

Transforming
Lives

EMERGENCY PLANS AND CRITICAL STAFFING MANAGEMENT IN LONG-TERM CARE SETTINGS

Residential Care Services

February 2024



This Training is to Help Participants:

1. Understand Emergency Plan Regulatory Requirements in Long-Term Care (LTC) Settings.
 - Know the LTC Setting Requirements to Notify the Complaint Resolution Unit (CRU) When Activating Emergency Plans.
2. Learn the Term “Critical Staffing Management” for LTC Settings.
 - Identify Options for Prioritizing Care Along a Continuum When Staffing is at Crisis Levels due to Emergency Events.
3. State How Critical Staffing Management Relates to Emergency Plan Activation.



What are Emergency Plans?

Emergency Plans Are:

- Written documents on how the LTC setting will meet the needs of each resident or client during emergencies and disasters.
- Outline the response to natural and man-made emergencies and disasters that could occur.
 - Weather related incidents - flood, mud, storm
 - Disaster - fire, building collapse
 - Public health emergencies (PHE) - infectious illness pandemic
- ***Are not activated for chronic low or temporary staffing shortages unrelated to a natural or man-made emergencies or disaster.***

Emergency Plan Regulatory Requirements

Adult Family Homes (AFH) [WAC 388-76-10830](#) Emergency and disaster plan—Required.

Assisted Living Facilities (ALF) [WAC 388-78A-2700](#) Emergency and disaster preparedness (g).

Nursing Homes (NH) [WAC 388-97-1740](#) Disaster and emergency preparedness.

Enhanced Services Facilities (ESF) [WAC 388-107-1600](#) Emergency disaster plan.

Certified Community Residential Supports & Services [WAC 388-101D-0060](#) Policies and procedures.

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) [42 CFR § 483.475](#) - Condition of participation: Emergency preparedness.

Each LTC setting is required to have an emergency plan.

Federal Emergency Plan Regulatory Requirements

Emergency Preparedness Requirements for the Centers for Medicare and Medicaid Services (CMS) refers to NH & ICF/IID

Includes 4 core elements:

- Risk assessment and emergency planning
- Policies and procedures
- Communication plan
- Training and testing



Emergency Plan Reporting Requirements

Adult Family Homes (AFH) [WAC 388-76-10225](#) Reporting requirement.

Assisted Living Facilities (ALF) [WAC 388-78A-2650](#) Reporting fires and incidents.

Nursing Homes (NH) [WAC 388-97-1640](#) Required notification and reporting.

Enhanced Services Facilities (ESF) [WAC 388-107-0610](#) Reporting fires and incidents.

AFH, ALF, NH and ESF LTC settings are required to notify the department when an unusual event requires implementation of the disaster plan and/or circumstances which threaten the ability to ensure continuation of services to residents.

Notify Who? When?

NH, ALF: must *immediately* notify the department's aging and disability services administration (ADSA)

ESF: Must *immediately* report to the department

AFH: Report by calling the complaint toll-free hotline number

NOTE: “ADSA” and “the department” means the complaint resolution unit (CRU)

Critical Staffing Management

- During the 2020-2023 COVID-19 public health emergency, some LTC settings implemented disaster plans to manage critical staffing shortages.
- RCS developed critical staffing management guidelines in collaboration with ombuds and provider associations.
- Guidelines addressed strategies to mitigate impact of staffing shortages and supply chain issues *secondary to emergent events or disasters*.

Staffing shortages alone do not justify implementing critical staffing management strategies

Critical Staffing Management in Long-Term Care 2021

Original Goal:

- Keep residents and clients in their home.
- Prevent emergent transfers related to staffing issues.
- Limit stress on hospitals and the health care system during the public health emergency (PHE).

Original Documents:

- Created to address critical staffing shortages in LTC settings related to the COVID-19 Pandemic.
- Adapted framework from Crisis Standards of Care developed for the fair allocation of scarce resources during emergencies.

Continuum of Emergency Care – Including Staffing Management



Conventional: Normal level of healthcare resources.

Contingency: Demand for healthcare resources begins to exceed supply but adaptations are possible to still deliver functionally equivalent care.

Crisis: Resources are exceeded by demand or depleted; functionally equivalent care is no longer possible to address all requirements and there is a risk to resident/client or provider.

Primary Goal of Implementing Critical Staffing Management

Implemented When: *an emergent event or disaster has taken place, leading to staffing shortages, and emergent transfers are not available.*

Focus On:

- Providing essential supportive services including eating/drinking, personal hygiene, and safety.
- Administering only essential medications and treatments.
- Comfort care, including fluids and pain management.

Critical Staffing Management RCS Guide

- Tool to help LTC settings consider options when faced with critical staffing crises.
- Not mandated or required by RCS.
- Identifies regulations, care and services that could be delayed, decreased, stopped, or modified during contingency and crisis staffing conditions.



Critical Staffing Management RCS Guide

Regulations/Care services that could be delayed/decreased/stopped or modified	Contingency Demand for healthcare resources begins to exceed supply but adaptations are possible to still deliver functionally equivalent care	Crisis Resources are exceeded by demand or depleted; functionally equivalent care is no longer possible to address all requirements and there is a risk to patient/resident or provider
Showers	<input type="checkbox"/> Decrease (resident/client preference)	<input type="checkbox"/> Primarily bed baths/wash ups-showers as able
Nailcare	<input type="checkbox"/> Reduce	<input type="checkbox"/> Stop with exception of Diabetic nail care
Restorative programs (including toileting programs)	<input type="checkbox"/> Reduce	<input type="checkbox"/> Stop with exception of independent programs
Outings-facility arranged/organized	<input type="checkbox"/> Medically Necessary only	<input type="checkbox"/> Request family to assist with medically necessary appointments
Activities	<input type="checkbox"/> Reduce frequency	<input type="checkbox"/> Stop-focus on res care needs
Visitations	<input type="checkbox"/> Reduce times allowed	<input type="checkbox"/> Reduce times allowed
Resident council meetings	<input type="checkbox"/> Reduce frequency	<input type="checkbox"/> Stop-address grievances individually
Dining (including mealtimes)	<input type="checkbox"/> Modify mealtimes, allow variation, limit choices	<input type="checkbox"/> Focus on 3 meals/day & snacks; alternates may not be available for lunch/dinner meals

Critical Staffing Management in Long-Term Care

Updates: February 2024

Changed:

- Removed references to COVID-19.
- Emergent transfers may be preferable to Critical Staffing Management Strategies.

Unchanged:

- Strategies to provide essential supportive services and reporting.
- Critical Staffing Strategies may be implemented:
 - *When emergency plans are activated, and*
 - Emergent events lead to staffing shortages and transfers are not feasible.
- Before critical staffing strategies are implemented, Long-Term Care (LTC) settings should coordinate with the department.

AL TSA

Long-Term Care Professionals & Providers

Residential Care Services

Adult Family Home Providers

Assisted Living Facility Professionals

Nursing Home Professionals

Certified Community Residential Setting Providers

ICFs/IID Providers

Enhanced Services Facilities

BAAU Application Processing Timeline

Behavioral Health Support for Providers

Informal Dispute Resolution (IDR)

RCS Management Bulletins

Home & Community Services

Office of Rates Management

▶ Training Information

▶ Nurse Delegation Program

Nursing Services

Residential Care Services

RCS is responsible for the licensing and oversight of adult family homes, assisted living facilities, nursing facilities, intermediate care facilities for individuals with intellectual disabilities, and certified community residential services and supports. Our mission is to promote and protect the rights, security and well being of individuals living in these licensed or certified residential settings.

Facility Information

- Adult Family Home Providers
- Assisted Living Providers
- Nursing Home Professionals
- Certified Community Residential Services and Supports
- Enhanced Services Facilities
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Nursing Assistant Program

Resources

- Critical Staffing Management in LTC Settings Guide
- Behavioral Health Support for Providers
- Informal Dispute Resolution
- Tables and Charts
- Emergency Planning Information
- Nurse Aide Registry



Submit COVID-19 Data

Make an Online Incident Report

Management Bulletins

Provider Letters

Contact Us

<https://www.dshs.wa.gov/altsa/residential-care-services/residential-care-services>

LTC Setting Procedure

Activate Emergency Plans When:

- There is an emergency or disaster AND
- Resources are exceeded by demand or depleted AND
- Functionally equivalent care is no longer possible to address all requirements AND
- Emergent transfer is not possible

Providers Are Encouraged to Contact the RCS Field Manager to Discuss:

- Options for adjusting operations
- Standards of care to preserve and effectively allocate limited resources

Frequently Asked Questions

What Must LTC Settings Document When Moving to Contingent or Crisis Level Care Standards?

- Any time a specific resident/client care plan is not delivered, then document in the resident/client record.
- If the LTC setting implements an emergency / disaster plan to relocate residents/clients, contact CRU (this documents the response).
- Follow LTC setting policy / procedure / emergency plan related to documentation.

Even if there is not a specific regulatory requirement for your LTC setting, notification of the department when emergency plans are activated facilities a coordinated response to the event.

Emergency Plan Review

Emergency Plans Are:

- Written documents on how the LTC setting will meet the needs of each resident or client during emergencies and disasters.
- Outline the response to natural and man-made emergencies and disasters that could occur.
 - Weather related incidents - flood, mud, storm
 - Disaster - fire, building collapse
 - Public health emergencies (PHE) - infectious illness pandemic
- ***Are not activated for chronic low or temporary staffing shortages unrelated to a natural or man-made emergencies or disaster.***

Critical Staffing Management Summary

Critical Staffing Management: Continuum of Care under emergency / disaster plans activated when:

- Resources are exceeded by demand or depleted AND
- Functionally equivalent care is no longer possible to address all requirements AND
- Emergent transfer is not possible

FOCUS: Providing essential supportive services including eating/drinking, personal hygiene, essential medications, treatments, and safety.

EXPECTATION: LTC settings will return to conventional care standards once the critical staffing shortage has passed.

Participants Should Now:

1. Understand Emergency Plan Regulatory Requirements in Long-Term Care (LTC) Settings.

- Including LTC Setting requirements to Notify the Complaint Resolution Unit (CRU) When Activating Emergency Plans.

2. Know the Term “Critical Staffing Management” for LTC Settings.

- List Options for Prioritizing Care Along a Continuum When Staffing is at Crisis Levels due to Emergency Events.

3. Grasp How Critical Staffing Management Relates to Emergency Plan Activation.



References

Institute of Medicine 2013. Crisis Standards of Care: A Toolkit for Indicators and Triggers. Washington, DC: The National Academies Press. <https://doi.org/10.17226/18338>

National Academies of Sciences, E. a. (2020, March 28). Rapid Expert Consultation on Crisis Standards of Care for. Retrieved from National Academies of Sciences, Engineering, and Medicine : <https://files.asprtracie.hhs.gov/documents/nap-rapid-expert-consultation-on-csc-for-covid-19-pandemic.pdf>

National Center for Biotechnology Information, U. N. (2012). Crisis Standards of Care: A Systems Framework for Catastrophic Disaster Response. Retrieved from Chapter 8 - Out-of-Hospital and Alternate Care Systems: <https://www.ncbi.nlm.nih.gov/books/NBK201069/>

Retrieved from Chapter 8 - Out-of-Hospital and Alternate Care Systems:
<https://www.ncbi.nlm.nih.gov/books/NBK201069/>

American Red Cross Disaster Preparedness Plan – [How to Prepare](#)

For questions, please contact:

Residential Care Services

Richard Freed, Emergency Preparedness Coordinator

Richard.Freed@dshs.wa.gov 360-819-7001

or

Infection Prevention and Control/Emergency Preparedness Team

DSHS/ALISA/RCS ipc.epteam@dshs.wa.gov