		PRTFs EMERGENCY PREPAREDNESS WORKSHEET		
	F SURVEY			
	F FACILITY ER NUMBER			
. SURVEY	OR .			
. SURVEY	OR ID			NOT
Tag #	Title	Tag Text	MET	NOT MET
	Establishment of the Emergency Program (EP)	The PRTF must comply with all applicable Federal, State and local emergency preparedness requirements. The PRTF must establish and maintain a comprehensive emergency preparedness program that meets the requirements of this section. The emergency preparedness program must include, but not be limited to, the following elements:		
	Develop and Maintain EP Program	(a) Emergency Plan. The PRTF must develop and maintain an emergency preparedness plan that must be reviewed, and updated at least annually.		
0006	Maintain and Annual EP Updates	(1) Be based on and include a documented, facility-based and community-based risk assessment, utilizing an all-hazards approach, including missing residents. (2) Include strategies for addressing emergency events identified by the risk assessment.		
	EP Program Patient Population	(3) Address patient/client population, including, but not limited to, persons at-risk; the type of services the PRTFs has the ability to provide in an emergency; and continuity of operations, including delegations of authority and succession plans.		
	Process for EP Collaboration	(4) Include a process for cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials' efforts to maintain an integrated response during a disaster or emergency situation, including documentation of the facility's efforts to contact such officials and, when applicable, of its participation in collaborative and cooperative planning efforts.		
	Development of EP Policies and Procedures	(b) Policies and procedures. PRTFs must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, and the communication plan at paragraph (c) of this section. The policies and procedures must be reviewed and updated at least annually.		
	Subsistence needs for staff and patients	(1) The provision of subsistence needs for staff and patients whether they evacuate or shelter in place, include, but are not limited to the following:		
		 (i) Food, water, medical and pharmaceutical supplies (ii) Alternate sources of energy to maintain the following: (A) Temperatures to protect patient health and safety and for the safe and sanitary storage of provisions. 		
		(B) Emergency lighting. (C) Fire detection, extinguishing, and alarm systems. (D) Sewage and waste disposal.		
	Procedures for Tracking of Staff and Patients	(2) A system to track the location of on-duty staff and sheltered residents in the PRTF's care during and after an emergency. If on-duty staff and sheltered residents are relocated during the emergency, the PRTF's must document the specific name and location of the receiving facility or other location.		
	Policies and Procedures including Evacuation	Safe evacuation from the PRTF, which includes consideration of care and treatment needs of evacuees; staff responsibilities; transportation; identification of evacuation location(s); and primary and alternate means of communication with external sources of assistance.		_ <u></u>
	Policies and Procedures for Sheltering	(4) A means to shelter in place for patients, staff, and volunteers who remain in the PRTF.		
	Policies and Procedures for Medical Docs.	(5) A system of medical documentation that preserves patient information, protects confidentiality of patient information, and secures and maintains availability of records.		
	Policies and Procedures for Volunteers	(6) The use of volunteers in an emergency or other emergency staffing strategies, including the process and role for integration of State and Federally designated health care professionals to address surge needs during an emergency.		
0025	Arrangement with other Facilities	(7) The development of arrangements with other PRTFs, and other providers to receive patients in the event of limitations or cessation of operations to maintain the continuity of services to facility patients.		
	Roles under a Waiver Declared by Secretary	(8) The role of the PRTF under a waiver declared by the Secretary, in accordance with section 1135 of the Act, in the provision of care and treatment at an alternate care site identified by emergency management officials.		1
0029	Development of Communication Plan	(c) The PRTF must develop and maintain an emergency preparedness communication plan that complies with Federal, State and local laws and must be reviewed and lupdated at least annually.		
0030	Names and Contact Information	((c) The communication plan must include all of the following: (1) Names and contact information for the following: (i) Staff. (ii) Entities providing services under arrangement. (iii) Patients' physicians		
		(iv) Other PRTFs. (v) Volunteers.		
0031	Emergency Officials Contact Information	(c) The communication plan must include all of the following: (2) Contact information for the following: (i) Federal, State, tribal, regional, and local emergency preparedness staff.		
		(ii) Other sources of assistance.		
	Primary/Alternate Means for Communication	[(c) The communication plan must include all of the following:		
		(3) Primary and alternate means for communicating with the following: (i) PRTF staff. (ii) Federal, State, tribal, regional, and local emergency management agencies.		
	Methods for Sharing	(c) The communication plan must include all of the following:		
	Information	(4) A method for sharing information and medical documentation for patients under the PRTF's care, as necessary, with other health providers to maintain the continuity of care.		
		(5) A means, in the event of an evacuation, to release patient information as permitted under 45 CFR 164.510(b)(1)(ii).		
		(6) A means of providing information about the general condition and location of patients under the PRTF's care as permitted under 45 CFR 164.510(b)(4).		
	Sharing Information on Occupancy/Needs	((c) The communication plan must include all of the following:		
0000	Emergency Pro- To-in'	(7) A means of providing information about the PRTF occupancy, needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee.		
	Emergency Prep Training and Testing	(d) Training and testing. The PRTF must develop and maintain an emergency preparedness training and testing program that is based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, policies and procedures at paragraph (b) of this section, and the communication plan at paragraph (c) of this section. The training and testing program must be reviewed and updated at least annually.		

0037	Emergency Prep Training		
	Program	(1) Training program. The PRTF must do all of the following:	
		(i) Initial training in emergency preparedness policies and procedures to all new and existing staff, individuals providing services under arrangement, and volunteers,	
		consistent with their expected roles.	
		(ii) After initial training, provide emergency preparedness training at least annually.	
		(iii) Demonstrate staff knowledge of emergency procedures.	
		(iv) Maintain documentation of all emergency preparedness training.	
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0039	Emergency Prep Testing	(2) Testing, The PRTF must conduct exercises to test the emergency plan at least annually. The PRTF must do all of the following:	
0000	Requirements	(2) Testing. The FRTF mass conduct exercises to test the emergency plan at least annually. The FRTF mass as all of the following.	
	requirements	(i) Participate in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility-based. If the PRTF	
		to raticipate in a fundamental artificiation and including a fundamental and included a fundamental and included a fundamental artificial and included a fundamental artificial and a community-based or leaper fundamental artificial and a community-based or leaper fundamental artificial and a community-based or leaper fundamental artificial artificial artificial and a community-based or leaper fundamental artificial	
		experiences an actual natural or main made entergency into requires actuation to the entergency plant, the EXTL'S exempt norm engaging in a community-based or individual, facility-based full-scale exercise for 1 year following the onset of the actual event.	
		intorwood, racing-based ton-scale exercise for 1 year ontowing the oriset of the actual event. (ii) Conduct an additional exercise that may include, but is not limited to the following:	
		(ii) Conduct an adomional exercise mat may include, but is not infinited to the following: ((A) A second full-scale exercise that is community-based or individual, facility-based.	
		(B) A tabletop exercise that includes a group discussion led by a facilitator, using a narrated, clinically-relevant emergency scenario, and a set of problem statements,	
		directed messages, or prepared questions designed to challenge an emergency plan.	
		(iii) Analyze the PRTF's response to and maintain documentation of all drills, tabletop exercises, and emergency events, and revise the PRTF's emergency plan, as	
		needed.	
0042	Integrated Health	(e) [or (f)]Integrated healthcare systems. If a PRTF is part of a healthcare system consisting of multiple separately certified healthcare facilities that elects to have a	
	Systems	unified and integrated emergency preparedness program, the PRTF may choose to participate in the healthcare system's coordinated emergency preparedness	
		program.	
		If elected, the unified and integrated emergency preparedness program must do all of the following:	
		(1) Demonstrate that each separately certified facility within the system actively participated in the development of the unified and integrated emergency preparedness	
		program.	
		(2) Be developed and maintained in a manner that takes into account each separately certified facility's unique circumstances, patient populations, and services offered.	
		(3) Demonstrate that each separately certified facility is capable of actively using the unified and integrated emergency preparedness program and is in compliance with	
		the program.	
		(4) Include a unified and integrated emergency plan that meets the requirements of paragraphs (a)(2), (3), and (4) of this section. The unified and integrated emergency	
		plan must also be based on and include the following:	
		(i) A documented community-based risk assessment, utilizing an all-hazards approach.	
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		(ii) A documented individual facility-based risk assessment for each separately certified facility within the health system, utilizing an all-hazards approach.	
		(5) Include integrated policies and procedures that meet the requirements set forth in paragraph (b) of this section, a coordinated communication plan, and training and	
		testing programs that meet the requirements of paragraphs (c) and (d) of this section, respectively.	
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