

Focus on Function Outpatient Rehab Agency

Emergency Preparedness Policy and Procedure Effective 11/17/2017

Policy: The Emergency Preparedness and Response Plan (EPRP) will be initiated for emergency situations that interfere with normal operations and disrupt outpatient therapy service delivery.

Purpose: To maintain agency operations and /or mitigate service disruption during emergency situations that impact the internal and external agency environment, staff and clients.

Procedure:

The agency will take the following actions to develop, maintain, and implement an emergency preparedness and response plan (EPRP) for patients receiving PT OT ST services:

1. The Administrator and other individuals designated by the administrator will be involved in the development of the EPRP.
2. The Administrator will designate the Rehab Coordinator and Business Operations Manager as alternates to act as the agency's disaster coordinators.
3. A continuity of business operations plan that addresses emergency financial needs, essential functions for client services, critical personnel and vendors, and how to return to normal operations as quickly as possible will be included as part of the EPRP .
4. As part of the EPRP development the agency will conduct a risk assessment to identify the potential disasters most likely to occur in the agency's service area.
5. The EPRP will include a description of the actions and responsibilities for agency staff in emergency planning for the applicable potential disasters identified in the agency's risk assessment/hazard vulnerability assessment.
6. The Administrator will monitor disaster-related news and information, including after hours, weekends, and holidays, to receive warnings of imminent and occurring disasters when known. Several methods, including but not limited to the following, may be used to monitor such known or impending disasters:
 - a. Television
 - b. Radio, NOAA weather radio
 - c. Internet
 - d. Emergency broadcast channels, apps and alerts
7. The following actions will occur as part of the response and recovery phase of the EPRP:
 - a. The administrator or designee may initiate each phase.
 - b. The administrator or designee(s) as part of the agency's communication protocol will communicate with:
 - i. Leaders and owners (if applicable)

ii. Staff

iii. Clients or someone responsible for a client's EPRP

iv. County and city emergency management officials if needed during and after an event

v. State and Federal emergency management entities if warranted by the nature of the event and;

vi. Other entities as applicable such as:

1. Medical Emergency Response Center (MERC 405-297-7200), OKSDH (405-419-4231)

2. Emergency Medical Services

3. Other health care providers

c. The primary mode of communication will be texting to cell phones (see "Emergency Phone list Staff Communication Tree") and calling other listed entities from cell phones. If the primary mode of communication fails, other methods including but not limited to Land line phones, email, Internet technologies may be used.

7. The agency will release and maintain client information as allowed by state and federal law in accordance with the HIPAA Privacy Rule for release of records and sharing patient information.

8. Sheltering in Place or Evacuation: In the event that an emergency requires staff and clients to shelter in place such as chemical, biological, or radiological contaminants released into the environment in such quantity and/or proximity that authorities and/or Administrator determine that it is safer to remain indoors rather than to evacuate employees. The Administrator shall announce Shelter in Place status by email and intercom and close the business. If there are customers, clients, or visitors in the building, they shall be advised to stay in the building for their safety. Follow Shelter in Place Procedure.

9. The Administrator will identify when staff and clients need to evacuate the clinic and notify via intercom and email. In the event of evacuation/ in the event of an emergency, maintain triage records in order to coordinate and communicate with the appropriate individuals and relevant state, federal and local, tribal, regional, officials if applicable. The agency is not responsible for physically evacuating clients. Medical Emergency Response Center (MERC 405-297-7200) can be contacted for evacuee management. The administrator will also inform State and local officials of any on duty staff or patients whom we are unable to contact. The clinic will be closed by the Administrator in situations of advance notice of potential emergency such as weather.

10. Alarm Systems and signals are in place and in working order for the purpose of reducing the severity of workplace accidents and injuries by ensuring that alarm systems operate properly and procedures are in place to alert employees to workplace emergencies. See floor plan for location of alarms, fire extinguishers and exit routes. The alarm system will inform all affected employees that an emergency exists. For alarm systems to provide adequate notification in the event of an emergency, Focus on Function shall have annual fire safety inspections by the Fire Marshall and American Fire and Safety company to assure that all fire safety systems, devices are installed and functioning accordingly to comply with approved fire safety standards.

11. The agency will ensure that all staff are trained and oriented about their responsibilities in the agency's EPRP upon hire, annually and when the plan is revised.

12. The Administrator and other individuals (if applicable) designated by the administrator will review the plan at least annually, and after each actual emergency response, to evaluate its effectiveness and to update the plan as needed. Collaboration with fire, safety experts will be included in annual review.

13. As part of the annual internal review, the agency will table top test the response phase of the EPRP in a planned table top exercise drill if not tested during an actual emergency response. The documentation demonstrating compliance shall remain available for review at any time for a period of no less than three years.

14. Focus on Function will make a good faith effort to comply with the requirements of this policy during a disaster. If the agency is unable to comply with any of the requirements of this policy, the agency will document in the agency's records attempts of staff to follow procedures outlined in the emergency preparedness and response plan.

15. Certain emergency situations that are beyond the agency's control, such as when roads are impassable, may make it impossible to provide services. In the event that it is not possible to reach the clinic to provide services to clients due to impassable roads, the agency will contact the clients and inform them the clinic is closed until we call to reschedule appointments. Focus on Function staff are able to provide Physical, Occupational and Speech Therapy services in an emergency.

16. Secure and Maintain Availability of medical records: Client records are maintained in electronic data format with nightly offsite back up housing of data and an external hard drive back up which will be taken home nightly with an employee as an additional form of data backup. The software vendor will also maintain capability to recover electronic health records from any damage to computer equipment or files. In the event of an emergency requiring use of paper records, the Administrator will maintain triage records in order to coordinate and communicate with the appropriate individuals and relevant state, federal and local officials if applicable. Client records can also be accessed via laptop or remote access.

17. Focus on Function will provide the following information to the OKSDH licensing office no later than five working days after any of the following temporary changes resulting from the effects of an emergency or disaster. The notice and information will be submitted by fax or e-mail. If fax and e-mail are unavailable, notifications will be provided by telephone, and followed up in writing as soon as possible. If communication with the licensing office is not possible, Focus on Function will fax, e-mail, or telephone the designated survey office to provide notification.

a. Temporary Relocation of the clinic:

b. the license number for the place of business and the date of temporary relocation;

c. the physical address and phone number of the temporary location; and

d. the date an agency returns to a place of business after temporary relocation.

18. The EPRP will be initiated for the highest risk hazards for the Focus on Function service area per our hazards risk assessment. These high risk hazards for Focus on Function of tornado, winter weather

events, flood and fire will be addressed following the individual emergency procedures. Active shooters will additionally be addressed. Refer to individual hazard procedures to follow.