

## Arizona State Survey Agency Emergency Preparedness (EP) End-Stage Renal Disease (ESRD) Dialysis Facility Survey Preparation Worksheet

This survey preparation worksheet is provided to assist dialysis facilities ensure that they will be able to meet all emergency preparedness requirements. At the time of a survey, a facility will be scored as having “Met” or “Not Met” the Centers for Medicare & Medicaid Services (CMS) emergency preparedness standards as set forth in the Conditions for Coverage by E-tag.

E-tag Number	E-tag Title
<b>E - 0003</b>	<b>Establishment of the Emergency Program</b>
<p><b>Requirement:</b></p> <ul style="list-style-type: none"> <li>• The ESRD facility must comply with all applicable federal, state, and local EP requirements.</li> <li>• Emergencies include, but are not limited to:               <ul style="list-style-type: none"> <li>– Fire</li> <li>– Equipment or power failures</li> <li>– Care-related emergencies</li> <li>– Water supply interruption</li> <li>– Natural disasters likely to occur in the facility's geographic area</li> </ul> </li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Interview facility leadership and ask them to describe the facility's EP program</li> <li>• Ask to see the facility's written policy and documentation on EP</li> </ul>	

E-tag Number	E-tag Title
<b>E - 0004</b>	<b>Develop and Maintain EP Program</b>
<p><b>Requirement:</b></p> <ul style="list-style-type: none"> <li>• The ESRD facility must develop and maintain an EP plan that must be evaluated and updated at least annually</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the facility has an emergency plan by asking to see a copy of the plan</li> <li>• Ask facility leadership to identify the hazards that were identified in the facility's risk assessment and how the risk assessment was conducted</li> <li>• Review plan to verify it contains all the required elements. Verify that the plan was reviewed and updated annually</li> </ul>	

E-tag Number	E-tag Title
<b>E - 0006</b>	<b>Maintain and Annual EP Updates</b>
<p><b>Requirement:</b></p> <p>The EP must be maintained and updated:</p> <ul style="list-style-type: none"> <li>• Based on and include a documented, facility- and community-based risk assessment, using an all-hazards approach</li> <li>• Include strategies for addressing emergency events identified by the risk assessment</li> </ul>	

**Survey Process—The surveyor will:**

- Ask to see the written documentation of the facility's risk assessment and associated strategies
- Interview facility leadership and ask which hazards were included in the risk assessment and why
- Ask how the risk assessment was conducted
- Verify the risk assessment is based on an all-hazards approach specific to the geographic location of the facility that encompasses all potential hazards

E-tag Number	E-tag Title
E - 0007	EP Program Patient Population

**Requirement:**

The EP plan must address the:

- Patient/client population
- Type of services the ESRD facility is prepared to provide in an emergency.
- Plans for continuity of operations, including delegations of authority and succession

**Survey Process—The surveyor will:**

- Ask to see documentation for required items

E-tag Number	E-tag Title
E – 0009	Process for EP Collaboration

**Requirement:**

The ESRD facility must:

- Have a documented process for cooperation and collaboration with local, tribal, regional, state, and federal EP officials. Documentation should include efforts to maintain an integrated response during a disaster or emergency
- Document all efforts to contact EP officials and, when applicable, its participation in collaborative and cooperative planning efforts
- Contact the local emergency preparedness agency at least annually to confirm that the agency is aware of the ESRD facility's needs in the event of an emergency

**Survey Process—The surveyor will:**

- Interview facility leadership and ask them to describe their process for ensuring cooperation and collaboration with local, tribal, regional, state, and federal EP officials' efforts to ensure an integrated response during a disaster or emergency
- Ask for documentation of the facility's efforts to contact such officials and, when applicable, its participation in collaborative and cooperative planning efforts
- Ask to see documentation that the facility has contacted the local public health and emergency management agency public official at least annually to confirm that the agency is aware of the facility's needs in the event of an emergency and knows how to contact the agencies in the event of an emergency

E-tag Number	E-tag Title
E - 0013	Development of EP Policies and Procedures (P&Ps)
<p><b>Requirement:</b> Facilities must:</p> <ul style="list-style-type: none"> <li>• Develop and implement EP P&amp;Ps, based on the facility’s EP risk assessment, and communication plan</li> <li>• Review and update P&amp;Ps at least annually</li> </ul> <p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Review written P&amp;Ps which address the facility's EP and verify that they were:               <ul style="list-style-type: none"> <li>– Were developed based on the facility and community-based risk assessment and communication plan, using an all-hazards approach</li> <li>– Ask to see documentation that verifies the P&amp;Ps have been reviewed and updated on an annual basis</li> </ul> </li> </ul>	

E-tag Number	E-tag Title
E - 0018	P&P— Tracking System
<p><b>Requirement:</b> Facilities must have a P&amp;P that addresses a tracking system:</p> <ul style="list-style-type: none"> <li>• To track the location of their on-duty staff and sheltered patients during an emergency               <ul style="list-style-type: none"> <li>– If on-duty staff and sheltered patients are relocated during the emergency, the facility must document the specific name and location of the receiving facility or other location</li> </ul> </li> <li>• To ensure:               <ul style="list-style-type: none"> <li>– Continuity of care and treatment needs of evacuees</li> <li>– Clear understanding of staff responsibilities</li> <li>– Patient transportation to dialysis plans are documented</li> <li>– Identification of evacuation location(s) and primary and alternate means of communication with external sources of assistance are established</li> </ul> </li> </ul> <p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Ask the staff to describe and/or demonstrate the tracking system used to document locations of patients and staff</li> <li>• Verify that the tracking system is documented as part of the facilities' EP P&amp;Ps</li> </ul>	

E-tag Number	E-tag Title
E - 0020	P&P— Facility Evacuation
<p><b>Requirement:</b> Facilities must have a P&amp;P that addresses safe evacuation from the ESRD facility, including:</p> <ul style="list-style-type: none"> <li>• Consideration of care and treatment needs of evacuees</li> <li>• Staff responsibilities.</li> <li>• Transportation</li> <li>• Identification of evacuation location(s)</li> <li>• Primary and alternate means of communication with external sources of assistance</li> </ul>	

**Survey Process—The surveyor will:**

- Review the EP plan to verify it includes P&Ps for safe evacuation from the facility and that it includes all the required elements

**E-tag Number**

**E-tag Title**

**E - 0022**

**P&Ps for Sheltering**

**Requirement:**

The facility must have a P&P in place that addresses a means to shelter in place for patients, staff, and volunteers who remain in the ESRD facility

**Survey Process—The surveyor will:**

- Verify the EP plan includes P&Ps for how it will provide a means to shelter in place for patients, staff, and volunteers who remain in a facility
- Review the P&Ps for sheltering in place to evaluate if they align with the facility's EP and risk assessment

**V-tag Number**

**V-tag Title**

**E - 0023**

**P&Ps for Preservation of Medical Documentation**

**Requirement:**

The facility must have P&Ps in place that address how the facility will protect, preserve, and maintain:

- Medical documentation and patient information
- Confidentiality of patient information
- Availability of records

**Survey Process—The surveyor will:**

- Ask to see a copy of the P&Ps that shows how the medical record documentation system the facility has developed will preserve patient information, protect confidentiality of patient information, and secure and maintain availability of records

**E-tag Number**

**E-tag Title**

**E - 0024**

**P&Ps for Use of Volunteers**

**Requirement:**

The facility must have P&Ps in place that address the use of volunteers in:

- An emergency.
- Emergency staffing strategies, including:
  - A method for contacting off-duty staff during an emergency
  - Procedures to address contingencies in the event staff are not able to report to duty, which could include but may not be limited to integrating state- and federally-designated healthcare professionals to address surge needs during an emergency

**Survey Process—The surveyor will:**

Verify the facility has included P&Ps in its EP plan for:

- The use of volunteers
- Other staffing strategies to include but need not be limited to, utilizing using from other

facilities and state- or federally-designated health professionals

E-tag Number	E-tag Title
<b>E - 0025</b>	<b>P&amp;Ps for Provision of Backup Services</b>
<p><b>Requirement:</b> The facility must have P&amp;Ps in place that address the:</p> <ul style="list-style-type: none"> <li>• Development of arrangements with other facilities and/or providers to receive patients in the event of limitations or cessation of operations</li> <li>• Continuity of services to facility patients in the event of facility closure</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Ask to see copies of the arrangements and/or any agreements the facility has with other facilities to receive patients in the event the facility is not able to care for them during an emergency</li> <li>• Ask facility leadership to explain the arrangements in place for transportation in the event of an evacuation</li> </ul>	

E-tag Number	E-tag Title
<b>E - 0026</b>	<b>P&amp;Ps for Waiver 1135</b>
<p><b>Requirement:</b> The facility must have P&amp;Ps in place that address the:</p> <ul style="list-style-type: none"> <li>• Role of the facility under waiver 1135</li> <li>• Provision of care and treatment at an alternate care site identified by emergency management officials</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the facility has included P&amp;Ps in its emergency plan describing the facility's role in providing care and treatment at alternate sites under an 1135 waiver</li> </ul>	

E-tag Number	E-tag Title
<b>E - 0027</b>	<b>P&amp;Ps for Emergency Medical System Assistance</b>
<p><b>Requirement:</b> The facility must have P&amp;Ps in place that address how emergency medical system assistance can be obtained when needed</p>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the facility has included P&amp;Ps in its EP that address a process for obtaining emergency medical assistance when needed</li> </ul>	

E-tag Number	E-tag Title
<b>E - 0028</b>	<b>P&amp;Ps for Emergency Equipment and Medications</b>
<p><b>Requirement:</b> The facility must have P&amp;Ps in place that address a process by which facility staff can confirm that emergency equipment and medication are on premise, working, and immediately available, including but not limited to:</p> <ul style="list-style-type: none"> <li>• Oxygen</li> </ul>	

- Airways
- Suction
- Defibrillator or automatic external defibrillator (AED)
- Resuscitator
- Emergency drugs

**Survey Process—The surveyor will:**

- Verify the facility has a process in place by which its staff can confirm that emergency equipment is on the premises and immediately available
- Verify that the process includes at least the listed emergency equipment within its EP plan by asking to see a copy of the written P&P on emergency equipment and medications
- Check to see that all of the listed equipment is available and in working order
- Ask to see procedure/checklist for ensuring equipment is checked
- Check to see that all emergency drugs are not out of date

E-tag Number	E-tag Title
E - 0029	Development of Communication Plan
<p><b>Requirement:</b> Facilities must:</p> <ul style="list-style-type: none"> <li>• Develop and maintain an EP communication plan that complies with federal, state, and local laws</li> <li>• Be reviewed and updated at least annually</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the facility has a written communications plan by asking to see the plan</li> <li>• Ask to see evidence that the plan has been reviewed and updated as necessary or on an annual basis at minimum</li> </ul>	

E-tag Number	E-tag Title
E - 0030	Names and Contact Information
<p><b>Requirement:</b> Facilities must include names and contact information for the following in their communication plan:</p> <ul style="list-style-type: none"> <li>• Staff</li> <li>• Entities providing services under arrangement</li> <li>• Patients' physicians</li> <li>• Other (facilities)</li> <li>• Volunteers</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify that all required contacts are included in the communications plan by asking to see a list of the contacts with their contact information</li> <li>• Verify that all contact information has been reviewed and updated at least annually by asking to see evidence of the annual review</li> </ul>	

E-tag Number	E-tag Title
E - 0031	Emergency Officials' Contact Information
<p><b>Requirement:</b> Facilities must include names and contact information for the following in their communication plan:</p> <ul style="list-style-type: none"> <li>• Federal, state, tribal, regional, and/or local emergency preparedness staff</li> <li>• Other sources of emergency assistance</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify that all required contacts are included in the communication plan by asking to see a list of the contacts with their contact information</li> <li>• Verify that all contact information has been reviewed and updated at least annually by asking to see evidence of the annual review</li> </ul>	

E-tag Number	E-tag Title
E - 0032	Primary/Alternate Means for Communication
<p><b>Requirement:</b> Facilities must specify primary and alternate means for communicating with the following in the communication plan:</p> <ul style="list-style-type: none"> <li>• ESRD staff</li> <li>• Federal, state, tribal, regional, and local emergency management agencies</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the communications plan includes primary and alternate means for communicating with facility staff, federal, state, tribal, regional, and local emergency management agencies by reviewing the communications plan</li> <li>• Ask to see the communications equipment or communications systems listed in the plan</li> </ul>	

E-tag Number	E-tag Title
E - 0033	Methods for Sharing Information
<p><b>Requirement:</b> Facilities must include in the communication plan a:</p> <ul style="list-style-type: none"> <li>• Method for sharing information and medical documentation for patients under their care, as necessary, with other health providers to maintain the continuity of care</li> <li>• Means of providing information about the general condition and location of residents under the facility's care as permitted under 45 CFR 164.510(b)(4)</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the communication plan includes a method for sharing information and medical documentation for patients under the facility's care, as necessary, with other health providers to maintain the continuity of care by reviewing the communication plan</li> </ul>	

E-tag Number	E-tag Title
E - 0034	Sharing Information on Occupancy Needs
<p><b>Requirement:</b> The facility must demonstrate in the communication plan that they have a means of providing information about the facility's occupancy, needs, and ability to provide assistance to the:</p> <ul style="list-style-type: none"> <li>• Authority having jurisdiction</li> <li>• Incident Command Center</li> <li>• Designee</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the communication plan 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</li> </ul>	

E-tag Number	E-tag Title
E - 0036	Training and Testing Program
<p><b>Requirement:</b> The facility must develop and maintain an EP training and testing program that is:</p> <ul style="list-style-type: none"> <li>• Based on and in accordance with all of the following: <ul style="list-style-type: none"> <li>– Facility's emergency plan</li> <li>– Risk assessment</li> <li>– P&amp;Ps</li> <li>– Communication plan</li> </ul> </li> <li>• Reviewed and updated at least annually</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify that the facility has a written training and testing program that meets the requirements of the regulation</li> <li>• Verify the program has been reviewed and updated on, at least, an annual basis by asking for documentation of the annual review, as well as any updates made</li> </ul>	

E-tag Number	E-tag Title
E - 0038	Training and Testing Program—Facility Staff
<p><b>Requirement:</b></p> <ul style="list-style-type: none"> <li>• The facility must provide: <ul style="list-style-type: none"> <li>– Initial training in emergency preparedness P&amp;Ps to all new and existing staff, individuals providing services under arrangement, and volunteers, consistent with their expected roles</li> <li>– Follow-up emergency training at least annually</li> <li>– Documentation of initial and follow-up trainings</li> </ul> </li> <li>• Staff must be able to demonstrate: <ul style="list-style-type: none"> <li>– Knowledge of emergency procedures, including informing patients of: <ul style="list-style-type: none"> <li>▪ What to do</li> <li>▪ Where to go, including instructions for occasions when the geographic area of the</li> </ul> </li> </ul> </li> </ul>	



dialysis facility must be evacuated

- Who to contact if an emergency occurs while the patient is not in the dialysis facility
  - Contact information must include an alternate emergency phone number for the facility for instances when the dialysis facility is unable to receive phone calls due to an emergency situation
- How to disconnect themselves from the dialysis machine if an emergency occurs
- That their CPR certification is current (patient care staff)
- Knowledge of how to use of emergency equipment and administer emergency drugs (nursing staff)

**Survey Process—The surveyor will:**

- Verify that the facility has an emergency preparedness training program and that it is updated annually
- Interview staff and ask them to describe the evacuation procedures and plan
- Verify current copies of CPR certifications for all patient care staff are on file

E-tag Number	E-tag Title
E - 0039	Emergency Prep Testing Requirements—Facility

Facilities must:

- Conduct exercises to test the emergency plan at least annually
- Do all of the following:
  - Participate in a full-scale exercise that is community-based or when a community-based exercise is not available, an individual, facility-based exercise
    - If the facility experiences an actual natural or man-made emergency that requires activation of the emergency plan, the ESRD is exempt from engaging in a community-based or individual, facility-based full-scale exercise for one year following the onset of the actual event
  - Conduct an additional exercise that may include but is not limited to:
    - A second full-scale exercise that is community-based or individual, facility-based.
    - 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
- Analyze the facility’s responses in an after-action review (AAR) with documentation of all drills, tabletop exercises, and emergency events
- Revise the facility’s EP, as needed

**Survey Process—The surveyor will:**

- Ask to see documentation of the annual tabletop and full-scale exercises
  - Which may include, but is not limited to, the exercise plan, the AAR, and any additional documentation used by the facility to support the exercise
- Ask to see the documentation of the facility's efforts to identify a full-scale community-based exercise if they did not participate in one
  - i.e., Date, personnel, agencies contacted, and the reasons for the inability to participate in a community-based exercise

- Request documentation of the facility's analysis and response and how the facility updated its EP based on this analysis

E-tag Number	E-tag Title
E - 0040	Training and Testing—Patient Orientation
<p><b>Requirement:</b> The facility must provide initial emergency training and annual review for patients that is based on all of the following:</p> <ul style="list-style-type: none"> <li>• EP plan</li> <li>• Risk assessment</li> <li>• P&amp;Ps</li> <li>• Communication Plan</li> </ul>	
<p><b>Survey Process—The surveyor will:</b></p> <ul style="list-style-type: none"> <li>• Verify the facility has implemented their P&amp;Ps and are actively providing orientation and training of all their patients for the EP program</li> <li>• Interview a patient and ask him or her to describe their orientation to the facility in terms of emergency protocols and procedures</li> </ul>	

E-tag Number	E-tag Title
E - 0042	Integrated Health Systems
<p><b>Requirement:</b> If the facility is part of a healthcare system consisting of multiple, separately-certified healthcare facilities that elect to have a unified and integrated EP program, the facility may choose to participate in the healthcare system's coordinated EP program. If elected, the unified and integrated EP program must be able to do/demonstrate all of the following:</p> <ul style="list-style-type: none"> <li>• Demonstrate that each separately-certified facility within the system actively participated in the development of the unified and integrated EP program</li> <li>• That it has been developed and maintained in a manner that takes into account each separately certified facility's unique circumstances, patient populations, and services offered</li> <li>• Demonstrate that each separately-certified facility is capable of actively using the unified and integrated EP program and is in compliance with the program</li> <li>• Include a unified and integrated EP program that meets all of the requirements specified within this document</li> <li>• Be based on and include the following: <ul style="list-style-type: none"> <li>– A documented community-based risk assessment, using an all-hazards approach</li> <li>– A documented individual facility-based risk assessment for each separately certified facility within the health system, using an all-hazards approach</li> <li>– Integrated P&amp;Ps that meet the requirements set forth in this document</li> <li>– A coordinated communication plan</li> <li>– Training and testing programs that meet the requirements set forth in this document</li> </ul> </li> </ul>	

**Survey Process—The surveyor will:**

- Verify whether or not the facility has opted to be part of its healthcare system's unified and integrated EP program
- Verify by asking to see documentation of its inclusion in the program
- Ask to see documentation that verifies the facility within the system was actively involved in the development of the unified EP program
- Ask to see documentation that verifies the facility was actively involved in the annual reviews of the program requirements and any program updates
- Ask to see a copy of the entire integrated and unified EP program and all required components (emergency plan, policies and procedures, communication plan, training and testing program)
- Ask facility leadership to describe how the unified and integrated EP program is updated based on changes within the healthcare system such as when facilities enter or leave the system

**Disclaimer:** This is a worksheet to assist the survey process and is not a comprehensive listing of requirements under the Emergency Planning requirements.

This material was prepared by HSAG: ESRD Network 15, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy nor imply endorsement by the U.S. Government. CO-ESRD-15A125-05022019-01