Connect Consulting Services
Engage – Prepare – Recover

CMS Emergency Preparedness Compliance
Self-Assessment Tool

Completing this self-assessment tool will help you determine how your organization can meet the Centers for Medicare and Medicaid (CMS) emergency preparedness requirements. The scoring rubric will also identify your emergency planning, training, and exercise gaps.

To answer the questions below, please assign a value between 5 - 0 to determine your CMS compliance readiness level, with 5 being most complete and 0 not complete at all.

CMS Emergency Preparedness Requirement Element	Score 0-5	Notes
Emergency Plan Requirements		
Do you have staff assigned to keep the emergency management program current that represents each of your Health Center's (HC) departments such as administration and clinical?		
Have you identified internal and external risks to your organization by completing a Hazard Vulnerability Assessment (HVA) for each of your practice sites?		
Does your organization have an all hazards Emergency Operations Plan (EOP) for each of your practice sites that can guide your disaster response process for both medical and non-medical disasters?		
Does your HC have a business continuity plan (BCP) to address continuity of patient care?		
Does your EOP contain orders of succession with an Incident Command System (ICS)? (If decision makers are unavailable, who is in charge?)		
Do you review and update EOP and BCP plans annually based upon risks identified in the HVA?		
Do you review and update the HVA annually?		
Do your plans address cyber security for all HC patient and operations data?		
Emergency Plan Requirement Section Subtotal		
Communications Plan Requirements		
Does your HC have a communication plan with policies and procedures for communicating with internal stakeholders such as patients, Board, and staff?		

CMS Emergency Preparedness Requirement Element	Score 0-5	Notes
Communications Plan Requirements		
Does your communication plan address communicating with external stakeholders such as federal, tribal, state, and local agencies?		
Does your HC have alternate/redundant communications systems (satellite phones, radios, etc.) in the event standard communications systems become unavailable?		
Does your EOP/BCP reference your HC internal and external communication policies and alternate/redundant communication systems?		
Do you review and revise your HC communications plans annually?		
Communication Plan Requirement Section Subtotal		
Training and Testing Plan Requirements		
Does the HC have a training and testing plan?		
Does your emergency preparedness training occur **annually** focusing on emergency management, personal preparedness, continuity of operations, and business continuity?		
Do you provide initial training in emergency preparedness policies and procedures to all new and existing staff, individuals providing services under arrangement, and volunteers, consistent with their expected roles?		
Do you maintain documentation of those annual trainings?		
Does your HC participate in an operational facility level or community based full –scale exercise annually?*		
Does your HC conduct a functional or tabletop exercise annually?**		
After drills and exercises, does a process exist to identify successes and opportunities for improvement which are documented as an after-action report?		
Does the HC create disaster exercise scenarios based upon the risks of the organization?		
Do you analyze your staff's responses to and maintain documentation of drills, tabletop exercises, and emergency events, and revise their emergency plans, as needed?		
Training and Testing Plan Requirement Section Subtotal		
Total CMS Compliance Score		

* Section 491.12(d)(2) will require RHCs/FQHCs to participate in a full-scale exercise at least annually. If an RHC or FQHC experienced an actual natural or man-made emergency requiring activation of its emergency plan, it will be exempt from the requirement for a community or individual, facility-based full-scale exercise for 1 year following the onset of the actual event. However, for purposes of determining the burden for these requirements, CMS assumes that all RHCs/FQHCs will have to comply with all of these requirements.

** RHCs/FQHCs will also be required to participate in an additional testing exercise (tabletop and/or functional) of their choice at least annually.

Scoring Rubric

115 – 80: You are on your way to CMS compliance!
79 – 50: There are gaps in your emergency management program.
49 – 22: You have a long way to go to get to CMS compliance.
21 – 0: You are just getting started.