaid program. The below downloadable sections will provide additional information, such as the background and overview of the final rule and related resources.

Additional information has been provided on the left side hyperlinks categorized by information from the EP Rule, such as the Emergency Preparedness Plan, Communication Plan, Policies and Procedures and Testing.

Note: For Medicaid-only facilities (other than ICF-IIDs and PRTFs), please contact your State Medicaid Agency to determine whether you are required to meet the Emergency Preparedness requirements under the Final Rule.

If you have questions as to whether your healthcare facility is required to comply with the final rule, please refer to the downloads section below and the attachment labeled 17 Facility- Provider Supplier Types Impacted. Additionally, please contact your specific facility CFO, CEO, Human Resource Staff, etc. to determine what Medicare certified provider number you are associated/certified under, which will determine which requirements you need to comply with.

The below downloadable sections will provide additional information, such as the background and overview of the final

The CMS Rules Apply to...

Inpatient	Outpatient
<ul style="list-style-type: none">• Hospitals• Critical Access Hospitals• Religious Nonmedical Health Care Institutions (RNHCIs)• Psychiatric Residential Treatment Facilities (PRTFs)• Long-Term Care (LTC) / Skilled Nursing Facilities• Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)	<ul style="list-style-type: none">• Ambulatory Surgical Centers• Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services• Community Mental Health Centers (CMHCs)• Comprehensive Outpatient Rehabilitation Facilities (CORFs)• End-Stage Renal Disease (ESRD) Facilities• Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)• Home Health Agencies (HHAs)• Hospice• Organ Procurement Organizations (OPOs)• Programs of All-Inclusive Care for the Elderly (PACE)• Transplant Centers



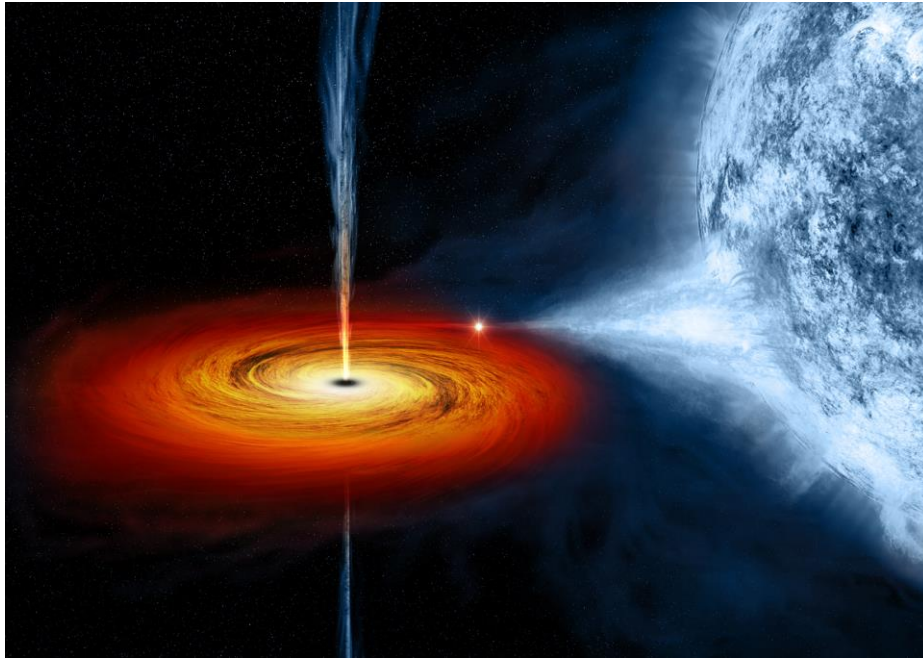
Why is Emergency Preparedness important for RHCs?

Adds a 9th Condition
of Participation

Is a Condition Level
Deficiency. (You can be
terminated – Lose RHC
Status)

Is time consuming
and costly to
implement.

Emergency Preparedness (EP) will be Time Consuming and Costly



Estimated to cost Independent
RHCs \$6,016 annually

START HERE



Emergency Preparedness Videos



Date	Title	Link
10/5/2016	Emergency Preparedness Requirements MLN Connects [®] Call 10/5/16	https://www.youtube.com/watch?v=GcPdvw4nZuU
3/10/2014	Understanding the Proposed Rule on Emergency Preparedness	https://www.youtube.com/watch?v=8splScqEEQM&t=1151s
3/7/2017	CMS Emergency Preparedness: Local Community Guidelines	https://www.youtube.com/watch?v=laMkR8d_BYY
10/6/2016	10 Keys to Healthcare Emergency Planning	https://www.youtube.com/watch?v=ip-mTeGqaql

Emergency Preparedness
Interpretative Guidelines
June 2, 2017
Appendix Z



Appendix Z Interpretative Guidelines

<p>On June 2, 2017, CMS released Appendix Z Which is the Interpretative Guidelines for Emergency Preparedness. (All 17 provider types are included)</p>	<p>https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-29.pdf (74 page PDF)</p>
<p>Surveyor Tool Microsoft Excel which lists surveyor procedures for all 17 provider types.</p>	<p>https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/Surveyor-Tool-EP-Tags.xlsx</p>

The Compliance Team Issues EP Standards in July, 2017



<https://www.dropbox.com/s/16lp7y2d2abib2e/2017%20Emergency%20Preparedness%20The%20Compliance%20Team%20Standards%20Appendix%20Z.docx?dl=0>

(14 page PDF)

<http://www.thecomplianceteam.org/>

EP Basic Surveyor Training Course

The screenshot shows a web browser window with a navigation menu on the left and a main content area displaying a slide. The slide title is "Emergency Preparedness for Every Emergency". The slide content is divided into four vertical panels: a world map with hazard icons, two healthcare professionals in scrubs, a healthcare professional in a lab coat, and a hand checking an "EMERGENCY PREPARATION CHECKLIST". The checklist includes items like "Water Containers", "First Aid Kit", "Torch", "Battery Operated Radio", "Batteries", "Tinned Food", and "Can Opener". A "FORWARD" button is visible at the bottom right of the slide. Below the slide, a "1 of 3" indicator and a right arrow are present. The browser's address bar shows the URL: https://surveyortraining.cms.hhs.gov/pubs/EPlayer.aspx?cid=0CMSEmPrep_ONL&sid=fc58599e-ce51-e711-9524-0e63451df84&sv=1&pid=6#5. The taskbar at the bottom shows several open applications, including WebEx, PDF files, and various system icons. The system clock indicates 6:58 PM on 9/12/2017.

Introduction

Lesson 1

Lesson 2

Introduction

Lesson 2, Topic 1

Lesson 2, Topic 2

> Module Summary

Click Exit to close this window

Emergency Preparedness for Every Emergency

Section 1: Emergency Survival Items

- Water Containers
- First Aid Kit
- Torch
- Battery Operated Radio
- Batteries
- Tinned Food
- Can Opener

FORWARD

1 of 3

WebEx_Meeting.ics

2017 Emergency P...pdf

arpat_selfextractin...zip

2017 Emergency P...pdf

2017 Pennsylvania...p...

Show all

6:58 PM 9/12/2017

Emergency Preparedness Basic Surveyor Training Course

- On August 22, 2017 CMS issued an Emergency Preparedness Basic Surveyor Training Course. The Centers for Medicare & Medicaid Services (CMS) Survey & Certification Group (SCG) developed the Emergency Preparedness Basic Surveyor Training Course to help health and safety and Life Safety Code (LSC) surveyors and reviewers gain proficiency in surveying all affected participating providers and certified suppliers for compliance with their individual emergency preparedness requirements. Here is the link to the training course: https://surveyortraining.cms.hhs.gov/pubs/ClassInformation.aspx?cid=0CMSEmPrep_ONL

- Introduction
- Lesson 1
- Lesson 2
- Introduction
- Lesson 2, Topic 1
- > Lesson 2, Topic 2
- Module Summary

Knowledge Check

Which of the following contain resources specific to developing emergency plans and responses that meet the requirements of the emergency preparedness rule? Select all that apply.

- A. Survey & Certification Group (SCG) Emergency Preparedness Website
- B. Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, & Information Exchange (TRACIE)
- C. Disaster Relief and Emergency Assistance Center
- D. National Disaster Risk Reduction Center
- E. Appendix Z of the State Operations Manual (SOM)

Correct. The SCG Emergency Preparedness Website, ASPR TRACIE, and Appendix Z contain resources specific to developing emergency plans and responses that meet the requirements of the emergency preparedness rule.

Submit

18 of 22

Definitions of Key Terms



Source

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/FAQ-Round-Four-Definitions.pdf>

Emergency Preparedness

- Emergency Preparedness Program: The Emergency Preparedness Program is a facility's comprehensive approach to meeting the health and safety needs of their patient population and provides facilities with guidance on how to respond to emergency situations that could impact the operation of the facility, such as natural or man-made disasters. It includes (1) all-hazards risk assessment and emergency planning, (2) development and implementation of policies and procedures, (3) a communication plan, and (4) training and testing. The program as a whole consists of the Emergency Plan, which is based on the four core elements.

Emergency Plan

- Emergency Plan: An emergency plan is one part of a facility's emergency preparedness program and provides the framework which includes conducting facility-based and community-based risk assessments that will assist a facility in addressing patient needs along with the continuity of business operations. Additionally, a plan will support, guide and ensure a facility's ability to collaborate with local emergency preparedness officials.

Hazard Vulnerability Assessments (HVAs)

- Hazard Vulnerability Assessments (HVAs)(2) are systematic approaches to identifying hazards or risks that are most likely to have an impact on a healthcare facility and the surrounding community. The HVA describes the process by which a provider or supplier will assess and identify potential gaps in its emergency plan(s)

(2)The Assistant Secretary for Response and Preparedness (ASPR) Technical Resources Assistance Center and Information Exchange (TRACIE) Hazard Vulnerability/Risk Assessment.

<https://asprtracie.hhs.gov/technicalresources/3/Hazard-Vulnerability-Risk-Assessment/0>

Kaiser Permanente Tool: <https://www.calhospitalprepare.org/hazard-vulnerability-analysis>

Full-Scale & Facility-Based Exercises

- Full-Scale Exercise: A full scale exercise is a multi-agency, multijurisdictional, multi-discipline exercise involving functional (for example, joint field office, emergency operation centers, etc.) and “boots on the ground” response (for example, firefighters decontaminating mock victims).
- Facility-Based: When discussing the terms “all-hazards approach” and facility-based risk assessments, we consider the term “facility-based” to mean that the emergency preparedness program is specific to the facility. Facility-based includes, but is not limited to, hazards specific to a facility based on the geographic location; Patient/Resident/Client population; facility type and potential surrounding community assets (i.e. rural area versus a large metropolitan area).

Full-Scale & Facility-Based Exercises



Lessons Learned: If you are having a drill ensure that all authorities and participants are informed ahead of time.

Table-Top Exercise

- Table-top Exercise (TTX): A table-top exercise is a group discussion led by a facilitator, using narrated, clinically-relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan. It involves key personnel discussing simulated scenarios, including computer-simulated exercises, in an informal setting. TTXs can be used to assess plans, policies, and procedures.



Emergency Preparedness What is Required?





Words to Live By

“The time to repair the roof is when the sun is shining”



-JFK

What are the Goals and Objectives of EP



Goals



Address systemic gaps.



Provide a regulatory framework to ensure a coordinated emergency preparedness process.



Encourage coordination within communities and states as well as across state lines



What does an EP Plan look like?

- **Emergency Preparedness Program** must be established and maintained by RHCs. An EP program includes:
 - A facility-based and community-based **Risk Assessment** utilizing an all hazards approach and an **Emergency Plan** based upon the **RA**.
 - **Emergency Policies and Procedures** based upon Risk Assessment and Emergency Plan. (How are you going to implement the EP)
 - A **Communication Plan which** identifies staff, providers, volunteers, state and federal contacts and methods to contact them.
 - **Testing and Training** of the procedures annually through exercises including at least one community-based or facility-based exercise and one Table-Top Exercise. (or two community-based/facility based)

Four Mandated Components



Emergency Plan

- Based on a risk assessment
- Using an all-hazards approach
- Update plan annually

Policies & Procedures

- Based on risk assessment and emergency plan
- Must address: subsistence of staff and patients, evacuation, sheltering in place, tracking patients and staff

Communications Plan

- Complies with Federal and State laws
- Coordinate patient care within facility, across providers, and with state and local public health and emergency management

Training & Exercise Program

- Develop training program, including initial training on policies & procedures
- Conduct drills and exercises

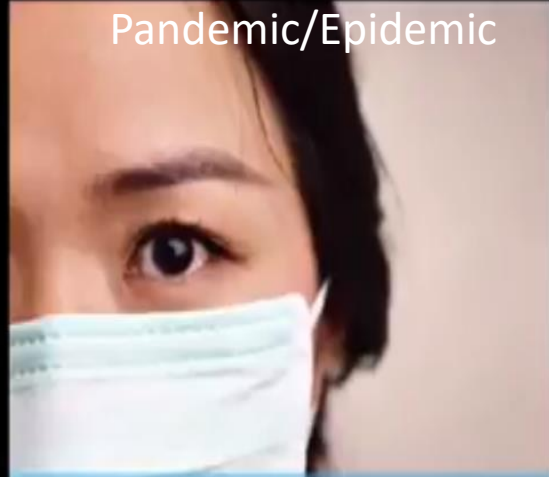
Four Core Elements of Emergency Preparedness

1. Risk Assessment and Emergency Plan

Identify the Following:

- Hazards likely in geographic area (an all hazards approach)
- Care-related emergencies
- Equipment and Power failures (one emergency leads to another)
- Interruption in Communications, including cyber attacks
 - Back up communication plans if primary plan fails.
- Loss of all/portion of facility
 - Test your generator for 4 hours at full 100% power annually.
(not required for RHCs)
- Loss of all/portion of supplies
- Plan is to be reviewed and updated at least annually
- Risk Assessment may already be done by local agencies if the RHCs reasoning for using it is included in the EP Policies.

Pandemic/Epidemic



Biological



Chemical



6 Types of Preparedness Planning

Nuclear



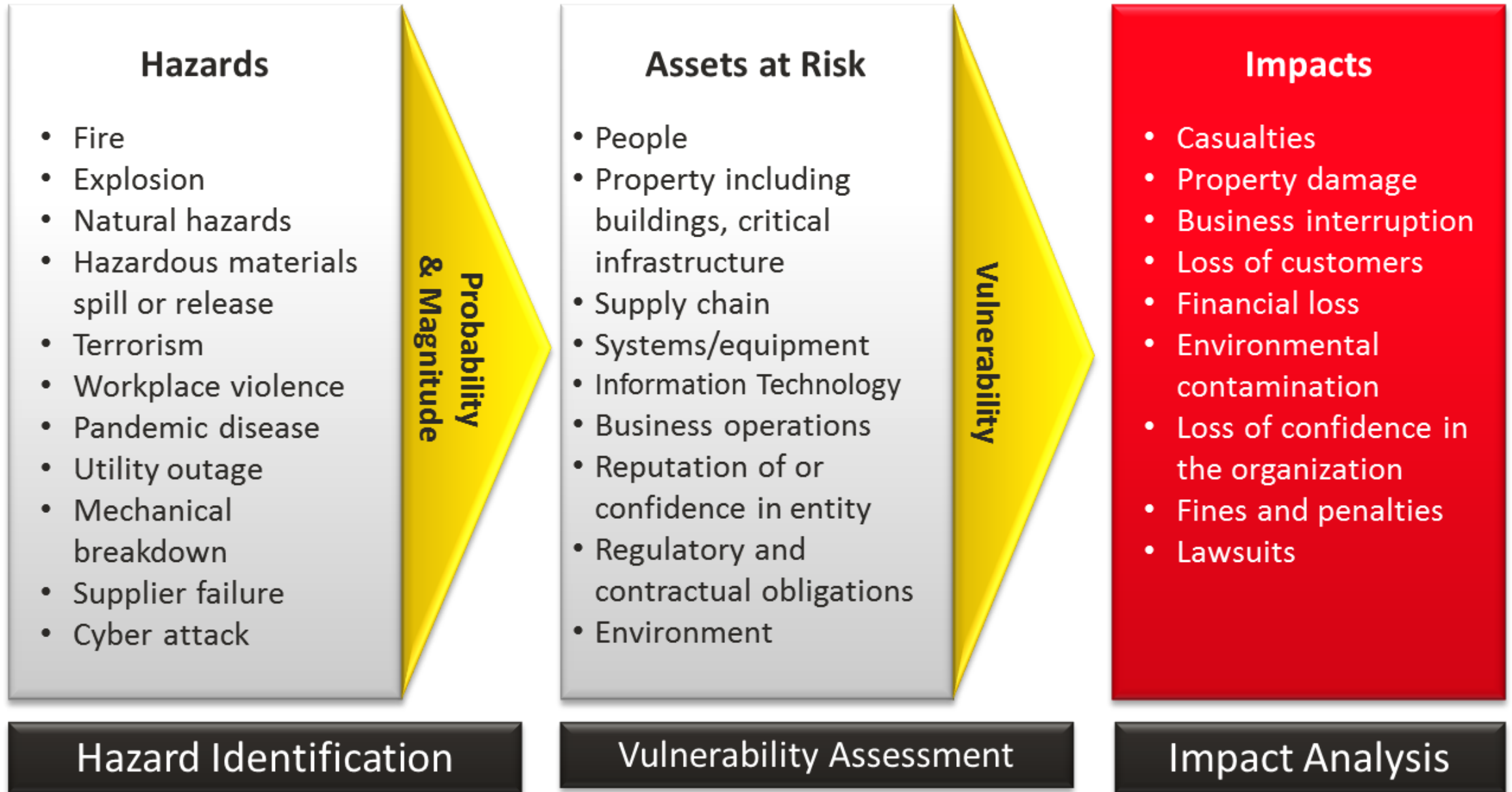
Fire/Power/etc.



Natural



What is an All Hazards Risk Assessment



Four Core Elements of Emergency Preparedness – 2. Policies & Procedures

Policies and procedures. The RHC must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, and the communication plan at paragraph (c) of this section. The policies and procedures must be reviewed and updated at least annually.

At a minimum, the policies and procedures must address the following:

- (1) Safe evacuation from the RHC, which includes appropriate placement of exit signs; staff responsibilities and patient needs.
- (2) A means to shelter in place for patients, staff, and volunteers who remain in the facility. (Not required to maintain food, water, etc.)

EP – 2. Policies & Procedures (continued)

(3) A system of medical documentation that preserves patient information, protects confidentiality of patient information, and secures and maintains the availability of records.

(4) 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 to address surge needs during an emergency.

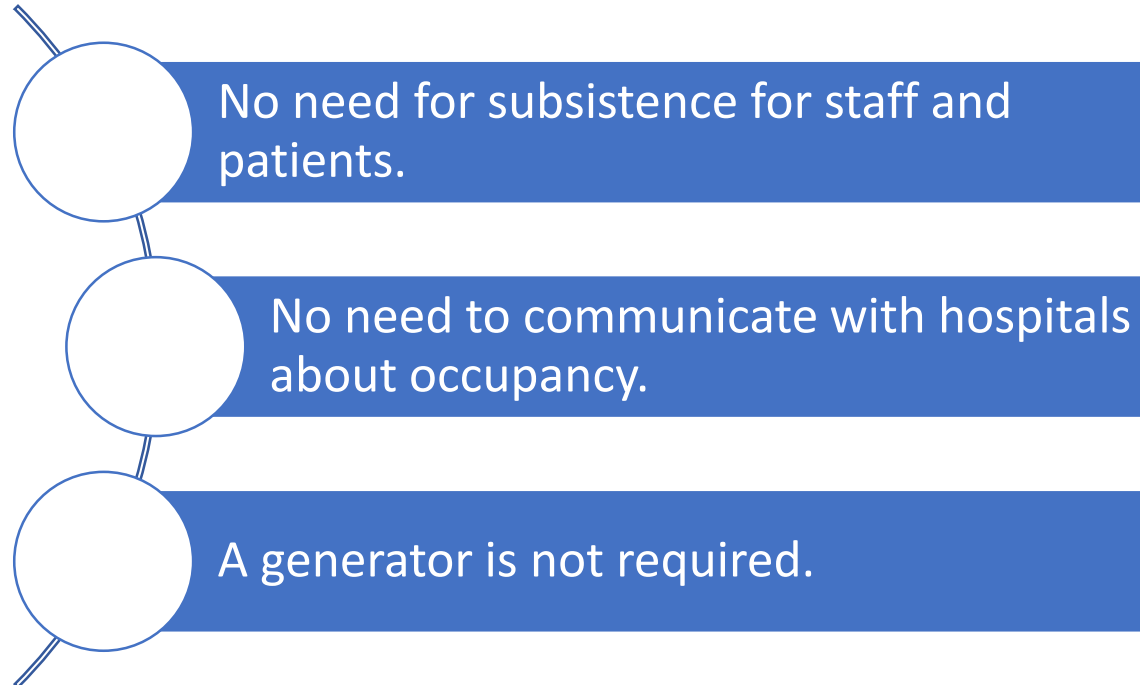
Centers for Medicare and Medicaid Services (CMS) Emergency Preparedness Requirements by Provider Type

Inpatient					
Provider Type	Emergency Plan	Policies and Procedures	Communication Plan	Training and Testing	Additional Requirements
Hospital	Develop a plan based on a risk assessment using an “all hazards” approach, which is an integrated approach focusing on capacities and capabilities critical to preparedness for a full spectrum of emergencies and disasters. The plan must be updated annually.	Develop and implement policies and procedures based on the emergency plan, risk assessment, and communication plan which must be reviewed and updated at least annually. System to track on-duty staff & sheltered patients during the emergency.	Develop and maintain an emergency preparedness communication plan that complies with both federal and state laws. Patient care must be well-coordinated within the facility, across health care providers and with state and local public health departments and emergency systems. The plan must include contact information for other hospitals and CAHs; method for sharing information and medical documentation for patients.	Develop and maintain training and testing programs, including initial training in policies and procedures and demonstrate knowledge of emergency procedures and provide training at least annually. Also annually participate in: <ul style="list-style-type: none"> • A full-scale exercise that is community- or facility-based; • An additional exercise of the facility’s choice. 	Generators—Develop policies and procedures that address the provision of alternate sources of energy to maintain: (1) temperatures to protect patient health and safety and for the safe and sanitary storage of provisions; (2) emergency lighting; and (3) fire detection, extinguishing, and alarm systems.
Critical Access Hospital	*	*	*	*	Generators

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/EP-Rule-Table-Provider-Type.pdf>

The Regulations are not one size fits all

Outpatient Providers					
Outpatient providers are not required to provide subsistence needs for staff and patients.					
Provider Type	Emergency Plan	Policies and Procedures	Communication Plan	Training and Testing	Additional Requirements
RHC/FQHC	*	Does not have to track staff and patients, or have arrangements with other RHCs to receive patients or have alternate care sites.	Does not need to provide occupancy information.	*	



Four Core Elements of Emergency Preparedness – 3. Communication Plan

2. Communication Plan

(c) *Communication plan.* The RHC must develop and maintain an emergency preparedness communication plan that complies with Federal, State, and local laws and must be reviewed and updated at least annually. The communication plan must include all of the following:

(1) Names and contact information for the following:

(i) Staff.

(ii) Entities providing services under arrangement.

(iii) Patients' physicians.

(iv) Other RHCs.

(v) Volunteers.

Communication Plan - Continued

- (2) Contact information for the following:
 - (i) Federal, State, tribal, regional, and local emergency preparedness staff.
 - (ii) Other sources of assistance.
- (3) Primary and alternate means for communicating with the following:
 - (i) RHC staff.
 - (ii) Federal, State, tribal, regional, and local emergency management agencies...

Four Core Elements of Emergency Preparedness

4. Training & Testing

(1) Training program. The RHC must do all of the following:

- (i) Initial training in emergency preparedness policies and procedures to all new and existing staff, individuals providing services under arrangement, and volunteers, consistent with their expected roles,
- (ii) Provide emergency preparedness training at least annually.
- (iii) Maintain documentation of the training.
- (iv) Demonstrate staff knowledge of emergency procedures.

Four Core Elements of Emergency Preparedness

4. Training & Testing (2)

(1)Testing. The RHC/FQHC must conduct exercises to test the emergency plan at least annually. The RHC must do the following:

(i)Participate in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility-based. If the RHC experiences an actual natural or man-made emergency that requires activation of the emergency plan, the RHC is exempt from engaging in a community-based or individual, facility-based full-scale exercise for 1 year following the onset of the actual event.

Training & Testing (3)

- (i) Conduct an additional exercise that may include, but is not limited to following:
 - (A) A second full-scale exercise that is community-based or individual, facility based.
 - (B) 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.



Homeland Security Exercise and Evaluation Program

Navigation

Search

Languages

Multimedia (Photos, Video, and Audio)


Multimedia Collections

Documents and Resources

Document Collections

Photo, Video Use Guidelines

The Homeland Security Exercise and Evaluation Program (HSEEP) provides a set of guiding principles for exercise programs, as well as a common approach to exercise program management, design and development, conduct, evaluation, and improvement planning. HSEEP exercise and evaluation doctrine is flexible, adaptable, and is for use by stakeholders across the whole community and is applicable for exercises across all mission areas – prevention, protection, mitigation, response, and recovery.

	Size	Publication Date
 Homeland Security Exercise and Evaluation Program	0.72M	April 1, 2013

Resource Type: Document / Report | Last Updated: June 17, 2016

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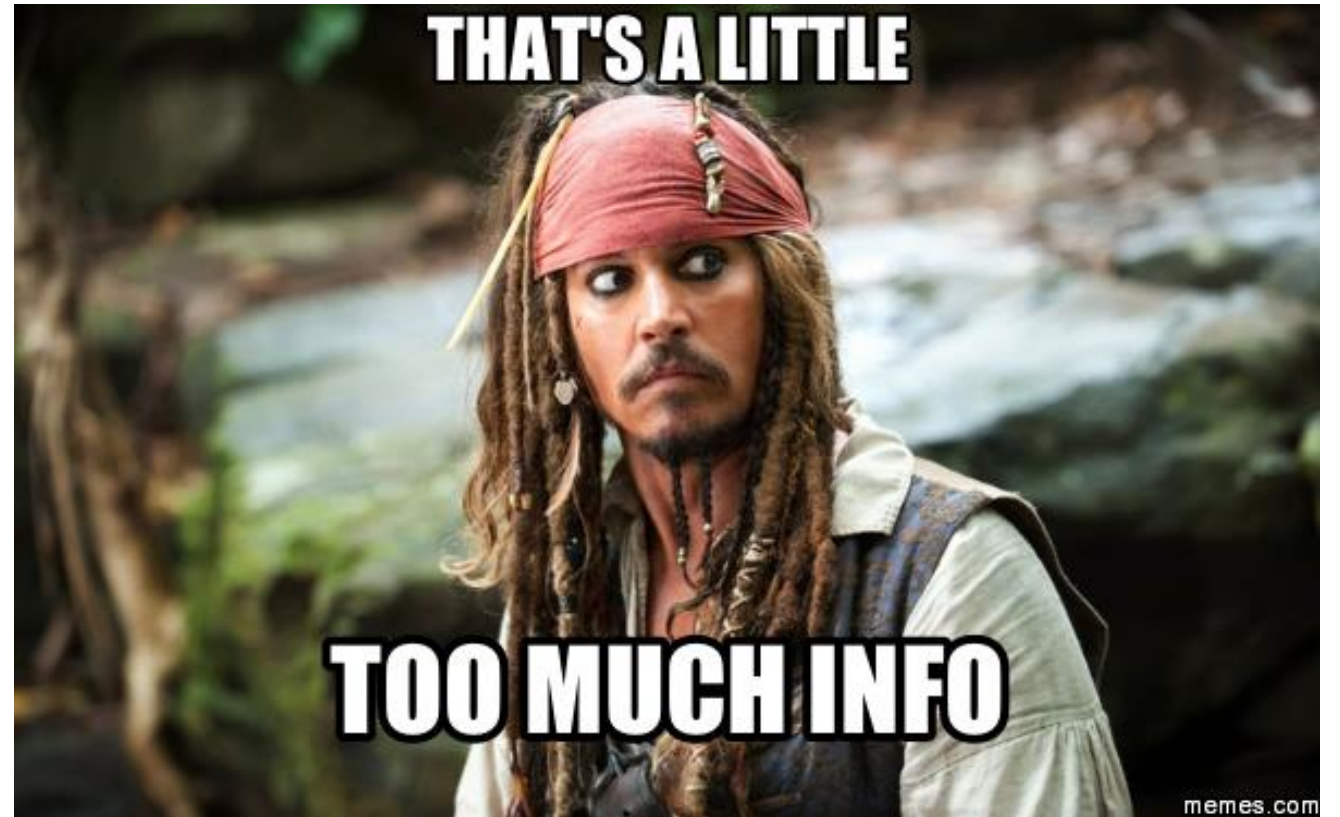


 Official website of the Department of Homeland Security

https://www.fema.gov/media-library-data/20130726-1914-25045-8890/hseep_apr13_.pdf

Information and Resources

It is very easy to get lost in all the information on Emergency Preparedness. Here are some resources.



EMERGENCY PREPAREDNESS RESOURCE WEBSITE

- We have added an Emergency Preparedness Resource page provides templates, policies and procedures, presentations, webinars, and just about every resource your RHC will need to comply with the CMS Emergency Preparedness Regulations on November 15, 2017. Here is the link to the page or just go to resources.
- <http://www.ruralhealthclinic.com/emergency-preparedness>

EMERGENCY PREPAREDNESS RESOURCES FOR RHCS

- Healthcare Business Specialists, LLC works with Rural Health Clinics on Cost Reporting, Billing, and Compliance issues. As a part of that commitment to RHCs we are providing the following resources for RHCs to use in complying with the Emergency Preparedness requirements that must be complied with by November 15, 2017. Good luck and get started as soon as possible as the regulation is very time intensive.
 - [**NARHC Handout on 10/19/2017 \(2-Page PDF\)**](#)
- **Self Assessment:** Where do you stand on being ready for Emergency Preparedness? Take this self assessment form to determine your readiness for compliance. [Self Test for Emergency Preparedness.](#)
- **CFR and Regulatory Citations:** Emergency Preparedness and related regulations
- [CFR publication of the Emergency Preparation Regulations \(September 16, 2016, 186 page PDF\)](#)
- [The Stafford Act requiring Mitigation Plans for States and local governments \(181 page PDF\)](#)

EMERGENCY PREPAREDNESS RESOURCES FOR RHCS

Healthcare Business Specialists has provided some sample Emergency Preparedness policies and procedures.

- [Emergency Preparedness Sample Policies and Procedures for RHCs](#)
- [Emergency Preparedness Policy and Procedure Plan Sample Manual \(Part 1 of 2 PDF\)](#)
- [Emergency Preparedness Policy and Procedure Plan Sample Manual \(Part 2 of 2 PDF\)](#)

HBS Presentations on Emergency Preparedness are included below. These are the presentations that were used to develop the sample policies and procedures.

- [October 13, 2017 Webinar on RHC Policy and Procedure Manual Template](#)
- [September 29, 2017 Presentation on EP](#)
- [July 27, 2017 HBS Presentation on EP](#)
- [October 19, 2017 Presentation on EP](#)

What is ASPR Tracie

The U.S. Department of Health and Human Services (HHS) Office of the **Assistant Secretary for Preparedness and Response (ASPR)** sponsors the **ASPR Technical Resources, Assistance Center, and Information Exchange (TRACIE)**.

<https://asprtracie.hhs.gov/cmsrule>

Note: Think Regional Extension Center for Emergency Preparedness

ASPR TRACIE



- Self-service collection of audience-tailored materials
- Subject-specific, SME-reviewed "Topic Collections"
- Unpublished and SME peer-reviewed materials highlighting real-life tools and experiences



- Personalized support and responses to requests for information and technical assistance
- Accessible by toll-free number (1844-5-TRACIE), email (askasprtracie@hhs.gov), or web form (ASPRtracie.hhs.gov)



- Area for password-protected discussion among vetted users in near real-time
- Ability to support chats and the peer-to-peer exchange of user-developed templates, plans, and other materials

ASPRtracie.hhs.gov/CMSrule

- ASPR TRACIE's Topic Collections and provider- and supplier-specific resources can help organizations involved in implementing the CMS requirements with resources tailored to their specific needs
- Resources for hazard vulnerability assessments, emergency plans, policies and procedures, communications plans, trainings, and testing


ASPRtracie.hhs.gov


1-844-5-TRACIE


askasprtracie@hhs.gov

41:33 / 50:05

MLN Connects

23

Emergency Preparedness Requirements MLN Connects® Call
10/5/16

CMSHHSgov

Up next

Autoplay



CMS Emergency Preparedness Guidelines with Bob McKee, DSc, Boston University

Show all

2017 Emergency P...pdf 2017 Cost Reportpdf WPS Address Cha...pdf 2017 Cost Reportpdf



12:01 AM
4/5/2017

CMS Resources

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Templates-Checklists.html>

The screenshot shows a web browser window displaying the CMS.gov website. The address bar shows the URL: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Templates-Checklists.html>. The page header includes the CMS.gov logo and navigation links: Home, About CMS, Newsroom, FAQs, Archive, Share, Help, and Print. A search bar is located below the header with the text "Learn about your health care options" and a "Search" button.

The main navigation menu consists of several yellow buttons: Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education.

The breadcrumb trail reads: Home > Medicare > Survey & Certification - Emergency Preparedness > Templates & Checklists.

The page is divided into two main sections. On the left is a sidebar titled "Survey & Certification - Emergency Preparedness" with a list of links: State Survey Agency Guidance, Health Care Provider Guidance, Lessons Learned/Archives, Emergency Preparedness Rule, Core EP Rule Elements, 1135 Waivers, Earthquakes, Hurricanes, Severe Weather, Flooding, Wild Fires and Fires General, Influenza and Viruses, Homeland Security Threats, and Templates & Checklists (which is highlighted).

The main content area is titled "Templates & Checklists". It contains the following text: "With the input of the S&C Emergency Preparedness Stakeholder Communication Forum, CMS has compiled a list of useful national emergency preparedness resources to assist State Survey Agencies (SAs), their State, Tribal, Regional, local emergency management partners, and health care providers to develop effective and robust emergency plans."

Below this text is a section titled "Resources, updates, and links will be regularly posted on this Web site including:" followed by a bulleted list:

- Public health emergency declarations
- Emergency preparedness tools
- Emergency preparedness training
- Survey & Certification Public Health Emergency Frequently Asked Questions – All Hazards
- SA Emergency Preparedness Promising Practices
- Pandemic Flu information

At the bottom of this section, it says: "For specific questions please contact SCGEmergencyPrep@cms.hhs.gov".

Below the text is a "Downloads" section with a list of links to PDF files:

- [Health Care Provider Voluntary After Action Report/Improvement Plan Template and Instructions \[ZIP, 54KB\]](#)
- [All Hazards Frequently Asked Questions \[PDF, 236KB\]](#)
- [CMS EP Acronym Glossary Final \[PDF, 380KB\]](#)
- [Emergency Preparedness Checklist for All Providers \[PDF, 109KB\]](#)
- [Emergency Preparedness Checklist ITC Facilities Specific \[PDF, 79KB\]](#)

The bottom of the screenshot shows the Windows taskbar with the search bar "Ask me anything" and the system tray displaying the time "11:29 PM 4/5/2017" and a notification icon with the number "16".

Emergency Preparedness Documents

Description and Importance	Link
Emergency Preparedness Checklist	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/SandC_EPChecklist_Provider.pdf
Emergency Preparedness Healthcare Coalitions	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/By-Name-by-State-Healthcare-Coalitions.pdf
Tabletop Exercise from FEMA on Winter Storms	https://www.dropbox.com/s/prbwuz4ndi4v8ou/2017%20Emergency%20Preparedness%20How%20to%20prepare%20for%20a%20winter%20storm%20with%20Tabletop%20Exercise.pdf?dl=0

Emergency Preparedness Documents

Description and Importance	Link
Steps to Compliance - Action Plan for RHCs.	https://www.dropbox.com/s/vygnpzi2ff8r6ng/2017%20Emergency%20Preparedness%20Steps%20for%20Compliance.docx?dl=0
Emergency Preparedness Policy and Procedures Template	https://www.dropbox.com/s/woequokfzv94fsa/2017%20Emergency%20Preparedness%20Policy%20and%20Procedure%20%28Word%29.docx?dl=0
Communication Plan for RHCs Template	https://www.dropbox.com/s/499ls30tv37bi4d/2017%20Emergency%20Preparedness%20Communication%20Plan%20by%20HBS%20developed%20on%20September%2013%20C%202017.docx?dl=0

The Emergency Preparedness Action Plan

1. Read the Regulations, Resources, Templates & watch MLM Videos.

2. Document any and all activities that are spent on EP. (phone calls)

3. Select an Emergency Preparedness Champion to lead the process and an Executive Team of three or more to implement EP.

4. Reach out to the local, CERT, county, state EP officials or coalitions and piggyback off their efforts. Be involved with any drills or tabletops.

5. Conduct the all hazards risk assessment or use the one obtained in 4. if appropriate.

6. Prepare your Emergency Plan to address the most common hazards.

7. Prepare your Emergency Policy and Procedures implementing EP.

8. Prepare your Communication Plan including how to contact people.

The Emergency Preparedness Action Plan (2)

9. Train everyone in the RHC about the EP Plan. Test and document.

10. Train volunteers (spouses or immediate family in smaller RHCs) on HIPAA, OSHA, and the Emergency Plan.

11. Participate in a community-wide drill or a facility-drill if one is not available. Write up any lessons learned from the drill.

12. Participate in another community-wide drill or facility-drill or conduct a table-top exercise instead. (Recommended)

13. Review, Update and authorize changes to the EP, EPP, and CP yearly.

14. Repeat the following year. Document. Document. Document.

Get Started. This will take Time!!!



Questions & Contact Information

Mark Lynn, CPA (Inactive)

RHC Consultant

Healthcare Business Specialists

Suite 214, 502 Shadow Parkway

Chattanooga, Tennessee 37421

Phone: (423) 243-6185

marklynnrhc@gmail.com

www.ruralhealthclinic.com

