

Delta Region Community Health Systems Development (DRCHSD) Program

**Clinic Webinar Series:
Emergency Preparedness**



The Center's Purpose



The [National Rural Health Resource Center \(The Center\)](#) is a nonprofit organization dedicated to sustaining and improving health care in rural communities. As the nation's leading technical assistance and knowledge center in rural health, The Center focuses on five core areas:

- Transition to Value and Population Health
- Collaboration and Partnership
- Performance Improvement
- Health Information Technology
- Workforce



DRCHSD Program Supported by FORHP and DRA



U.S. Department of Health & Human Services



HRSA

Federal Office of Rural Health Policy

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Diversity, Equity, Inclusion, & Anti-racism



Building a culture where difference is valued

The Center is committed to DEI and anti-racism. We create an environment that reflects the communities we live in and serve; a place where everyone feels accepted and empowered to be their full, authentic selves; and where everyone belongs.

We understand the impact of and seek to defeat racism and discrimination in ourselves, our workplace, and the world. This guides how we cultivate leaders, build our programs and resources, and deliver our technical assistance.

We are an organization that honors, celebrates, and respects all dimensions of diversity. These principles are central to our mission and to our impact.

[Read more at ruralcenter.org/DEI](https://ruralcenter.org/DEI)

Upcoming Webinars

- **Clinic Webinar Series: Maintaining Compliance in your RHC**
 - June 27, from 11 a.m. – 12 p.m.
- **Social Media Webinar: Using the 5 W's (who, what, when, where, and why)**
 - July 9, from 11 a.m. – 12 p.m.
- **Social Media Webinar: How to Optimize one piece of content across multiple platforms**
 - July 16, from 11 a.m. – 12 p.m.

Today's Speaker:



Steve Smith, FACHE, FACMPE,
CHFP, CRHCP
Director
FORVIS

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Rural Health Clinic Emergency Preparedness Requirements and Best Practices

June 20, 2024

Healthcare

Meet the Presenter



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Agenda

- Overview of Final Rule
- Survey Procedures
- Emergency Preparedness Plan Resources
- Questions and Answers

Emergency Preparedness Plan Final Rule

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Final Rule Overview

- Published September 16, 2016, and applies to all supplier types
- Implementation required as of November 15, 2017
- Compliance is required to participate in Medicare program
- Primary requirements (reviewed every two years):
 - + Emergency Plan and Risk Assessment – 491.12(a)
 - + Policies and Procedures – 401.12(b)
 - + Communication Plan – 491.12(c)
 - + Training and Testing – 491.12(d)
 - + Integrated Plan – 491.12(e)

Emergency Plan and Risk Assessment

- Risk Assessment
 - + All hazards approach based on facility and community-based risks
- Must be reviewed every two years
- Must be applicable to each individual clinic
- Address patient population
 - + Services RHC can provide in an emergency
 - + Continuity of operations
 - + Delegation of authority and succession plans
- Collaboration with local, tribal, regional, State and Federal officials to maintain integrated response

Policies and Procedures

- Must be reviewed at least every two years
- Must include the following elements:
 - + Safe evacuation from RHC
 - + Means to shelter in place for patients, staff and volunteers
 - + System of medical documentation that preserves patient information
 - + Use of volunteers or other emergency staffing strategies including State and Federal professionals to address surge needs

Communication Plan

- Must be reviewed at least every two years
- Names and contact information
 - + Staff
 - + Vendors
 - + Patients' physicians
 - + Other RHCs/FQHCs
 - + Volunteers
- Additional contact information
 - + Federal, State, tribal, regional and local emergency preparedness staff
 - + Other sources of assistance

Communication Plan (continued)

- Primary and alternate means for communicating with the following:
 - + RHC staff
 - + Federal, State, tribal, regional and local emergency management agencies
- Means of providing information about general condition and location of patients
- Means of providing information about RHCs needs and ability to provide assistance to the authority having jurisdiction or the Incident Command Center

Training and Testing

- Training

- + Initial training in emergency preparedness policies and procedures to all new and existing staff
- + Emergency preparedness training at least every two years
- + Maintain documentation of the training
- + Demonstrated staff knowledge of emergency procedures
- + If policies and procedures are significantly updated additional training must be conducted and documented

Training and Testing (continued)

- Testing
 - + Full-scale exercise that is community based every two years or
 - If community based is unavailable an individual, facility based functional every two years or
 - If actual emergency occurs the RHC is exempt from engaging in the next required functional exercise
 - + Additional exercise every two years opposite the year the full scale functional exercise was conducted that may include:
 - Second full scale exercise
 - Mock disaster drill
 - Tabletop exercise led by facilitator and includes a group discussion using a clinically relevant emergency scenario, set of problem statements, directed messages or prepared questions

Training and Testing (concluded)

- Testing (continued)
 - + Analyze the RHCs response and maintain documentation of all drills, tabletop exercises and emergency events
 - + Revise the emergency plan as needed
 - + Conduct additional training if need is determined

Integrated Healthcare Systems

- RHCs that are a part of a healthcare system may have an independent emergency preparedness plan or participate in the system's emergency preparedness program. If participating in system's program:
 - + Show each facility participated
 - + Take into account each facility's unique circumstances
 - + Demonstrate each facility is capable of using the program
 - + Include integrated policies and procedures, communication plan, and testing and training programs

Emergency Preparedness Plan Survey Procedures

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Survey Procedures - Training

- Surveyor will review copies of the RHCs emergency preparedness plan including:
 - + Initial and subsequent emergency preparedness trainings
 - + Annual emergency preparedness training offerings
 - + Sample of staff training files
 - + Proof that the RHC has updated its training program at least every two years
 - Recommended to retain at least the past 2 cycles of emergency training documentation (4 years)
- Surveyor will interview staff and ask questions regarding initial and subsequent trainings and verify knowledge of program

Survey Procedures - Testing

- Surveyor will perform the following:
 - + Ask leadership to explain participation of management and staff
 - + Review documentation of exercises
 - + Review documentation of efforts to identify a full scale community based exercise if they didn't participate in one
 - + Review documentation of analysis and response to test and how the program was updated based on that analysis

Emergency Preparedness Plan Resources

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Resources for RHCs

- Emergency Preparedness Federal Regulation
 - + <https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-491/subpart-A/section-491.12>
- CMS Emergency Preparedness Response Office (EPRO)
 - + <https://www.cms.gov/about-cms/what-we-do/emergency-response>
- Appendix Z – Emergency Preparedness
 - + https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/som107ap_z_emergprep.pdf
- Sample Risk Assessment Tool

Questions?



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Thank you!

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Assurance / Tax / Advisory

Questions or Comments





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