

## MDS Alert

### Compliance: Ready? Set? Evacuate!

**Review this check-list to make sure your facility's emergency preparedness plan is up to speed.**

With hurricane season bearing down on the east coast and tremendous fires devastating parts of the west, every nursing facility across the country needs to be sure that its all-hazards, emergency preparedness planning is current and up-to-date, urges **Margaret A. Leoni**, technical advisor, for the Centers for Medicare & Medicaid Services' (CMS) Office of Clinical Standards and Quality/Survey & Certification Group, Division of Nursing Homes.

F-tag alert: Facilities that fail to have detailed written plans and procedures to meet all potential emergencies and disasters, such as fire, severe weather, and missing residents can be hit with a citation at tag F517. In addition, under tag F518, facilities must train all employees in emergency procedures when they begin to work in the facility, periodically review the procedures with existing staff, and carry out unannounced staff drills using those procedures. (For details, consult the Medicare State Operations Manual, pgs. 649-650, available at: [www.cms.gov/Medicare?Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/index.html?redirect=/SurveyCertificationGenInfo/PMSR/list.asp](http://www.cms.gov/Medicare?Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/index.html?redirect=/SurveyCertificationGenInfo/PMSR/list.asp))

Leoni notes that at a minimum Emergency Preparedness Planning should include:

- Hazard Identification;
- Hazard mitigation;
- Preparedness;
- Response; and
- Recovery.

Most importantly, you need to put in place evacuation plans in the event that you have to do a full building evacuation, Leoni stressed. "Who are your receiving facilities? Do they know who they are? How will you transport individuals there? How are you going to track residents? How are you going to provide actual medical record information to go with each resident during an evacuation?" she asked.

Full Building Evacuation:

- Resident tracking: Develop a method to assure each resident that leaves your facility has proper identification and his/her transportation and destination are recorded. Assure follow up to "close the loop" when residents arrive at the receiving facility.
- Medical records: Plan ahead of time what records will go and how. If there are electronic medical records, how is this going to affect movement of records in a disaster?
- Receiving facilities: Have a dialogue with other facilities to determine if they may be willing to accept some of your residents and ensure that you provide like-for-like care in the event your staff are unable to move with your residents. Are there regional Mutual Aid Plans that provide the ability to have a single transfer agreement with all regional facilities and across state lines where applicable?
- Transportation needs: Conduct surveys to determine what your likely transportation needs may be (e.g. ambulance with a paramedic, ambulance with an EMT, wheelchair vans, etc.) and then discuss these needs with your local emergency management to determine if those resources could be available

In addition, Leoni noted, there are special focus areas, such as evacuation and influx of residents/surge capacity, that require additional elements to support and protect your residents.

**Influx of Residents/Surge Capacity:**

- Sheltering of residents (within licensed beds): Develop a strategy to handle an influx of residents with an appropriate intake process, communication with the evacuating facility and family or responsible parties, and implementing a care plan once they arrive at your facility.
- Sheltering of residents (above licensed beds): In certain local or regional disasters, a facility may need to exceed licensed/certified beds in order to protect evacuating residents. This process will require waivers to surge over licensed beds, but facilities should have plans in place to handle the influx of residents, communication, continuity of care and staffing necessary to manage a surge. In many of these situations, Emergency Credentialing will need to be utilized to bring in staff from other facilities or agencies to support the surge.

Additional information and tools are available for providers at:

[www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html](http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html). If you click on the Health Care Provider link you will find several links to other resources including a tool for evacuation decision developed through a federal grant by the State of Florida, Leoni noted.

You may also check [www.massmap.org](http://www.massmap.org) for an influx/surge guideline developed by Massachusetts Department of Public Health also through a federal grant. "Just go on that website and search on emergency preparedness; it brings you right up to a page where there's tons of information and tools for folks to look at and use," she said.

Editor's note: Readers who would like the .pdf file of the National Criteria for Evacuation Decision-Making in Nursing Homes (2008) prepared by the Florida Health Care Education and Development Foundation through a project funded by the John A. Hartford Foundation may e-mail the editor with their request at: [marjorie.lellis@comcast.net](mailto:marjorie.lellis@comcast.net).