

2019 New York State Department of Health (NYSDOH) Comprehensive Emergency Management Plan (CEMP) Training for Nursing Homes and Adult Care Facilities

Frequently Asked Questions (FAQ)

**Question: Should facilities replace current preparedness plans and adopt the CEMP?**

Answer: Adoption of this resource is not a requirement. The facility may use the CEMP document and tools to enhance existing plans. Facilities may also opt to use the CEMP document and tools as the main planning document.

**Q: Can facilities just use the Mutual Aid Plan (MAP)?**

A: The MAP, and other local plans, should/can be a starting point for facility planning efforts. These more specific documents do not contain all elements outlined in the CEMP tools. Facilities should include information from these plans as needed and appropriate in CEMP documents as they modify for their specific facility.

**Q: Shelter in Place (SiP) definition is varied across the State. What one is correct?**

A: As defined in the CEMP training and tools, SiP refers to keeping a small number of medically fragile patients/residents in a facility when risk of evacuation exceeds the risk of remaining. SiP is used only if there is a mandatory evacuation order that includes a SiP option (most commonly for Coastal Storms). Requires pre-approval from NYSDOH prior to each hurricane season and re-authorization at time of the incident.

Defend in Place is the ability of a facility to safely retain all residents during an incident related hazard (e.g., flood, severe weather) in the absence of a mandatory evacuation order.

**Q: Do facilities need to notify the NYSDOH Regional Office of an event within 24-hours?**

A: Yes, all events effecting operations at a facility are required to be reported to the Regional Office within 24-hours. NYSDOH may be able to provide assistance or resources and may need to monitor a situation either on-site or remotely.

The facility may call the Regional Office during regular business hours and the NYS Duty Officer (1-866-881-2809 and press#1) off-hours (5pm-8am Monday-Friday, holidays, and weekends).

Notification should be made as soon as possible after the initial event is under control.

**Q: Our facility was “dinged” because our Hazard Vulnerability Analysis (HVA) did not address very specific “what If’s”, e.g. vehicle breakdown when transporting a resident on oxygen. Is this the intent of the HVA?**

A: The HVA is not the place to capture this. The HVA should address overall hazards and vulnerabilities for the facility, not specific policies or procedures.

**Q: Surveyors sometimes ask to see the facilities “Aware Prepare” plan. Is this the evacuation plan?**

A: “Aware Prepare” was never the title of the plan but a past branding logo. This has been removed from all NYSDOH preparedness documents with any updates. The Evacuation Plan Template has been updated and will be released in summer of 2019. Webinars will be provided to review revisions and updates.

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Q: The lack of a hurricane annex was noted during the last survey at our facility. Will hurricane be on the new template?

A: The new template takes an all-hazards approach. Most of the template applies for all types of hazards, e.g. a planned evacuation is carried out in the same manner for all types of hazards. Facilities should identify hazards that require incident specific information or annexes that could be incorporated into the CEMP.

Q: How can a facility deal with an issue on the 'off-shifts' where staff is less prepared?

A: It is the responsibility of the facility to ensure staff on all shifts, including part time and per diem staff, are trained and prepared to respond to an emergency event impacting the facility.

Q: During an event or emergency can facility staff be mandated to stay?

A: Not in most instances. Licensed staff (e.g., RNs, LPNs) must always sign off care to the oncoming shift before leaving. It is the responsibility of the facility to identify a qualified person who "is authorized in writing to act in the absence of the administrator or person legally responsible for the operations of the facility."

Q: What or who is the Authority Having Jurisdiction?

A: "Authority Having Jurisdiction" (AHJ) refers to the organization, office, or individual having the statutory authority to recommend or order the evacuation of regional healthcare facilities. Note: The title Chief Elected Official is interchangeable with AHJ.

Q: Who can authorize an evacuation?

A: The facility administrator may authorize an evacuation and/or the AHJ may order an evacuation. NYSDOH **cannot** order an evacuation of a healthcare facility.