

# CMS Preparedness Rules for CMHC's



# CMHC Preparedness Rule

## SUMMARY OF NEW REQUIREMENTS

Under the terms of the newly released rule, CMS will require providers to develop and implement the following:

### 1. Risk Assessment & Planning

A risk assessment plan that identifies a multitude of threat scenarios and has the capacity to address a broad range of related emergencies;

### 2. Policies and Procedures

A site-specific emergency plan based upon this risk assessment and focused on capacities and capabilities that are critical to preparedness for a full spectrum of emergencies; Policies and procedures that support the successful execution of the emergency plan and risks identified during the risk assessment process.

### 3. Communication Planning

A communication plan explaining how to contact appropriate staff, professionals and caregivers in a timely manner to ensure continuation of patient care; and

### 4. Training and Testing (annually)

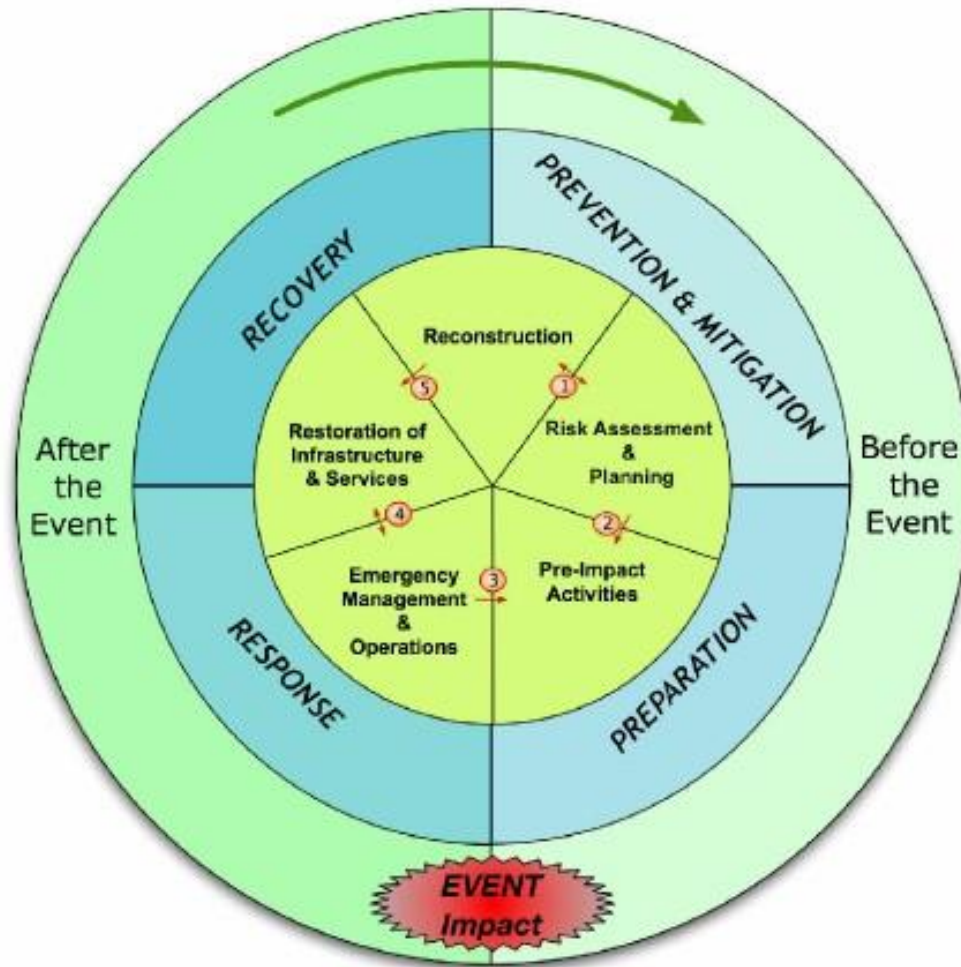
Initial training for staff on policies and procedures. A testing program that is based on emergency plan, communication plan, and risk assessment. Participate in one full-scale exercise and one facility or community based exercise.

## Implementation Date

1 year from final publication of rule (approximately October 2017)



# The Disaster Cycle

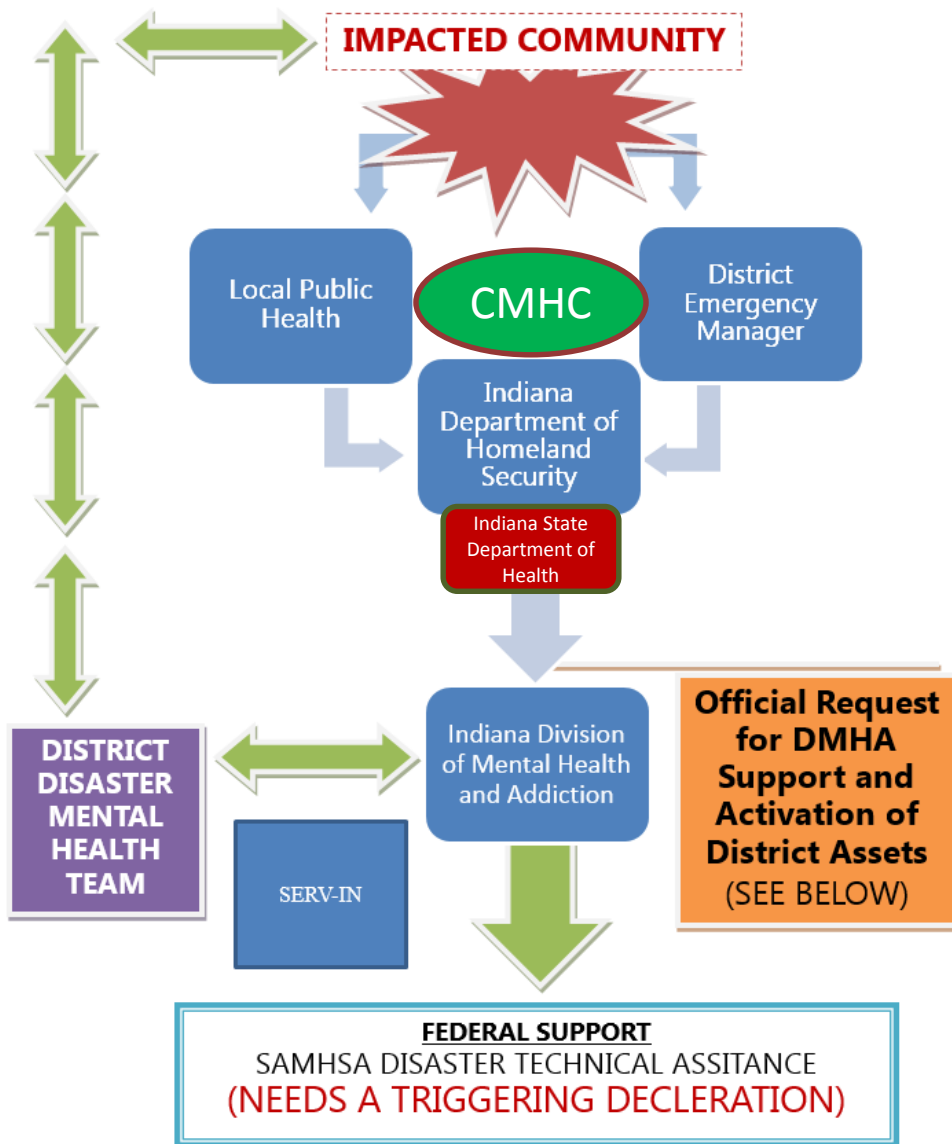


# Event

- All Hazard Threats
- Non-Traditional Events
- Black Swan Events

“The black swan theory or theory of black swan events is a metaphor that describes an event that comes as a surprise, has a major effect, and is often inappropriately rationalized after the fact with the benefit of hindsight. The term is based on an ancient saying which presumed black swans did not exist, but the saying was rewritten after black swans were discovered in the wild.”





Surge capacity represents the ability to manage a sudden, unexpected increase in patient volume that would otherwise severely challenge or exceed the current capacity of the health care system.

# CMHC Preparedness Requirements: Five Functional Areas



risk assessment and planning



policies and procedures



communications planning



training and testing



integrated health systems



# Risk Assessment and Planning

## Solution

- DMHA will provide (5) one day Continuity of Operations Planning (COOP) workshops to CMHC's.
  - May, June, July, August, and September
- This workshops will include completion of:
  - COOP,
  - Risk Assessment
  - Call-down Matrix
  - Contact List for Employees and State Officials.

Completed no later than August 30,2017



# Policies and Procedures

## Solution

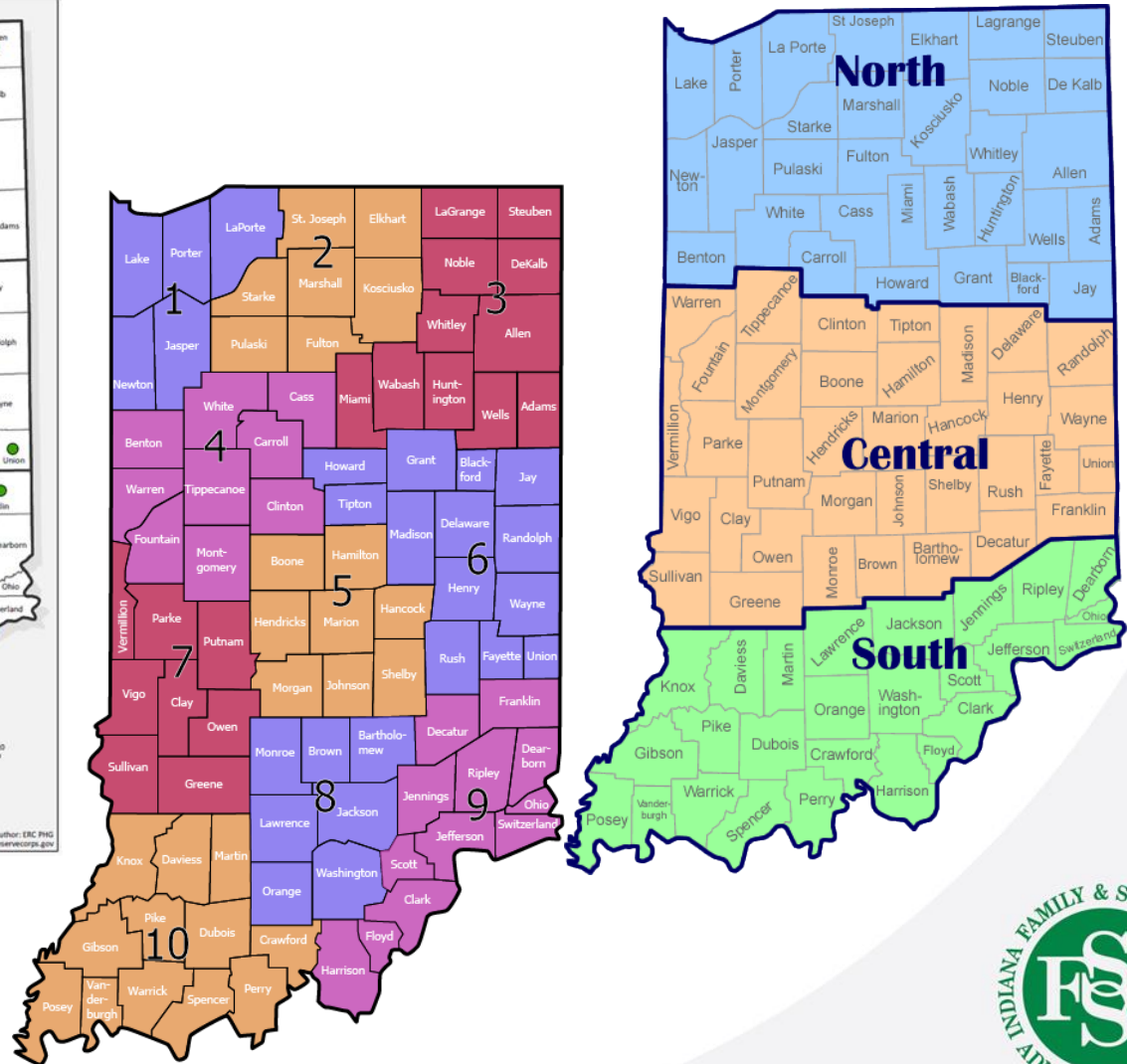
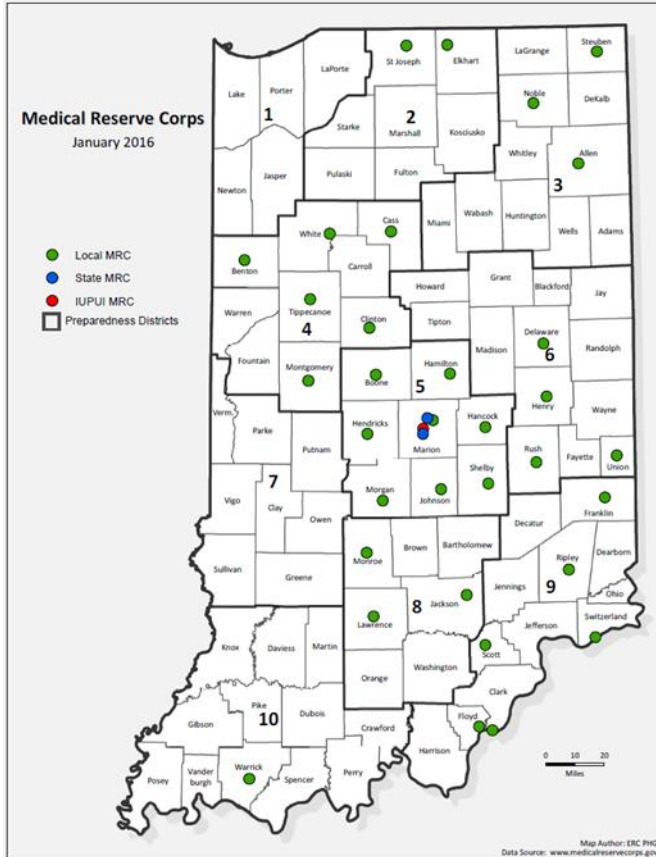
- Completion of Disaster Mental Health Response Plan
- Completion of medical reserve corps training and participant identification from each CMHC through mission ready packages.
- Transition state to three regional disaster behavioral health coalitions which have MOU's with other CMHC's to maintain continuity of services in the event of a disaster.

Completed no later than August 30, 2017





# Behavioral Health Coalitions



# Communication Planning

## Solution

- COOP training will help the CMHC catalog and gather pertinent information for communication plan.
- In addition to completion of DMHA' CMHC preparedness template will establish communication plan with DMHA and other state/local official.
- Identifying staff for the districts REST team will ensure effective communication with non-traditional partners and the medical reserve corps.

Completed no later than August 30, 2017.



# Training and Testing

## Solution

- PsySTART software and service portfolio which will create a cadre of trainers in Listen, Protect, Connect: Psychological First Aid; Anticipate, Respond, Deter: Resilience Tool. A cadre will be pulled from CMHC's.
- 26 Red Ball Drills (one per CMHC) will cover the exercise, testing, and HVA component.
- DMHA will review DMHA's CMHC preparedness template provided to the CMHC's and provide technical assistance.
- DMHA will deliver webinars on all-hazards disaster mental health for REST teams and CMHC's.
- Having staff on the REST team will allow for participation in full-scale exercises.



# Drills

25 red ball drills per year to test and train CMHC's

## Executive Summary

Active attacker and workplace violence threats are on the rise in the US and globally; preparation is the key to limiting the terrifying possibilities of these attacks. IFSSA has indicated a need to conduct proactive workplace violence training for their facilities. The **Red Ball Drills**<sup>®</sup> program provides a comprehensive security/safety review, utilizing proprietary methodology. Experior Group, Inc. (EGI) conducts focused testing of active shooter and workplace violence preparedness. EGI consultants lead realistic, "live" scenarios and in-depth discussions with clients to identify critical information for developing the correct policies and procedures.



# Summary

- CMHC's **MUST** be compliant by October 31, 2017.
- Participation is encouraged.
- DMHA will cover the cost of Red Ball Drills.
- CMHC's are encouraged to engage local healthcare coalitions.
- CMHC's must identify staff for district REST team.



# QUESTIONS?

Michael Ross, MSW, LCSW

Email: [Michael.Ross@fssa.in.gov](mailto:Michael.Ross@fssa.in.gov)

Phone: (317) 460-2452

