


**Emergency Preparedness Considerations
in the
Home Care Setting**

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Overview & Objectives

- Provide **background on the state's home care associations**: the Home Care Association of New York State, the NYS Association of Health Care Providers, & our roles in EP/ER
- Discuss the **home care system and hospice in NYS**
- Discuss our **Associations' current and planned collaborative initiatives in EP/ER** with the Office of Health Emergency Preparedness
- Discuss specific **challenges in home care/hospice EP/ER**
- **Engage** your questions, comments, recommendations, possible steps we can take together

Overview & Objectives

- ▶ The ultimate goal is to support collaborative work for the health and safety of medically needy individuals receiving care at home in emergencies



Background

- The Home Care Association of New York State (HCA) and the New York State Association of Health Care Providers (HCP) are statewide associations representing the home and community-based services sector of the health care continuum in New York State.
- Headquartered in Albany, with providers and organizational members statewide.
- Each association has assigned staff handling program/ policy development, technical assistance to providers, education, advocacy, state/federal legislative and executive engagement, research, communications, and more.

Background

- HCA and HCP are extensively engaged in activities to strengthen and support emergency preparedness and response, and to better integrate home and community based care into local, regional and state emergency management systems.
- HCA and HCP are collaborative partners to the State Department of Health's Office of Health Emergency Preparedness on progressive, multi-tiered initiatives in preparedness and response.
- The following is a summary of our Associations' organizational roles in emergency preparedness and response.

Roles in Emergency Preparedness & Response

We serve as:

- Principal sources of information, education, training and technical assistance for home and community based providers for emergency preparedness and response (and all other program areas).
- Collaborating partners with the Health Department's Office of Primary Care and Health Systems Management, and Office of Health Insurance Programs in their regulatory roles for providers and health plans, as well as in their jurisdictional roles in declared emergencies.
- Principal communication points for home care in emergency conditions, circulating and exchanging essential information, guidance and updates pertaining to any and all facets of the emergency in question.
- Collaborating partners with health associations and organizations representing other sectors (hospitals, nursing homes, clinics, etc.) in the continuum of care.
- Communication point to and from state and local agencies, organizations, and incident command in advance of, during and following emergency situations.
- Interface with federal agencies on emergency response policy.
- Collaborating partners with the State Department of Health's Office of Health Emergency Preparedness under a statewide initiative, which includes multi-tiered planning and structural improvement for emergency response in health care, including planning and response interface with Regional Health Emergency Preparedness Coalitions and Regional Training Centers.
- Advocates for policy development and/or revision to ensure the most effective emergency management system.

Home Care in NYS

- New York State has the **most comprehensive and diverse home and community based care system** in the nation.
- The **scope of home care is broad** – encompassing a wide array of both health and supportive services delivered at home.
- Home care agencies and programs provide **post-acute, rehabilitative, supportive and complex long term care** for medically needy elderly, adults and children.
- **Hospice** provides patients – in their homes, special "hospice residences, nursing facilities, and inpatient hospice settings – with comprehensive professional, supportive and spiritual services in the case of palliative care and/or quality end of life care.
- **Home care agencies** are sponsored or operated by free-standing entities (e.g., private agencies or voluntary agencies like Visiting Nurses), hospitals and nursing homes. Home care providers are state and federally certified or state licensed. New York's agencies cover the entire state and serve several hundred thousand cases annually. **Hospices** are distinctly and separately certified under state and federal law, and operate in all regions of the state



Home Care in NYS

- Home care clients **cross the spectrum of care**, from:
 - New mothers and infants; to
 - Children and adults with public health needs, or with medical fragility or disability who are maintained with skilled supervision, home support services, home modification and equipment; to
 - Seniors who need assistance with activities of daily living to remain in their homes; to
 - Postsurgical patients needing assistance with wound care;
 - And more.
- Hospice specializes in the care of extremely needy patients and families (young, adult and elderly alike) facing palliative/end-of-life care needs.

Home Care in NYS

- Home care agency services include
 - **professional services**
 - including care management, nursing, physical therapy, occupational therapy, speech pathology, medical social work, audiology, respiratory therapy, nutritional counseling and other
 - **aide care**
 - including home health aide, personal care aide, housekeeper
 - **telehealth** services, and
 - **other support services**
 - including home adaptations, home delivered meals, social day care

Home Care in NYS

- ▶ Providers of home care include all levels and types of agencies and programs, including:
 - ▶ • Certified home health agencies (CHHAs)
 - ▶ • Licensed home care services agencies (LHCSAs)
 - ▶ • Long Term Home Health Care Programs (LTHHCPs)
 - ▶ • Managed long term care (MLTC) plans
 - ▶ • Hospice
 - ▶ • Home and community based waiver programs
 - ▶ • Consumer Directed Personal Assistance models

Home Care in NYS

- New York's home care system also includes **an array of special needs programs**, agencies and services, such as for medically fragile children, persons with traumatic brain injury, persons with AIDS/HIV, persons with intellectual or physical disabilities, and others.
- **Importantly: Home care is not only the "in-home" visit and care** by nurses, therapists, social workers, aides and others, **but is also** care management, service partnerships with hospitals, physicians, managed care plans and other providers; partnership in care transitions, ER diversion, medical management, public health, telehealth, and more.

Home Care EP Regulations

- Home care agencies are required by regulations (state, and now also by federal) to establish and maintain emergency preparedness plans.
- **State DOH regulations** require home care agencies to develop and maintain emergency plans.
- The regulations specifically require the agency's governing authority to *"ensure the development of a written emergency plan which is current and includes procedures to be followed to assure health care needs of patients continue to be met in emergencies which interfere with delivery of services and orientation of all employees to their responsibilities in carrying out such a plan."*

Home Care EP Regulations

- In September, the **US Centers for Medicare and Medicaid Services** adopted emergency preparedness rules for all Medicare and Medicaid participating providers.
- These new rules add to the current state regulations.
- The effective/compliance date for providers is **November 2017**. Much time and attention has been and is currently being devoted to analysis, implementation planning and support, including a crosswalk between current NYS and federal rule obligations, and practical actions providers must take to simultaneously address both.

Home Care EP Regulations

- CMS has identified **four core elements** that central to emergency preparedness for providers.
- **Risk Assessment and Planning:** Providers are required to conduct a comprehensive risk assessment utilizing an "all-hazards" approach. Providers are also required to develop an emergency preparedness plan that addresses the emergency events identified in the risk assessment, to be reviewed and updated annually.

Home Care EP Regulations

- **Policies and Procedures:** Providers are required to implement policies and procedures based on the emergency plan and risk assessment, to be reviewed and updated annually.
- **Communication Plan:** Providers are required to: develop and maintain an emergency communication plan (reviewed and updated annually) to ensure coordination of patient care within and across health care providers, health departments, and emergency systems; establish HIPAA-compliant methods of sharing patient information and keeping medical records readily available during an emergency.

Home Care EP Regulations

- **Training and Testing:** Providers are required to develop and maintain an emergency preparedness training and testing program that includes initial training on all emergency preparedness policies and procedures developed as a result of this rule.
 - Providers are required to conduct drills and exercises to test emergency plans annually.

Home Care EP Regulations

- In addition, home care agency EP/ER requirements are further specified in a May 10, 2005 "Dear Administrator Letter" (DAL), which is also applied to hospice, and include:
 - 24x7 emergency contact
 - Call-down list of agency staff
 - Community contacts and partners (including local department of health, local emergency management, law enforcement and others)
 - Collaboration with local emergency management
 - Health Commerce System communications
 - Patient roster and contacts
 - Participation in drills and exercises
 - Annual EP plan updates
 - Prioritization of patients (level 1, 2 and 3), and
 - Other

Home Care Challenges in Emergency Preparedness

- Home care and hospice agencies and patients face **unique challenges in emergency preparedness** and response. Some key challenges are outlined below.
- **The home care setting itself** – The home care setting itself provides for unique and especially challenging aspects of emergency response, particularly when compared to facility-based care.
- Home care and hospice providers are handling **large numbers** of extremely **medically needy** and vulnerable individuals at home and in the community; many individuals reside in remote **rural or difficult to access settings** (like high rises).

Home Care Challenges in Emergency Preparedness

- Instead of a facility-based venue where patients and staff are consolidated into a single, congregate setting, home care and hospice patients are nearly always **in their own individual homes or apartments, and are spread throughout their communities.**
- Agency **personnel must therefore “bring the care to the patient,”** traversing to-and-from each patient’s home and neighborhood.
- Home care and hospice personnel must therefore also manage, direct and administer services across a **geographic expanse that can be impacted in many varied ways during an emergency.**

Home Care Challenges in Emergency Preparedness

- **In home and hospice care, every patient, home, neighborhood and community is a potential, distinct emergency in itself to be navigated and managed.**
- **Home care providers assist across settings during emergencies** – In addition to conducting emergency response for patients in their homes, **home care and hospice also reach beyond to assist other settings and the community at large.** Agencies conduct or assist with patient evacuation, provision of care in shelters, hospital transfers, and many other system supports.

Home Care Challenges in Emergency Preparedness

- **Navigation across affected community areas** - Providers must marshal resources, services and patient management needs across broken communications, severed service networks, extreme environmental dangers and an entire community in simultaneous need to reach, provide and manage care for patients.
- **Structural Obstacles** - Home care and hospice providers are also challenged with major structural obstacles in the response system, including:

Home Care Challenges in Emergency Preparedness

1. Obstructed access to patients in restricted zones.
2. Difficulty obtaining priority access to fuel.
3. Regulatory impediments to care and management in emergency conditions (see next slide).
4. Lack of federal, state or other supportive financing for preparedness, response or recovery.
5. Dearth of education/comprehension of home care.
6. Wider dependency on communications and utilities.
7. Transportation for home health personnel and patients.
8. Other.

Home Care Challenges in Emergency Preparedness

Regulatory Barriers/Flexibility Need

Areas identified by individual home care providers, HCA and HCP as regulatory impediments needing waiver or flexibility in emergencies:

> Geographic Service Area	> Discharge Procedures
> Physician Orders	> Scope of Practice
> Patient Assessment	> Claims/Billing
> Plan of Care	> Access to Fuel
> Admission Requirements	> Access to Restricted Zones/Curfew
> Minimum Standards	> Reporting

Home Care & OHEP Collaboration Areas

Planning and Initiative Areas of HCA, HCP and DOH-OHEP include:

Work with Coalitions/Regional Integration and Collaboration – Participate with regional Health Emergency Preparedness Coalitions and coalition partners – including other provider sectors, emergency managers, regional training centers, and other – in planning, education/training, coordinating and integrating emergency preparedness efforts. Enhance maturation of emergency preparedness and capabilities integration of homebased care into regional emergency preparedness and response.

Provider - Local Emergency Manager Engagement – Promote and facilitate local engagement and relationship development between individual home care/hospice providers and local emergency managers for emergency preparedness and response.

Regulatory Flexibility Needs - Addressing regulatory barriers; collaborating on the development and circulation of a provider guide for regulatory relief during emergencies.

Incident Command - Promoting Incident Command System awareness, education, and use.

Transportation Assistance Levels - Facilitating education and implementation of Transportation Assistance Levels in home care - assist with education, webinars, technical assistance; work with local response partners and EOMs for transportation allocation in an emergency.

Home Care & OHEP Collaboration Areas

Exercises and Drills – Participate in OHEP Exercise Advisory Committee meetings, regional HEPC and RTC exercise tabletops and workgroups, and provide input for exercise design and objectives.

Promote Situational Awareness – Collaborate with OHEP, OPCHSM, HEPCs and health sector partners on development of Situational Awareness processes, roles and activities.

Survey and Reporting - Collaborate to assist with home care provider follow-up to ensure completion of relevant Health Commerce System (HCS) HERDS surveys conducted during emergencies, including redistribution of NYSDOH messages and notifications as requested/required.

Toolkit to Assist with Home Care Patient/Family Preparedness – Develop and promote availability and use of a home care provider toolkit to be used to assist home care patients and families with overall emergency preparedness, including transport for relocation in emergencies.

Coastal Storm/Flood Zone Planning – Assist providers with identification and use of coastal storm/flood zone planning and evacuation resources.

Guide for Regulatory Flexibility

- Newly issued guide for addressing statutory/regulatory flexibility during emergencies
- Addresses all health care provider sectors
- Special thanks and commendations to HANYS, Iroquois and DOH for leadership in coordinating, compiling, publishing
- Incorporates the work of HCA, HCP and other sector to derive content and recommendations from and about each respective sector

The image shows the cover of a guide titled "Temporary Suspension or Modification of Statutes and Regulations in New York State During Emergencies". The cover is yellow and blue, with the text "A GUIDE FOR HEALTHCARE PROVIDERS" at the top. It features a photograph of a residential area with a road and trees. Logos for HCA, HCP, and IROQUOIS are visible at the bottom.

Collaborative Initiatives of Home Care & Office of Health Emergency Preparedness

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Contact Information

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