Toto, we’re not in Kansas anymore...

Emergency Preparedness is a vital part of ensuring your residents and staff remain safe when emergency or natural disaster situations arise. If you want to prevent your facility, staff and residents from being swept off to Oz, like Dorothy or Toto, make sure that everyone is prepared on how to react in all possible emergency/disaster situations that may arise.

Initially, you may think that there are minimal risks of emergency or natural disasters that can occur in Idaho; however, you would be mistaken, as Idaho is susceptible to several types of natural disasters. Prior to developing a emergency preparedness plan, brainstorm all potential emergency situations that could arise in your area. Think about the following areas/types of incidents:

- Natural Disasters: earthquakes, wildfire, flooding, avalanche, accumulation of snow, landslide, volcanic explosion/ash fall, infectious diseases, food/water contamination.
- Technological Disasters: dam failure, power outage/failure, urban fire, release of hazardous materials, plane crashing near or on building, nuclear meltdown.
- Human Caused Disasters: wildfire, bomb threat, civil disturbances, terrorism, hostage situation, car driven into your facility, mass shooting.

Can you think of other natural, technological or human caused disasters that may impact your facility?

Once you have determined what emergency or disaster situations you need to plan for, begin developing an appropriate comprehensive emergency preparedness plan. The plan needs to direct your staff and residents on how to proceed, if an event occurs. Review the following websites for assistance in developing your disaster plans:

- [http://healthandwelfare.idaho.gov/Portals/0/Medical/LicensingCertification/SC_EPChecklist_Provider.pdf](http://healthandwelfare.idaho.gov/Portals/0/Medical/LicensingCertification/SC_EPChecklist_Provider.pdf)
Emergency Preparedness Cont...

As you develop your emergency preparedness plans consider the following:

◊ Where/Who are the local community supports in the event of a natural disaster? Besides the following link: [http://disastercenter.com/idaho/idaho.htm](http://disastercenter.com/idaho/idaho.htm), your local public health office is a great resource for emergency preparedness planning.

◊ In what instances will residents need to be evacuated from the building versus staying at the facility?

◊ In the event residents need to be evacuated, where will they go? You may need to consider several options. If the disaster just affects your building, then a close option may be appropriate. If the disaster affects your regional area, then a evacuation location outside of your regional location would be appropriate. In other words, it is important to have emergency relocation agreements locally, regionally and outside of the region.

◊ How will you safely transport the residents to the evacuation locations?

◊ How will you provide staff to care for and supervise the residents when they are evacuated?

◊ In the event residents remain in the building, how will you ensure the residents are safe during those times. Make sure that if the fire alarm system goes down for 4 or more hours, that a fire watch is put in place. Also ensure that you have enough food, power, clothing and water available during the emergency disaster.

Remember to review your policies and procedures for fire, explosion, flood, earthquake, high wind and/or other emergencies with a critical eye, to ensure they will direct your staff and residents on how to respond in the event of an emergency. You can also incorporate those policies and procedures that you have into your comprehensive emergency preparedness plan.

Submission of Plan of Correction (POC) & Evidence of Resolution (EOR)

Going through the survey process can be overwhelming, especially during the exit conference when your deficiencies are being reviewed. When you receive either a core or non-core (punch list) deficiency, you are required to submit information back to Licensing and Certification (L & C). It maybe unclear at the exit, what you are required to send to us (L & C), as we often receive POCs and EORS that do not fully meet the criteria that is expected.

The criteria for submitting POCs and EORs are laid out in the IDAPA 16.03.22 Idaho Residential Care or Assisted Living facilities rules.

1) Plan of Correction Requirements:

**130.08. Plan of Correction for Core Issue Deficiencies.** The facility must develop a plan of correction and return an acceptable plan of correction to the Licensing and Survey Agency, for all core-issue deficiencies, within ten (10) calendar days of receipt of the Statement of Deficiencies and Plan of Correction form.

An acceptable plan of correction must include:

a. A plan to assure correction of each deficient practice and to assure ongoing compliance;
b. Describe how and the frequency that the corrective actions will be monitored to assure that each deficient practice is corrected and will not recur, such as what program will be put into place to monitor the continued effectiveness of the systemic change;

c. State the completion date for correcting each deficiency, except in unusual circumstances, and only with the written approval of the Licensing and Survey Agency. No correction date may be more than sixty (60) days from the inspection exit date as printed on the “Statement of Deficiencies and Plan of Correction” form; and

d. The administrator’s signature and the date submitted.

When you receive your Statement of Deficiencies (2567), you will receive a letter that restates the above in 5 questions. The plan that you submit, must answer all of those questions. If you want your POC to be posted to the website with your Statement of Deficiencies, please include it on the right side of the Statement of Deficiencies, without using any names (i.e., no resident names, no staff names, no family member names, no agency names, etc.). If you submit your POC and it includes names, it will not be posted on the website. Additionally, if you submit your POC on a separate piece of paper (not part of the Statement of Deficiencies) it will not be posted with your survey results.

2. Evidence of Resolution Requirements:

130.09. Evidence of Resolution for Non-Core Deficiencies. The facility must provide evidence of resolution of non-core issues to the Licensing and Survey Agency, within thirty (30) calendar days of the exit conference. The facility may show evidence of resolution by providing receipts, pictures, and completed policies, training, schedules, and other records.

When you receive your non-core deficiencies during the exit conference, you have 30 days from that date, to submit evidence of resolution. When you submit your EOR, make sure to send the actual documentation showing the non-core deficiency has been corrected. Your EOR submission can explain what you submitted, but it should never just be a plan without the supporting evidence. If you have questions about what to submit, please call our office and talk with either the team leader of your survey or the office person to receive some guidance as to what to submit.

When the facility submits appropriate POCs and EORs, it helps us review the information more quickly and helps you resolve the survey findings in a more timely manner. If we can work together to make this process more streamlined, it will beneficial to us all.

**NO MATTER HOW LONG THE WINTER, SPRING IS SURE TO FOLLOW.** - Proverb