EMERGENCY PREPAREDNESS

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Community Hospital

DISCLAIMER

This presentation may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. Please review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

AGENDA

- Understanding the CMS Guidelines

- Assessment and Implementation

- Steps of Emergency Management

- Resources

CMS EMERGENCY PREPAREDNESS RULE

- 1st published in the Federal Register for comment in December 2013

- Increases patient safety during emergencies

- Establishes consistent emergency preparedness requirements across provider and supplier types

- Establishes a more coordinated response to natural and man-made disasters

GOALS FOR THE RULE

Address systemic gaps

Establish consistency

Encourage coordination

Definition of a disaster

A **disaster** is a serious disruption occurring over a short (mass casualty incident) or long period of time (pandemic) that causes widespread human, material, economic or environmental loss which exceeds the ability of the affected community or society to cope using its own resources.
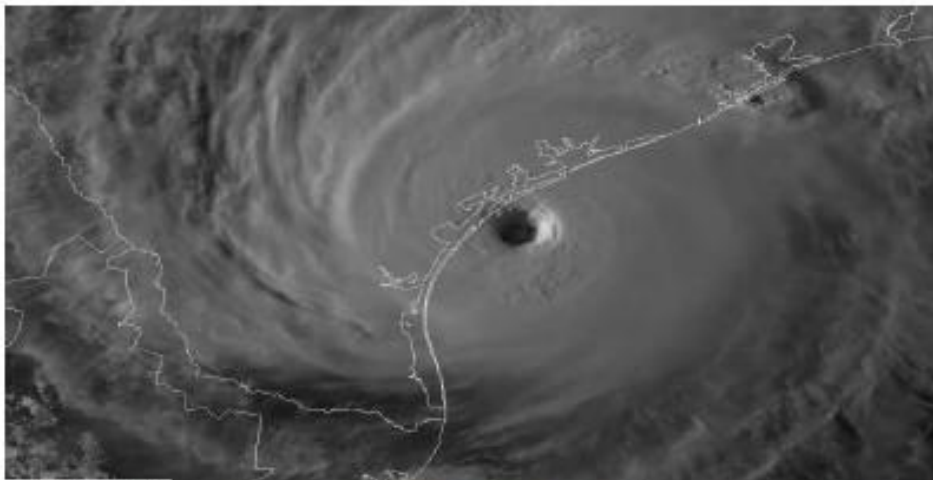
WHAT KEEPS YOU AWAKE AT NIGHT?

WORK RELATED THOUGHTS, KEEP ME AWAKE...

BOIL WATER NOTICE
Do not drink the water without boiling it first. Bring all water to a boil for at least two minutes, and let it cool before using.

SANTE FE, TX
KTRK
TEXAS SCHOOL SHOOTING
TX GOV.: 10 DEAD, 10 WOUNDED IN SHOOTING
17-YEAR-OLD SUSPECT ARRESTED; EXPLOSIVES FOUND
CBSN
LIVE

EMERGENCY

HOUSTON, WE HAVE A PROBLEM
memegenerator.net

CORONAVIRUS
IN HOUSTON
FOX 26

Internal Incidents

- Fire
- Cyber-security
- Infectious Diseases
- Missing Person
- Active Shooter

External Incidents

▸ Mass Causality

▸ HazMat

▸ Tornado

▸ Winter Storms

▸ Power Outage

TYPES OF DISASTER EVENTS

Purpose: To establish national emergency preparedness requirements, consistent across provider and supplier types.

- Outlines emergency preparedness Conditions of Participation (CoPs) & Conditions for Coverage (CfCs)

  - CoPs and CfCs are health and safety standards all participating providers must meet to receive certificate of compliance

- Applies to 17 provider and supplier types

  - Different emergency preparedness regulations for each provider type

FEDERAL REGISTER

Vol. 81   Friday,
No. 180   September 16, 2016

Part II

Department of Health and Human Services

Centers for Medicare & Medicaid Services
42 CFR Parts 403, 416, 418, et al.
Medicare and Medicaid Programs; Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers; Final Rule

Bottom line: Providers and Suppliers that wish to participate in Medicare and Medicaid – i.e. the nation's largest insurer – must demonstrate they meet new emergency preparedness requirements in rule.

# Core Elements of the CMS Emergency Preparedness Rule include:

Who is Affected?

Inpatient	Outpatient
Critical Access Hospitals (CAHs)	Ambulatory Surgical Centers (ASCs)
Hospices	Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services
Hospitals	Community Mental Health Centers (CMHCs)
Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)	Comprehensive Outpatient Rehabilitation Facilities (CORFs)
Long Term Care (LTC)	End-Stage Renal Disease (ESRD) Facilities
Psychiatric Residential Treatment Facilities (PRTFs)	Home Health Agencies (HHAs)
Religious Nonmedical Health Care Institutions (RNHCIs)	Hospices
Transplant Centers	Organ Procurement Organizations (OPOs)
	Programs of All Inclusive Care for the Elderly (PACE)
	Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)
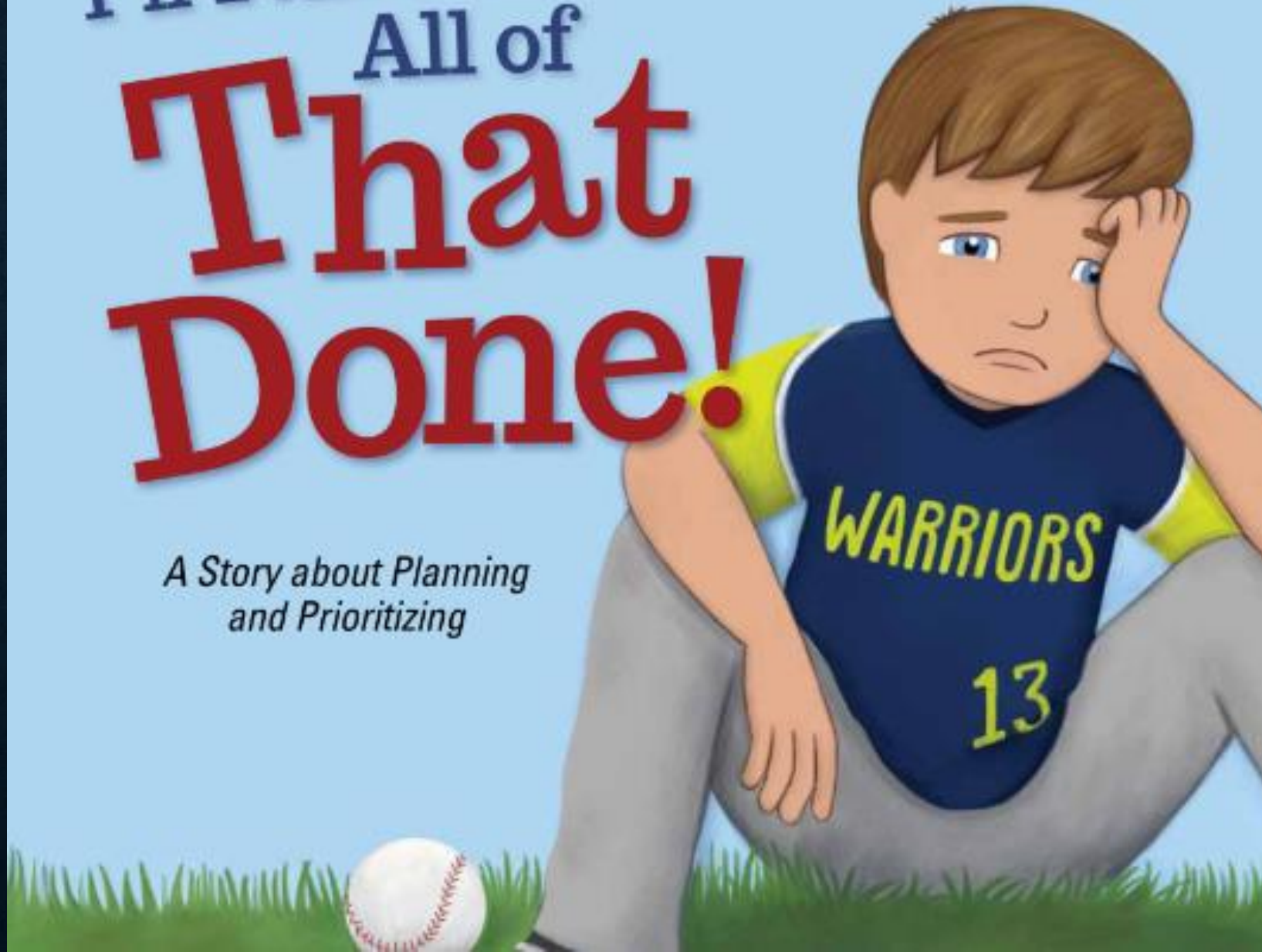
HOSPITAL PREPAREDNESS PROGRAM

The Hospital Preparedness Program (HPP) enables the health care system to save lives during emergencies that exceed day-to-day capacity of the health and emergency response systems.

Behavioral and Mental Health Centers and Agencies

Outpatient Facilities

Emergency Medical Services

Hospitals

Home Health Agencies

Long Term Care
Skilled Nursing Facilities
Hospice Care

Health Centers
Rural Health Centers
Community Health Centers

Community Partners
Academic Institutions
Non-profits
Volunteers

Health Care Coalition (HCC)

Emergency Management Agencies

Public Health Departments

Physicians
Primary Care
Specialists

Local Government
Elected Officials
Fire Departments
Police
Departments

Healthcare Coalitions in Nebraska

Panhandle Regional Medical Response System

Michelle Hill

Office:
308-633-2866

Cell:
308-262-5764

Email:
mhill@pphd.org

Rural Region One Medical Response System

Dennis Colden

Office:402-336-2406
Cell:402-369-3019
Email:rromrs@ncdhd.ne.gov

Omaha Metropolitan Healthcare Coalition

Justin Watson

Office:
402-599-9413

Email:
juwatson
@nebraskamed.com

Southeast Nebraska Healthcare Coalition

Stephanie Vinson

Office:
402-274-3993

Email:
stephanie@sedhd.org
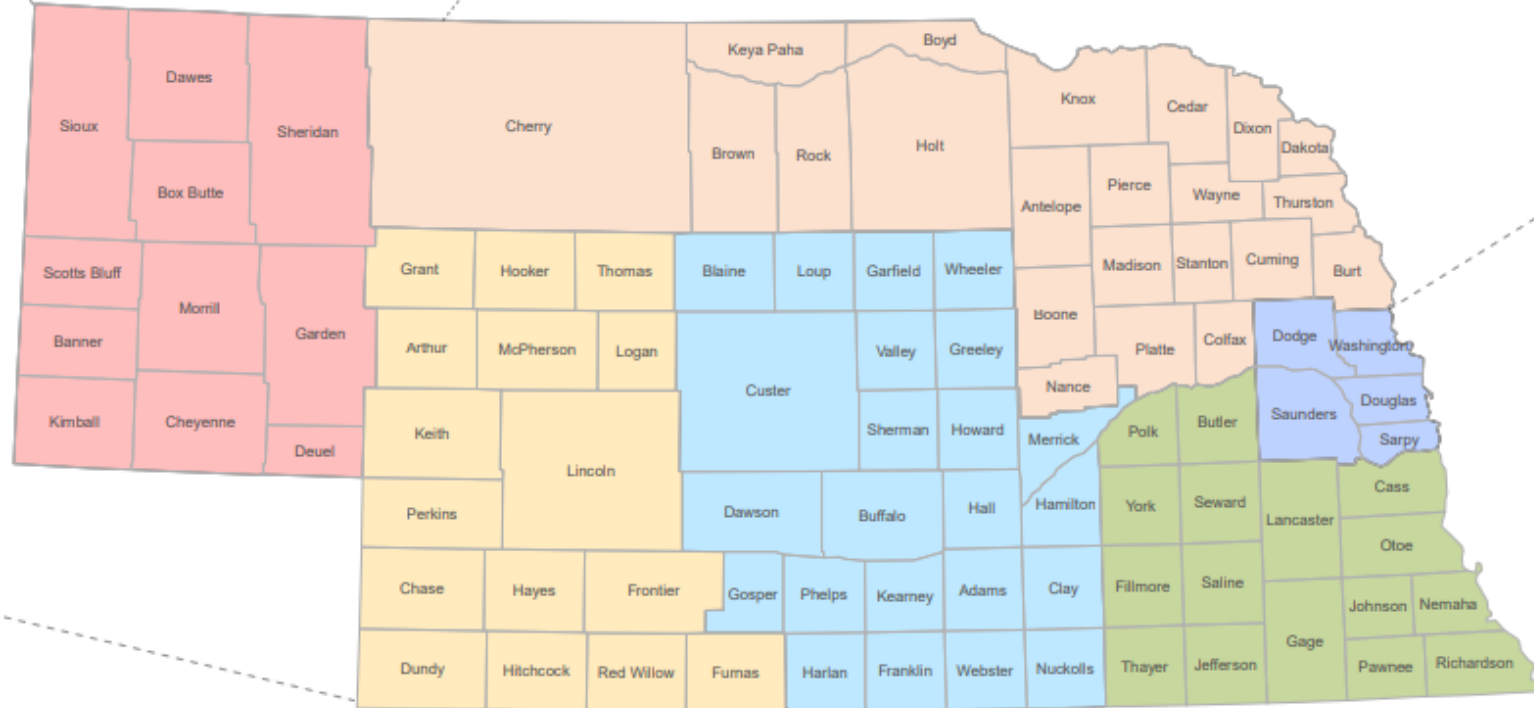
Nebraska Plains Healthcare Coalition

Heidi Wheeler

Cell:
308-883-0786

Email:
hlwheeler@ymail.com

TriCities Medical Response System

Cody Samuelson

Office:308-995-4778
Cell:308-991-9842
Email:csamuelson@trphd.org

Date:OCT 18, 2019

NEBRASKA
Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

HOSPITAL INCIDENT COMMAND SYSTEM (HICS)
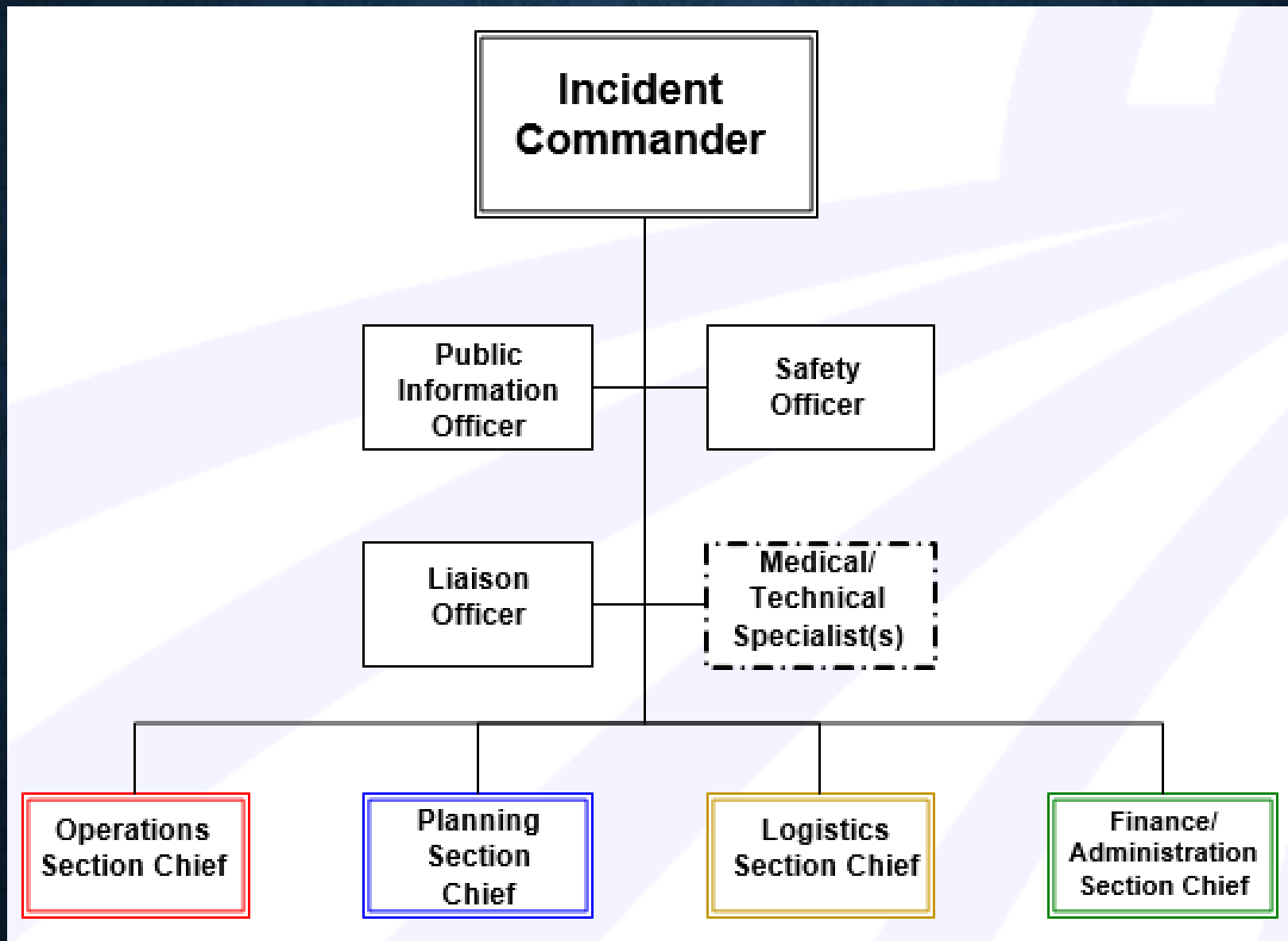
BASIC INCIDENT COMMAND STRUCTURE

PREPAREDNESS – ALL HAZARDS APPROACH

5 STEPS OF EMERGENCY MANAGEMENT

- Prevention

- Mitigation

- Preparedness

- Response

- Recovery

HAZARD VULNERABILITY ANALYSIS

| Alert Type | PROBABILITY | ALERTS | ACTIVATIONS | SEVERITY = (MAGNITUDE - MITGATION) | | | | | | RISK |
				HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	Likelihood this will occur			Possibility of death or injury	Physical losses and damages	Interuption of services	Preplanning	Time, effectiveness, resources	Community/Mutual Aid staff and supplies	* Relative threat
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	Number of Alerts	Number of Activations	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low	0 = N/A 1 = High 2 = Moderate 3 = Low	0 = N/A 1 =High 2 = Moderate 3 = Low	0 - 100%

Natural Occurring Events

Technological Related Events

Human Related Events

HazMat Related Events

(EM.02) Emergency Response Plans

- (EM.02.01) Activation Procedures for Incident Command
- (EM.02.02) Activation of Disaster Plan
- (EM.02.03) Alternative Care Site Plan
- (EM.02.04) Active Shooter - Armed Intruder
- (EM.02.05) Bomb Threat Plan
- (EM.02.06) Business Continuity Disaster Recovery
- (EM.02.07) Chemical Exposure-Decontamination
- (EM.02.08) Communications Plan
- (EM.02.09) Disaster Activation Levels
- (EM.02.10) Disaster Credentialing
- (EM.02.11) Earthquake Event
- (EM.02.12) Evacuation/Shelter in Place *Revised!*
- (EM.02.13) Hostage Situation

- (EM.02.14) Mass Casualty Plan
- (EM.02.15) Mass Fatality Event
- (EM.02.16) Missing Person Event
- (EM.02.17) Occupancy Exception
- (EM.02.18) Patient Tracking
- (EM.02.19) Severe Weather - Tornado Watch - Tornado Warning
- (EM.02.20) Strategic National Stockpile
- (EM.02.21) Structural Damage
- (EM.02.22) Traffic/Crowd Control
- (EM.02.23) Utility Failures
  - (EM.02.23.01) Utility System Failures Resource Document
- (EM.02.23) Winter Storm Event *Revised!*
- (EM.02.24) 1135 Wavier Implementation
- Crisis Standards of Care

Community Hospital
Fiscal Year 2020 – 2021 Actual Events/Exercise/Training Activities

Exercises, Drills, Actual Events	Qtr. 1 (2020)			Qtr. 2 (2021)			Qtr. 3 (2021)			Qtr. 4 (2021)		
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
CPI Responder (Training or Actual Event)										4/16 Actual Event-OPII 4/20 training		
Blizzard/Snow Emergency Actual / drill												
Relocation Actual / Drill									3/24 Statewide tornado drill			
Community wide Actual / drill	COVID Pandemic							Seeing a decrease in admissions		Seeing a decrease in admissions 4/6 TTX: school bus		
Missing person Actual / drill										4/29 Actual		
NPHCC (Medical Response System) Training					Communication Call down EX 11/10-11					4/26 Burn TTX		
HERT Training								2/16 Workshop				
Hospital Incident Management Team	COVID Pandemic							Began meeting once a month re: COVID		4/6 TTX: school bus 4/26 Burn TTX		
Active Shooter Training												
Southwest NE Public Health Dept.						Closed Pod Vaccination Clinic at CH	Closed Pod Vaccination Clinic at CH		Closed Pod Vaccination Clinic at CH			
IT Cybersecurity Incident			9/24 Actual		11/9 Actual							
Community-wide THIIRA (every 3 yrs.)												

Communication is Critical

Public

Patients/Families

Staff

Media

First Responders

Vendors

Mass Communication

Cell Phones (text messages)

Handheld Radios

HAM Radios

Training and Testing Requirements

OTHER KEY ELEMENTS

Temperature Controls and Emergency and Standby Power

- Higher level of requirements for hospitals, critical access hospitals, and long-term care facilities.

- Locate generators in accordance with National Fire Protection Association (NFPA) guidelines.

- Conduct generator testing, inspection, and maintenance as required by NFPA.

- Maintain sufficient fuel to sustain power during an emergency.

WHERE ARE WE NOW?

- Interpretive Guidelines and State Operations Manual has been developed and published by CMS

- In September, 2017, the surveyor training for emergency preparedness requirements was launched. Available at https://surveyortraining.cms.hhs.gov/

- Training through the Integrated Surveyor Training website is available for providers and suppliers

- As of November 15, 2017, in conjunction with their regularly scheduled survey, these condition of participation will now be assessed.

QSEP

Driving Healthcare Quality

Welcome to the Quality, Safety & Education Portal (QSEP)

Logout

Select here for instructions on how to access **Targeted COVID-19 Training for Nursing Homes**

The Quality, Safety & Education Portal (QSEP) provides the full curriculum of surveyor training and guidance on health care facility regulations.

QSEP is an online platform that empowers learners to lead and manage their own learning in order to master the content. All training is available on-demand on a top-notch self-service portal. 24/7 access means you have the freedom to learn what you want, where you want, when you want.

COMPLIANCE

- Facilities are expected to be in compliance with these requirements

- Surveys for Emergency Preparedness will be in conjunction with the regular survey cycle

- 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
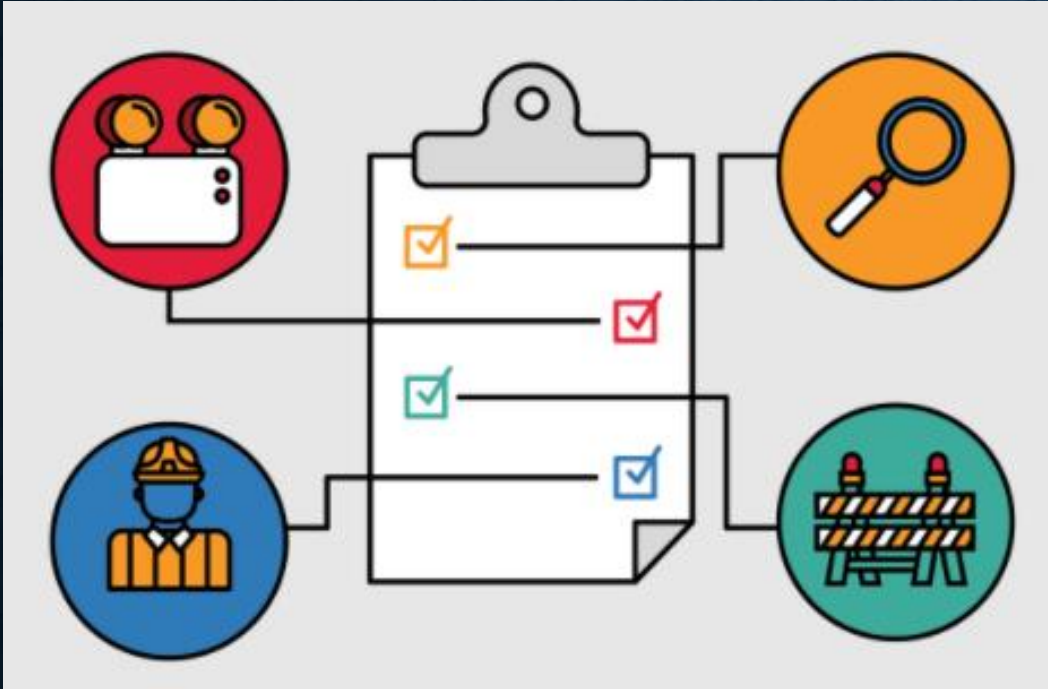
RECOVERY

WHY ALL THE HYPE ABOUT EMERGENCY PREPAREDNESS

Disasters

2021 Winter Storms. February 13, 2021.

2020 North American Wildfire Season. December 7, 2020.

2020 Atlantic Hurricane Season. December 1, 2020.

2020 Monsoon Floods. July 17, 2020.

2020 Spring Tornadoes. January 10, 2020.

2019 California Wildfires. October 10, 2019.

2019 **Catastrophic** River Flooding. March 14, 2019.

2017 Wildfires.

Hurricane Harvey

| 58 inches of rain | 19T gallons of rainwater | 19 tornadoes | 130mph sustained winds |

122K people rescued

0 Patients Colleagues Visitors Harmed During the Storm

"One of the worst weather disasters in US history"
– The Weather Channel

Santa Fe High School Shooting

10 people fatally shot

14 others wounded

3rd deadliest high school shooting

7:40AM first shots fired

25 Min duration of the event

12 Patients triaged and treated at HCA Houston Healthcare

"One of the most heinous attacks that we've ever seen in the history of Texas schools"
– Texas Governor Greg Abbott
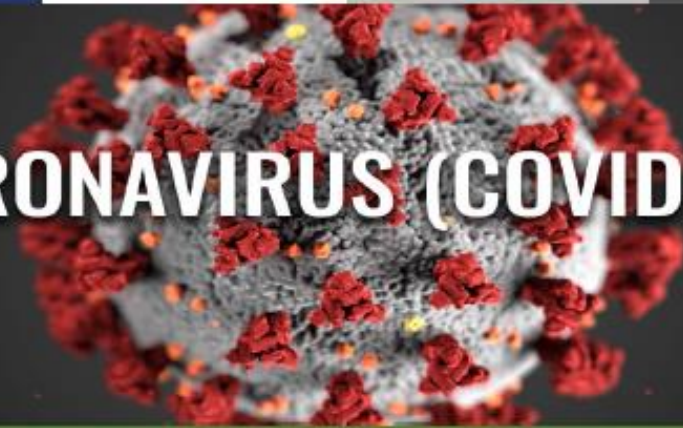
Winter Storm Uri (SNOVID)

4 inches of snow & sleet

7M people without water

0 Texans prepared...

5M people without power

10 hospitals on fire watch

10 hospitals on a boil water notice

"This was one of the most impactful winter events in recent history that brought multiday road closures, power outages, loss of heat, broken pipes, and other societal impacts for the region. While the damage is still being assessed, this will likely go down as the first billion dollar disaster of 2021 globally, and potentially the most costly weather disaster in the state of TX history, surpassing even Hurricane Harvey from 2017"

– Weather.gov

HOW PREPARED ARE **YOU** FOR A DISASTER?

LET'S FIND OUT!

RESOURCES

- CMS.GOV
  - Outline of requirements by provider type
  - Links to aggregated EP resources
  - Routinely updated FAQs
- CDC
- Federal & Accrediting Organizations
- Healthcare Ready CMS Knowledge Center

- Center for Domestic Preparedness
  - cdp.dhs.gov
- HHS/ASPR Technical Resources, Assistance Center, and Information Exchange (TRACIE)
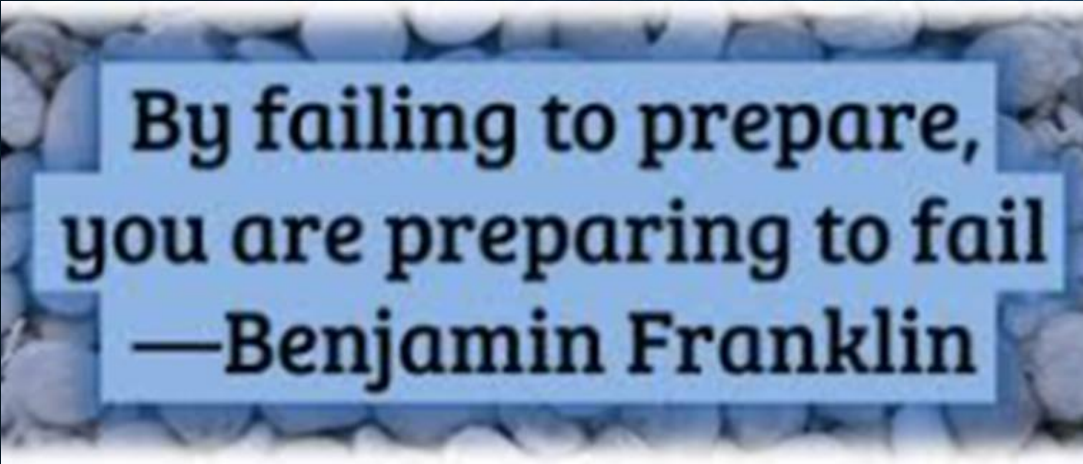- NFPA, Chapter 12
- Google

WHAT SURPRISED YOU?

WHAT QUESTIONS DO YOU HAVE?

By failing to prepare,
you are preparing to fail
—Benjamin Franklin

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