



NATIONAL ASSOCIATION OF
Community Health Centers®

EP Compliance = Disaster Resilience

Presented By:

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V.P. of Planning and Strategy



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HOUSEKEEPING

- This meeting is being recorded
- PDF of slides will be shared after the webinar via email
- Please introduce yourself in the chat with your name, organization and location.
- Please put your questions in the Q&A box during the presentation. We will dedicate some time in the end where people can unmute and ask questions.
- We invite everyone to share!

Taina Lopez

Director of Emergency Management

National Association for Community Health Centers

- Taina Lopez has over 10 years of public health and healthcare emergency management experience across diverse sectors, including United Nations agencies, local government and working with Federal, State and private partners. Prior to this role she was the Director of Public Health Emergency Response for Orange County, NY, Senior Manager for Healthcare Coalition Planning with NYC Dept of Health and Mental Hygiene and worked on public health/healthcare emergencies in New York, Kurdistan, Iraq and supporting the West Africa Ebola Epidemic.
- She joined NACHC in Nov 2023. In her role, she will continue NACHC's commitment to supporting health centers, PCAs, and HCCNs prior to, during, and post disasters. She will focus on developing NACHC's EM training and technical assistance, aligned with partner needs. Additionally, she will work with NACHC leaders, national, federal, and private partners to secure equitable representation and consideration of Health Centers in emergency planning and response.



Karen Garrison

Vice President of Planning and Strategy

Connect Consulting Services

- Karen Garrison has directed a many programs that serve seniors and disabled adults in community based and clinical settings in the San Francisco Bay Area. Programs include, skilled nursing, residential dementia care, adult day health programs, supportive senior housing, clinical case management, and national service programs.
- She has been with Connect for 6 years and specializes in emergency preparedness CMS and The Joint Commision (TJC) compliance. Karen has also developed comprehensive emergency management programs, emergency and business continuity plans, and training development and interview facilitation. These projects allow organizations to build contract and regulatory compliance and disaster resilience.
- Karen oversees all projects and leads a planning team of experienced staff. Our clients include healthcare providers, community-based and clinical organizations, local county and state governments.



Disaster Resilience = EP Compliance

- “Disaster resilience is the ability of individuals, communities, organizations to adapt to and recover from hazards, shocks or stresses without compromising long-term prospects for development”. [National Resilience Guidance: Background and Key Concepts \(fema.gov\)](https://www.fema.gov/national-resilience-guidance-background-and-key-concepts)
- “Regular emergency preparedness activities provide an organization with the opportunity to continually improve their internal emergency preparedness processes”.
- EP Compliance is required, so embrace it.

TRAINING OBJECTIVES

1 Understand Emergency Preparedness core principles and terminology



2 Discover strategies to build a robust emergency preparedness framework within your healthcare operations



3 Review CMS and TJC compliance regulations to foster teamwork among FQHC providers



4 To understand how to use EP requirements to prepare, mitigate, respond, and recover from disaster



5 Learn about local resources to improve your organization's EP knowledge



6 Learn key strategies to build an effective emergency preparedness culture in your organization



TRAINING SECTIONS

1. Overview of Emergency Preparedness Basic Principals
2. Overview of the CMS and TJC Emergency Preparedness Requirements
3. Ways to incorporate Emergency Preparedness throughout your organization



EMERGENCY Preparedness

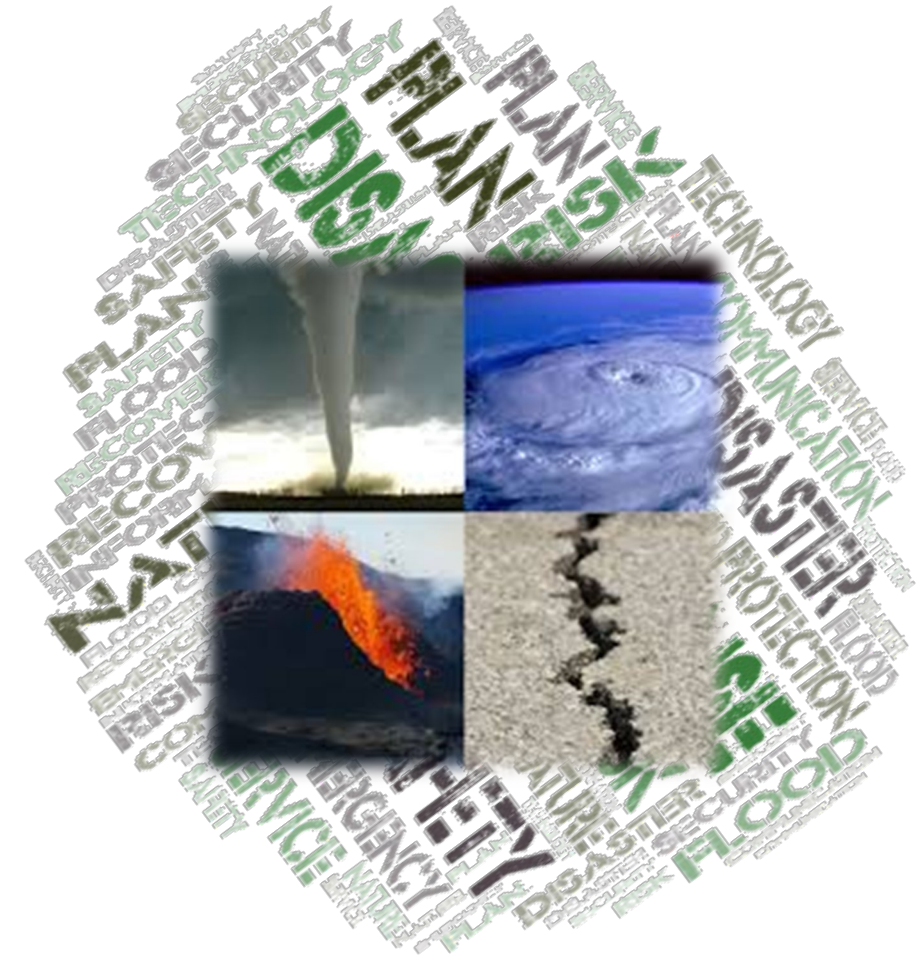


I. Overview of Emergency Preparedness Principles

- Emergency Management Terminology
- Disaster Concepts
- HIPAA Considerations

Emergency Management Terminology

- **Disaster:** A sudden, calamitous event that seriously disrupts the functioning of a community and causes human, material and economic losses that exceed the community's ability to cope using its own resources.
- **Disaster (healthcare perspective):** Any situation where the incident, numbers of patients or severity of illness impacts or exceeds the ability of the facility or system to care for them.



Emergency Management Terminology

- **Natural Disaster:** are catastrophic events that result from any of the Earth's natural phenomena. These can range from wildfires, earthquakes, floods, extreme weather, etc.
- **Human Caused Disaster:** have an element of human intent, negligence, or error involving a failure of a man-made system. Human-caused disasters include crime, arson, civil disorder, terrorism, war, biological/chemical threat, cyber-attacks, etc.



Emergency Management Terminology

- **Discussion Based Exercises:** Discussion-based exercises are normally used as a starting point in escalating exercise complexity. Discussion-based exercises include seminars, workshops, tabletop exercises (TTXs), and games.
- **Operations Based Exercises:** Operations-based exercises are hands on. They are used to validate plans, policies, agreements, and procedures solidified in discussion-based exercises. Operations-based exercises include drills, functional exercises (FEs), and full-scale exercises (FSEs).



All Disasters Happen Locally!

When Disaster Strikes, Who Do You Call?

Any Natural or
Man-Made
Disasters

Your Insurance
Company

First Line of Emergency Management Support: **Always
Call Local Services First**

Call 911

Your Local Fire
Department or
Police Services

Your County
Office of
Emergency
Management

Second Line of Support: **Regional, State
and Federal EM Services**

Tribal
Emergency
Management
Agencies

State Office of
Emergency
Services

Federal
Emergency
Management:
FEMA



Considering that all emergencies start locally, what partners or EM officials do you coordinate with?

Who does your organization coordinate with during disaster?

Disasters Often Disproportionally Affect Vulnerable Populations

Vulnerable populations include individuals from racial or ethnic minorities, children, elderly, socioeconomically disadvantaged, intellectually disabled underinsured or those with certain medical conditions. Vulnerable populations often experience higher incidences health disparities.

Individuals' who experience a decrease in mobility with chronic health conditions, or have an intellectual disability, have specialized care needs, can experience increased challenges during disaster.

Transportation for those with specialized needs means that access to transportation would be best planned of disaster.

Due to their chronic health conditions and physical limitations, residents may require an enhanced medical services Special Needs Shelter during a disaster. Specialized services can include, transportation, targeted messaging, specialized medical services (i.e., dialysis, wound care) and other wrap around services.

The Preparedness Cycle is a continuous cycle of planning, organizing, training, equipping, exercising, evaluating, and taking corrective action to ensure effective coordination during an emergency.



- Emergency preparedness activities should be completed year-round.
- EP is a continuous cycle of process improvement.
- It is important to document gaps in your emergency preparedness capacity and EP documentation so improvements can be made to your program.
- EP activities drive the preparedness cycle.

An Emergency Management Program allows FQHC organizations to:

Enhance their ability to respond to a disaster with a coordinated, well-planned response

To use an ALL-Hazards Approach to preparing and responding to disasters

To coordinate with local emergency management agencies and partners to prepare for disaster together

Allows providers, community groups and local EM officials to use the same rulebook, nomenclature, and best practices

HIPAA Considerations During Disaster



- HIPAA Privacy Standards are not automatically waived during a disaster, so it is important to safeguard a patient's Personal Health Information (PHI).
- Organizations need to determine how they will communicate with local EM officials, residents, external partners and other healthcare organizations.
- Effective planning around "Post Disaster Communication" is key to be able to "message important details" about the disaster while maintain your patient's PHI.
- Utilize your organization's Privacy Officer / team and existing HIPAA protocols to be able to craft to develop strategies in advance of how to maintain HIPAA compliance.

EMERGENCY Preparedness



2. Overview of CMS and TJC Emergency Preparedness Requirements

- Overview of CMS Emergency Preparedness Requirements
- Overview of TJC Emergency Management Requirements

TJC and CMS EMERGENCY MANAGEMENT CROSSWALK TOOL

Connect developed this TJC and CMS Crosswalk tool for NACHC in 2022

This crosswalk is intended as a easy reference guide to compare emergency management requirements for The Joint Commision (TJC) and Centers for Medicare and Medicaid (CMS) specifically for FQHCs.

Three parts of this document includes:

- FQHC TJC and CMS Emergency Management Requirement Grid
- TJC only Emergency Management Requirement Grid
- CMS only Emergency Preparedness Requirement Grid



Source Material: [NACHC Final.docx](#)

Overview of FQHC CMS EP Requirements

21 CMS Emergency Preparedness E-Tags (out of 44)

6 Key Areas

- Emergency Plan / Risk Assessment / HVA
- Policies and Procedures (4)
- Communications Plan
- Staff Training
- Testing / Exercises
- Emerging Infectious Disease Respons





Purpose of a CMS Emergency Preparedness Program

To establish national emergency preparedness requirements across all CMS providers to ensure adequate EP planning for both natural and man-made disasters.

An EP program allows FQHC Providers to keep their organizations operational during times of disaster so they can continue to provide necessary services to their patients during and after disaster.

For FQHC organizations staff to develop an understanding of emergency preparedness practices so that the organization's becomes disaster resilient.

Core CMS Emergency Preparedness Requirements for FQHC Providers

1. Develop an Emergency Plan based on your annual Risk Assessment (HVA)
2. Develop FQHC Specific Policies and Procedures (4)
3. Create a Communications Plan
4. Conduct staff training
5. Exercises to test EP Program Documentation
6. Infectious Disease Response Plan

1. Emergency Operations Plan (EOP)

CMS Requirement: Must develop and maintain an emergency preparedness plan that is reviewed and updated at least every two years.

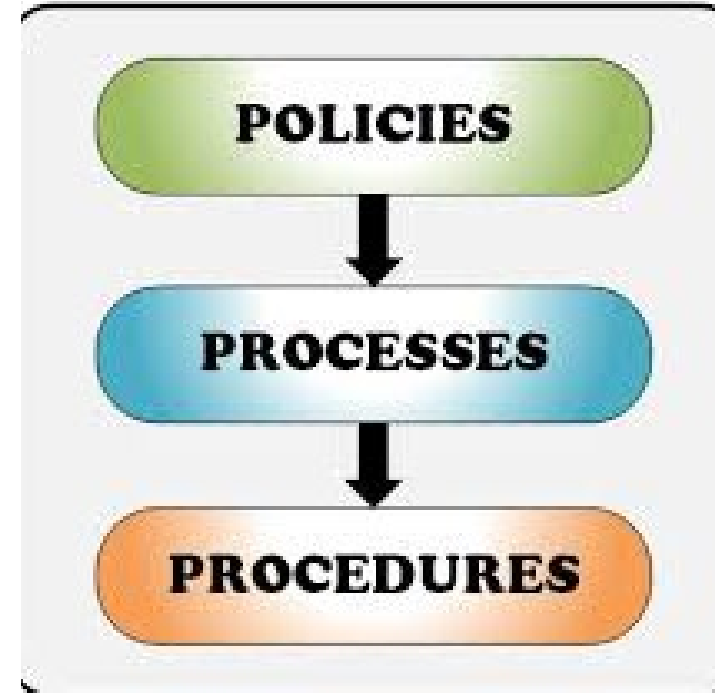
The Plan Must:

- Be based on YOUR organizations and community-based “all hazards” risk assessment (HVA)
- Include your patient population, including, type of services that you can provide in an emergency
- Include your program site information including addresses, important contact information and building information.
- Include continuity of operations, delegations of authority and your organization’s succession plan
- EP Program documentation must be updated and reviewed **every 2 years**



2. Four FQHC Specific Policies and Procedures

- Safe evacuation from the FQHC program site
- Shelter in Place procedures should include predesignated assembling areas and emergency supplies
- Process to develop a system of medical documentation that includes a “Go to Paper Protocol”
- To develop the use of volunteers in an emergency (medical credentialing process)



All FQHC Policies and Procedures must be updated and reviewed at least every 2 years

3. Communications Plan

CMS Requirement: must develop and maintain an emergency preparedness communications plan that complies with Federal, State and local laws and **must be updated every two years.**

- Names and contact info for staff, contracted services, participating medical staff and other Providers in your area
- Contact information for Federal, State, tribal, regional, local Emergency Management officials
- Strategies to communicate with local EM officials such as advanced messaging, contact information and communications policy.
- Primary and redundant means of communication
- A process to provide information about the general condition and location of patients under your organization’s care



4. EP Staff Training

CMS Requirement: CMS requires FQHC providers to complete emergency preparedness staff training:

- Initial EP training in emergency preparedness to all new and existing staff, vendors and volunteers
- Any FQHC staff must be able to show emergency preparedness knowledge when being surveyed
- Maintain documentation of all trainings (i.e., sign in sheets, agendas, training documents, etc.)
- If there are major changes to an existing policy and procedure, it is important to retrain staff regarding these changes.
- Provide emergency preparedness training to all staff **every 2 years**.



5. Emergency Preparedness Exercises



CMS Requirement:

- FQHC Providers must conduct, and document one Tabletop Exercise (TTX) exercise every two years
- If FQHC Providers experience an emergency, and they complete an After-Action Report and Improvement Plan, it will count the annual exercise requirement.

After Action Report (AAR)/Improvement Plan (IP)

<Insert Facility Name> <Insert Exercise Name> After Action Report (AAR)/ Improvement Plan (IP)		
Section 1: Exercise Overview		
Client: <Insert Facility Name> Exercise Name: <Insert Exercise Name> Begin: <Insert Date> Time: <Insert Time> End: <Insert Date> Time: <Insert Time>		
Program: <input type="checkbox"/> CMS Requirement <input type="checkbox"/> CDC/HHS PHEP Grant <input type="checkbox"/> Emergency Management Performance Grant (EMPG) <input type="checkbox"/> Local Emergency Planning Committee <input type="checkbox"/> Hospital Preparedness Program (HPP)	Type of Event <input type="checkbox"/> Actual/Real Event <input type="checkbox"/> Seminar/Workshop <input type="checkbox"/> Tabletop Exercise (TTX) <input type="checkbox"/> Drill <input type="checkbox"/> Functional/Command Post <input type="checkbox"/> Full-Scale Exercise (FSE)	Mission Focus of Exercise <input type="checkbox"/> Prevent <input type="checkbox"/> Protect <input type="checkbox"/> Mitigate <input type="checkbox"/> Respond <input type="checkbox"/> Recover
Exercise Scenario: (Mark appropriate blocks.)		
Natural <input type="checkbox"/> Severe Weather <input type="checkbox"/> Earthquake <input type="checkbox"/> Flood <input type="checkbox"/> Landslide <input type="checkbox"/> Wildfire <input type="checkbox"/> ...	Technological <input type="checkbox"/> Power Failure <input type="checkbox"/> Disease Outbreak <input type="checkbox"/> Technological <input type="checkbox"/> Communications (internet, cell tower) <input type="checkbox"/> Dam Failure <input type="checkbox"/> ...	Core Capability <input type="checkbox"/> Public Health, Healthcare, & EMS <input type="checkbox"/> Health & Social Services

3. Communications Assess the decision-making process as it deals with the activation of the department's Emergency Operations Plan (EOP) and the Business Continuity Plan.
Rating:
<ul style="list-style-type: none"> Critical Task: Was your plan/process clear on when to activate the for an emergency? <ul style="list-style-type: none"> <input type="radio"/> Task Met: Yes/No <input type="radio"/> Analysis: [Insert evaluation/analysis of why/why not the Critical Task was achieved.]
<ul style="list-style-type: none"> Critical Task: Was your plan clear on what roles need to be filled and who is responsible during an emergency? <ul style="list-style-type: none"> <input type="radio"/> Task Met: Yes/No <input type="radio"/> Analysis: [Insert evaluation/analysis of why/why not the Critical Task was achieved.]

Overview of The Joint Commission EM Requirements for FQHC's



12 TJC Emergency Management Standards

4 Key Areas

- Preparedness
- Response
- Recovery
- Mitigation

PURPOSE OF A TJC EMERGENCY MANAGEMENT PROGRAM



To establish a strategy for emergencies and disasters that could disrupt normal operations in healthcare organizations.

This program aims to ensure effective coordination during incident response by following a continuous cycle of planning, organizing, training, equipping, exercising, evaluating, and taking corrective action¹. The comprehensive emergency management program involves systematic analysis, shared decision-making, internal and external collaborations, and the assignment of available resources (staff, space, supplies) to effectively prepare for, respond to, and recover from all incidents and emergencies².

A TJC EMERGENCY MANAGEMENT PROGRAM INCLUDES 4 KEY AREAS:

1.Preparedness: Developing plans, training personnel, and organizing resources to be ready for potential emergencies.

2.Response: Implementing actions during an actual emergency to protect lives, property, and the environment.

3.Recovery: Restoring normal operations and services after an emergency.

4.Mitigation: Reducing the impact of future emergencies through preventive measures.

For FQHC organizations, having a well-structured emergency management plan is crucial to maintaining safety and continuity of care during challenging situations.



ANY QUESTIONS?





What are your organization's biggest challenges with operationalizing your emergency management program (EMP)?

Please list your organization's biggest EMP challenges?

EMERGENCY Preparedness



3. Incorporate Emergency Preparedness throughout your organization

- Strategies to encourage Emergency Management Participation
- Preparing for a CMS or TJC survey

Ways to Encourage EP Compliance in your Organization

Form a Safety Team to work on EP Activities. Conduct regular meetings

Send key staff out to local emergency preparedness trainings

Make Emergency Preparedness activities DOABLE

Make an annual plan for training and exercises for your organization

Compliance is a Licensing Requirement

EP Compliance ultimately increases an organization's disaster resilience

EP Compliance = Disaster Resilience

Your Safety Team to develop your Emergency Preparedness Program



Assemble a multi-disciplinary team to coordinate with departments to implement all aspects of your EP Program.



Include members of your operational staff, senior leadership, and clinical staff often serve on your Incident Command Team during a disaster.



Incident command team members need the authority to act and authorize resources and actions when responding to an emergency.

Emergency Preparedness Committee Activities

- Emergency Preparedness activities should not be done in a silo
- EP Committee members should be individuals from different disciplines (i.e., operations, clinical, facilities, administration) to build and maintain your EP Program
- Meet on a regular basis to continue EP activities
- Emergency Preparedness is a **TEAM SPORT**



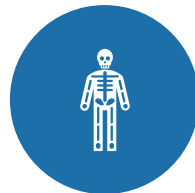
CMS or TJC Survey Prep



Understand all aspects of your Emergency Preparedness Program that will be evaluated during your organization's regular CMS or TJC survey process



Document all trainings and exercises, keep training documents and sign in sheets.



You are generally given a "survey window" (i.e., 4-8 weeks) when you can be surveyed



Surveyors assess staff readiness in their basic knowledge of your organization's EP processes(i.e., escape routes, P & P's, alternative sites)

Identify and Close Gaps in EP Documentation & Process



Identify specific areas to improve your emergency preparedness practices and update annually.



Revise sections of your Emergency Preparedness Program based on EP activities completed over the year.



Document and approve those changes and have key staff approve those changes to your EPP.



CMS Surveyors will be looking for documentation from November 2017

ANY QUESTIONS?





- Has provided emergency and business continuity, training and exercise consulting services since 2009
- Named 2018 Sacramento SBA - Woman-Owned Business of the Year
- Named 2021 California Capital Business of the Year

We provide:

- Emergency Operation Management Planning
- Business Continuity Planning
- Evacuation Planning
- Incident Command Personnel Staffing
- Incident Command System Support
- Emergency Management Training Development and Delivery
- Active Shooter and Workplace Violence De-escalation planning and training
- Emergency Preparedness Drills and Exercises
- TJC and CMS Compliance Audits

CCS' Business Certifications:



More Information?

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UPCOMING NACHC EMERGENCY MANAGEMENT TRAINING

“Emergency Management: Sharing Best Practices and Listening Session”

Date: 6/6/2024, 2-3pm

This webinar will provide firsthand experiences and best practices in health center emergency management, while facilitating a listening session for health center staff to share their experiences, challenges, and successes in planning for, responding to, and recovering from emergencies and disasters.

THANK YOU!



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