Prepublication Requirements

The Joint Commission

New and Revised Emergency Management (EM) Requirements

The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online *E-dition*®), accredited organizations and paid subscribers can also view them in the monthly periodical The *Joint Commission Perspectives*®. To begin your subscription, call 800-746-6578 or visit http://www.jcrinc.com.

Please note: Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

APPLICABLE TO THE NURSING CARE CENTER ACCREDITATION PROGRAM

Effective January 1, 2025

Emergency Management (EM) Chapter

EM.09.01.01

The organization has a comprehensive emergency management program that utilizes an all-hazards approach.

Element(s) of Performance for EM.09.01.01

New EP 1 **The organization has a written comprehensive emergency management program that utilizes an all-hazards approach. The program includes but is not limited to the following:**
- **Leadership structure and program accountability**
- **Hazard vulnerability analysis**
- **Mitigation and preparedness activities**
- **Emergency operations plan and policies and procedures**
- **Education and training**
- **Exercises and testing**
- **Continuity of operations plan**
- **Disaster recovery**
- **Program evaluation**

Ⓓ **Documentation is required**

New EP 2 If the organization is part of a health care system that has a unified and integrated emergency management program and it chooses to participate in the program, the following is demonstrated within the coordinated emergency management program:
- Each separately certified organization within the system actively participates in the development of the unified and integrated emergency management program
- The program is developed and maintained in a manner that takes into account each separately certified organization's unique circumstances, patient/resident population, and services offered
- Each separately certified organization is capable of actively using the unified and integrated emergency management program and is in compliance with the program
- Documented community-based risk assessment utilizing an all-hazards approach
- Documented individual, facility-based risk assessment utilizing an all-hazards approach for each separately certified organization within the health care system
- Unified and integrated emergency plan
- Integrated policies and procedures
- Coordinated communication plan
- Training and testing program

Ⓓ   Documentation is required

New EP 3 The organization complies with all applicable federal, state, and local emergency preparedness laws and regulations.

EM.10.01.01

The organization's leader(s) provides oversight and support of the emergency management program.

Element(s) of Performance for EM.10.01.01

New EP 1 The organization's leader(s) provides oversight and support of the emergency management activities.
Note 1: Ways in which the leader(s) provides oversight and support may include allocating resources, planning and reviewing policies and procedures, and other activities that support the emergency management activities.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborate with the system's emergency management leadership structure.

New EP 2 The organization's leader(s) identifies an individual(s) who will develop and maintain the emergency operations plan, coordinate emergency management education and training, and conduct exercises to evaluate the emergency operations plan and response procedures.
Note 1: The organization determines what education, training, and experience in emergency management qualifies the individual to lead the program.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's designated emergency management program lead may serve as the organization's emergency management program lead provided there is collaboration with the identified organization's leader(s).

New EP 3 The organization has a committee that oversees the emergency management program. The committee includes the emergency management program lead and other participants identified by the organization; meeting frequency, goals, and responsibilities are defined by the committee.
Note 1: Based on the size and needs of the organization, the committee may include the owners/operators, medical director, organizational leaders, clinical staff, or others and may be incorporated into an existing committee.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management committee.

EM.11.01.01

The organization conducts a hazard vulnerability analysis utilizing an all-hazards approach.

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Element(s) of Performance for EM.11.01.01

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New EP 1 The organization conducts a hazard vulnerability analysis (HVA) using an all-hazards approach. The HVA identifies hazards that could occur at the organization, including missing patients and residents, and in the community where the organization is located. The HVA is documented.
Note 1: If the organization has multiple sites, separate HVAs are required if the sites are in different geographic locations, have different hazards or threats, or the patient/resident population or services offered are unique to this facility.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management program when developing the hazards vulnerability analysis that is specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's hazard vulnerability analysis includes but is not limited to the following:
- Natural hazards (such as flooding, wildfires)
- Human-caused hazards (such as bomb threats or cyber/information technology crimes)
- Technological hazards (such as utility or information technology outages)
- Hazardous materials (such as radiological, nuclear, chemical)
- Emerging infectious diseases (such as those that have newly appeared in a population or are rapidly increasing in incidence, which may be localized to a community or widespread)

Ⓓ **Documentation is required**

New EP 3 The organization evaluates and prioritizes the findings of the hazard vulnerability analysis to determine which hazards present the highest likelihood of occurring and the impacts those hazards will have on the operating status of the organization and its ability to provide services. The findings are documented.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management program when evaluating and prioritizing hazards that are specific to the organization.

Ⓓ **Documentation is required**

New EP 4 The organization uses its prioritized hazards from the hazard vulnerability analysis to identify and implement mitigation and preparedness actions to increase the resilience of the organization and help reduce disruption of essential services or functions.
Note 1: Mitigation activities may include reviewing agreements with other health care facilities, establishing an alternative meeting place in the event the organization is not accessible, reviewing supplies on hand and vendor alternatives, and planning how to protect medical records and how to back-up electronic records.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management program when implementing mitigation and preparedness actions that are specific to the organization.

EM.12.01.01

The organization develops an emergency operations plan based on an all-hazards approach.
Note: The organization considers its prioritized hazards identified as part of its hazards vulnerability analysis when developing an emergency operations plan.

Element(s) of Performance for EM.12.01.01

New EP 1 The organization has a written all-hazards emergency operations plan (EOP) with supporting policies and procedures that provides guidance to staff on actions to take during emergency or disaster incidents. The EOP and policies and procedures include but are not limited to the following:
- EOP activation
- Communications plan
- Maintaining, expanding, decreasing, or closing operations
- Protecting critical systems and infrastructure
- Conserving and/or supplementing resources
- Surge plans (such as flu or pandemic plans)
- Identifying alternate treatment areas or locations
- Sheltering in place
- Evacuating (partial or complete) or relocating services
- Safety and security
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's EOP includes policies and procedures that are specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's emergency operations plan (EOP) identifies the patient and resident population(s) that it will serve, including at-risk populations, and the types of services it would have the ability to provide in an emergency or disaster event. Documentation is required.
Note: At-risk populations, such as the elderly, persons with dementia, dialysis patients or residents, or persons with physical or mental disabilities, may have additional needs to be addressed during an emergency or disaster incident, such as medical care, communication, transportation, supervision, and maintaining independence.

Ⓓ **Documentation is required**

New EP 3 The organization's emergency operations plan (EOP) includes written procedures for when and how it will shelter in place or evacuate (partial or complete) its staff, volunteers, patients, and residents.
Note 1: Safe evacuation includes consideration of care, treatment, and service needs of evacuees, staff responsibilities, and transportation.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's EOP includes policies and procedures for when and how the organization will shelter in place or evacuate.

Ⓓ **Documentation is required**

New EP 4 The organization's emergency operations plan (EOP) includes written procedures for how the organization will provide essential needs for its staff, volunteers, patients, and residents, whether they shelter in place or evacuate, that includes but is not limited to the following:
- Food and other nutritional supplies
- Medications and related supplies
- Medical/surgical supplies
- Medical oxygen and supplies
- Potable or bottled water

Ⓓ **Documentation is required**

New EP 5 The organization has a process for activating its emergency operations plan and identifies the individual(s) who is responsible for determining operational decisions during an emergency or disaster incident.
Note : If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the health care system's activation and response procedures may be centralized as long as there is collaboration and coordination with the identified organization leader(s).

Ⓓ **Documentation is required**

New EP 6 The organization's emergency operations plan (EOP) includes a process for cooperating and collaborating with other health care organizations, relevant community partners (such as fire, police, local incident command, public health departments), and relevant authorities (such as federal, state, tribal, regional, and local emergency preparedness staff) in an effort to leverage support and resources and to provide an integrated response during an emergency or disaster incident.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's EOP includes a process for cooperating and collaborating that is specific to the organization.

New EP 9 The organization develops and implements emergency preparedness policies and procedures that address the role of the organization under a waiver declared by the Secretary for the US Department of Health & Human Services, in accordance with section 1135 of the Social Security Act, in the provision of care and treatment at an alternate care site identified by emergency management officials.
Note 1: This element of performance is applicable only to organizations that receive Medicare, Medicaid, or Children's Health Insurance Program reimbursement.
Note 2: For more information on 1135 waivers, visit https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Resources/Waivers-and-flexibilities and https://www.cms.gov/about-cms/agency-information/emergency/downloads/consolidated_medicare_ffs_emergency_qsas.pdf.

Ⓓ **Documentation is required**

EM.12.02.01

The organization has a communications plan that addresses how it will communicate during an emergency.
Note: The organization considers prioritized hazards identified as part of its hazard vulnerability analysis when developing a communications plan.

Element(s) of Performance for EM.12.02.01

New EP 1 The organization maintains a contact list of individuals and entities that are to be notified in response to an emergency or disaster incident. The list of contacts includes but is not limited to the following:
- Staff
- Physicians and other licensed practitioners
- Volunteers
- Other health care and/or nursing care facilities
- Entities providing services under arrangement, including suppliers of essential services, equipment, and supplies
- Relevant community partners (such as fire, police, local incident command, public health departments)
- Relevant authorities (federal, state, tribal, regional, and local emergency preparedness staff)
- State licensing and certification agencies
- Office of the state long-term care ombudsman
- Other sources of assistance (such as health care coalitions)
Note 1: The type of emergency will determine which organizations/individuals need to be contacted to assist with the emergency or disaster incident.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's contact list includes contacts that are specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's communications plan describes how it will establish and maintain communications to deliver coordinated messages and information during an emergency or disaster incident to staff, volunteers, patients or residents, and others, as applicable.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's communications plan includes policies and procedures that are specific to the organization.

Ⓓ **Documentation is required**

New EP 3 The organization's communications plan describes the following:
- How the organization will communicate with and report information about its organizational needs, available occupancy, and ability to provide assistance to relevant authorities
- How the organization will share information from the emergency operations plan with patients or residents and families or representatives, as appropriate
Note: Examples of organization needs include shortages in personal protective equipment, staffing shortages, evacuation or transfer of patients or residents, and temporary loss of part or all organization function.

Ⓓ **Documentation is required**

New EP 5 In the event of an emergency or evacuation, the organization's communications plan includes a method for sharing and/or releasing location information and medical documentation for patients or residents under the organization's care to the following individuals or entities, in accordance with law and regulation:
- Patient's or resident's family, representative, or others involved in the care of the patient or resident
- Disaster relief organizations and relevant authorities
- Other health care providers
Note: Sharing and releasing of patient or resident information is consistent with 45 CFR 164.510(b)(1)(ii) and (b)(4).

Ⓓ **Documentation is required**

New EP 6 The organization's communications plan identifies its primary and alternate means for communicating with staff and relevant authorities (such as federal, state, tribal, regional, and local emergency preparedness staff). The plan includes procedures for how and when alternate/backup communication methods are used.
Note: Examples of alternate/backup communication systems include amateur radios, portable radios, text-based notifications, cell phones, and satellite phones, and reverse 911 notification systems.

Ⓓ **Documentation is required**

EM.12.02.03

The organization has a staffing plan for managing all staff and volunteers during an emergency or disaster incident.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a staffing plan.

Element(s) of Performance for EM.12.02.03

New EP 1 The organization develops a staffing plan for managing all staff and volunteers to meet patient and resident care needs during the duration of an emergency or disaster incident. The plan includes the following:
- Methods for contacting off-duty staff
- Acquiring staff from its other health care facilities
- Use of volunteer staffing, such as staffing agencies, health care coalition support, and those deployed as part of the disaster medical assistance teams
Note 1: If the organization determines that it will never use volunteers during disasters, this is documented in its plan.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's staffing plan includes policies and procedures that are specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's staffing plan addresses the management of all staff and volunteers as follows:
- Reporting processes
- Roles and responsibilities for essential functions
- Integrating staffing agencies, volunteer staffing, or deployed medical assistance teams into assigned roles and responsibilities (as applicable)
Note : If the organization determines that it will never use volunteers during disasters, this is documented in its plan.

Ⓓ **Documentation is required**

New EP 4 The organization's staffing plan describes in writing how it will manage volunteer licensed practitioners when the emergency operations plan has been activated and a process for granting disaster privileges to volunteer physicians and other licensed practitioners and has a process for granting these privileges in accordance with law and regulation and organizational policy.
Note: If the organization determines that it will never use volunteers during disasters, this is documented in its plan.

Ⓓ **Documentation is required**

New EP 6 The staffing plan describes how it will provide employee assistance and support, which includes the following:
- Staff support needs (for example, housing or transportation)
- Family support needs of staff (for example, childcare, elder care)
- Mental health and wellness needs
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's policies and procedures for employee assistance and support include the organization's staff.

Ⓓ **Documentation is required**

EM.12.02.05

The organization has a plan for providing patient and resident care and clinical support during an emergency or disaster incident.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a plan for patient and resident care and clinical support.

Element(s) of Performance for EM.12.02.05

New EP 1 The organization's plan for providing patient and resident care and clinical support includes written procedures and arrangements with other organizations and providers for how it will share patient and resident care information and medical documentation and how it will transfer patients and residents to other health care facilities to maintain continuity of care.
Note 1: The sharing of patient and resident care information and medical documentation is in accordance with law and regulation.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's emergency operations plan includes policies and procedures for providing patient and resident care and clinical support that are specific to the organization.

Ⓓ **Documentation is required**

New EP 3 The organization's plan for managing deceased patients during an emergency or disaster incident includes coordinating with the local medical examiner's office, local mortuary services, and other local, regional, or state services, as applicable.

New EP 5 For organizations that elect The Joint Commission Memory Care Certification option: The emergency operations plan addresses the special needs of patients and residents diagnosed with dementia. The plan includes the following:
- How supervision will be maintained during evacuations
- How to manage agitation or anxiety when the environment or circumstances change
- How staff will maintain access to the resident's medical history, current medication orders, physician information, and family contacts
Note: The Alzheimer's Association recommends that organizations consider enrolling in a wandering response service.

Ⓓ **Documentation is required**

EM.12.02.07

The organization has a plan for safety and security measures to take during an emergency or disaster incident.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a plan for safety and security.

Element(s) of Performance for EM.12.02.07

New EP 1 The organization has a plan for safety and security measures to take during an emergency or disaster incident (such as identifying a location to shelter in place during severe weather or clear signage for evacuating the building safely). Refer to EC.02.01.01 for managing safety and security risks.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's emergency operations plan includes policies and procedures for providing safety and security measures that are specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's plan for safety and security measures includes a system to track the location of its on-duty staff and volunteers, patients, and residents when sheltered in place, relocated, or evacuated. If on-duty staff, volunteers, patients, or residents are relocated during an emergency, the organization documents the specific name and location of the receiving facility or evacuation location.
Note 1: The organization identifies a way to track patients and residents who might be susceptible to wandering after emergency measures are activated.
Note 2: Examples of systems used for tracking purposes include the use of established technology or tracking systems or taking head counts at defined intervals.

Ⓓ **Documentation is required**

EM.12.02.09

The organization has a plan for managing resources and assets during an emergency or disaster incident.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a plan for resources and assets.

Element(s) of Performance for EM.12.02.09

The Joint Commission

New EP 1 The organization's plan for managing its resources and assets describes in writing how it will document, track, monitor, and locate the following resources (on-site and off-site inventories) and assets during and after an emergency or disaster incident:
- Medications and related supplies
- Medical/surgical supplies
- Medical gases including oxygen and supplies
- Potable or bottled water and nutrition
- Non-potable water
- Laboratory equipment and supplies
- Personal protective equipment
- Fuel for operations
- Equipment and nonmedical supplies to sustain operations
Note 1: The organization should be aware of the resources and assets it has readily available and what resources and assets may be quickly depleted depending on the type of emergency or disaster incident.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's emergency operations plan includes policies and procedures for managing resources and assets that are specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's plan for managing its resources and assets describes in writing how it will obtain, allocate, mobilize, replenish, and conserve its resources and assets during and after an emergency or disaster incident, including the following, based on the settings and services provided:
- Coordinating within the health care system to request resources
- Coordinating with local supply chains or vendors
- Coordinating with local, state, or federal agencies for additional resources
- Coordinating with regional health care coalitions for additional resources
Note 1: High priority should be given to resources that are known to deplete quickly and are extremely competitive to receive and replenish (such as fuel, oxygen, personal protective equipment, ventilators, intravenous fluids, antiviral and antibiotic medications).
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's emergency operations plan includes policies and procedures for managing resources and assets that are specific to the organization.

Ⓓ **Documentation is required**

New EP 3 The organization's plan for managing its resources and assets describes in writing the actions the organization will take to sustain its needs for up to 96 hours based on calculations of current resource consumptions.
Note 1: Organizations are not required to remain fully functional for 96 hours or stockpile 96 hours' worth of supplies.
Note 2: The 96-hour time frame provides a framework for organizations to evaluate their capability to be self-sufficient for at least 96 hours. For example, if an organization loses electricity and has backup generators, the emergency operations plan for resources and assets establishes how much fuel is on hand and how long those generators can be operated before determining next steps. The plan may also address conservation of resources and assets, such as rationing existing resources, canceling noncritical procedures, or redirecting resources.

Ⓓ **Documentation is required**

EM.12.02.11

The organization has a plan for managing utility systems during an emergency or disaster incident.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a plan for utilities management.

Element(s) of Performance for EM.12.02.11

New EP 1 The organization's plan for managing utilities describes in writing the utility systems that it considers essential or critical to be able to continue to provide care, treatment, and services during an emergency or disaster incident.
Note 1: Essential or critical utilities to consider may include systems for electrical distribution; emergency power; heating, ventilating, and air conditioning; plumbing and steam boilers; medical gas; medical/surgical vacuum; and network or communication systems.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management program when determining essential or critical utility systems that are specific to the needs of the organization.

Ⓓ **Documentation is required**

New EP 2 The organization's plan for managing utilities describes in writing how it will continue to maintain essential or critical utility systems if one or more are impacted during an emergency or disaster incident.

Ⓓ **Documentation is required**

New EP 3 The organization's plan for managing utilities describes in writing alternative means for providing essential or critical utilities, such as water supply, emergency power supply systems, fuel storage tanks, or emergency generators.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management program when determining alternative utility systems that are specific to the needs of the organization.

Ⓓ **Documentation is required**

New EP 4 The organization's plan for managing utilities includes alternate sources for maintaining energy to the following:
- Heating and cooling systems to protect patient/resident health and safety and for the safe and sanitary storage of provisions
- Emergency lighting
- Fire detection, extinguishing, and alarm systems
- Sewage and waste disposal
Note 1: It is important for organizations to consider alternative means for maintaining temperatures at a level that protects the health and safety of all persons within the facility. For example, when safe temperature levels cannot be maintained, the organization considers partial or full evacuation or closure.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the organization's leader(s) collaborates with the system's emergency management program when determining alternative sources for maintaining energy that are specific to the needs of the organization.

Ⓓ **Documentation is required**

EM.13.01.01

The organization has a continuity of operations plan.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a continuity of operations plan.

Element(s) of Performance for EM.13.01.01

New EP 1 The organization has a written continuity of operations plan (COOP) that is developed with the participation of key executive leaders, business and finance leaders, and other department leaders as determined by the organization. These key leaders identify and prioritize the services and functions that are considered essential or critical for maintaining operations.
Note 1: The COOP provides guidance on how the organization will continue to perform its essential business functions to deliver essential or critical services. Essential business functions to consider include administrative/vital records, information technology, financial services, security systems, communications/telecommunications, and building operations to support essential and critical services that cannot be deferred during an emergency; these activities must be performed continuously or resumed quickly following a disruption.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's COOP includes prioritizing essential or critical services and functions that are specific to the organization.

(D) **Documentation is required**

New EP 2 The organization's continuity of operations plan identifies in writing how and where it will continue to provide its essential business functions when the location of the essential or critical service has been compromised due to an emergency or disaster incident.
Note: Examples of options to consider for providing essential services include the use of off-site locations, space maintained by another organization, existing facilities, telework (remote work), or telehealth.

(D) **Documentation is required**

New EP 3 The organization has a written order of succession plan that identifies who is authorized to assume a particular leadership or management role when that person(s) is unable to fulfill their function or perform their duties.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's written order of succession includes roles and responsibilities that are specific to the organization.

(D) **Documentation is required**

New EP 4 The organization has a written delegation of authority plan that provides the individual(s) with the legal authorization to act on behalf of the organization for specified purposes and to perform specific duties.
Note 1: Delegations of authority are an essential part of an organization's continuity program and should be sufficiently detailed to make certain the organization can perform its essential functions. Delegations of authority will specify a particular function that an individual is authorized to perform and includes restrictions and limitations associated with that authority.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's written delegation of authority plan identifies legal authorizations that are specific to the organization.

Ⓓ **Documentation is required**

EM.14.01.01

The organization has a disaster recovery plan.
Note: The organization considers its prioritized hazards identified as part of its hazard vulnerability analysis when developing a disaster recovery plan.

Element(s) of Performance for EM.14.01.01

New EP 1 The organization has a written disaster recovery plan that describes strategies, actions, and individual responsibilities necessary to restore the organization's care, treatment, or services after an emergency or disaster incident.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's disaster recovery plan addresses strategies that are specific to the organization.

Ⓓ **Documentation is required**

EM.15.01.01

The organization has an emergency management education and training program.
Note: The organization integrates its prioritized hazards identified as part of its hazard vulnerability analysis into education and training.

Element(s) of Performance for EM.15.01.01

New EP 1 The organization has a written education and training program in emergency management that is based on the prioritized risks identified as part of its hazard vulnerability analysis, the emergency operations plan, communication plan, and policies and procedures.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system's education and training program includes information specific to the organization.

Ⓓ **Documentation is required**

New EP 2 The organization provides initial education and training in emergency management to all new and existing staff, individuals providing services under arrangement, and volunteers that is consistent with their roles and responsibilities in an emergency. The initial education and training include the following:
- Activation and deactivation of the emergency operations plan
- Communications plan
- Emergency response policies and procedures
- Evacuation, shelter-in-place, and lockdown procedures
- Where and how to obtain resources and supplies for emergencies (such as procedures manuals or equipment)
Documentation is required.
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system provides initial education and training that is specific to the organization's staff roles and responsibilities.

Ⓓ **Documentation is required**

New EP 3 The organization provides ongoing education and training to all staff, individuals providing services under arrangement, and volunteers that is consistent with their roles and responsibilities in an emergency:
- At least annually
- When roles or responsibilities change
- When there are significant revisions to the emergency operations plan, policies, and/or procedures
- When procedural changes are made during an emergency or disaster incident requiring just-in-time education and training
Documentation is required.
Note 1: Staff demonstrate knowledge of emergency procedures through participation in drills and exercises, as well as post-training tests, participation in instructor-led feedback (for example, questions and answers), or other methods determined and documented by the organization.
Note 2: Organizations are not required to retrain staff on the entire emergency operations plan but can choose to provide education and training specific to the new or revised elements of the emergency management program.
Note 3: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the system provides ongoing education and training that is specific to the organization's staff roles and responsibilities.

Ⓓ **Documentation is required**

EM.16.01.01

The organization plans and conducts exercises to evaluate its emergency operations plan and response procedures.
Note: The organization integrates its prioritized hazards identified as part of its hazard vulnerability analysis into the development of emergency exercises.

Element(s) of Performance for EM.16.01.01

New EP 1 The organization describes in writing a plan for when and how it will conduct annual testing of its emergency operations plan. The planned exercises are based on the following:
- Likely emergencies or disaster scenarios
- Emergency operations plan and policies and procedures
- After-action reports (AAR) and improvement plans
- The six critical areas (communications, staffing, patient/resident clinical and support services, safety and security, resources and assets, and utilities)
Note 1: The planned exercises should attempt to stress the limits of its emergency response procedures in order to assess how prepared the organization may be if a real event or disaster were to occur based on past experiences.
Note 2: An AAR is a detailed critical summary or analysis of an emergency or disaster incident, including both planned and unplanned events. The report summarizes what took place during the event, analyzes the actions taken by participants, and provides areas needing improvement.

Ⓓ **Documentation is required**

New EP 2 The organization is required to conduct two exercises per year, including unannounced staff drills using emergency procedures, to evaluate the emergency operations plan.
- One of the annual exercises consists of an operations-based exercise as follows:
  - Full-scale, community-based exercise; or
  - Functional, facility-based exercise when a community-based exercise is not possible
- The other annual exercise consists of either an operations-based or discussion-based exercise as follows:
  - Full-scale, community-based exercise; or
  - Functional, facility-based exercise; or
  - Mock disaster drill; or
  - Tabletop, seminar, or workshop that is led by a facilitator and includes a group discussion using narrated, clinically relevant emergency scenarios and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan.
Exercises and actual emergency or disaster incidents are documented (after-action reports).
Note 1: The organization would be exempt from conducting its next annual operations-based exercise if it experiences an actual emergency or disaster incident (discussion-based exercises are excluded from exemption). An exemption only applies if the organization provides documentation that it activated its emergency operations plan.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, each organization may choose to conduct its own exercises or participate in the system's regional exercises.
Note 3: See the Glossary for the definitions of operations-based and discussion-based exercises.

Ⓓ **Documentation is required**

EM.17.01.01

The organization evaluates its emergency management program, emergency operations plan, and continuity of operations plans.

Element(s) of Performance for EM.17.01.01

New EP 1 The committee that oversees the emergency management program reviews and evaluates all exercises and actual emergency or disaster incidents. The committee reviews after-action reports (AARs), identifies opportunities for improvement, and recommends actions to take to improve the emergency management program.
The AARs and improvement plans are documented.
Note 1: An AAR provides a detailed critical summary or analysis of a planned exercise or actual emergency or disaster incident. The report summarizes what took place during the event, analyzes the actions taken by participants, and provides areas needing improvement.
Note 2: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the AARs and improvement plans may be developed at the system level.

(D) **Documentation is required**

New EP 2 The after-action reports, any identified opportunities for improvement, and any recommended actions to improve emergency management are forwarded to the organization's leader(s) for review.

New EP 3 The organization reviews and makes necessary updates to the following items at least annually, or more frequently if necessary:
- Emergency management program
- Hazard vulnerability analysis
- Emergency operations plan, policies, and procedures
- Communications plan
- Continuity of operations plan
- Education and training program
- Exercise program
Note: If the organization is part of a health care system (such as a corporate nursing care or senior health care organization) that has a unified and integrated emergency management program, the updates to the items listed may be developed at the system level with participation from the organization's leader(s).

(D) **Documentation is required**