

Home Health Conditions of Participation 2018 Implementation Checklist
484.102 Condition of Participation: Emergency Preparedness

Review each checklist item to insure compliance with the following requirements with the Medicare Home Health Conditions of Participation effective November 15, 2017. NOTE: Additional language is required for specific state licensure regulations, accreditation standards or existing agency policies.

CoP/Standard	CoP/Standard Elements of Compliance	Check if Present	Comments
484.102 (a) Standard: Emergency Plan	Obtain current information and resources from CMS: https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html and other state/federal agencies to use in developing the Emergency Preparedness Program.		
	Conduct an “All Hazards” Risk Assessment: Prioritize patients according to acuity and develop patient specific emergency plans		
	Update all Patient handouts, EP tips/phone #'s		
	Ensure Emergency Management Plan is reviewed and updated yearly and identifies potential emergencies from Risk Assessment. <ul style="list-style-type: none"> • ID Potential Emergencies • Prioritize areas most vulnerable disasters • Define emergency events that result from disasters i.e. staff exposure, power loss • Determine where to document pts EM plan in medical record. Annual EMP in-service for all staff. 		
	Evidence of initial and annual education re: Emergency Preparedness Plan.		
	Identify and coordinate Plan with local, tribal, regional and state or federal emergency preparedness officials. Document/log efforts and communication attempts to contact/coordinate with officials.		
484.102 (b) Standard: Policies and Procedures	Evaluate current policies, documentation practices and process flows related to your Emergency Preparedness Plan.		

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	Establish Command structure and each managers responsibility i.e. initiate, alternative staff mobilization, priority pts, surge capacity, etc. Including procedures for the following: <ul style="list-style-type: none"> • When disaster occurs with/without warning • Disaster review and staff assignments • Individual Emergency plan for patient include in comprehensive assessment • Procedure to inform state/local EP officials for patient requiring evacuation based on medical/ psych condition/ home environment etc., in care. • Procedure for follow up with patient/ staff regarding interruption when services needed. • Notify state/ local officials of on-duty staff/ patient when unable to contact in an emergency. • System of medical documentation: preserves patient info, confidentiality, and secures/ maintains availability of record. • Plan for involvement of volunteers. 		
	Review/Update Continuity of Operations for Pandemic Flu (COOP) Plan as needed to reflect requirements.		
	Review and update policies and procedures annually based on agency needs and annual All Hazards Risk Analysis.		

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484.102 (c) Standard: Communication Plan	Establish a plan to ensure communication & staff mobilization and monitoring staff for safety. Conduct ongoing review to ensure the following: <ul style="list-style-type: none"> • Availability and accessibility of current contact info for staff, contractors, patients and caregivers, physician. Fed/State/Local EP staff. • Strategies for patient care Priority levels and criteria guidelines, e.g. 1,2,3,4 or high, mod, min. risk • Alternate Staff mobilization • Liaison to State emergency management/or bordering state agency • Prolonged Pandemic, add to Continuity of Operation Plans (COOP) • Evacuation Plan for agency’s Buildings, safety of employees, treatment if needed. • Identify who will speak to the public and what will be told to the public/staff family if they call • Recovery phase accounting for & checking staff, pts, data review, sequence data, etc. • Recovery phase staff discussion re concerns, experience, ID stressors in staff • Post disaster/drill evaluation of the EP response. Recommend staff questionnaire for all involved. 		
484.102 (d) Standard: Training and Testing	Develop and maintain EP training and testing based on All Hazards Risk Assessment, P&Ps and communication plan that is reviewed and updated annually.		
	Document initial and annual training all staff/contract and volunteers. Demonstrate staff knowledge of emergency procedures.		
	Conduct (2) exercises to test EP annually and analyze the response: <ul style="list-style-type: none"> • Participate in full scale exercise community or facility based; and • Table top exercise. May participate in additional exercises as noted in the standard.		
	Document response to an actual natural or man-made emergency that requires activity of the emergency plan (exempts agency from participation in full scale or facility based exercise for 1year following the event.		
	Post disaster/drill evaluation of the EP response and revision of the Emergency Plan as needed.		

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484.102 (d) Standard: Integrative Healthcare Systems	Integrate P & P for communication plan, testing, and training Note: If a HHA is part of a healthcare system consisting of multiple separately certified healthcare facilities the HHA may choose to participate in the healthcare system's coordinated emergency preparedness program. Ensure this is documented if applicable.		