

ESRD Federal Facility Disaster Guidelines 2010

❖ V408

(d) Standard: Emergency preparedness. The dialysis facility must implement processes and procedures to manage medical and non medical emergencies that are likely to threaten the health or safety of the patients, the staff, or the public. These emergencies include, but are not limited to, fire, equipment or power failures, care-related emergencies, water supply interruption, and natural disasters likely to occur in the facility's geographic area.

❖ V409

(1) Emergency preparedness of staff. The dialysis facility must provide appropriate training and orientation in emergency preparedness to the staff. Staff training must be provided and evaluated at least annually and include the following:

(i) Ensuring that staff can demonstrate a knowledge of emergency procedures, including informing patients of-

(A) What to do;

(B) Where to go, including instructions for occasions when the geographic area of the dialysis facility must be evacuated;

(C) Whom to contact when an emergency occurs while the patient is not in the dialysis facility. This contact information must include an alternate emergency phone number for the facility for instances when the dialysis facility is unable to receive phone calls due to an emergency situation (unless the facility has the ability to forward calls to a working phone number under such emergency conditions); and

(D) How to disconnect themselves from the dialysis machine if an emergency occurs.

❖ V411

(i) Ensuring that nursing staff are properly trained in the use of emergency equipment and emergency drugs.

- The "emergency equipment" that is required at a minimum, is defined in V13. The "emergency drugs" to be kept onsite may be determined by the medical director and defined by facility policy.

❖ V412

(2) Emergency preparedness patient training. The facility must provide appropriate orientation and training to patients.

❖ V13

(3) Emergency equipment

Emergency equipment, including, but not limited to, oxygen, airways, suction, defibrillator or automated external defibrillator, artificial resuscitator, and emergency drugs, must be on the premises at all times and immediately available.

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❖ V14

(4) Emergency plans. The facility must-

- (i) Have a plan to obtain emergency medical system assistance when needed. All members of the facility staff must be able to demonstrate knowledge of how to obtain emergency medical assistance

❖ V15

- (ii) Evaluate at least annually the effectiveness of the emergency and disaster plans and update them as necessary. The facility must conduct periodic or mock emergency in order to determine the staff's skill level/educational needs and effectiveness of their plans.

❖ V16

- (iii) Contact its local disaster management agency at least annually to ensure that such agency is aware of dialysis facility needs in the event of an emergency.

❖ V768

(g) Standard: Emergency coverage.

- (1) The governing body is responsible for ensuring that the dialysis facility provides patients and staff with written instructions for obtaining emergency medical care.

❖ V769

- (2) The dialysis facility must have available at the nursing/monitor station, a roster with the names of physicians to be called for emergencies, when they can be called, and how they can be reached.

❖ V770

(3) The dialysis facility must have an agreement with a hospital that can provide inpatient care, routine and emergency dialysis and other hospital services, and emergency medical care which is available 24 hours a day, 7 days a week. The agreement must:

- (i) Ensure that hospital services are available promptly to the dialysis facility's patients when needed
- (ii) Include reasonable assurances that patients from the dialysis facility are accepted and treated in emergencies.