

ASPR TRACIE Technical Assistance Request

Response Date: 7 January 2019

Request:

The requestor contacted ASPR TRACIE and noted that he worked for a large Federally Qualified Health Center (FQHC) comprised of multi-practice medical centers located in several buildings and offices. His organization conducted an active shooter exercise to meet the Centers for Medicare & Medicaid (CMS) Emergency Preparedness (EP) requirements. He stated that while they were conducting a recent active shooter exercise, a staff member became frightened and was not able to continue participating in the exercise. He had the following questions:

- Since we have so many building and offices, can we have one active shooter exercise for the entire company or do we have to have separate exercises per individual site?
- I read that under the new CMS EP Rule that if each site has a different CMS Certification Number (CCN), each site has to hold its own exercise. Could you elaborate on this and is there another way that makes it simpler for our organization?
- With regards to the active shooter exercise, what is the requirement on using a gun that shoots blanks? I know it is suggested to make it as real as possible, but a lot of employees are scared of the gunshot sounds. Are there alternatives for functional active shooter drills?

Response:

The ASPR TRACIE Team provided the requestor with several resources, including links to the following: [Explosives and Mass Shooting Topic Collection](#), [Exercise Program Topic Collection](#), the [Select Disaster Behavioral Health Resources page](#), and the various CMS-specific information provided in the next section of this document.

We also reached out to the CMS Quality, Safety & Oversight Group (QSOG) for further feedback related to the requestor's requirement-specific questions. CMS provided the following response:

“You are correct, facilities with different CCN numbers must demonstrate compliance upon survey that they have completed the drills and exercises. However, please note, there is the option for ‘Integrated EP Programs.’ Facilities that are part of a system consisting of multiple, separately certified healthcare facilities that elects to have a unified and integrated EP program, may choose to participate in the system’s unified and integrated EP program. If a facility elects to participate in the unified EP program, the facility must demonstrate/include:

- Active participation in the development of the unified program
- The facility’s unique circumstances, patient populations, and services are part of the program
- It is capable of utilizing the unified EP program
- A community-based and facility based risk assessment specific to the facility

- Integrated policies and procedures that meet all requirements

As for the second question regarding the active shooter exercise: as you know, active shooter incidents are not specifically required under CMS EP Rule (though could be part of a facility's all hazard response if applicable). There is no guidance as to 'using blanks' or how to simulate these emergencies, however, you must ensure patient safety at all times, as well as the staff safety and well-being. We have had a lot of inquiries about drilling with nursing home residents and how to evacuate them during a 'drill' and we have advised that patient and staff safety is imperative. We would recommend reaching out to someone in the state, or even your local police department to ask how they can train to current standards without negatively impacting the staff. We are sure there are other avenues to do the training without full simulation of an active shooter.

Please also consult your [State Survey Agency](#) to see if they are able to provide additional insight on any state-specific requirements.”

CMS-Specific Information:

CMS published the [interpretive guidelines](#) and the State Operations Manual that addresses specific regulatory expectations. This is posted on their website (under the Downloads section): <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Emergency-Prep-Rule.html>.

ASPR TRACIE has developed and collected a number of resources that we encourage you to use and believe will help facilitate compliance, including the resources provided in this response. However, this does not substitute review of the final rule text and interpretive guidelines. If you have specific questions about your facility's compliance please review the interpretive guidelines, or contact your state's survey agency or the CMS Quality, Safety & Oversight Group (QSOG) at the following email address: SCGEmergencyPrep@cms.hhs.gov.

CMS and ASPR TRACIE are partnering to provide technical assistance, and share resources and promising practices to help affected providers and suppliers start or update the documents mandated by the new Emergency Preparedness rule. Additional key resources include:

- The ASPR TRACIE dedicated CMS Rule page: <https://asprtracie.hhs.gov/cmsrule>
- The entire CMS Emergency Preparedness Rule: <https://federalregister.gov/a/2016-21404>
- The CMS Emergency Preparedness Survey and Certification Page: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Emergency-Prep-Rule.html>
- CMS has developed a [Quick Glance Table of the rule requirements by provider type](#), to highlight key points of the new Emergency Preparedness rule. **NOTE:** This table is not meant to be an exhaustive list of requirements nor should it serve as a substitute for the regulatory text.
- ASPR TRACIE developed a [CMS Emergency Preparedness \(EP\) Rule Resources at Your Fingertips Document](#). Within this document are links to key resources:
 - CMS' developed [frequently asked questions \(FAQ\) documents](#) that synthesizes answers to commonly asked inquiries about the CMS EP Rule.

- The FAQs, in combination with the CMS [at-a-glance chart](#) and [Provider and Supplier Type Definitions Fact Sheet](#), can help planners identify and address planning gaps and facilitate compliance with the regulations.
- Interested in learning more about your local healthcare coalition? [This chart](#) can help you identify the preparedness office of your state public health agency. Remember: the release of the CMS EP Rule provides healthcare coalitions a tremendous opportunity to strengthen relationships and leverage a broader group of personnel and resources to provide for the medical needs of the whole community during a disaster.
- To review the Medicare Learning Network National Call on the EP Rule, you can access the PowerPoint [slides, transcript, and audio recording here](#).