

Critical Maintenance

Emergency Plan Biennial Review,
Civil Rights, Personnel File Audits



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OBJECTIVES

- Participants will:
 - Gain an understanding of the required civil rights elements for the clinic
 - Discover which documents will be reviewed during the personnel file audit
 - Learn the operative guidelines and timeframes for the emergency plan review






CIVIL RIGHTS

CIVIL RIGHTS


- Required signage
- Referral to corporate civil rights policies
- Civil rights attestation
 - Assurance of compliance portal
 - Submit required information



CIVIL RIGHTS

1. Title VI of the Civil Rights Act of 1964
 2. Section 504 of the Rehabilitation Act of 1973
 3. Title IX of the Education Amendments of 1972
 4. The Age of Discrimination Act of 1975
 5. Section 1557 of the Patient Protection and Affordable Care Act
 6. The Church Amendments, The Coats-Snowe Amendment, The Weldon Amendment, Section 1553 of the Patient Protection and Affordable Care Act and Section 1303 of the Patient Protection and Affordable Care Act
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CIVIL RIGHTS


- Non-Discrimination Policy
 - Ensure language is current
 - List services the clinic offers for persons with disabilities
 - Disclose contact information for 504 Coordinator
 - Clarify how you disseminate your notice of non-discrimination
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CIVIL RIGHTS

○ Admissions

- Describe eligibility requirements

○ Age Restrictions


- “It is the policy of NAME OF CLINIC to not deny or restrict access to services based on an individual’s age (unless age is a factor necessary to normal operations or the achievement of any statutory objective).” 

CIVIL RIGHTS

- Grievance Procedure
 - Outline due process standards
 - Disclose who handles grievances and their contact information




CIVIL RIGHTS


- Limited English Proficiency
 - Describe the clinic's procedure for oral and written communication with persons with LEP
 - Disclose staff that are qualified interpreters
 - Disclose the agency that the clinic has contracted with for interpretative services
 - Protect PHI
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CIVIL RIGHTS

○ Auxiliary Aids

- Describe the clinic's procedure for assisting persons with speech, hearing and visual impairments
 - Disclose staff members that are qualified interpreters for sign-language
 - Disclose the agency that the clinic has contracted with for interpretative services
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CIVIL RIGHTS

- Program Accessibility
 - Describe how the clinic accommodates people with disabilities:
 - Curb cuts
 - Elevators (if applicable)
 - Level access to all rooms
 - Convenient parking
 - Services and aids
- 

CIVIL RIGHTS

○ Helpful links:

- Assurance of compliance portal:

- <https://ocrportal.hhs.gov/ocr/aoc/instruction.jsf>

- Information regarding the conscience protections:

- <https://www.hhs.gov/conscience/conscience-protections/index.htm>



CIVIL RIGHTS

- Helpful links:
 - Sample policies:
 - <https://www.hhs.gov/civil-rights/for-providers/clearance-medicare-providers/technical-assistance/index.html>
 - 1557 – Top 15 languages by State
 - <https://www.hhs.gov/civil-rights/for-individuals/section-1557/translated-resources/index.html>



PERSONNEL FILES

PERSONNEL FILES

- Application, Resume or CV
 - Long term employees
- I-9 and W-4
- Signed job descriptions



PERSONNEL FILES

- Signed standards of conduct
- Confidentiality Agreement
- Performance Evaluations
 - Based on job description
 - Completed annually




PERSONNEL FILES


- Background check
 - If applicable by State
- Basic life support (BLS)
 - For all hands-on patient care staff



PERSONNEL FILES

- TB Testing
 - Upon hire
 - OR X-ray if you have a positive reaction
 - Hepatitis B
 - Proof that it is completed
 - Declination form
 - Hepatitis B Titre Draw
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PERSONNEL FILES

- Licensing/Certification
 - Name of employee
 - Title
 - License number/expiration
 - DEA number/expiration
 - Collaborative agreement (if applicable)
- 

PERSONNEL FILES

- Training
 - Tobacco, Non-Discrimination, OSHA, HIPAA, Fraud, Waste and Abuse, etc.
- Proficiency Testing



PERSONNEL FILES

- OIG Exclusions
 - Office of Inspector General
 - <https://exclusions.oig.hhs.gov>



PERSONNEL FILES

○ OIG Exclusions

6/6/2019

Search the Exclusions Database | Office of Inspector General

 An official website of the United States government. [Here's how you know >](#)

Search the Exclusions Database

Search For An Individual

 Search For Multiple Individuals |  Search For A Single Entity |  Search For Multiple Entities

Last Name

(and/or) First Name

 Search

 Clear

Related Content

LEIE Downloadable
Databases

Monthly Supplement Archive

Waivers

Quick Tips

Background Information

Applying for Reinstatement

Contact the Exclusions
Program

Frequently Asked Questions

Special Advisory Bulletin and
Other Guidance



PERSONNEL FILES

○ OIG Exclusions

6/6/2019


OIG Search Results

 An official website of the United States government. [Here's how you know >](#)

Exclusions Search Results: Individuals

No Results were found for

Sacrey , Tressa

 If no results are found, this individual or entity (if it is an entity search) is not currently excluded. Print this Web page for your documentation


[Search Again](#)

Search conducted 6/6/2019 1:44:12 PM EST on OIG LEIE Exclusions database.
Source data updated on 6/5/2019 9:03:00 AM EST.

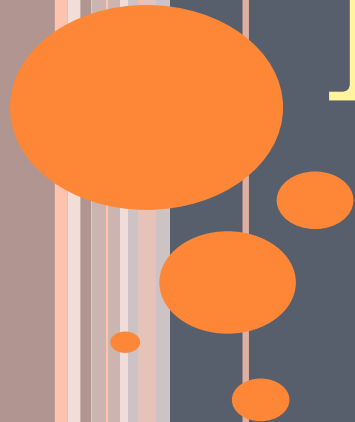


PERSONNEL FILES

○ OIG Exclusions

- What if exclusions are found?
 - Do an advanced search
 - Date of birth, SSN, Driver's license
 - Make copies of information that clear the exclusion
 - If still on exclusion list- cannot be employed at the clinic
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EMERGENCY PREPAREDNESS




EMERGENCY PREPAREDNESS


- Areas to review:
 - Risk Assessment
 - Communication Plan
 - Policies
 - Training and Testing



EMERGENCY PREPAREDNESS

- What is a Risk Assessment?
 - A risk assessment is an evaluation of vulnerability to specific hazards
 - Hazards are categorized by the same standard
 - Creates numeric value for each risk
 - A living document that should be updated at least biennially.
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EMERGENCY PREPAREDNESS


- Conducting a risk assessment:
 - Research
 - State and county mitigation plans
 - Hospital risk assessment
 - Actual events
 - Probability
 - Impact
 - Response
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EMERGENCY PREPAREDNESS

- All hazards approach:
 - Naturally occurring
 - Technological
 - Human related
 - Hazardous materials
 - Infectious diseases



EMERGENCY PREPAREDNESS

- A risk assessment must be completed at least biennially.
 - Items to consider for updated risk assessment:
 - Actual events
 - New construction
 - News reports
 - Health department reports
 - Each location must have an individual risk assessment
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EMERGENCY PREPAREDNESS

- Communication plan:
 - Internal
 - Staff, volunteers, physicians, arrangements, receiving facilities
 - External
 - Federal, State, tribal, regional, local
 - Vendors
 - Condition of patients
 - Clinic needs
 - Clinic resources



EMERGENCY PREPAREDNESS

- Updating internal communication plan:
 - Staff turnover
 - Roles and responsibilities
 - Call tree
 - Between locations
 - Internal communication tools




EMERGENCY PREPAREDNESS

- Updating external communication plan:
 - Governmental elections
 - Documentation – Burden Relief
 - Communication tools
 - Vendor list



EMERGENCY PREPAREDNESS

○ Policies:

- Evacuation
 - Shelter-in-place
 - Medical documentation
 - Volunteers
 - Medication handling
 - Situation hazard policies based on risk assessment
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EMERGENCY PREPAREDNESS

- Policy updates:
 - Meeting points
 - Situation hazard policies based on updated risk assessment
 - Updates based on after action reports




EMERGENCY PREPAREDNESS

- Training:
 - All staff are trained on their expected roles
 - Staff are trained upon hire and at least biennially
 - Include volunteers and individuals providing services under arrangements



EMERGENCY PREPAREDNESS

- Testing: **UPDATE 09/20**
 - Disclaimer:
 - Always check with your deeming entity to see how they are interpreting this new guidance.
 - Read the full document QSO-20-41-ALL
 - <https://www.cms.gov/files/document/qso-20-41-all.pdf>
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EMERGENCY PREPAREDNESS

○ Testing:

- Where were we?

- The initial emergency preparedness rules and regulations were released November 16, 2016. All provider types had to implement the changes by November 16, 2017. At the time of initial release, the testing program at the RHC had to include one required exercise and one exercise of choice every year


EMERGENCY PREPAREDNESS

- Testing:
 - Initially:
 - 2 trainings per year:
 - 1 required exercise and 1 exercise of choice

Still required if you didn't update your policy



EMERGENCY PREPAREDNESS

- Testing:
 - Burden relief:
 - September 30, 2019, CMS issued the final rule that allowed the RHC to move to a biennial process for emergency testing, policy review, emergency plan review and program evaluation. RHCs were able to adopt this process as long as they updated their policy. 

EMERGENCY PREPAREDNESS

○ Testing:


- September 2019 Burden Relief:

- 2 trainings biennially:

- 1st year in cycle: required exercise

- 2nd year in cycle: exercise of choice

Actual events exempted you from any additional exercises that year



EMERGENCY PREPAREDNESS

- Testing:
 - Current guidance:
 - September 28, 2020, CMS issued updated guidance for how to enact an exemption when a clinic experiences an actual event and the difference between a required exercise and an exercise of choice.

**PLEASE NOTE: THE LAW DID NOT
CHANGE**



EMERGENCY PREPAREDNESS

- Testing:
 - Current guidance:
 - CFR 491.12(d)(2)(i)(B) “If the RHC experiences an actual natural or manmade emergency that requires activation of the emergency plan, **the RHC is exempt from engaging in its next required** full- scale community based or individual, facility-based functional exercise **following** the onset of the emergency event.

EMERGENCY PREPAREDNESS

- Testing:
 - Current guidance:
 - Required exercise:
 - Full scale exercise
 - Functional exercise



EMERGENCY PREPAREDNESS

○ Testing:

- Current guidance:


- Exercise of choice

- Mock disaster

- Table-top drill

- Workshop

- The clinic may also choose to conduct a secondary full scale exercise or functional exercise.



EMERGENCY PREPAREDNESS

- Testing:
 - Exemption clause:
 - An actual event exempts the clinic from the next due “required exercise”.
 - An actual event DOES NOT EXEMPT the clinic from the next due “exercise of choice



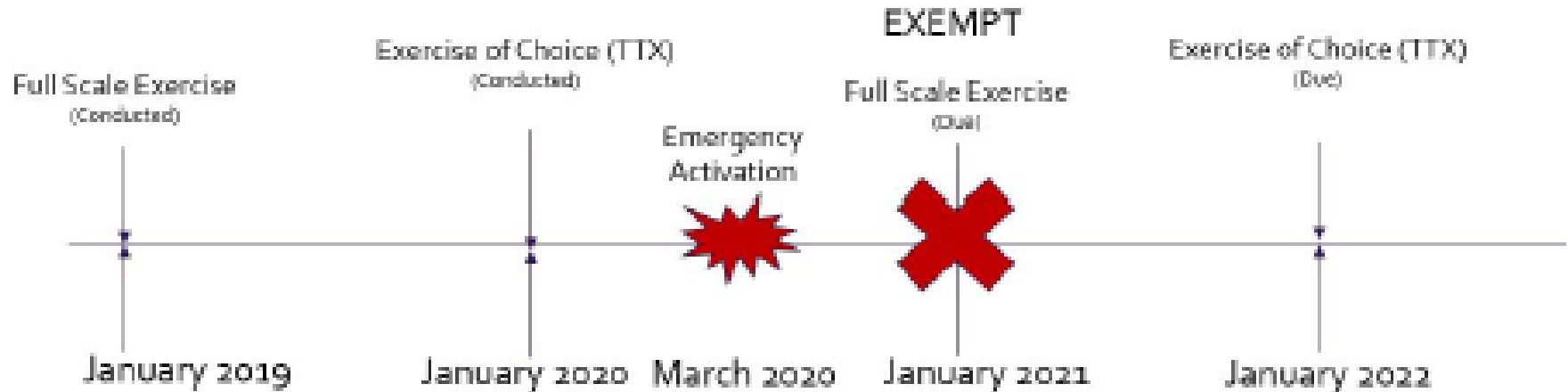
EMERGENCY PREPAREDNESS

○ Testing:



EMERGENCY PREPAREDNESS

○ Testing:



EMERGENCY PREPAREDNESS


- Testing:
 - Action steps:
 - Define your testing cycle
 - What type of drill was due this year before Covid-19 hit?



EMERGENCY PREPAREDNESS

Type of Exercise	Hazard Exercised	Due	After Action Complete
Required exercise	Community Based Flu Clinic	June 2018	Attached
Exercise of Choice	Active Shooter Table Top	June 2019	Attached
ACTUAL EVENT	Pandemic	March 2020	Attached
Required Exercise	Community Based Mass Transportation	June 2020	EXEMPT due to Actual Event 3/20
Exercise of Choice	Bomb Threat Table Top	June 2021	---

EMERGENCY PREPAREDNESS

- Testing:
 - Action steps:
 - Understand the exemption clause
 - Be able to describe the exemption to ensure understanding that the exemption is based on the next scheduled required exercise and not the next scheduled exercise of choice.
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EMERGENCY PREPAREDNESS

- Testing:
 - Action steps:
 - DOCUMENT evidence that the clinic enacted the emergency plan in order to determine whether the testing exemption is acceptable for use. (After Action Report)



EMERGENCY PREPAREDNESS

- Testing:
 - After action reports (AAR)
 - Analyze the clinic's response
 - Plan of correction as needed
 - Updated policies
 - CMS has a great example of an AAR



EMERGENCY PREPAREDNESS

- Testing:
 - After action reports (AAR)
 - Capabilities tested
 - Timeline of events
 - At least 3 strengths
 - At least 3 areas of improvement
 - Plan of correction
 - Conclusion



EMERGENCY PREPAREDNESS

- Tying it all together:
 - Bring all updates to the program evaluation meeting
 - Train staff on all updates





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