



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

Office of Health Care Quality

Spring Grove Hospital Center • Bland Bryant Building

55 Wade Avenue • Baltimore, Maryland 21228-4663

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – John M. Colmers, Secretary

TO: Maryland Assisted Living & Stakeholders

RE: New COMAR 10.07.14.46 Emergency and Disaster Plans

FROM: Wendy Kronmiller, Director

DATE: May 19, 2009

I am enclosing a copy of COMAR 10.07.14, which became effective December 29, 2008. These regulations require assisted living programs to develop and maintain an emergency and disaster plan, including procedures for:

- Evacuation, transportation or shelter-in-place;
- Notifying families of actions that may be taken to keep residents safe, including a summary of emergency provisions and possible evacuation procedures;
- Continuity of operations (72 hour supply rule);
- Locating and identifying residents during displacement, including sending a brief medical fact sheet with each resident;
- Establishing an emergency planning liaison and providing that contact information to the local emergency management.

The new regulations were adopted pursuant to House Bill 770, Ch. 472 (2006) and reflect the need for enhanced disaster planning for health care facilities in the aftermath of Hurricane Katrina and other recent large-scale disasters. Sample templates are posted on our web-site at http://dhmh.state.md.us/ohcq/download/alforms/emergency_Preparedness_forms.pdf to facilitate completing the emergency plan; however, note that the regulations are minimal standards. We encourage you to take part in educational sessions and web offerings on this important subject which are being offered by many local emergency management agencies.

We are advised by emergency planning experts that if there is a large scale disaster, facilities such as assisted living homes are anticipated to be able to function independently for at least 72 hours before emergency resources may be able to respond. That somber reality underlies these regulations and makes it even more important to devote attention to emergency planning.

We have attempted to address some anticipated questions below. Other questions about the regulatory requirements may be addressed to Michael Cook, Environmental Safety Officer, (410) 402-8181 or mcook@dhmh.state.md.us. Questions about emergencies in general and the status of emergency planning in your region may be addressed to your local emergency management agency.

Toll Free 1-877-4MD-DHMH • TTY for Disabled - Maryland Relay Service 1-800-735-2258

Web Site: www.dhmh.state.md.us

FAQ's:

1. *How will the surveyors evaluate whether 72 hours of supplies are present?* Experts say that because individuals' needs vary, there is no precise formula or calculation. OHCQ surveyors will anticipate the facility being able to demonstrate that it has conducted an assessment of its needs per patient per day and accumulated those resources.
2. *What proof is required of an agreement with a transportation source or alternate shelter?* OHCQ expects facilities to use due diligence and all reasonable efforts to procure transportation and alternate shelter agreements in the event that a facility must evacuate. However, we understand that it may be difficult to procure actual contracts to cover all contingencies. While a written contract would be optimal proof to "document an agreement," proof could be in the form of a note in the file verifying communications with transport companies or alternate sources of shelter. The note should clearly state whether the facility was able to reach any agreements for transportation or shelter and the extent of those agreements and any contingencies attached to the agreement. Again, OHCQ expects reasonable efforts and due diligence by the facility in procuring contracts. If a facility is unable to procure a contract, a note should be in the record of the facility's attempts to procure contracts. In addition, facilities should register with FRED, which is Maryland's Facility and Resource Database. In the event of an emergency, FRED will alert registered facilities on available beds throughout the system.
- 3) *What is meant by a "brief medical fact sheet?"* In the event of an emergency, it will be important for facilities receiving patients to quickly access basic information such as contact persons, medications, and allergies. During a disaster, a receiving facility (which may not even be a health care facility) will not have the time to look through a resident's chart to locate this information. It may not be possible to access information via the internet or telephone. Therefore, we will require a brief summary of the listed information on a sheet of paper, updated and readily available in the event of an emergency. If the facility has a face sheet for its chart containing the information listed in the regulation, then a copy of that face sheet (stored with other face sheets for easy transport) should suffice.
- 4) *How should we provide contact information to the Local Emergency Management Organization, as required by the new regulations?* We have confirmed that MIEMSS and MEMA will share information from FRED with the local emergency management agencies. Therefore, a facility which has registered with FRED will have met this requirement. An application to enroll is attached. Once registered, you will receive a user's guide from MIEMSS.
- 5) *When will surveyors expect to see emergency plans and supplies consistent with these new requirements?* Emergency plans are currently required under State regulation. However, we understand that it may take time to collect supplies, expand plans and prepare summaries in conformance with the new requirements in the enhanced regulations. Surveyors will anticipate full compliance with aspects of these regulations which are new by August 1, 2009.

6) *What resources are available to assisted living homes on the subject of emergency planning?*
You may visit the assisted living unit web-site at:
[http://dhmh.state.md.us/ohcq/download/alforms/emergency Preparedness forms.pdf](http://dhmh.state.md.us/ohcq/download/alforms/emergency_Preparedness_forms.pdf) for a list of emergency plans as one option that will satisfy minimum requirements for complying with these regulations. There are also resources available to facilities from national associations on developing emergency and disaster plans. Resources include:

- American Association of Homes and Services for the Aging, www.aahsa.org. Resources can be found under “Quality First”, “Resources”, “Governance and Accountability”.
- American Health Care Association, www.ahcancal.org. Resources can be found under “Facility Operations”.

Facilities may also want to check with state associations, such as LifeSpan/The Beacon Institute, www.lifespan-network.org; and the Health Facilities Association of Maryland, www.hfam.org, for any seminars on emergency and disaster planning being offered.

Enclosures: COMAR 10.07.14.46
Application, FRED

Transmittal No: AL-09-06

.46 Emergency Preparedness.

A. The facility shall comply with:

- (1) All applicable local fire and building codes; and
- (2) The Life Safety Code, NFPA 101, including Chapter 24 of NFPA 101 if the facility is a one or two family dwelling as defined by NFPA 101.

B. Fire Extinguishers. An assisted living program shall:

- (1) Ensure that fire extinguishers are:
 - (a) Located on each floor and adjacent to, or in, special hazard areas, such as:
 - (i) Furnace rooms;
 - (ii) Boiler rooms;
 - (iii) Kitchens; or
 - (iv) Laundries;
 - (b) Of standard and approved types; and
 - (c) Installed and maintained to be conveniently available for use at all times; and
- (2) Initially and at least annually instruct staff in the use of fire extinguishers.

C. Emergency and Disaster Plan.

(1) The assisted living program shall develop an emergency and disaster plan that includes procedures that shall be followed before, during, and after an emergency or disaster, including:

- (a) Evacuation, transportation, or shelter in-place of residents;
- (b) Notification of families and staff regarding the action that will be taken concerning the safety and well-being of the residents;
- (c) Staff coverage, organization, and assignment of responsibilities for ongoing shelter in-place or evacuation, including identification of staff members available to report to work or remain for extended periods; and
- (d) The continuity of services, including:
 - (i) Operations, planning, financial, and logistical arrangements;
 - (ii) Procuring essential goods, equipment, and services to sustain operations for at least 72 hours;
 - (iii) Relocation to alternate facilities or other locations; and
 - (iv) Reasonable efforts to continue care.

(2) The licensee shall have a tracking system to locate and identify residents in the event of displacement, an emergency, or a disaster that includes at a minimum the:

- (a) Resident's name;
- (b) Time that the resident was sent to the initial alternative facility or location; and
- (c) Name of the initial alternative facility or location where the resident was sent.

(3) When the assisted living program relocates residents, the program shall send a brief medical fact sheet with each resident that includes at a minimum the resident's:

- (a) Name;
- (b) Medical condition or diagnosis;
- (c) Medications;
- (d) Allergies;
- (e) Special diets or dietary restrictions; and
- (f) Family or legal representative contact information.

(4) The brief medical fact sheet for each resident described in §C(3) of this regulation shall be:

- (a) Updated upon the occurrence of change in any of the required information;
- (b) Reviewed at least monthly; and
- (c) Maintained in a central location readily accessible and available to accompany residents in case of an emergency evacuation.

(5) The licensee shall review the emergency and disaster plan at least annually and update the plan as necessary.

(6) The licensee shall:

- (a) Identify a facility, facilities, or alternate location or locations that have agreed to house the licensee's residents during an emergency evacuation; and
- (b) Document an agreement with each facility or location.

(7) The licensee shall:

- (a) Identify a source or sources of transportation that have agreed to safely transport residents during an emergency evacuation; and
- (b) Document an agreement with each transportation source.

(8) Upon request, a licensee shall provide a copy of the facility's emergency and disaster plan to the local emergency management organization for the purpose of coordinating local emergency planning. The licensee shall provide the emergency and disaster plan in a format that is mutually agreeable to the local emergency management organization.

(9) The licensee shall identify an emergency and disaster planning liaison for the facility and shall provide the liaison's contact information to the local emergency management organization.

(10) The licensee shall prepare an executive summary of its evacuation procedures to provide to a resident, family member, or legal representative upon request. The executive summary shall, at a minimum:

- (a) List means of potential transportation to be used in the event of evacuation;
- (b) List potential alternative facilities or locations to be used in the event of evacuation;
- (c) Describe means of communication with family members and legal representatives;
- (d) Describe the role of the resident, family member, or legal representative in the event of an emergency situation; and

(e) Notify families that the information provided may change depending upon the nature or scope of the emergency or disaster.

D. Evacuation Plans. The facility shall conspicuously post individual floor plans with designated evacuation routes on each floor.

E. Orientation and Drills.

(1) The licensee shall:

(a) Orient staff to the emergency and disaster plan and to their individual responsibilities within 24 hours of the commencement of job duties; and

(b) Document completion of the orientation in the staff member's personnel file through the signature of the employee.

(2) Fire Drills.

(a) The assisted living program shall conduct fire drills at least quarterly on all shifts.

(b) Documentation. The assisted living program shall:

(i) Document completion of each drill;

(ii) Have all staff who participated in the drill sign the document; and

(iii) Maintain the documentation on file for a minimum of 2 years.

(3) Semiannual Disaster Drill.

(a) The assisted living program shall conduct a semiannual emergency and disaster drill on all shifts during which it practices evacuating residents or sheltering in-place so that each is practiced at least one time a year.

(b) The drills may be conducted via a table-top exercise if the program can demonstrate that moving residents will be harmful to the residents.

(c) Documentation. The assisted living program shall:

(i) Document completion of each disaster drill or training session;

(ii) Have all staff who participated in the drill or training sign the document;

(iii) Document any opportunities for improvement as identified as a result of the drill; and

(iv) Keep the documentation on file for a minimum of 2 years.

(4) The licensee shall cooperate with the local emergency management agency in emergency planning, training, and drills and in the event of an actual emergency.

F. Emergency Electrical Power Generator.

(1) Generator Required. By October 1, 2009, an assisted living program with 50 or more residents shall have an emergency electrical power generator on the premises, unless the program meets the requirements of §F(7) of this regulation.

(2) Generator Specifications. The power source shall be a generating set and prime mover located on the program's premises with automatic transfer. The emergency generator shall:

(a) Be activated immediately when normal electrical service fails to operate;

(b) Come to full speed and load acceptance within 10 seconds; and

(c) Have the capability of 48 hours of operation of the systems listed in §F(5) of this regulation from fuel stored on-site.

(3) Test of Emergency Power System.

- (a) The program shall test the emergency power system once each month.
- (b) During testing of the emergency power system, the generator shall be exercised for a minimum of 30 minutes under normal emergency facility connected load.
- (c) Results of the test shall be recorded in a permanent log book that is maintained for that purpose.
- (d) The licensee shall monitor the fuel level of the emergency generator after each test.

(4) The emergency power system shall provide lighting in the following areas of the facility:

- (a) Areas of egress and protection as required by the State Fire Prevention Code and Life Safety Code 101 as adopted by the State Fire Prevention Commission;
- (b) Nurses' station;
- (c) Drug distribution station or unit dose storage;
- (d) An area for emergency telephone use;
- (e) Boiler or mechanical room;
- (f) Kitchen;
- (g) Emergency generator location and switch gear location;
- (h) Elevator, if operable on emergency power;
- (i) Areas where life support equipment is used;
- (j) If applicable, common areas or areas of refuge; and
- (k) If applicable, toilet rooms of common areas or areas of refuge.

(5) Emergency electrical power shall be provided for the following:

- (a) Nurses' call system;
- (b) At least one telephone in order to make and receive calls;
- (c) Fire pump;
- (d) Well pump;
- (e) Sewerage pump and sump pump;
- (f) If required, for evacuation purposes an elevator;
- (g) If necessary, heating equipment needed to maintain a minimum temperature of 70°F (24°C) in all common areas or areas of refuge;
- (h) Life support equipment; and
- (i) Nonflammable medical gas systems.

(6) Common Areas or Areas of Refuge. If the emergency power system does not provide heat to all resident rooms and toilet rooms, the program shall provide common areas or areas of refuge for all residents. The areas shall meet the following requirements:

- (a) The common area or areas of refuge shall maintain a minimum temperature of 70°F (24°C);
- (b) Heated toilet rooms shall be provided adjacent to the common areas or areas of refuge; and

(c) The program facility shall provide to the Department a written plan that defines the:

- (i) Specified common areas or areas of refuge;
- (ii) Paths of egress from the common areas or areas of refuge; and
- (iii) Provision for light, heat, food service, and washing and toileting of residents.

(7) Applicability of Emergency Power Requirements.

(a) Within 36 months of the effective date of this chapter, existing programs with 50 or more beds shall complete the installation and acceptance of a working system as required in this regulation.

(b) An assisted living program shall be exempt from the requirements of §F of this regulation if the program can safely transfer residents through an enclosed corridor to a building that is equipped with an electrical power generator that satisfies the requirements of §E of this regulation.

(c) An assisted living program may request a waiver from the requirements of §F of the regulation in accordance with the procedures outlined in COMAR 10.07.14.08 on a year-to-year basis. The program shall demonstrate in the waiver request financial hardship that would adversely affect the program's viability.

(d) When the Department grants a waiver to an assisted living program for the requirements of §F of this regulation, the assisted living program shall:

- (i) Disclose in writing to current and prospective residents that the program does not have an emergency generator; and
- (ii) Develop a plan to follow in the event of a loss of electrical power

Sample Template for Development of Emergency Plans for Assisted Living

Regulatory Requirements Procedures Developed For: ***	Completed	Not Complete	Date for Completion	Individual Responsible
Identifying an emergency planning liaison for the facility and providing their contact information to local emergency management (satisfied by FRED registration)				
Transportation of individuals served/staff with documented agreements with each transportation source				
Ensuring staff is immediately oriented to individual responsibilities upon date of hire and documentation of their acknowledgement recorded				
Holding quarterly fire drills on each shift with documentation of each staff's participation and drill completion				
Holding and documenting semi-annual practice drills on shelter-in-place and evacuation on each shift so that both types of drills are practiced annually				
Documenting opportunities for improvement identified from drill				
Notifying families regarding the action taken that will be taken concerning the safety/wellbeing of individuals served				
Notifying staff regarding the action that will be taken concerning safety/wellbeing of individuals served				
Planning continuity of operations, including financial capabilities and logistical arrangements				

NOTE: This sample template is used to assist assisted living in complying with COMAR 10.07.14.46 (Emergency Preparedness). It is not meant to exclude other formats so long as they include all elements of the regulations.

Sample Template for Development of Emergency Plans for Assisted Living

Planning staff coverage, organization and assignment of responsibilities for ongoing sheltering in place or evacuations				
Identifying staff members available to report to work or remain during extended periods				
Planning for reasonable efforts to continue care to residents				
Ensuring continuity of the procurement of essential goods, equipment, and services(for 72 hours)				
Ensuring the identification of and relocation to alternate facilities in the event of evacuation via documented agreements with each facility or location				
Ensuring an adequate tracking system for residents in the event of relocation				
Ensuring adequate medical fact sheet for resident is available to be sent to alternate facility				
Ensuring facility's emergency and disaster plans are reviewed at least annually and then shared with local emergency management organizations upon request				
Providing executive summaries of the evacuation procedures to the resident, family member or legal representative upon request				

***please document procedures on a separate page

Sample Template for Development of Emergency Plans for Assisted Living

Procedures

(Issues to Consider)

Identifying an emergency planning liaison for facility and providing their contact information to local emergency management:	Consideration 1: Liaison's name and contact information	Consideration 2: Person or position to provide this information to local emergency management	
<p>Procedures:</p> <ol style="list-style-type: none">1.2.3.4.			

Evacuation of individuals served/staff including posting of evacuation floor plans, including routes for each floor:	Consideration 1: Person responsible for ordering evacuation	Consideration 2: Person responsible for overall evacuation
<p>Procedures:</p> <ol style="list-style-type: none">1.2.3.4.		

Sample Template for Development of Emergency Plans for Assisted Living

Ensuring staff is immediately oriented to individual responsibilities upon date of hire and documentation of their acceptance is recorded:	Consideration 1: Must be done within 24 hours of hire	Consideration 2: Signed documentation of employee placed in personnel file	Consideration 3:
Procedures: 1. 2. 3. 4.			

Holding quarterly fire drills on each shift with documentation of each staff member's participation and drill completion:	Consideration 1: Ensure that all participating staff sign a document acknowledging the completion of the drill	Consideration 2: Person responsible for holding the drills.	Consideration 3: Maintain documentation for minimum 2 years
Procedures: 1. 2. 3. 4.			

Sample Template for Development of Emergency Plans for Assisted Living

Documenting opportunities for improvement identified from drill	Consideration 1: Person responsible for preparing	Consideration 2: Person responsible for ensuring corrective action is taken	Consideration 3: Documentation on file for minimum 2 years
Procedures: 1. 2. 3. 4.			
Notifying families regarding the action taken that will be taken concerning the safety/well-being of individuals served	Consideration 1: Person(s) responsible for notifying families		
Procedures: 1. 2. 3. 4.			

Sample Template for Development of Emergency Plans for Assisted Living

Notifying staff regarding the action taken concerning safety/well-being of individuals served	Consideration 1: Person(s) responsible for notifying staff
Procedures: 1. 2. 3. 4.	

Planning continuity of financial operations and logistical arrangements:	Consideration 1: Plans for continuity of operations	Consideration 2: Plans for financial arrangements	Consideration 3: Plans for logistical arrangements
Procedures: 1. 2. 3. 4.			

Sample Template for Development of Emergency Plans for Assisted Living

Planning staff coverage needs for ongoing sheltering in place or evacuation	Consideration 1: Short term staffing plan	Consideration 2: Long term staffing plan
<p>Procedures:</p> <ol style="list-style-type: none">1.2.3.4.		

Identifying staff members available to report for work or remain during extended periods	Consideration 1: List of available staff members, including contact information
<p>Procedures:</p> <ol style="list-style-type: none">1.2.3.4..	

Sample Template for Development of Emergency Plans for Assisted Living

Identifying sources of transportation for emergency evacuation and documentation of agreement	Consideration 1: Name and contact for each transportation source	Consideration 2: Type of agreement documented: verbal or written	Consideration 3: Person responsible for making arrangements
Procedures: 1. 2. 3. 4.			

Planning for reasonable efforts to continue care to residents:	Consideration 1: Consistent Staffing	Consideration 2: Available Resources	Consideration 3: Other
Procedures: 1. 2. 3. 4.			

Sample Template for Development of Emergency Plans for Assisted Living

Ensuring an adequate tracking system for residents in the event of displacement:	Consideration 1: Include resident's name	Consideration 2: Include time resident sent to initial alternate location	Consideration 3: Include name and, if possible, contact information of alternate location
Procedures: 1. 2. 3. 4.			

Ensuring adequate medical fact sheet for resident is sent to alternate facilities:	Consideration 1: Ensure that the fact sheet is updated within a reasonable time of a change of the information required	Consideration 2: Reviewed monthly	Consideration 3: Maintained in central location accessible and available during evacuation
Fact sheet includes: Name of resident, medical condition or diagnosis, medications, allergies, special diets or dietary restrictions, and family or legal representative contact information			
Procedures: 1. 2. 3. 4.			

Sample Template for Development of Emergency Plans for Assisted Living

Ensuring identification of alternate location, including documented agreement with each location	Consideration 1: Name and address of alternate location	Consideration 2: Name of person agreement made with and date of agreement	Consideration 3: Type of agreement made-verbal, written, or best efforts
Procedures: 1. 2. 3. 4.			

Ensuring facility's emergency and disaster plans are shared with local emergency management organizations upon request	Consideration 1: Person responsible for sharing facility's plans with local emergency management Consideration 2: Format should be mutually agreed upon
Procedures: 1. 2. 3. 4.	

Sample Template for Development of Emergency Plans for Assisted Living

<p>Providing executive summaries of evacuation procedures to a resident, family member or legal representative upon request</p>	<p>Consideration 1: Person responsible for writing executive summary</p>	<p>Consideration 2: Policy for when and how to provide requested summary to family member or resident</p>	<p>Consideration 3: Lists of potential transportation, alternate facilities, and means of communications</p>
<p>Consideration 4: Description of roles and responsibilities of residents, family members or legal representatives</p> <p>Consideration 5: Notification to families that information provided to them may change</p> <p>Procedures:</p> <ol style="list-style-type: none"> 1. 2. 3. 4. 			

Sample Template for Development of Emergency Plans for Assisted Living

Holding and documenting semi-annual practice drills on shelter-in-place and evacuation on all shifts (each type practiced once a year)	Consideration 1: Person(s) responsible for scheduling drills and person responsible for documenting drill and staff verification of participation	Consideration 2: Documentation of evacuation or shelter in place.	Consideration 3: Documentation if the drill was tabletop or functional and why. (this must be based on demonstrable harm to residents if they were moved)
<p>Procedures:</p> <ol style="list-style-type: none">1.2.3.4.5.			

**Facility Resource Emergency Database
(FRED)
Application for Participation**

Organization Name _____
Owner/Assisted Living Manager _____
Address _____
City _____ State _____ Zipcode _____
E-Mail _____
Office Phone _____ Facsimilie _____ Pager _____

I designate the following person to manage the use of FRED within our organization.

Name _____
Address _____
City _____ State _____ Zipcode _____
E-Mail _____
Office Phone _____ Facsimilie _____ Pager _____

Our organization may be classified as a (an) (Check All that apply)

- | | |
|--|--|
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Federal Law Enforcement |
| <input type="checkbox"/> 911 EMS Agency/Fire Department | <input type="checkbox"/> State Health Department |
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> State EMS Agency |
| <input type="checkbox"/> Local Health Department | <input type="checkbox"/> State Emergency Management |
| <input type="checkbox"/> Local Emergency Management Agency | <input type="checkbox"/> Local Public Safety Answering Point |
| <input type="checkbox"/> Local Law Enforcement | <input type="checkbox"/> 911 Dispatch Center |
| <input type="checkbox"/> Nursing Home/LTC Facility | <input type="checkbox"/> Other _____ |

Signed _____ Date _____

Printed: _____

Mail to: Region III Office
 Maryland Institute for Emergency Medical Services Systems
 653 West Pratt Street
 Baltimore, Maryland 21201

OR

Fax to: 410-706-8530