

Emergency Preparedness: CMS NFPA Crosswalk

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CMS Emergency Preparedness CoP LTC Facilities	CMS EP CoP Reference	NFPA 1600	NFPA 99
October 2016	483.73	2016	2012 ed.
Require both an emergency preparedness program and an emergency preparedness plan.	483.73		12.2.2.3 12.2.3.2 12.4.1 12.5.1
Emergency Plan			
Comply with all applicable Federal, State, and local emergency preparedness requirements. The emergency plan must be reviewed and updated annually.	483.73		12.2.3.3 12.4.1.2 12.5.3.6.1
The emergency plan must be based on and include a documented facility based and community based risk assessment utilizing an all hazards approach including missing residents.	483.73 (a) 1	4.4.2 5.1.3 5.1.4 5.2.1	12.5.2 12.5.3.1
The emergency plan includes strategies for addressing emergency events identified by the risk assessment.	483.73 (a) 2	5.1.5 6.6.2	12.5.2 12.5.3.1
The emergency plan must address the resident population including but not limited to, persons at risk, the types of services that the facility would be able to provide in an emergency; continuity of operations, including delegations of authority and succession plans.	483.73 (a) 3	5.2.2.2	12.2.2.3 12.5.3.1.3 (1) 12.5.3.2.3 (11) 12.5.3.3.6.4
Have a process for ensuring cooperation and collaboration with local, tribal, regional, state, or federal emergency preparedness officials' efforts to maintain an integrated response during a disaster or emergency situation, including documentation of the facility efforts to contact such officials and, when applicable, its participation in collaborative and cooperative planning efforts.	483.73 (a) 4		12.2.3.3 12.5.3.3.6.1 (2) (6)
Policies and Procedures			
Develop and implement emergency preparedness policies and procedures based on the emergency plan and communications plan. The policies and procedures must be reviewed and updated at least annually.	483.73 (b)		12.5.3.3.5 12.5.3.3.6.1 12.5.3.6.1
The policies and procedures must address (1) the provision of subsistence needs for staff and residents whether they evacuate or shelter in place including but not limited to (i) food, water, medical and pharmaceutical supplies (ii) alternate sources of energy to maintain: (A) temperatures to protect resident 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.	483.73 (b) 1 i-ii A-D		12.5.3.3.6.2 12.5.3.3.6.4 (7) (8) 12.5.3.3.6.5 12.5.3.3.6.6
Develops a system to track the location of on-duty staff and sheltered residents in the facility's care during an emergency. If on-duty staff or sheltered residents are relocated during the emergency the LTC facility must document the specific name and location of the receiving facility or other location.	483.73 (b) 2		12.5.3.3.6.4 (9)
Have policies and procedures in place to ensure the safe evacuation from the facility, which includes consideration of care and treatment needs of evacuees; staff responsibilities; transportation; identification of evacuation locations; and primary and alternate means of communication with external sources of assistance.	483.73 (b) 3		12.5.3.3.6.1 (3) (4) 12.5.3.3.6.2 (7) 12.5.3.3.6.4 (1) (6) (7) (8) (9) 12.5.3.3.6.8
Have a means to shelter in place for residents, staff, and volunteers who remain in the facility.	483.73 (b) 4		12.5.3.3.3 12.5.3.3.6
Have a system of medical documentation that preserves resident information, protects the confidentiality of resident information, and secures and maintains availability of records.	483.73 (b) 5	4.7.2	12.5.3.3.6.1 (4)
Have policies and procedures in place to address the use of volunteers in an emergency and other emergency staffing strategies,	483.73 (b) 6	6.9.1.2	12.5.3.4.5

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including the process and role for integration of state or federally designated health care professionals to address surge needs during an emergency.			
The development of arrangements with other facilities and providers to receive residents in the event of limitations or cessation of operations to maintain the continuity of services to residents.	483.73 (b) 7	6.9.1.2	
Policies and procedures to address the role of the LTC facility under a waiver declared by the Secretary, in accordance with section 1135 of the Act, for the provision of care and treatment at an alternate care site (ACS) identified by emergency management officials.	483.73 (b) 8		
Communication Plan			
Be required to develop and maintain an emergency preparedness communication plan that complies with local, state, and federal law and required to review and update the communication plan at least annually.	488.73 (c)	6.4	12.5.3.3.6.1
As part of its communication plan include in its plan the names and contact information for staff; entities providing services under arrangement; residents' physicians; other LTC facilities; and volunteers.	488.73 (c) 1 i-iv	6.4.1	
Require contact information for federal, state, tribal, regional, or local emergency preparedness staff and other sources of assistance.	488.73 (c) 2 i-iv	6.4.1	12.5.3.3.6.1 (6)
Include primary and alternate means for communicating with LTC facility staff and federal, state, tribal, regional, and local emergency management agencies.	488.73 (c) 3 i-ii	6.4.1	12.5.3.3.6.1
Include a method for sharing information and medical documentation for residents under the LTC facility's care, as necessary, with other health care providers to maintain continuity of care.	488.73 (c) 4		12.5.3.3.6.1 (4)
Have a means, in the event of an evacuation, to release resident information as permitted under 45 CFR 164.510.	488.73 (c) 5	6.4.1	12.5.3.3.6.1 (4)
Have a 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).	488.73 (c) 6		12.5.3.3.6.1 (4)
Have a means of providing information about the LTC facility's occupancy, needs, and its ability to provide assistance, to the authority having jurisdiction or the Incident Command Center, or designee.	488.73 (c) 7		12.5.3.3.6.1 (2) (6)
Have a method for sharing information from the emergency plan that the facility has determined is appropriate with residents and their families or representatives.	488.73 (c) 8		
Training and Testing			
Develop and maintain an emergency preparedness training and testing program based on the emergency plan, risk assessment, policies and procedures, and communication plan. The training and testing program must be reviewed and updated at least annually.	488.73 (d)	7.1	12.3.3.10
Provide initial training in emergency preparedness policies and procedures to all new and existing staff, individuals providing on-site services under arrangement and volunteers consistent with their expected roles. Provide this training annually and maintain documentation of all emergency preparedness training along with demonstration of staff knowledge of emergency procedures.	488.73 (d) 1 i-iv	7.1	12.3.3.10
Conduct exercises to test the emergency plan at least annually.	488.73 (d) 2	8.1.1 8.5.1	12.3.3.10
Participate in a full scale exercise that is community-based or when community based exercise is not available, individual, facility-based.	488.73 (d) 2 i		
If the facility experiences an actual natural or man-made emergency that requires activation of the emergency plan, the facility 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.	488.73 (d) 2 ii		
Conduct a second exercise that may include but is not limited to a second full-scale exercise that is 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 the emergency plan.	488.73 (d) 2 ii A-B		12.3.3.2
Analyze the response to and maintain documentation of all drills, tabletop exercises, and emergency events and revise the facility emergency plan as needed.	488.73 (d) 2 iii		12.3.3.2
Emergency and Standby Power Systems			
The LTC facility must implement emergency and standby power systems based on the emergency plan and the policies and procedures.	488.73 (e)		12.3.3.2

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Emergency generator location. The generator must be located in accordance with the location requirements found in the Health Care Facilities Code, Life Safety Code, and NFPA 110, when a new structure is built or when an existing structure or building is renovated.	488.73 (e) 1		Section 3-4
Emergency generator inspection and testing. The facility must implement emergency power system inspection and testing requirements found in the Health Care Facilities Code, NFPA 110, and the Life Safety Code.	488.73 (e) 2		
Emergency Generator Fuel. LTC facilities that maintain an onsite fuel source to power emergency generators must have a plan for how it will keep emergency power systems operational during the emergency, unless it evacuates.	488.73 (e) 3		
Integrated Healthcare Systems			
If the facility is part of a healthcare system consisting of multiple separately certified healthcare facilities that elects to have a unified and integrated emergency preparedness program, the facility may choose to participate in such a program.	488.73 (f)		
Demonstrate that each separately certified facility within the system actively participated in the development of the unified and integrated emergency preparedness program.	488.73 (f) 1		
The unified and integrated emergency preparedness program must be developed and maintained in a manner that takes into account each separately certified facility's unique circumstances, resident populations and services offered.	488.73 (f) 2		
Demonstrate that each separately certified facility is capable of actively using the unified and integrated emergency preparedness program and is in compliance.	488.73 (f) 3		
Include a unified and integrated emergency plan that meets all standards of paragraphs (a) (2), (3), and (4) of this section.	488.73 (f) 4		
The plan must be based on a community risk assessment using an all hazards approach with each separately certified facility within the health system having a documented individual facility based risk assessment.	488.73 (f) 4 i		
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.	488.73 (f) 5		