

EMERGENCY PREPAREDNESS — RHCs and FOHCs

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
<p>§491.12 The RHC/FQHC must comply with all applicable Federal, State and local emergency preparedness requirements. The RHC/FQHC must develop and maintain a comprehensive emergency preparedness program that meets the requirements of this section, utilizing an all-hazards approach specific to its location. The emergency preparedness program must include, but not be limited to, the following elements:</p> <p>Three essential elements are required in the final rule to maintain access to healthcare services during emergencies:</p> <ul style="list-style-type: none"> a. Safeguarding human resources b. Maintaining business continuity c. Protecting physical resources 					
<p>The RHC and FQHC must comply with all applicable federal, state and local emergency preparedness requirements.</p>					
<p>§491.12 (a) Emergency Plan</p>					
<p>The RHC/FQHC must develop and maintain an emergency preparedness plan that must be reviewed, and updated at least annually. The plan must include, but not be limited to, the following: §491.12(a)(1-4)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<p>Preparedness planning should focus on capacities and capabilities critical to a full spectrum of emergencies or disasters.</p> <p>Examples may include care-related emergencies, equipment and power related failures, communication interruptions- including cybersecurity attacks, loss of all or part of the facility, interruption in essential supplies.</p>
<p>a. Be based on and include a documented, facility- based and community-based risk assessment, utilizing an all- hazards approach. §491.12 (a)(1)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>b. Include strategies for addressing emergency events identified by the risk assessment. §491.12 (a)(2)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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<p>c. Address patient population, including, but not limited to, persons at risk; the type of services the RHC/FQHC has the ability to provide in an emergency; and continuity of operations, including delegations of authority and succession plans.</p> <p>§491.12 (a)(3)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<p>At risk patient populations may need additional assistance such as those with disabilities, living in an institutionalized setting, from diverse cultures, limited English proficiency, lack transportation, chronic medical disorders or drug dependency.</p> <p>At risk individuals means children, pregnant women, senior citizens, others with special needs in a public health emergency or based upon unique population and geographical areas.</p> <p>See the Public Health Service Act and the National Response Framework for expanded definitions.</p>
<p>d. 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 RHC/FQHC's efforts to contact such officials and, when applicable, its participation in collaborative and cooperative planning efforts.</p> <p>§491.12 (a)(4)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
§491.12 (b) Policies and Procedures					
<p>The RHC/FQHC must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in section (a) Emergency Plan, in section (a)(1) Risk Assessment and section (c) Communication Plan. The policies and</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<p>The RHC/FQHC is 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.</p>

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procedures must be reviewed and updated at least annually. At a minimum, the policies and procedures must address the following: §491.12 (b)(1-4)					
a. Safe evacuation from the RHC/FQHC, which includes appropriate placement of exit signs; staff responsibilities and needs of the patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
b. A means to shelter in place for patients, staff, and volunteers who remain in the facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Policies and procedures should address the criteria for selecting patients and staff sheltered in place and a description of how to ensure their safety.
c. A system of medical documentation that preserves patient information, protects confidentiality of patient information, and secures and maintains the availability of records.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Policies and procedures must be in compliance with Health Insurance Portability and Accountability Act (HIPAA) Rules at 45 CFR parts 160 and 164.
d. The use of volunteers in an emergency and 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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
§491.12(c) Communication Plan					
The RHC/FQHC must develop and maintain an emergency preparedness communication plan that complies with both Federal, State and local law and must be reviewed and updated at least annually.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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The communication plan must include all of the following:					
Names and contact information for the following: §491.12 (c)(1)(i-v) a. Staff b. Entities providing services under arrangement. c. Patients’ physicians. d. Other RHCs/FQHCs e. Volunteers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Contact information for the following: §491.12 (c)(2)(i-ii) a. Federal, State, tribal, regional, and local emergency preparedness staff. b. Other sources of assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Primary and alternate means for communicating with the following: §491.12 (c)(3)(i-ii) a. RHC/FQHC’s staff. b. Federal, state, tribal, regional, and local emergency management agencies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Consideration of pagers, internet by non-telephone cable providers, HAM, satellite phones, multiple cell carriers.
A means of providing information about the general condition and location of patients under the facility’s care as permitted under 45 CFR 164.510(b)(4). §491.12 (c)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Uses and disclosures for disaster relief purposes rule. The communication plan should include what types of information is releasable, and who is authorized to release this information during an emergency.
A means of providing information about the RHC/FQHC’s needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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§491.12 (c)(5)					
§491.12 (d) Training and Testing					
The RHC/FQHC must develop and maintain an emergency preparedness training and testing program that is based on the emergency plan set forth in section (a) Emergency Plan, in section (a)(1) Risk Assessment, section (b) Policies and Procedures and section (c) Communication Plan. The training and testing program must be reviewed and updated at least annually.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		The RHC/FQHC must conduct drills and exercises to test the emergency plan to identify gaps and areas for improvement.
Training program. The RHC/FQHC must do all of the following: a. 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 role. §491.12 (d)(1)(i-iv) b. Provide emergency preparedness training at least annually. c. Maintain documentation of the training d. Demonstrate staff knowledge of emergency procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Testing. The RHC/FQHC must conduct drills and exercises to test the emergency plan at least annually. The RHC/FQHC must do all of the following: §491.12 (d)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Participate in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility-based. §491.12 d)(2)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Include in the planning a process for ensuing cooperation and collaboration with local, tribal, regional, State, and Federal emergency preparedness officials. The RHC/FQHC should document efforts to contact such officials and, when applicable, its participation in collaborative and cooperative planning efforts.
Conduct an additional exercise that may include, but is not limited 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. §491.12 (d)(2)(ii)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If the RHC/FQHC experiences an actual natural or man-made emergency that requires activation of the emergency plan, the RHC/FQHC is exempt from engaging in a community or individual, facility-based mock disaster drill for 1 year following the onset of the actual event. The RHC/FQHC must maintain documentation of the emergency event and be able to demonstrate how the emergency plan was put into action.
Analyze the RHC/FQHC's response to and maintain documentation of all drills, tabletop exercises, and emergency events, and revise the RHC/FQHC's emergency plan, as needed. §491.12 (d)(2)(iii)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
§491.12 (e) Integrated Health Systems					
Healthcare systems consisting of multiple separately certified healthcare facilities may elect to have a unified and integrated emergency preparedness program. If elected, the unified and integrated the emergency program must do all of the following:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Separately certified RHCs/FQHCs within an integrated healthcare system may elect to be part of the healthcare system's emergency preparedness program.

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Demonstrate that each separately certified facility within the system actively participated in the development of the unified and integrated emergency preparedness program. §491.12 (e)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Be developed and maintained in a manner that takes into account each separately certified facility's unique circumstances, patient populations and services offered. §491.12 (e)(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
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. §491.12 (e)(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Include a unified and integrated emergency plan that meets the requirements of paragraphs (a) (2), (3) and (4) of this rule. The unified and integrated emergency plan must also be based and include all of the following: §491.12 (e)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
A documented community-based risk assessment, utilizing an all-hazards approach. §491.12 (e)(4)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
A documented individual facility-based risk assessment for each separately certified facility within the health system, utilizing the all-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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hazards approach. §491.12 (e)(4)(ii)					
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 the rule, respectively. §491.12 (e)(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Helpful Hints

- Effective: November 15, 2016
- Survey ready: November 15, 2017

Key Resources and Links

- [SOM Appendix Z](#) Emergency Preparedness
- [Missouri Hospital Association](#) Emergency Preparedness