Implementing the CMS Emergency Preparedness Rule

Presenters:
Heidi Hedberg, Emergency Program Manager - Response
Sondra LeClair, Emergency Program Manager - Preparedness
DHSS, Division of Public Health,
Section of Rural and Community Health Systems
Section of Rural and Community Health Systems

- Health Emergency Response Operations (ANC office)
- Emergency Medical Services (JNU office)
- Trauma (ANC office)
- Office of Rural Health (ANC and JNU office)
DHSS
Public Health & Medical Delegations

- Risk Communications & Public Information
- Biological Response
- Chemical Response
  - Environmental Health
- Radiological Response
- Emergency Medical Countermeasures
  - Point of Dispensing Clinics
- Pandemic Influenza
- Mass Casualty Plan
  - Forward Patient Movement
  - Alaska Medical Station Plan

- Mass Fatality Plan
- Behavioral Health
- Pharmaceutical Management
- Mass Care
  - Health Surveys
  - Epidemiological Surveillance
  - Health Services (Nursing, Mental Health)
- Children Services
  - Unaccompanied minors
- Family Reunification
  - Family Assistance Center Support
DHSS Response Warehouse

- Organized
- Controlled Inventory
- Push Packs (Highly Infectious Disease)
- Load Plans (Air and Ground)
- Sustainable Equipment
- Continuity of Operations
- EOC Location
DHSS Assets

Transport
• (1) AmbuBus Kit
• (1) 15 person Mass Fatality Trailer
• (1) 28 Person Mass Fatality Trailer
• (2) 25’ Trailers
• (1) Truck
• (1) Big Joe V18 Forklift

Mobile EOC
• Tables, Chairs
• Laptops, iPads
• Monitors, TV Screens
• Cisco Phones
• IT Cables, Switches, Networks, Chargers
DHSS Assets

**Structures**
- (9) Western Shelter Tents
- (6) Blue Med Shelters

**Support Equipment**
- (1) Water Purification System
- (1) Kitchen Cart
- (6) Heaters CV125 Series 2842
- (4) Heaters HT1000
- (1) 14kW Whisper Quiet Generator
- (1) 36kW Whisper Quiet Generator
- (3) Honda Generator EB3000C
- (6) Honda Generator EB6500X
- (2) Yamaha Generator AP-2000iQ Series 2000
- (1) Champion Generator 9000 Dual Fuel Series
- (15) Pelican Lights 9500
- (17) LED Light Pelican 9440
Alaska Medical Stations
DHSS Assets

**Coms Equipment**
- (2) Coms Trailers
- (5) Rapid Pack Communication Backpacks
- (5) BGANs Satellite Modems
- (7) Iridium Go’s! Modems
- 2-way Radios, ALMR Radios, Sat Phones

**People**
- AK Respond
- DHSS staff
- AK-1 DMAT team
DHSS Assets

Medical

• (300) Trauma IFAK Kits
• Advanced First Aid Kits
• Medical Supplies
• Pharmaceuticals
• Mini/Mass Casualty Triage Supplies

Vents/ O2 Concentrators

• (2) HT50 Portable Ventilators
• (7) HT70 Portable Ventilators
• (6) Oxygen Concentrators
DHSS Assets

Personal Protective Equipment
- (26,880) N-95
- (6,000) Mask Kits (Mask, Goggles, 2 Sets of Gloves)
- Face Shields
- Surgical Masks
- (10) Maxair PAPRs
- (230,000 pairs) Vinyl Gloves – All Sizes
- (5) Highly Infectious Disease Push Packs for Hospitals

Pandemic
- (4) Vaccine Refrigerators and Carts
- Needles & Ancillary Supplies
How to Request a DHSS Resource

1. Call 24/7 DHSS Duty Officer 907-903-3721
2. Complete DHSS resource request form
3. Email request to dhsseoc@alaska.gov
DHSS Response Team

Counter Clockwise
Jessica Gould – Safety Officer
Heidi Hedberg – Operations, Logistics, Finance
Andy Jones – Incident Commander
Sondra LeClair – Plans
Todd Lecours – Medical Branch
Julie Rabeau – Medical Branch
Hospital Preparedness Program

Resources & Collaboration
Resource Sharing Guide

• Any public health or medical facility can participate
• Identifies local assets that may be available during a disaster
• If you participate you receive a copy of the guide
• Guide includes:
  – Emergency contact info
  – Alternate communication capabilities
  – Surge assets
Statewide Healthcare Coalition

- Planning, organizing, equipping, training coalition members to effectively prepare for and respond to disasters
- Forum for healthcare entities statewide to communicate preparedness gaps and mitigation strategies
- Opportunity for facilities to share effective approaches to disaster preparedness and response
- Receive State preparedness, response, and recovery efforts
Training Resources

Dept. of Health & Social Services
  – Hale Borealis Forum (conference)
  – Emergency preparedness technical assistance

Outside Sources
  – Center for Domestic Preparedness (CDP)
  – Rural Domestic Preparedness Consortium (RDPC)
  – FEMA
Emergency Preparedness Rule

Breaking Down the Requirements for Long Term Care Facilities
Final Rule

- Emergency Preparedness Requirement for Medicare and Medicaid Participating Providers and Suppliers
- Apply to all 17 provider and supplier types
- Published September 16, 2016
- Implement by November 16, 2017
Provider Types

Inpatient
- Hospitals
- Critical Access Hospitals
- Long Term Care Facilities
- Psychiatric Residential Treatment Facilities
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Religious Nonmedical Health Care Institutions
- Transplant Centers

Outpatient
- Hospices
- Ambulatory Surgical Centers
- Programs of All Inclusive Care for the Elderly
- Home Health Agencies
- Comprehensive Outpatient Rehabilitation Facilities
- Community Mental Health Centers
- Organ Procurement Organizations
- Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services
- Rural Health Clinics and Federally Qualified Health Centers
- End-Stage Renal Disease Facilities
Four Provisions for All Provider Types

- Risk Assessment & Planning
- Policies & Procedures
- Emergency Preparedness Program
- Communication Plan
- Training & Testing
Risk Assessment & Planning

Step 1. Perform risk assessment using an “all-hazards” approach, focusing on your capacities and capabilities

- Hazard Vulnerability Assessment is a tool used to evaluate the potential risks for a facility (ex. Kaiser model)
Risk Assessment & Planning

Step 2. Develop an emergency plan based on the risk Assessment, including missing residents

- Hazards likely in geographic area
- Care-related emergencies
- Equipment and power failures
- Interruption in communications, including cyber attacks
- Loss of all/portion of facility
- Interruptions in the normal supply of essentials, such as water, food, medical supplies, pharmaceuticals
- Continuity of operations, delegations of authority and succession plans

Step 3. Annually update emergency plan
Policies & Procedures

• Develop and implement policies and procedures that support the successful execution of the emergency plan and risks identified during the risk assessment process.

• P&P must address a range of issues including:
  1. Provision of subsistence needs for staff and residents
  2. System to track staff and residents during and after an emergency at facility or other location
  3. Evacuation plan
  4. Shelter in place plan
  5. System of medical documentation that preserves resident information
  6. Process to use volunteers during a disaster
  7. Arrangement with other LTC facilities and providers to receive residents
  8. Role of the LTC facility under a waiver declared by the secretary in accordance with section 1135 of the Act

• Annually update P&P
Communication Plan

Step 1. Develop a communication plan. The plan must include:

1. Name and contact info for staff, entities providing services, resident physicians, other LTC facilities, volunteers
2. Contact info for federal, state, tribal, regional or local emergency preparedness staff, state licensing and certification agency, office of the state LTC Ombudsman, other sources of assistance
3. Primary and alternate means of communication with contacts listed above
4. Method for sharing info and medical documentation for residents
5. A process in the event of an evacuation to release resident information
6. A process of providing info about the general condition and location of residents
7. A process of providing info about the LTC occupancy needs, ability to provide assistance
8. A method for sharing info from the emergency plan to residents and their families

Step 2. Annually update communication plan
Training & Testing Program

Develop and maintain training and testing program based off the risk assessment, P&P, emergency plan and communication plan:

- Including initial training for new and existing staff, individuals providing services and volunteers in emergency preparedness policies and procedures
- Annual refresher trainings to _demonstrate staff knowledge_ of emergency procedures
- Maintain documentation of the trainings

Conduct drills and exercises, including unannounced staff drills to test the emergency plan:

- A **full-scale exercise** that is community or facility based (*actual disasters*)
- An additional exercise of the facility’s choice
- After action reports – document your exercises

- Annually update the training and testing program plan
Integrated Healthcare System’s

- LTC is part of a healthcare system that has a unified emergency preparedness program

- Four requirements:
  1. Demonstrate each separately certified facility within the system actively participates in the program
  2. Takes into account each facilities unique circumstances, patient populations and services
  3. Demonstrates each facility is capable of using the integrated program
  4. Community based risk assessment and an individual facility based risk assessment
Additional Requirements

• Locate generators in accordance with National Fire Protection Association (NFPA) guidelines
• Conduct generator testing, inspection, and maintenance as required by NFPA
• Plan to maintain and keep emergency power systems operational
Interpretive Guidelines

“The IGs are sub regulatory guidelines which establish our expectations for the function states perform in enforcing the regulatory requirements. **Facilities do not require the IGs in order to implement the regulatory requirements.** We note the CMS historically releases IGs for new regulation after the final rule has been published. This EP rule is accompanied by extensive resources that providers and supplier can use to establish their emergency preparedness programs.”

*Federal Register / Vol. 81, No. 180 / Friday, September 16, 2016 / Rules and Regulations 63873*
Interpretive Guidelines

• The Survey & Certification Group (SGC) is in the process of developing the IGs which will assist in implementation of the new regulation

• Anticipate the guidelines to be completed by spring 2017

• IGs will be formatted into one new Appendix within the State Operations Manual (SOM) applicable to all 17 providers/supplier types
Compliance

• Facilities are expected to be in compliance with the requirement 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

• Training for surveyors is under development
Implementation Resources

CMS

Assistant Secretary for Preparedness and Response – Technical Resources, Assistance Center and Information Exchange
https://asprtracie.hhs.gov/

National Center for Disaster Medicine & Public Health
https://ncdmph.usuhs.edu/
Questions?
Thank You

24/7 DHSS Duty Officer 907-903-3721 cell

For more information please contact:

Heidi Hedberg, 269-5024
heidi.hedberg@alaska.gov

Sondra LeClair, 334-2637
sondra.leclair@alaska.gov