

Essential Components of Emergency Management Plans at Community Health Centers

Crosswalk of Plan Elements

Plan Components	Bureau of Primary Health Care Policy Information Notice 2007-15	Joint Commission	Accreditation Association for Ambulatory Health Care (AAAHC)	National Incident Management System (NIMS)
Health centers will have an emergency management plan	Plans and procedures for emergency management must be integrated into a health center's risk management approach to assure that suitable guidelines are established and followed so that it can respond effectively and appropriately to an emergency (page 4).	EM.02.01.01: The organization has a written Emergency Management Plan.	7.II.F: The organization has a comprehensive written emergency and disaster preparedness plan to address internal and external emergencies, including participating in community health emergency or disaster preparedness, when applicable. The written plan must include a provision for the safe evacuation of individuals during an emergency, especially individuals who are at greater risk.	2008/2009 Objective 3: Revise and update emergency operations plans (EOPs), standard operating procedures (SOPs), and standard operating guidelines (SOGs) to incorporate NIMS and National Response Framework (NRF) components, principles and policies, to include planning, training, response, exercises, equipment, evaluation, and corrective action.
Plan and organization are NIMS compliant	While it is not a requirement for health centers at this time, compliance with NIMS is strongly encouraged.			2008/2009 Objective 1: Adopt NIMS throughout the healthcare organization including all appropriate departments and business units. 2008/2009 Objective 2: Ensure Federal Preparedness awards support NIMS Implementation (in accordance with the eligibility and allowable uses of the awards).
Plan should be based on a Hazard Vulnerability Analysis (HVA)	Health centers should initiate emergency management planning by conducting a risk assessment such as a Hazard Vulnerability Analysis (page 5) Health centers are encouraged to participate in community level risk assessments and integrate their own risk assessment with the local community (page 5).	EM.01.01.01 / EP 2: The organization identifies potential emergencies and the direct and indirect effects that these emergencies may have on the need for its service or its ability to provide these services. Note: some organizations refer to this process as a hazard vulnerability analysis.	3.F: A program is maintained to assess and, where necessary, reduce risks associated with physical hazards, such as ergonomic exposures, violence at the workplace and external physical threats such as terrorism.	

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Plan should address the four phases of emergency management	<p>The EMP should address the four phases of emergency management –</p> <p>Mitigation activities lessen the severity and impact a potential disaster or emergency might have on a health center’s operation (page 5)</p> <p>Preparedness activities build capacity and identify resources that may be used should a disaster or emergency occur (page 5).</p> <p>Response refers to the actual emergency and controls the negative effects of emergency situations (page 5).</p> <p>Recovery actions begin almost concurrently with response activities and are directed at restoring essential services and resuming normal operations. Recovery planning is a critical aspect to sustaining the long-term viability of the health center (page 5).</p>	<p>EM.01.01.01 / EP 5: The organization uses its prioritized emergencies as a basis for defining mitigation activities (that is, activities designed to reduce the risk of and potential damage from an emergency).</p> <p>EM.01.01.01 / EP 6: The organization uses its prioritized emergencies as a basis for defining the preparedness activities that will organize and mobilize essential resources.</p> <p>EM.02.01.01 / EP 2: The organization has a written Emergency Management Plan that describes the response procedures to follow when emergencies occur.</p> <p>EM.02.01.01 / EP 4: The organization has a written Emergency Management Plan that describes the recovery strategies, actions, and individual responsibilities necessary to restore the organization’s care, treatment, or services after an emergency.</p>		2008/2009 Objective 3: Revise and update emergency operations plans (EOPs), standard operating procedures (SOPs), and standard operating guidelines (SOGs) to incorporate NIMS and National Response Framework (NRF) components, principles and policies, to include planning, training, response, exercises, equipment, evaluation, and corrective action.
Plan should be developed with a multi-disciplinary team	It is essential that the EMP be developed with an interdisciplinary approach involving all departments within the organization as the entire organization will be affected and play a role in an emergency. The Governing Board, senior management, and the clinical staff should have a lead role in the development of the EMP, and the Governing Board should approve the final EMP and any revisions to it (page 5).	EM.02.01.01 / EP 1: The organization’s leaders participate in the development of the Emergency Management Plan.		

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Plan should address patient surge	<p>Health centers should describe their approach to responding to emergencies that would suddenly and significantly affect the demand for the organization’s services or its ability to provide those services (page 6).</p> <p>The EMP should describe if and how health centers will continue to provide primary health care services to current and surge patients to the extent possible during an emergency, including consideration for continuity of services for contracted services as well as those services that are directly provided by the health center (page 7).</p>	EM.02.02.11: As part of its Emergency Management Plan, the [organization] prepares for how it will manage [patient]s during emergencies.		
Plan addresses resource management	<p>A health center’s EMP should address the following components as appropriate, considering the role of the health center in the local and/or State plans and what is most appropriate and necessary for the health center to respond to an emergency (page 6):</p> <ul style="list-style-type: none"> o Medical and non-medical supplies o Pharmaceuticals 	<p>EM.02.02.03: As part of its Emergency Management Plan, the [organization] prepares for how it will management resources and assets during emergencies. Note: All organizations are required to respond to a patient’s immediate care and safety needs if an emergency occurs with patients on site.</p> <p>EM.02.02.03 / EP 1: For organizations that plan to provide service during an emergency: The Emergency Management Plan describes how the organization will obtain and replenish medications and related supplies that will be required in response to an emergency.</p>	8.C: The organization has the necessary personnel, equipment and procedures to deliver safe care, and to handle medical and other emergencies that may arise.	

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Plan addresses resource management (con't)		<p>EM.02.02.03 / EP 2: For organizations that plan to provide service during an emergency: The Emergency Management Plan describes how the organization will obtain and replenish medical supplies that will be required to an emergency.</p> <p>EM.02.02.03 / EP 3: For organizations that plan to provide service during an emergency: The Emergency Management Plan describes how the organization will obtain and replenish non-medical supplies that will be required to an emergency.</p> <p>EM.02.02.03 / EP 12: For organizations that plan to provide service during an emergency: The organization implements the components of its Emergency Management Plan that require advance preparation to provide resources and assets during an emergency.</p>		
Plan should include method of structuring staff during emergency response	Health centers should have an all-hazards command structure within the organization, such as a standard ICS, that links with the community's command structure for emergencies... These policies and procedures should be integrated with the health center's EMP (page 9).	<p>EM.02.02.07: As part of its Emergency Management Plan, the [organization] prepares for how it will manage staff during an emergency.</p> <p>EM.02.02.07 / EP 1: The Emergency Management Plan describes the following: How the organization will manage staff during emergencies.</p> <p>EM.02.02.07 / EP 2: The Emergency Management Plan describes the following: The roles and responsibilities of staff during an emergency.</p>	8.C: The organization has the necessary personnel , equipment and procedures to deliver safe care, and to handle medical and other emergencies that may arise.	<p>2008/2009 Objective 11: Manage all emergency incidents, exercises, and preplanned (recurring/special events) in accordance with ICS organizational structures, doctrine, and procedures, as defined in NIMS.</p> <p>2008/20096 Objective 12: ICS implementation must include the consistent application of Incident Action Planning (IAP) and common communications plans, as appropriate.</p>

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		<p>EM.02.02.07 / EP 3: The Emergency Management Plan describes the following: The process for assigning staff to all essential staff functions.</p> <p>EM.02.02.07 / EP 4: The Emergency Management Plan identifies individual(s) to whom staff report in emergencies.</p>		
Plan addresses the use of volunteer licensed independent practitioners		<p>EM.02.02.13: During disasters, the [organization] may grant disaster privileges to volunteer licensed independent practitioners.</p> <p>EM.02.02.15: During disasters, the [organization] may assign disaster responsibilities to volunteer practitioners who are not licensed independent practitioners, but who are required by law and regulation to have a license, certification, or registration. (Note: Refer to the 2009 Standards for Ambulatory Care for all of the required Elements of Performance).</p>		
Plan includes detailed communication section	<p>The EMP should identify the health center’s policies and procedures for communicating with internal (staff, patients, special populations, Governing Board) and external (appropriate Federal, State, local, and Tribal agencies) stakeholders as well as with the public during emergencies (page 8).</p> <p>As part of the EMP, the health center should develop strategies for communicating with patients during an emergency including procedures to make patients aware of any alternate primary care service arrangements that may be available in the event the health center is closed. (page 8).</p>	<p>EM.02.02.01: As part of its Emergency Management Plan, the [organization] prepares for how it will communicate during emergencies.</p> <p>EM.02.02.01 / EP 1: The Emergency Management Plan describes how staff will be notified that emergency response procedures have been initiated.</p> <p>EM.02.02.01 / EP 3: The Emergency Management Plan describes how the organization will notify external authorities that emergency response measures have been initiated.</p>		<p>2008/2009 Objective 9: Apply common and consistent terminology as promoted in NIMS, including the establishment of plain language communication standards.</p> <p>2008 / 2009 Objective 13: Adopt the principle of Public Information, facilitated by the use of the Joint Information System (JIS) and Joint Information Center (JIC) during an incident or event.</p> <p>2008 /2009 Objective 14: Ensure that Public Information procedures and processes gather, verify, coordinate, and disseminate information during an incident or event.</p>
Plan addresses	The health center’s EMP should identify	EM.02.02.01 / EP 14: The organization		2008/2009 Objective 8: Promote and ensure

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communication systems	backup (also referred to as redundant) communication systems in the event that standard communication systems are unavailable and include these in its EMP (page 9).	establishes backup communication systems or technologies for use in the event that internal or external systems fail during an emergency. EM.02.02.01 / EP 17: The organization implements the components of its Emergency Management Plan that require advance preparation to support communications during an emergency.		that equipment, communication, and data interoperability are incorporated into the healthcare organization's acquisition programs. 2008/2009 Objective 10: Utilize systems, tools, and processes that facilitate the collection and distribution of consistent and accurate information during an incident or event.
Plan has process for activating and deactivating the plan	It (EMP) should describe under what circumstances and how, when, and by whom the EMP is activated, procedures for notifying staff when it has been initiated, and the roles and responsibilities of all personal responding to the emergency (page 6).	EM.02.01.01 / EP 5: The Emergency Management Plan describes the processes for initiating and terminating the organization's response and recovery phases of the emergency, including under what circumstances these phases are activated. EM.02.01.01 / EP 6: The Emergency Management Plan identifies the individual(s) responsible for activating the response and recovery phases of emergency response.		
Plan includes provisions for staff training	Health centers should provide ongoing training on emergency management and the implementation of the EMP to employees at all levels of the organization (page 7).		8.D: The organization provides documented periodic instruction of all personnel in the proper use of safety, emergency, and fire-extinguishing equipment.	2008/2009 Objective 5: Identify the appropriate personnel to complete ICS-100, ICS-200 and IS-700, or equivalent courses. 2008/2009 Objective 6: Identify appropriate personnel to complete IS-800 or an equivalent course. 2008/2009 Objective 7: Promote NIMS concepts and principles into all organization-related training and exercises. Demonstrate the use of NIMS principles and ICS management structure in training and exercises.
Plan includes a process for conducting drills and exercises	Health centers should continually test and evaluate the effectiveness of their EMP and make adjustments as necessary (page 7).	EM.03.01.03: The [organization] evaluates the effectiveness of its Emergency Management Plan.	8.E: The organization requires at least one (1) drill each calendar quarter of the internal emergency and disaster preparedness plan.	2008/2009 Objective 3: Revise and update emergency operations plans (EOPs), standard operating procedures (SOPs), and standard

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	<p>The frequency and methods of testing and evaluation (table top drills, functional exercises, etc.) should be determined by the organization, but should be at least on an annual basis (page 7).</p>	<p>EM.03.01.03 / EP 1: As an emergency response exercise, the organization activates its Emergency Management Plan twice a year at each site included in the Plan. Note 3: Tabletop exercises, though useful, are not acceptable substitutes for these exercises.</p> <p>EM.03.01.03 / EP 2: For each site of the organization that offers emergency services or is a community-designated disaster receiving station, at least one of the organization's two emergency response exercises includes an influx of simulated patients.</p> <p>EM.03.01.03 / EP 5: Emergency response exercises incorporate likely disaster scenarios that allow the organization to evaluate its handling of communications, resources and assets, security, staff, utilities, and patients.</p> <p>EM.03.01.03 / EP 13: Representatives from administrative, support, and clinical services participate in the evaluation of all emergency response exercises and all responses to actual emergencies.</p> <p>EM.03.01.03 / EP 14: The evaluation of all emergency response exercises and all responses to actual emergencies includes the identification of deficiencies and opportunities for improvement. This evaluation is documented.</p> <p>EM.03.01.03 / EP 16: The organization modifies its Emergency Management Plan based on evaluations of emergency response</p>	<p>One (1) of the annual drills must be a documented cardiopulmonary resuscitation (CPR) technique drill, as appropriate to the organization. The organization must complete a written evaluation of each drill, and promptly implement any corrections or modifications to the plan.</p>	<p>operating guidelines (SOGs) to incorporate NIMS and National Response Framework (NRF) components, principles and policies), to include planning, training, response, exercises, equipment, evaluation, and corrective action.</p> <p>2008/2009 Objective 7: Promote NIMS concepts and principles into all organization-related training and exercises. Demonstrate the use of NIMS principles and ICS management structure in training and exercises.</p>
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		<p>exercises and responses to actual emergencies.</p> <p>EM.03.01.03 / EP 17: Subsequent emergency response exercises reflect modifications and interim measures as described in the modified Emergency Management Plan.</p>		
Plan includes process for integrating health center plan and response with community	<p>Many State and/or local EMPs are already in place and, to the extent possible, a health center's EMP should be aligned and integrated with these emergency plans. To maximize integration, health centers are encouraged to connect with any ongoing efforts in these areas before developing and implementing their EMP (page 6).</p>	EM.01.01.01 / EP 4: The organization determines what its role will be, if any, in the community response plan.		2008/2009 Objective 4: Participate in interagency mutual aid and/or assistance agreements, to include agreements with public and private sector and nongovernmental organizations.
Plan assures access for special populations	<p>Health centers should plan for assuring access for special populations, such as migrant and seasonal farmworkers, homeless people, and residents of public housing (page 7).</p> <p>In developing the EMP, health centers are encouraged to also consider other populations such as non-English speaking individuals, children including those with special needs and those served at school-based health centers, individuals living with HIV disease, and disabled and elderly individuals (page 7).</p>			
Plan addresses continuity of operations	<p>The EMP should describe if and how health centers will continue to provide primary health care services to current and surge patients to the extent possible during an emergency, including consideration for continuity of services for contracted services as well as those services that are directly provided by the health center. The EMP should evaluate a health center's ability to maintain normal operations and describe the</p>	EM.02.02.11 / EP 1: The Emergency Management Plan describes how the organization will manage activities related to patient care, treatment, or services. Note: Activities related to patient care, treatment, or services might include scheduling, modifying, or discontinuing services; controlling information about patients; making referrals; transporting patients; and providing security.		

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	circumstances that must be met for health center to discontinue non-emergency primary care services or cease operations for a period of time, especially if staffing levels decrease (page 7).			
Plan includes safety and security measures	<p>A health center’s EMP should address the following components as appropriate, considering the role of the health center in the local and/or State plans and what is most appropriate and necessary for the health center to respond to an emergency (page 6):</p> <ul style="list-style-type: none"> ○ Security ○ Decontamination ○ Isolation 	<p>EM.02.02.05: As part of its Emergency Management Plan, the [organization] prepares for how it will manage security and safety during an emergency.</p> <p>EM.02.02.05 /EP 1: The Emergency Management Plan describes how internal security and safety will be provided during an emergency.</p> <p>EM.02.02.05 / EP 5: For organizations that plan to provide services during an emergency: The Emergency Management Plan describes how the organization will provide for radioactive, biological, and chemical isolation and decontamination.</p> <p>EM.02.02.05 / EP10: The organization implements the components of its Emergency Management Plan that require advance preparation to support internal security and safety during an emergency.</p>		
Plan address staff preparedness	The plan should also help staff prepare their families for emergencies – if staff are prepared at home, they are more likely to carry out vital responsibilities and duties at work in the health center (page 6).			

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