

Emergency Management Programs for Health Care Systems

Program Development Workshop

Unit Two: Standards and Regulations

Primary References

- *(Same as Lesson One, plus)*
- *NFPA 1600, Standard for Disaster/Emergency Management and Business Continuity Programs*
- *The Joint Commission emergency management standards*
- *HHS: Assistant Secretary for Preparedness and Response (ASPR) grant performance targets*
- *DHS: NIMS, Critical Infrastructure and National Preparedness documents and programs*

Lesson Objectives

- Identify and discuss the various standards and regulations that impact hospital/health system emergency management programs.
- Identify and discuss the DHS national preparedness and HHS hospital preparedness documents.

Emergency Management Standards and Regulations

- OSHA / EPA
- HHS
 - EMTALA
 - HIPAA
 - ASPR
- Joint Commission
- DHS
 - NIMS
- NFPA
- Internal standards and requirements

Which of these standards and regulations do you spend the most time on?

Are they all equally important?

Department of Homeland Security Standards: 2008-2009

- National Incident Management System (NIMS) requirements for U.S. hospitals and health systems:
 - Went from 17 to 14 requirements in FY08/09.
- Continuity of Operations Planning (Federal agencies - hospitals)

Department of Health and Human Services Requirements

- Emergency Medical Treatment and Active Labor Act (EMTALA)
- Health Information Portability and Accountability Act (HIPAA)
- Assistant Secretary for Preparedness and Response (ASPR), Hospital Preparedness Program (HPP)

Occupational Safety and Health Administration & the Environmental Protection Agency

- OSHA:
 - Emergency Planning and Community Right-to-Know Act
 - Hazardous Materials and Waste Operations and Response Act
- EPA:
 - Runoff from decontamination

National Fire Protection Association (NFPA)

- Standard 1600 – Disaster/Emergency Management and Business Continuity Programs
 - Identifies the core elements of an emergency management program.
- Standard 99/12 – Health Care Emergency Management and Security

The Joint Commission EM Standards: 2009

- Foundation for the Plan (EM.01.01.01)
- The Plan for Emergency Response (EOP)
 - General Requirements (EM.02.01.01)
 - Specific Requirements
 - Communications (EM.02.02.01)
 - Resources and Assets (EM.02.02.03)
 - Security and Safety (EM.02.02.05)
 - Staff (EM.02.02.07)
 - Utilities (EM.02.02.09)
 - Patients (EM.02.02.11)

The Joint Commission EM Standards: 2009 (con't)

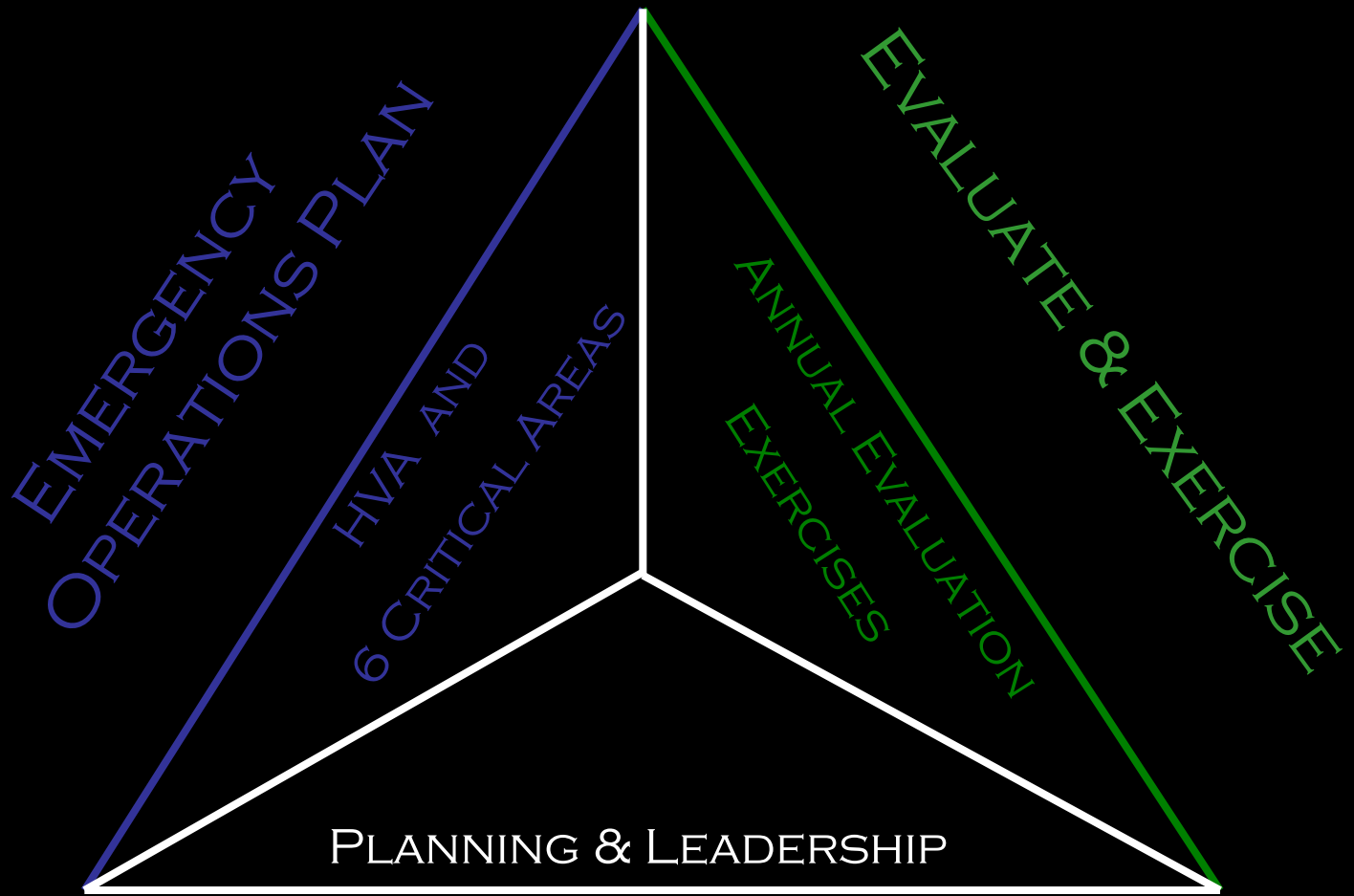
- Specific Requirements (con't)
 - Disaster Volunteer
 - Volunteer Licensed Independent Practitioners (EM.02.02.13)
 - Volunteer Practitioners (EM.02.02.15)
 - Evaluation
 - Evaluating the Planning Activities (EM.03.01.01)
 - Evaluation the EOP through Exercises (EM.03.01.03)

The Joint Commission: 2009 Overview

- Is now an accreditation manual chapter .
- All Standards and Elements of Performance from 2008 are incorporated into the 2009 Emergency Management Chapter.
- No new Standards or Elements of Performance in 2009.
- This new chapter contains some standards that were in HR, EC and MS.
- Survey Process is similar to 2008.

The Joint Commission: 2009 Overview (con't)

- The revised standards emphasize a “scalable” approach that can help manage the impact on a single organization, multiple organizations, an entire community, or region.
- Consider: the variety of events; the intensity of events; and, the duration of the disasters.
- The revisions also stress the importance of planning, and testing response plans for emergencies during conditions when the *local community cannot support* the healthcare organization.



EMERGENCY PROGRAM

Hazards Vulnerability Analysis (HVA)

- Documented.
- Annual Review.
- Site specific: one or many.
- Organization and community partners prioritize HVA
 - Includes disclosing to community needs and vulnerabilities.

Hazards Vulnerability Analysis (con't)

- Use the HVA to plan mitigation activities:
 - Impacts on Mission Critical Systems/Infrastructure
- Use the HVA to plan preparedness
 - Respond requirements - EP 8 - Documented inventory of resources & assets
 - Fuel
 - Personal Protective Equipment (PPE)
 - Water
 - Medical/surgical supplies
 - Other

Emergency Operations Plan (EOP)

- Emergency Operations Plan describes response procedures:
 - Written plan.
 - Capabilities to self-sustain for up to 96 hours.
 - EOP describes:
 - Recovery strategies
 - Initiation and termination of response and recovery phases
 - Defines authorities
 - Alternative care sites
 - Actual implementation is documented

EOP: Six Critical Areas

1. Communication [EC.02.02.01]
2. Resources & Assets [EC.02.02.03]
3. Safety & Security [EC.02.02.05]
4. Staff responsibilities [EC.02.02.07]
5. Utilities Management [EC.02.02.09]
6. Patient, clinical & support activities [EC.02.02.11]

TJC Surveying

- Review of the organizations Emergency Operations Plan.
- Two themes:
 - Discussion
 - Prefer to conduct in ICS
 - Observation
 - Tour based on Discussion
- The subject matter will be based on a review of the Hazard Vulnerability Analysis

Survey Process - Discussion

1. Compliance with EM Standards
 - ✓ EOP
 - ✓ Six Critical Functions
2. Discuss Emergency Operations Plan.
3. Surveyor is evaluating Team Dynamics

Survey Process – Discussion

Surveyor initiates discussion around the four EM categories:

- Mitigation
- Planning
- Response
- Recovery

Surveyor examines:

- Six Critical Functions
- Organization's overall EM structure
- Operations
- Planning activities

Survey Process - Observation

- How the facility handles actual emergencies.
- Evaluated with the organization.
- Availability of supplies & equipment.
- Training efforts that accompanied EOP.
- Effectiveness of communication systems.
- Contingency Planning.
- Patient care.

Scoring & Decision Process

- Scoring Scale
 - 0 = Insufficient Compliance
 - 1 = Partial Compliance
 - 2 = Full Compliance
- Requirement for Improvement (RFI)
 - All findings of less than full compliance will be cited as a RFI
 - All RFIs require resolution through an Evidence of Standards Compliance (ESC)
 - This includes findings scored partial
 - “Supplemental Findings” (2008 term) are eliminated

EP Scoring Categories

A: Structural requirements

- EP's scored yes (2) or no (0)
- May address issues requiring full compliance

C: Based on number of times an EP is not met

- Score 2: 0-1 instances of non-compliance
- Score 1: 2 instances of non-compliance
- Score 0: ≥ 3 instances of non-compliance
 - Above is based on a sample of 10

NOTE: The 'B' Category has been eliminated

Department of Homeland Security: Key Directives (2001-2008)

Homeland Security Presidential Directive(s);

- 5 – Management of Domestic Incidents
 - National Response Plan/Framework
 - National Incident Management System
- 7 – Critical Infrastructure Protection
- 8 – National Preparedness
 - Target Capability List
 - Homeland Security Exercise and Evaluation Program

HHS ASPR

Hospital Preparedness Program

Overarching Requirements and ASPR Expectations:

The following four sub-capabilities must be incorporated into the development and maintenance of all capabilities:

- **National Incident Management System (NIMS)**
- **Education and Preparedness Training**
- **Exercises, Evaluation and Corrective Actions**
- **Needs of At-Risk Populations**

HHS ASPR

Hospital Preparedness Program

Level One Sub-capability: FY 2008 HPP cooperative agreement funds will be used to continue building medical surge capacity and capability at the State and local level through associated planning, personnel, equipment, training and exercises.

- Interoperable Communication Systems
- Tracking of Bed Availability (HA_vBED)
- ESAR VHP
- Fatality Management
- Medical Evacuation/Shelter in Place
- Partnership/Coalition Development

HHS ASPR

Hospital Preparedness Program

Level Two Sub-Capabilities: These Level-Two sub capability activities remain allowable costs under the FY 2008 cooperative agreement provided the Level-One Capabilities are being adequately addressed in the work plan.

- Alternate Care Sites
- Mobile Medical Assets
- Pharmaceutical caches
- Personal Protective Equipment
- Decontamination

HHS ASPR

Hospital Preparedness Program

Additional Considerations:

- Medical Reserve Corps
- Critical Infrastructure Protection

HHS ASPR

Hospital Preparedness Program

Appendices:

- Medical Surge Capacity and Capability
- NIMS Requirements for Healthcare Organizations
- Homeland Security Exercise and Evaluation Program
- HAvBED Operations Requirements and Definitions
- Emergency System for the Advance Registration of Health Professionals

Questions ?