



Bureau of Home Care and Rehabilitative Standards
EMERGENCY PREPAREDNESS
Items Needed For Survey – Hospice
 (Revised February 2020)

Provider #: _____

Date: _____

TAG	INFORMATION NEEDED	COMMENTS
E-0013	Policies and Procedures for Emergency Preparedness Program – reviewed and updated every 2 years	
E0016 ↓ ↓	Please flag these specific P & P for review: 1) Procedures to follow-up with staff and patients to identify needs in an emergency 2) Procedure for informing state / local officials of staff or patients they are unable to contact	
E0019	3) Procedure to inform state and local officials about patients in need of evacuation from their residences	
E0023	4) Medical record documentation system to preserve patient information and secure and maintain availability of records	
E0024	5) Use of hospice employees in an emergency and other staffing strategies	
E0025	6) Arrangements with other hospices and other providers to receive patients to maintain continuity of hospice service. (Look for written agreements such as Memorandums of Understanding or Transfer Agreements)	
E0004 E0006 E0007 E0007 E0009	Emergency Plan – must be reviewed and updated at least every 2 years Emergency Plan must include: - Risk assessment – Facility based and community based all-hazards - Types of services the agency has the ability to provide in an emergency - Includes delegation of authority and succession plan - Includes a process for cooperation and collaboration with local, regional, state or federal emergency preparedness officials	
E0029 E0030 E0031	Communication Plan - Most recent review/update of communication plan (required at least every 2 years) - Include names of staff, entities providing services under contract, patient’s physicians, and volunteers - Contact information for federal, state, regional, and local emergency preparedness staff/agencies	

E0032	- Primary and alternate means of communication with employees/officials	
E0033	Method for sharing information and medical information about patients with other health care providers	
E0036	Training Program – must be reviewed/updated at least every 2 years	
E0037 ↓	- Initial training for all new and existing employees and contract staff	
↓	- Provide on-going training at least every 2 years	
E0039	<p>Testing – must conduct exercises to test the plan at least annually. The hospice must provide the following:</p> <ul style="list-style-type: none"> — Documentation of most recent full-scale community based exercise; OR — If community-based exercise is not accessible, documentation of most recent individual, facility-based functional exercise every 2 years; OR — Documentation of actual or manmade emergency that required activation of the emergency plan (exempt from engaging in its next required full-scale community-based or individual, facility based functional exercise following the onset of the emergency event) <p>Conduct an additional exercise every 2 years opposite the year of one of the above exercises that may be:</p> <ul style="list-style-type: none"> • Any of the above exercises, or • Mock disaster drill, or • Tabletop exercise 	
E0039	Analysis of the HHA’s response to and maintain documentation of all drills, tabletop exercises and emergency events	
E0042	<p>Integrated Healthcare System – hospital based or other facility based hospice may elect to be part of the integrated healthcare system plan</p> <ul style="list-style-type: none"> - Hospice must have participated in development of the integrated plan - Considers the hospice services and patient populations - Hospice can demonstrate compliance with the plan - Meets all the specific requirements for hospices as stated above for the emergency plan, policies and procedures, communication plan, training, and testing. 	

Additional requirements for hospices with an inpatient facility are found on the ***Emergency Preparedness Items Need for Survey – Inpatient Hospice***