

Emergency Preparedness Survey Procedures

What the Surveyor will do....

Interview	Ask	Verify
Emergency Preparedness Program	Emergency Preparedness Program	Emergency Preparedness Program
Identify the <i>facility leadership</i> and ask him/her/them to <i>describe</i> the facility's <i>emergency preparedness program</i> .	To see the facility <i>written policy and documentation</i> for the emergency preparedness program.	The emergency plan includes <i>policies and procedures</i> for the provision of <i>subsistence needs</i> including, but not limited to, food, water and pharmaceutical supplies for patients and staff by reviewing the plan
Clients - Residents and their families or representatives and ask them if they have been given information regarding the facility's <i>emergency plan</i> .	To see <i>documentation</i> of the individual <i>analysis and response</i> and how the facility updated its emergency program based on this individual analysis.	The emergency plan includes <i>policies and procedures</i> to ensure adequate <i>alternate energy sources</i> necessary to maintain: <ul style="list-style-type: none"> ➤ Temperatures to protect patient health and safety; ➤ Safe and sanitary storage of provisions; ➤ Emergency lighting; and ➤ Fire detection, extinguishing and alarm systems.
	To see documentation the facility identified a system that protects the <i>confidentially</i> of client / resident information.	The emergency plan includes policies and procedures to provide for <i>sewage and waste disposal</i> .
	To see evidence the program has been <i>reviewed and updated</i> on, at least, an annual basis by asking for <i>documentation</i> of the annual review as well as any updates made.	The facility has the required <i>emergency and standby power systems</i> to meet the requirements of the facility's emergency plan and corresponding policies and procedures.
	To see evidence the plan includes <i>arrangements for transportation</i> to alternate care sites.	The emergency plan for " <i>shelter in place</i> " and evacuation plans. Based on those plans, does the facility have <i>emergency power systems</i> or plans in place to maintain safe operations while sheltering in place?
	To see documentation that the plan has used an 'all hazards approach' including <i>missing client / resident</i> .	** That ICF/IID emergency plans also meet the requirements for evacuation drills and training at §483.470(i).
Communication Plan	Communication Plan	Communication Plan
Identify the <i>facility leadership</i> and ask him/her/them to <i>describe</i> the facility's <i>communication plan</i> .	To see the <i>written communication plan</i> .	The facility has a <i>written communication plan</i> .
	To see the <i>communications equipment or communication systems</i> listed in the plan.	The <i>communication plan</i> includes <i>primary and alternate means</i> for communicating with facility staff, federal, state, regional and local emergency management agencies.
	Staff to demonstrate the method the facility has developed for sharing the emergency plan with residents or clients and their families or representatives.	The <i>communication plan</i> includes a method for <i>sharing information</i> and medical care documentation for clients under the facility's care, as necessary, with other health providers to maintain the continuity of care.

Interview	Ask	Verify
Communication Plan	Communication Plan	Communication Plan
		The facility has <i>developed policies and procedures</i> that address the means the facility will use to release patient information to include the general condition and location of patients, by reviewing the communication plan.
		The <i>communication plan</i> includes a means of providing information about the facility's needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee by reviewing the communication plan.
		The communication plan includes a means of providing information about their <i>occupancy</i> .
		The <i>communication plan</i> includes a method for sharing information from the emergency plan, and that the facility has determined it is appropriate with <i>residents or clients</i> and their families or representatives by reviewing the plan.
Training & Testing Program	Training & Testing Program	Training & Testing Program
Identify the <i>facility leadership</i> and ask him/her/them to <i>describe</i> the facility's <i>training and testing program</i> .	For copies of the facility's <i>initial</i> emergency preparedness training and annual emergency preparedness training offerings.	The facility has a <i>written training and testing program</i> that meets the requirements of the regulation.
Various staff and ask questions regarding the facility's initial and annual training course, to verify staff knowledge of emergency procedures.	To see <i>documentation</i> of the annual tabletop and full-scale exercises (which may include, but is not limited to, the exercise plan, the AAR, and any additional documentation used by the facility to support the exercise).	A sample of staff training files to verify staff have received initial and annual emergency preparedness training
Various staff and ask them to describe the evacuation procedures and plan.	To see the <i>documentation</i> of the 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 the reasons for the inability to participate in a community-based exercise).	
		Current copies of CPR certifications for all staff, as applicable, are on file.