



Hospital Emergency Preparedness Survey Readiness Checklist and Crosswalk

This checklist may help hospital facility professionals prepare for survey evaluations regarding emergency preparedness requirements from the Centers for Medicare & Medicaid Services (CMS). Similar to the K-Tags CMS uses for life safety, the new series of E-Tags developed by CMS provide interpretive guidance for emergency preparedness requirements. The final emergency preparedness rule was issued on September 16, 2016, with an effective date of November 15, 2016. Facilities need to be in full compliance with these requirements no later than November 15, 2017, when surveyors will implement the use of the E Tags.

E-Tag	Brief Description	Survey Readiness Practices	NFPA 99	TJC Standard	ASHE Resources
0001	Emergency preparedness program (EPP)	In addition to complying with all federal, state and local requirements: <ul style="list-style-type: none"> <input type="checkbox"/> Leadership must be able to describe the facility's emergency plan (EP), and how it was created using an all hazards approach <input type="checkbox"/> Present written plan and documentation of the EP 	12.2.2 12.4	EM.01.01.01 EP1	ASHE On Demand Emergency Preparedness Recordings
0004	Develop and maintain EPP	<ul style="list-style-type: none"> <input type="checkbox"/> Provide written EP plan, and illustrate that plan has all required elements. Prove that plan is evaluated annually by presenting written documentation <input type="checkbox"/> Leadership must be able to explain how the risk assessment was conducted to identify hazards 	12.2.2 12.4 12.5 12.5.3.3.5	EM.01.01.01 EM.02.01.01	ASHE Emergency Preparedness Rule Page
0006	Develop and maintain an emergency plan (EP) and annually update it	<ul style="list-style-type: none"> <input type="checkbox"/> Present written documentation of the facility's risk assessments (that were based on an all-hazards approach) and the strategies used to confront identified risks <input type="checkbox"/> Leadership should be able to explain which hazards are addressed and why they were included 	12.5.3.1	EM.01.01.01 EP2	ASHE Emergency Preparedness HVA Tools
0007	EP patient population	Leadership must be able to describe: <ul style="list-style-type: none"> <input type="checkbox"/> Facility's patient population that would be at-risk during an emergency and the strategies used to address the needs of at-risk patient populations <input type="checkbox"/> Facility's plans to continue operations <input type="checkbox"/> Delegations of authority and succession plans 	12.5.3.1.3 (2), 12.5.3.3.6.4	EM.02.02.11 EP4	

Hospital Emergency Preparedness Survey Readiness Checklist and Crosswalk

E-Tag	Brief Description	Survey Readiness Practices	NFPA 99	TJC Standard	ASHE Resources
0009	Process for EP collaboration	<input type="checkbox"/> Leadership must be able describe the process for an integrated response and ensuring cooperation and collaboration with local, tribal, regional, state, and federal emergency preparedness officials' efforts <input type="checkbox"/> Provide documentation of efforts to contact these officials, and notes on the collaborative plans	12.4.2, 12.5.3.3.6.1(2)&(6), 12.5.3.4.6, 12.5.3.4.7, 12.5.3.4.10	EM.01.01.01 EP3 EM.01.01.01 EP4 EM.01.01.01 EP7 EM.02.02.01 EP22	
0013	Policies and procedures (P&Ps)	<input type="checkbox"/> Illustrate that policies and procedures are based on a hazard vulnerability assessment and communication plan <input type="checkbox"/> Demonstrate that P&Ps are updated annually	12.5.3.1	EM.02.01.01 EP16	
0015	Subsistence needs for staff and patients	Ensure P&Ps address: <ul style="list-style-type: none"> <input type="checkbox"/> Subsistence needs including food, water and pharma supplies for patients and staff <input type="checkbox"/> Temperature regulation to ensure patient safety and sanitary storage of provisions <input type="checkbox"/> Emergency lighting, Fire detection, extinguishing, and alarm systems <input type="checkbox"/> Disposal of sewage and waste 	12.5.3.3.5 12.5.3.3.6.2 12.5.3.3.6.5	EM.02.02.07 EP5 EM.02.02.11	
0018	System for tracking staff and patients	<input type="checkbox"/> Staff must be able to describe and/or demonstrate the tracking system used to document locations of patients and staff <input type="checkbox"/> Verify that the tracking system is documented as part of the EPs P&Ps	12.5.3.3.6.4 (9)	EM.02.02.11 EP8 EM.02.02.11 EP12	
0020	Safe evacuation	<input type="checkbox"/> Illustrate that plans include safe evacuation as part of the P&Ps	12.5.3.3.6.8 (4) (c) 12.5.3.4.7	EM.02.01.01 EP2	
0022	Shelter in place	<input type="checkbox"/> Illustrate that the EP contains P&Ps for sheltering in place aligned with the facility's EP and risk assessment	12.5.3.3.3 12.5.3.3.6.8 (4) (a)	EM.02.01.01 EP15	



Hospital Emergency Preparedness Survey Readiness Checklist and Crosswalk

E-Tag	Brief Description	Survey Readiness Practices	NFPA 99	TJC Standard	ASHE Resources
0023	Medical documentation	<input type="checkbox"/> Illustrate that the facility has P&Ps to protect patients confidentiality and patient information, while making the records available to medical staff	12.5.3.3.6.1 (3) 12.5.3.3.6.1 (4)	EM.02.02.01 EP11 EM.02.02.01 EP12 EM.02.02.01 EP21	
0024	Volunteers	<input type="checkbox"/> Illustrate that the EP has P&Ps for the use of volunteers and other staffing strategies	12.5.3.4.5	EM.02.02.13 EM.02.02.15	
0025	Arrangements with other facilities	<input type="checkbox"/> Present copies of official agreements with other facilities to receive patients in an emergency <input type="checkbox"/> Leadership must be able to explain how patients will be transported	B.12.3.4 12.5.3.3.6.4 (7)	EM.02.02.01 EP20 EM.02.02.03 EP9	
0026	Role under waiver declared by secretary	<input type="checkbox"/> Present P&Ps describing the facility's role in providing care and treatment at alternate care sites under an 1135 waiver	12.5.3.3.6.8 (5)	EM.02.01.01 EP14	
0029	Emergency communication plan	<input type="checkbox"/> Present written communication plan <input type="checkbox"/> Present evidence that the plan is reviewed and updated annually	12.5.3.3.6.1 12.5.3.6	EM.02.02.01	
0030	Names and contact information	<input type="checkbox"/> Provide list of contacts with staff, entities providing services under arrangement, patients' physicians, other facilities, and volunteers' information. <input type="checkbox"/> Demonstrate all required contacts are included in plan, and updated annually	12.5.3.3.6.1 (6) (a)	EM.02.02.01 EP20	
0031	Emergency officials contact information	<input type="checkbox"/> Provide list of contacts for the federal, state, tribal, regional, and local emergency preparedness staff as well as other sources of assistance <input type="checkbox"/> Demonstrate all required contacts are in plan, and updated annually	12.5.3.3.6.1 (6) (a)	EM.02.02.01 EP20	
0032	Primary/alternate means of communication	<input type="checkbox"/> Verify primary and alternate means of communication for all emergency officials and staff <input type="checkbox"/> Must be able to present the communications equipment or communication systems	12.5.3.3.6.1 (5)	EM.02.02.01 EM.02.02.01 EP14	



Hospital Emergency Preparedness Survey Readiness Checklist and Crosswalk

E-Tag	Brief Description	Survey Readiness Practices	NFPA 99	TJC Standard	ASHE Resources
0033	Methods for sharing information	<input type="checkbox"/> Present a communication plan that outlines a way to share medical information for patients during an emergency, including those patients that must be evacuated <input type="checkbox"/> Present the P&Ps that address how the facility will release patient information, including the general condition and location of patients	12.5.3.3.6.1 12.5.3.3.6.4 (8)	EM.02.02.01 EP21	
0034	Sharing information on occupancy/needs	<input type="checkbox"/> Present communication plan that details information about the facility's needs, and its ability to provide assistance (including information of occupancy for hospitals)	12.5.3.3.6.1	EM.02.02.01	
0036	Training and testing	<input type="checkbox"/> Present proof of a written training and testing program; that this program has been reviewed and updated at least annually	12.5.3.3.7	EM.02.02.07 EP13	
0037	Training program	<input type="checkbox"/> Provide facility's initial EP training and annual EP offerings <input type="checkbox"/> Staff must be able to demonstrate knowledge of emergency procedures <input type="checkbox"/> Must be ready to show staff training files to verify that staff have received initial and annual EP training	12.5.3.3.7 12.5.3.3.7.2 12.5.3.3.7.4 12.5.3.3.7.5 12.5.3.3.7.6	EM.03.01.01 EM.03.01.03	
0039	Testing requirements	<input type="checkbox"/> Provide documentation of the completion of an annual table top exercise and a full scale exercise (including exercise plan, after action report, and any additional supporting documentation) <input type="checkbox"/> In the absence of a full-scale community exercise, provide documentation of facility's efforts to participate in a full-scale community based exercise <input type="checkbox"/> Provide facility's written analysis and response detailing how they updated the EP based on these analyses	12.5.3.3.9	EM.03.01.03	



Hospital Emergency Preparedness Survey Readiness Checklist and Crosswalk

E-Tag	Brief Description	Survey Readiness Practices	NFPA 99	TJC Standard	ASHE Resources
0041	Emergency and standby power systems	<input type="checkbox"/> Illustrate that facility has required emergency and standby systems to meet requirements of the EPP <input type="checkbox"/> Illustrate that facility has an emergency power plan for “shelter in place” and evacuation operations <input type="checkbox"/> Illustrate proper placement of EPSS in new construction or alteration/renovation of existing EPSS <input type="checkbox"/> Demonstrate that on site fuel source meets NFPA 110	12.5.3.3.6.5 12.5.3.3.6.6	EM.02.02.09 EP2	Roadmap to Resiliency
0042	Integrated health systems	<input type="checkbox"/> Illustrate that the health care system has elected a unified and integrated emergency preparedness system <input type="checkbox"/> Provide documentation that individual facility was actively involved in development of EPP <input type="checkbox"/> Provide documentation that individual facility was actively involved in annual review of EPP <input type="checkbox"/> Provide documentation of entire integrated and unified EPP <input type="checkbox"/> Leadership must be able to describe how integrated and unified EPP is updated based on changes within the health care system		EM.04.01.01	

The ASHE advocacy team works to monitor and unify the many overlapping codes and standards regulating the health care physical environment allowing health care facilities to optimize their physical environment and focus more of their valuable resources on patient care.

The American Society for Healthcare Engineering (ASHE) of the American Hospital Association | www.ashe.org

Disclaimer: This document is provided by ASHE as a service to its members. The information provided may not apply to a user’s specific situation and is not a substitute for application of the user’s own independent judgment or the advice of a competent professional. ASHE does not make any guaranty or warranty as to the accuracy or completeness of any information contained therein. ASHE and the authors disclaim liability for personal injury, property damage, or other damages of any kind, whether special, indirect, consequential, or compensatory, that may result directly or indirectly from use of or reliance on this document.