



ICF/ID Emergency Preparedness Survey Procedures

What the Surveyor will do....

Interview	Ask	Verify
Emergency Preparedness Program	Emergency Preparedness Program	Emergency Preparedness Program
Identify the <i>facility leadership</i> and ask him/her/them to <i>describe</i> the facility's <i>emergency preparedness program</i> .	To see the facility <i>written policy and documentation</i> for the emergency preparedness program.	The emergency plan includes <i>policies and procedures</i> for the provision of <i>subsistence needs</i> including, but not limited to, food, water and pharmaceutical supplies for patients and staff by reviewing the plan
Clients - Residents and their families or representatives and ask them if they have been given information regarding the facility's <i>emergency plan</i> .	To see <i>documentation</i> of the individual <i>analysis and response</i> . Ask how the facility updated its emergency program based on this individual analysis.	The emergency plan includes <i>policies and procedures</i> to ensure adequate <i>alternate energy sources</i> necessary to maintain: <ul style="list-style-type: none"> ➤ Temperatures to protect patient health and safety; ➤ Safe and sanitary storage of provisions; ➤ Emergency lighting; and ➤ Fire detection, extinguishing and alarm systems.
	To see documentation the facility identified a system that protects the <i>confidentially</i> of client / resident information.	The emergency plan includes policies and procedures to provide for <i>sewage and waste disposal</i> .
	To see evidence the program has been <i>reviewed and updated</i> as needed or, at least, biennially (every two years) by asking for <i>documentation</i> of the biannual review as well as any updates made.	The facility has the required <i>emergency and standby power systems</i> to meet the requirements of the facility's emergency plan and corresponding policies and procedures.
	To see evidence the plan includes <i>arrangements for transportation</i> to alternate care sites.	The emergency plan for " <i>shelter in place</i> " and evacuation plans. Based on those plans, does the facility have <i>emergency power systems</i> or plans in place to maintain safe operations while sheltering in place?
	To see documentation that the plan has used an 'all hazards approach' including <i>missing client</i> .	ICF/ID emergency plans must meet the requirements for evacuation drills and training at §483.470(i).

Communication Plan	Communication Plan	Communication Plan
Identify the <i>facility leadership</i> and ask him/her/them to <i>describe</i> the facility's <i>communication plan</i> .	To see the <i>written communication plan</i> .	The facility has a <i>written communication plan</i> .
	To see the <i>communications equipment or communication systems</i> listed in the plan.	The <i>communication plan</i> includes <i>primary and alternate means</i> for communicating with facility staff, federal, state, regional and local emergency management agencies.
	Staff to demonstrate the method the facility has developed for sharing the emergency plan with clients and their families or representatives.	The <i>communication plan</i> includes a method for <i>sharing information</i> and medical care documentation for clients under the facility's care, as necessary, with other health providers to maintain the continuity of care.
Interview	Ask	Verify
Communication Plan	Communication Plan	Communication Plan
		The facility has <i>developed policies and procedures</i> that address the means the facility will use to release patient information to include the general condition and location of patients, by reviewing the communication plan.
		The <i>communication plan</i> includes a means of providing information about the facility's needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee by reviewing the communication plan.
		The communication plan includes a means of providing information about their <i>occupancy</i> .
		The <i>communication plan</i> includes a <i>method</i> for sharing information on the plan. The facility has determined, if appropriate, to review the plan with <i>residents/clients, families or representatives</i> .

Training & Testing Program	Training & Testing Program	Training & Testing Program
Identify the <i>facility leadership</i> and ask him/her/them to <i>describe</i> the facility's <i>training and testing program</i> .	For copies of the facility's <i>initial</i> emergency preparedness training and biannual emergency preparedness training offerings.	The facility has a <i>written training and testing program</i> that meets the requirements of the regulation.
Various staff and ask questions regarding the facility's initial and biannual training course, to verify staff knowledge of emergency procedures.	To see <i>documentation</i> of both the full-scale exercise (which may include, but is not limited to, the exercise plan, the After Action report (AAR), and any additional documentation used by the facility to support the exercise). <i>The second exercise, which may be of 'PROVIDERS choice such as simulations, desk-top exercises, workshops or other methods that may best meet the needs of the facility and the clients that they serve.</i>	A sample of staff training files to verify staff have received initial and biannual emergency preparedness training
Various staff and ask them to describe the evacuation procedures and plan.		Current copies of CPR certifications for all staff, as applicable, are on file.