



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 Nursing Home Administrators and other Long Term Care Stakeholders

RE: New COMAR 10.07.02.24 Emergency and Disaster Plans

FROM: Wendy Kronmiller, Director 

DATE: May 30, 2008

I am enclosing a copy of COMAR 10.07.02.24, which became effective April 21, 2008. These regulations require nursing facilities 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. A sample plan template will be posted on our website within a few weeks 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.

We are advised by emergency planning experts that if there is a large scale disaster, facilities such as nursing 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 Margie Heald, Deputy Director, (410) 402-8101. Questions about emergencies in general and the status of emergency planning in your region may be addressed to your local emergency management agency.

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 and federal 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 October 1, 2008.

6) *What resources are available to nursing homes on the subject of emergency planning?*

As stated above, OHCQ will shortly be releasing a template for emergency plans as one option that will satisfy minimum requirements for complying with these regulations. We will update our website to include any area trainings in emergency planning when we become aware of them. 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 Network, 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 10.07.02.24
Application, FRED

10.07.02.24

.24 Emergency and Disaster Plan.

A. Emergency and Disaster Plan.

(1) The licensee 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, and 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 due to an emergency or 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 nursing facility relocates residents, the facility 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 §A(3) of this regulation shall be:

(a) Updated upon the occurrence of any change of information on the medical fact sheet;

(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, alternate location, or alternate 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 purposes 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 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 and responsibilities 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.

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

C. 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 licensee shall conduct fire drills at least quarterly on all shifts.
- (b) The licensee 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 Emergency and Disaster Drill.

- (a) The licensee shall conduct a semiannual emergency and disaster drill on all shifts during which the facility 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 licensee can demonstrate that moving residents will be harmful to the residents.
- (c) Documentation. The licensee shall:
 - (i) Document completion of each 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.

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

Organization Name _____
Chief Executive Officer _____
Address _____
City _____ State _____ Zipcode _____
E-Mail _____
Office Phone _____ Facsimilie _____ Pager _____

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

Manager 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"/> Commercial Ambulance Company | <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

Sample Template for Development of Emergency Plans for Nursing Homes

| 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 nursing homes in complying with COMAR 10.07.02.24 (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 Nursing Homes

| | | | | |
|--|--|--|--|--|
| 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 Nursing Homes

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 Nursing Homes

| | | | |
|---|---|--|-------------------------|
| 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 Nursing Homes

| 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 Nursing Homes

| | |
|--|---|
| 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 Nursing Homes

| 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 Nursing Homes

| 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 Nursing Homes

| | | | |
|---|--|---|---|
| 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 Nursing Homes

| 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 Nursing Homes

| | | | |
|--|---|--|---|
| Providing executive summaries of evacuation procedures to a resident, family member or legal representative upon request | Consideration 1: Person responsible for writing executive summary | Consideration 2: Policy for when and how to provide requested summary to family member or resident | Consideration 3: Lists of potential transportation, alternate facilities, and means of communications |
| <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 Nursing Homes

| 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. | | | |