Emergency Preparedness for Nursing Homes
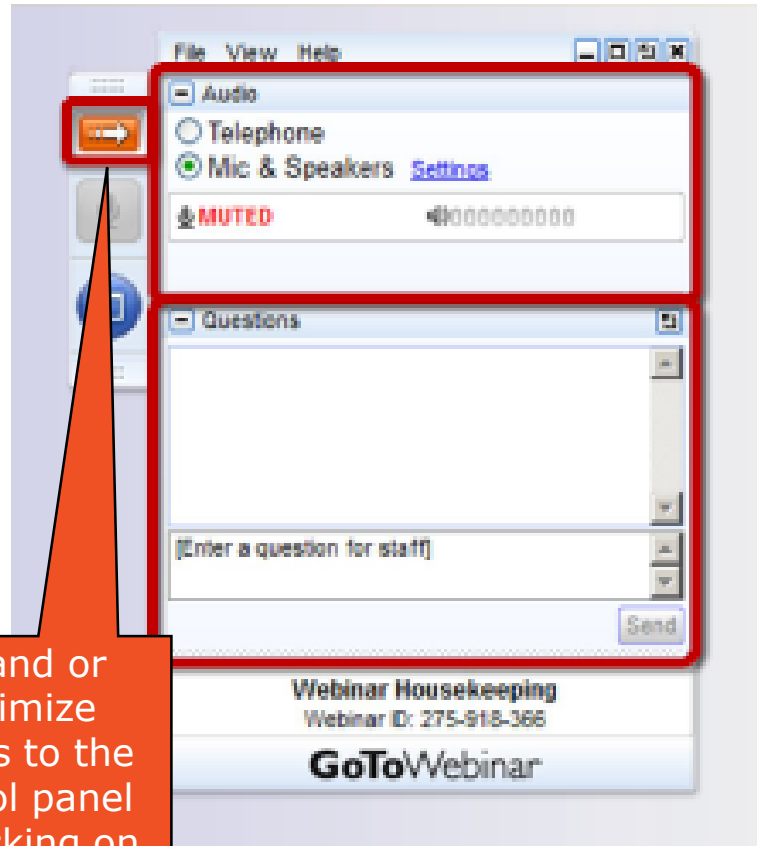
Presented by:

Joseph V. Bellino, MS, CHPA, CHEM, Engineering Department

August 21, 2018

The Joint Commission

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Just the Basics - Nursing Care Center

Emergency Preparedness for Nursing Homes

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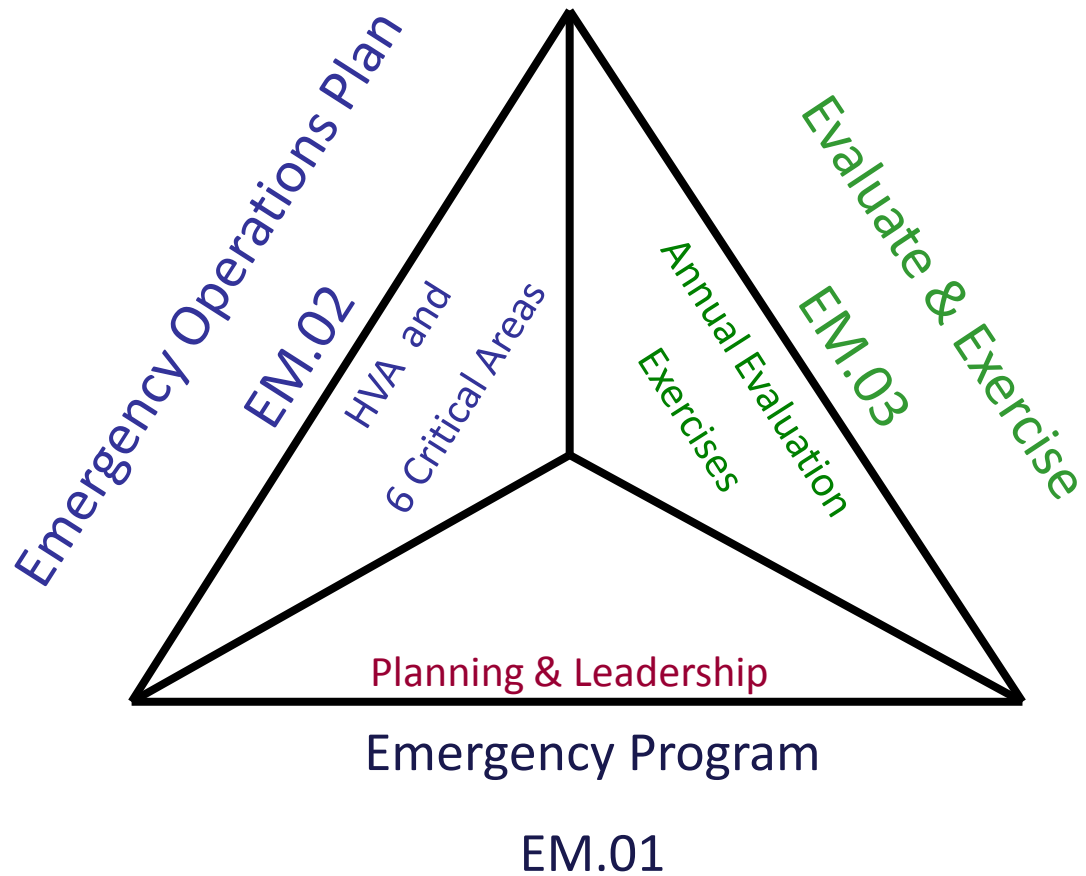
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Objectives

Upon completion of this program, participants will be able to:

1. Understand the Emergency Management standards

2. Understand the Emergency Management most challenging standards

Emergency Management

Emergency Operations Plan
EM.02

HVA and 6 Critical Areas

Annual Evaluation
Exercises

Evaluate & Exercise
EM.03

Planning & Leadership

Emergency Program

EM.01

Survey Fundamentals Apply

- Confirm that:

  - Hazard Vulnerability (HVA) was performed and is relevant to organization and community

  - Emergency Operations Plan (EOP) covers critical areas and supports response to prioritized risks

  - Staff training aligns with response plans

  - Exercises test & stress the plan & surface gaps, weaknesses, opportunities for improvement

  - Exercises and responses to actual emergencies are reviewed and inform improvements to plan

HVA Fundamentals

- All Hazards – Broad Based Approach

  - Workplace Violence – Extreme Workplace Violence
  - Tornados – Tornado Valley versus Georgia
  - Drought Conditions
  - Utilities – Sanitary Sewer? Water? Technology?
  - Long Term Incidents

Communications Plan

EM.02.02.01, For NCC's that use Joint Commission accreditation non-deemed purposes: As part of the communications plan, the NCC determines/prepares how it will communicate during emergencies:

- Staff

- Physicians - Licensed Independent Practitioners

- External authorities

- Patients and residents, families to include notification when patients/residents are relocated

- How the NCC communicates to other healthcare organizations their command structure

Communications Plan

EM.02.02.01, For NCC's that use Joint Commission accreditation for non-deemed purposes: As part of the communications plan, the NCC determines/prepares how it will communicate during emergencies:

- Names and roles of individuals – Command

- Command Center telephone numbers

- Resource/Asset sharing with other HCO's

  - Supply Chain

  - Memorandums of Agreement/Understanding

Communications Plan

EM.02.02.01, For NCC's that use Joint Commission accreditation for non-deemed purposes: As part of the communications plan, the NCC determines/prepares how it will communicate during emergencies:

- How and under what circumstances the NCC will:
  – Communicate the names of patients/residents and the deceased with other HCO's involved in the care and treatment of those mentioned.
- Relevant fed, state, tribal, regional and local EM
- Other sources of assistance

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Communications Plan

EM.02.02.01, For NCC's that use Joint Commission accreditation for non-deemed purposes:

As part of the communications plan, the NCC determines/prepares how it will communicate during emergencies:

- Identified Alternative Care Sites

- NCC establishes backup systems and technologies for the identified activities in EM.02.01.01

- The NCC implements components of the Emergency Operations Plan (EOP) that requires advanced preparation to support communication

Communications Plan

Incident Command Structure - Essential structure flexes to size of organization & type of emergency
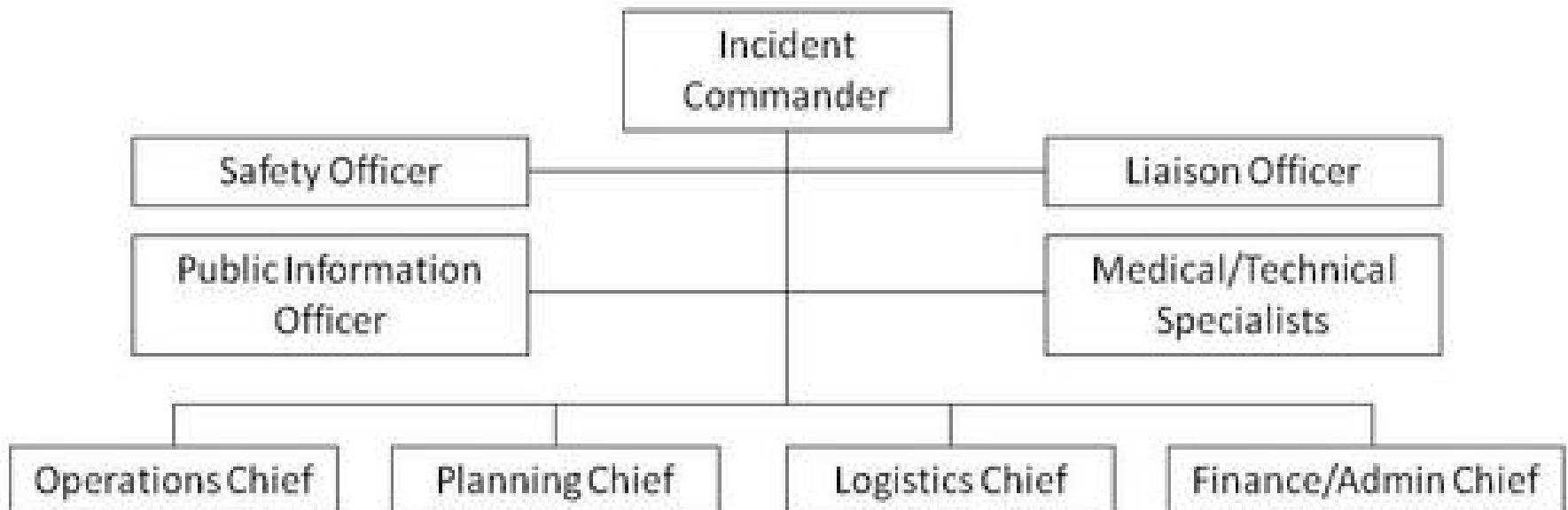
Policies & Procedures

Current key requirement addressing organization policy:

LD.04.01.07, EP 1 Leaders review and approve policies and procedures that guide and support patient care, treatment, or services.

Policies & Procedures

Survey Process:

- During document review evaluate EM plan for annual review and update.

- Existing EM and LD requirements sufficiently cover the need for policies

- To avoid possible redundancy or conflict with plans / procedures required in EM, EC, & LS, no additional policy EPs were added.

- Note: Clear distinction between TJC and CMS

Training

How to comply?

EM.02.02.07, EP 2 For NCC's that use Joint Commission accreditation for non-deemed purposes: <u>Initial and ongoing training</u> relevant to their emergency response roles is provided to staff, volunteers, and individuals providing on-site services under arrangement. This training is documented and then <u>reviewed and updated annually and when these roles change</u>.

Training

EM.02.02.07, EP 2 - continued

Staff <u>demonstrate knowledge</u> of emergency procedures through participation in drills and exercises, as well as post-training tests, participation in instructor-led feedback (for example, questions and answers), or other methods determined and documented by the organization.

Testing - Exercises

EM.03.01.03 EP 1

The organization activates its EOP twice a year.

– An actual emergency response can suffice

Tabletop sessions, though useful will not count toward this requirement.

EP 2 Emergency services or designated community disaster-receiving station require an influx of simulated patients and residents in at least one exercise.

Testing - Exercises

EM.03.01.03 – continued

EP 4 Having a defined role in the community's response plan, at least one of the two emergency response exercises includes participation in a community-wide exercise.

EP5 Exercises incorporate likely disaster scenarios that allow the organization to evaluate its handling of patients and residents, communications, resources and assets, security, staff, and utilities.

EP 6 Designates an individual(s) whose sole role during exercises is to monitor performance and document opportunities for improvement.

Testing - Exercises

EM.03.01.03 - continued

EP 13 The organization evaluates all emergency response exercises and all responses to actual emergencies with representation from administrative, support, and clinical services.

EP 14 Identification of deficiencies and opportunities for improvement. This evaluation is documented.

EP 15 Deficiencies and opportunities for improvement identified are communicated to the improvement team responsible for monitoring environment of care issues.

Testing - Exercises

EM.03.01.03 - continued

EP 16 Modifies its Emergency Operations Plan based on its evaluation of emergency response exercises and actual emergencies.

EP 17 Subsequent emergency response exercises reflect modifications and interim measures as described in the modified Emergency Operations Plan.

Five Most Difficult Standards

#1 EM.03.01.03: Evaluation

- Evaluates effectiveness of EOP

  - Two drills annually - activate the EOP
    - Actual events may apply
  - Likely scenarios to evaluate the 6 critical areas
  - Escalating event

Five Most Difficult Standards

#2 EM.02.02.13: Disaster Volunteers LIPs

- <u>May</u> grant disaster privileges to volunteer Licensed Independent Practitioners (LIP)
  - Identifies in writing responsibility for granting disaster privileges
  - Prior to eligibility, obtains 2 forms of ID
  - Grants privileges when EOP is activated
  - Determines how volunteer LIPs are distinguished

Five Most Difficult Standards

#3 EM.02.01.01: Plan Requirements

- Emergency Operations Plan
  - Identify capabilities for 72 - 96 hours
  - Leaders, including medical staff participate in development
  - Develops and maintains EOP
  - Process for initiating and terminating response and recovery

Five Most Difficult Standards
#4 EM.01.01.01 Foundation

- Engages in planning activities prior to developing the EOP

  - Documented inventory of resources and assets

  - Conducts HVA

  - Works with and prioritizes HVA with community

Five Most Difficult Standards

#5 EM.03.01.01 Evaluation

- Evaluates the effectiveness of the EOP

  - Annual review of inventory

  - Annual review of the EOP's objectives and scope

  - Annual review of the HVA

Survey Process

Pre-Session Documents

Emergency Operations Plan

- All hazards approach
- Addresses the six critical areas:
  - Communication-Resources/Assets
  - Safety & Security
  - Staff Responsibilities
  - Utilities Management
  - Patient, Clinical & Support Activities
- Inventory of resources and assets

Survey Process

Pre-Session Documents

- Identification of Potential Emergencies…..(aka, HVA)
    - Mitigation and preparedness activities for the identified risks
- Disaster drill and real event evaluations
    - Monitors and evaluates the six critical areas

Survey Process

- Emergency Management topics are addressed in Leadership, Individual Tracers, and System Tracers

- Scenarios not used
  - Focus on all-hazards planning to sustain six critical capabilities

Survey Process

Emergency Management Session

- Focus on mitigation and preparedness
- No disaster scenarios
    - Use disaster critiques
- Data collection
- Focused discussion on six critical areas
- Look at resources and assets inventory, if present
    - Appropriate storage
    - Expirations
    - Training

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Emergency Management Resources

- Emergency Management Portal resources to help health care organizations in preparing, planning and responding to disasters such as hurricanes, tornadoes, active shooter situations and cyberattacks

- Physical Environment Portal guidance for the top non-compliant Environment of Care/Life Safety standards

- Workplace Violence Prevention Resources to broaden the awareness of workplace violence

- FAQs on Nursing Care Center Standards

- Emergency Management in Health Care, Third Edition
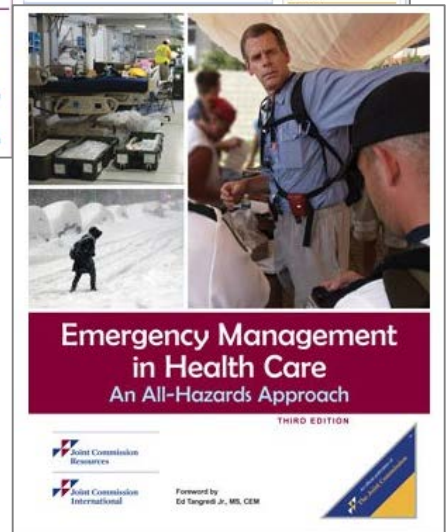
Accreditation Preparation Resources

— Partnering with Relias to deliver education on two platforms: Joint Commission Academy and Relias Learning Management System (RLMS)

— 8 online learning modules that cover:

- Guiding rationale and structure of each requirement

- What's expected to successfully demonstrate compliance

- Written documentation—what's required and when

— 1 CE credit for each completed module

— Access courses via Joint Commission Academy: www.jcaho.academy.reliaslearning.com

— Access courses via Relias Learning Management System (RLMS), visit: www.relias.com/partners/tjcncc

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FAQ's, online form to submit ?'s
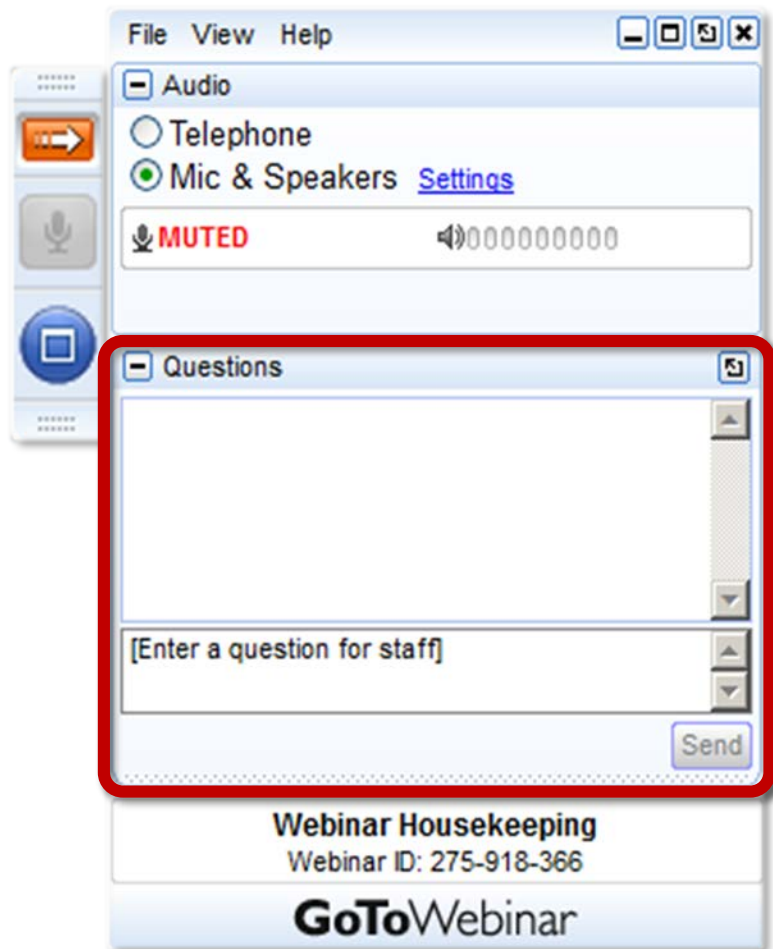
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Monnette Geronimo

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Jun 19	Value of Post-Acute Care and Disease Specific Care Certifications
Jul 24	Just the Basics on Nursing Care Center Accreditation
Aug 21	Emergency Preparedness for Nursing Homes
Sep 18	**Infection Prevention in Nursing Homes**
Oct 23	**FAQs about Nursing Care Center Accreditation**
Nov 27	**Strategies to Address Most Common Challenges in Nursing Homes**

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Thank you!