

# **CMS Guidelines for Rural Health Clinics**

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# Purpose of Rule

- Improve the facility's response to events such as natural and man-made disasters and infectious disease threats, such as Ebola and MERS-CoV.
- Mitigate future events by requiring facilities to meet certain requirements



# Why Create an Emergency Operations Plan Template?

- Emergency preparedness rule from the Centers for Medicare and Medicaid Services (CMS) requirements



# Healthcare EOP Templates

- Hospital
- Long Term Care
- Home Health
- Hospice (In-patient & Out-patient)
- Personal Care
- Ambulatory Surgical
- Rural Health/Federally Qualified Health Centers
- Prescribed Pediatric Extended Care
- End Stage Renal Disease
- Organ Procurement Organizations
- Comprehensive Outpatient Rehabilitation
- Psychiatric Residential Treatment
- Outpatient Physical Therapy
- Community Mental Health
- Intermediate Care Facilities for Individuals with Intellectual Abilities
- Transplant Centers
- Abortion



# Key Essentials Addressed by CMS Final Rule

- Safeguarding human resources
- Maintaining business continuity
- Protecting physical resources

These were not adequately addressed by previous regulations for Medicare and Medicaid.



# Core Elements

CMS identified four core elements needed for an effective, comprehensive framework for emergency preparedness requirements for participating providers and suppliers of Medicare and Medicaid.

- Risk assessment and emergency planning
- Policies and procedures
- Communication plan
- Training and testing



# Risk Assessment and Emergency Planning

Facilities are required to utilize an all hazards approach when executing a risk assessment. This approach should focus on capabilities and capacities critical for a broad range of emergencies or disasters most likely to occur near the supplier or provider's location.

Disasters or emergencies may include , but are not limited to:

- Power and equipment failures
- Care-related emergencies
- Loss of some or all of facility's communications, including cyber attacks
- Interruptions in the normal supply of essentials, such as water and food



# Risk Assessment and Emergency Planning

- Facility-based Hazard Vulnerability Analysis
- Build a plan based on your hazards
- Address patient population
- Cooperation and collaboration with local authorities





# Policies and Procedures

All facilities are required to develop and implement policies and procedures that support the successful execution of the emergency plan and risks identified during the risk assessment process.



# Policies and Procedures

- Safe evacuation
- Shelter in place
- Medical records
- Volunteers



# Communication Plan

Facilities are required to develop and maintain an emergency preparedness communications plan that complies with state and federal law.

The plan must use a system to contact appropriate staff, patients' treating physicians, and other necessary people in a timely manner to ensure continuation of patient care functions in a safe and effective manner.



# Communication Plan

- Contact list
- Contact information for emergency preparedness officials
- Communication methods
- Information for Emergency Management Agency



# Training and Testing

Facilities are required to develop and maintain an emergency preparedness training and testing program. It must include:

- Initial training for new and existing staff in emergency preparedness policies and procedures
- Annual refresher trainings
- Annual emergency preparedness training
- Conduction of drills and exercises to identify gaps and areas for improvement in the emergency plan



# Training and Testing

- Must complete at least one community based full scale exercise annually (an event can count as the full scale exercise)
- Additionally, must complete at least one of the following annually:
  - Community based full scale exercise,
  - A clinically relevant table top exercise



# Training and Testing

- After Action Review/Corrective Action Plan



# Questions?

