

Fall Focus Area: Emergency Communications

Communication in a disaster or emergency is often the number one area for improvement. The time to prepare, test, and train with your emergency communication modes and equipment is now.

Who will you contact?

Be sure to include and update information for all contacts you would need during an emergency or a disaster in your emergency compunications plan. This includes internal contacts such as those within your facility or organization and external contacts for those outside of your facility or organization. See the table below for examples:

Internal	External
Related to your organization/staff/residents	Support partners/agencies/businesses who may be needed during a disaster
Staff (on and off duty)	Your County EMA
Residents	Your Healthcare Coalition
Residents' families	GHCA Council Coordinator
Residents' Physicians/Care Providers	Local Public Health
Volunteers	Other LTC Facilities (MOUs, etc.)
• OTHERS?	DCH Healthcare Facility Regulation Division
	Outside Vendors (critical service providers)
	LTC Ombudsman
	Local Fire/EMS Services, Law Enforcement
	OTHERS?

When will you contact them?

After updating the contact information in your emergency communication plan, create a priority list of who to contact first, then second, and so on. This can vary based on the type of emergency so try to keep the order the same for broad issues like a power outage. Creating a one page list (and keeping it accessible and updated!) of the first five people to contact can reduce the time it takes for the first contact to be made.

How will you contact them?

For each contact listed, include multiple modes of communication (e.g. phone, email, fax, satellite phone, social media messengers, etc.). For vendors or service providers, include a 24-hour emergency number in your plan for

The Department of Homeland Security's Cybersecurity and Infrastructure Security Agency (CISA) has priority telecommunications services available which allows subscribers to communicate when networks are degraded or emergencies

after-hours.

All communication equipment used or referenced within the plan should be tested and trained on at least annually. For example, if your alternate mode of communication within the facility is walkie-talkies, we recommend holding a quarterly training session with all staff (across all shifts) expected to use a walkie-talkie during an emergency.

congested. These services have been utilized for multiple disasters and reported a 100% call success rate when used during Hurricane Matthew (2016) for over 2,300 calls.

See below for resources on multiple communications platforms:

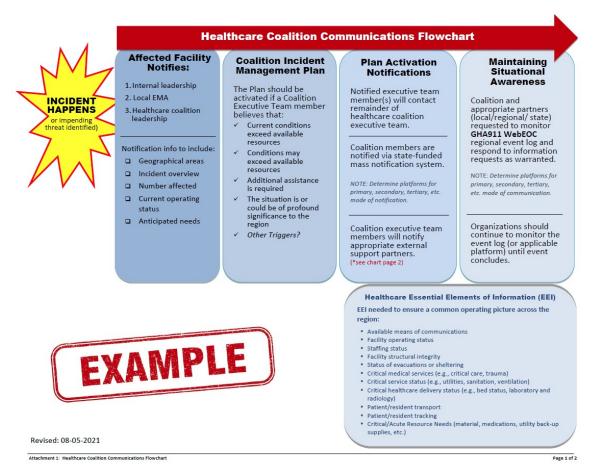
- Government Emergency
 Telecommunications
 Service (GETS)
- <u>Wireless Priority Service</u> (<u>WPS</u>)
- Southern Linc
- NOAA Weather Radios
- GHA911 WebEOC
- Everbridge
- Amateur Radio Emergency Service (ARES)

What information will you share?

What information you share will depend on who you are contacting and what issues you are having during an emergency. It is important to include guidelines on what information is able to be shared with who within your communications plan. HIPAA rules are still in place even during a disaster but some rules are loosened in the event of an evacuation. Read our CMS Appendix Z related requirements section below for more information.

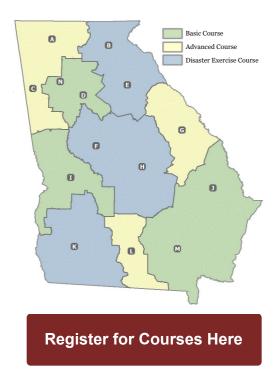
Healthcare Coalition Emergency Communications Flowchart

Healthcare coalitions each have a regional emergency communication flowchart. These flowcharts, a generic example is provided below, list who to contact after an incident occurs and explains the process the healthcare coalition will utilize in order to assist your facility. The Essential Elements of Information (EEIs), in the bottom right corner, are helpful prompts to remember to gather as much information as possible and provide it to your emergency contacts. A downloadable version of the flowchart is available here.



Upcoming LTC Emergency Preparedness Courses

Year 4 includes three (3) offerings each of the Basic Course, Advanced Course, and a new Disaster Exercise Course. All courses are currently scheduled for in-person attendance, subject to change due to COVID-19. Refer to the map below to see what courses are offered in your area and click the button to register for courses.



LONG TERM CARE INFECTIOUS DISEASE EDUCATIONAL PROGRAM

The University of Georgia's, Institute for Disaster Management has a new educational program funded through CMS Civil Money Penalty Funds. This program will include two courses on infectious diseases for certified long term care facility staff over the next three years.

This year, the Infectious Disease Foundations Course will be offered 14 times, once per healthcare coalition, from October 2021 - May 2022.

Click the button below for more course information and to register for courses.

Register for Courses Here

CMS Appendix Z Related Requirements

Emergency Communications Plan: E-0029 - 0035

Facilities must **develop and maintain an emergency communication plan** that complies with Federal, State, and local laws and must be **reviewed and updated at least annually**. The communication plan must include all of the following:

Names and/or contact information for:

- Facility staff
- Entities providing services under arrangement (i.e. vendors/service providers)
- Residents' physicians/care providers
- Other facility/facilities of the same type (i.e. sister facilities or others under arrangement)
- Volunteers
- Federal, State, tribal, regional, and local emergency preparedness staff
- The State Licensing and Certification Agency (i.e. Georgia Department of Community Health Healthcare Facility Regulation Division)
- The Office of the State Long Term Care Ombudsman
- Other sources of assistance

Primary and alternate means for communicating with:

- Facility staff
- Federal, State, tribal, regional, and local emergency management agencies

Methods or means to accomplish:

• Sharing information and medical documentation for residents under the facility's care, as necessary, with other health providers

- to maintain the continuity of care
- In the event of an evacuation, releasing patient information as permitted under 45 CFR 164.510(b)(1)(ii)
 - Commonly known as the HIPAA Privacy Rule, this regulation establishes requirements for disclosing patient information to assist in disaster relief efforts
- Providing information about the facility's occupancy, needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee
- Sharing information from the emergency plan, that the facility has determined is appropriate, with residents and their families or representatives

NOTES:

- Facilities which utilize electronic data storage should be able to provide evidence of data back-up with hard copies or demonstrate capability to reproduce contact lists or access this data during emergencies.
- Contact information contained in the communication plan must be accurate and current.
- Individual contacts for emergency management agencies are not required. For instance, a state emergency management agency may have a specific phone line or contact method not specific to an individual person.
- It is expected that facilities would consider pagers, cellular phones, walkie-talkies, weather radios, Ham radio, and satellite telephone communication systems as alternate communication methods.
- The communication plan should include procedures regarding when and how alternate communication methods are used, and who uses them.
- The facility should ensure their alternate communication methods are compatible with other facilities, agencies, and local officials it plans to communicate with during emergencies.
- Facilities are required to develop a method for sharing information and medical documentation for residents under the facility's care with other healthcare providers to maintain continuity of care.

- Such system must ensure necessary resident care information is sent with an evacuated resident to the next care provider as well as readily available for residents being sheltered-in-place.
- It is recommended facilities provide a quick "Fact Sheet" to residents and their families including instructions on how to contact the facility in the event of an emergency and any other pertinent information in the emergency plan.
 - This "Fact Sheet" can be included in onboarding materials, signed off on by residents' families, and shown to surveyors to demonstrate compliance.

Survey Procedures for E-0029 - 0035:

- Verify the facility has a written emergency communication plan.
- Verify that all required contacts are included in the communication plan by asking to see a list of the contacts with their contact information.
- Verify all contact information has been reviewed and updated at least annually by asking to see evidence of the review.
- Ask facility leadership or the designee responsible for the emergency program to verbally explain how they are to collaborate with Federal, State, and local officials to ensure their communication plan complies with the Federal, State, and local requirements.
- Verify the facility has contact information for the State Survey Agency and/or public health departments.
- Verify the communication plan includes primary and alternate means for communicating with facility staff, Federal, State, tribal, regional, and local emergency management agencies by reviewing the communication plan.
- Ask to see the <u>communications equipment or communication</u> <u>systems listed in the plan</u>.

For a complete list of requirements and recommendations, refer to CMS Appendix Z available for download <u>here</u>.

General Resources

Family/Home Preparedness: www.ready.gov/georgia

Find your Local Emergency Management Agency (EMA): www.gema.georgia.gov/locations

Find your Healthcare Coalition (HCC): www.gha911.org

Georgia Health Care Association (GHCA): www.ghca.info/

Regional Calendar for upcoming events and trainings: www.gha911.org/coalition-information/

Emergency Communication Resources

<u>Healthcare Coalition Communications Flowchart - Generic</u> <u>Government Emergency Telecommunications Service (GETS)</u> <u>Wireless Priority Service (WPS)</u>

Southern Linc

NOAA Weather Radios

GHA911 WebEOC

Everbridge

Amateur Radio Emergency Service (ARES)

National Association for Amateur Radio (ARRL)

<u>Family Emergency Communication Plan</u>

Georgia's Long Term Care Emergency Preparedness Educational Program is funded through Centers for Medicare and Medicaid Services (CMS), Civil Money Penalty (CMP)

Funds – Emergency Preparedness in Georgia Certified Nursing Homes,

Grant #: 18044G (CMP REQUEST #: 2017-04-GA-1219)

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