#### 22VAC40-73-950. Emergency preparedness and response plan. A. The facility shall develop a written emergency preparedness and response plan that shall address: 1. Documentation of initial and annual contact with the local emergency coordinator to determine (i) local disaster risks, (ii) communitywide plans to address different disasters and emergency situations, and (iii) assistance, if any, that the local emergency management office will provide to the facility in an emergency. 2. Analysis of the facility's potential hazards, including severe weather, biohazard events, fire, loss of utilities, flooding, workplace violence or terrorism, severe injuries, or other emergencies that would disrupt normal operation of the facility. 3. Written emergency management policies and procedures for provision of: a. Administrative direction and management of response activities; \_\_\_\_\_b. Coordination of logistics during the emergency; \_\_\_\_\_c. Communications; d. Life safety of residents, staff, volunteers, and visitors; e. Property protection; f. Continued services to residents; g. Community resource accessibility; and h. Recovery and restoration. 4. Written emergency response procedures for assessing the situation; protecting residents, staff, volunteers, visitors, equipment, medications, and vital records; and restoring services. Emergency procedures shall address: a. Alerting emergency personnel and facility staff; \_\_\_\_\_b. Warning and notification of residents, including sounding of alarms when appropriate; c. Providing emergency access to secure areas and opening locked doors; d. Conducting evacuations and sheltering in place, as appropriate, and

accounting for all residents;

	_e. Locating and shutting off utilities when necessary;
	_f. Maintaining and operating emergency equipment effectively and safely;
emerg	g. Communicating with staff and community emergency responders during the ency; and
necess	h. Conducting relocations to emergency shelters or alternative sites when ary and accounting for all residents.
call lists, buildi	orting documents that would be needed in an emergency, including emergency ng and site maps necessary to shut off utilities, memoranda of understanding sites, and list of major resources such as suppliers of emergency equipment.
generator shall include	r 1, 2020, an assisted living facility that is equipped with an on-site emergency in its emergency preparedness and response plan a description of the provide sufficient power for the operation of lighting, ventilation, temperature n, and refrigeration.
C. By Decembe	r 1, 2020, an assisted living facility that is not equipped with an onsite emergency
	r into an agreement with a vendor capable of providing the facility with an erator for the provision of electricity during an interruption of the normal supply; and
emergency ger	r into at least one agreement with a separate vendor capable of providing an erator in the event that the primary vendor is unable to comply with its the facility during an emergency.
	unteers shall be knowledgeable in and prepared to implement the emergency le event of an emergency.
emergency preparedno placed on an individual	nall develop and implement an orientation and semi-annual review on the ss and response plan for all staff, residents, and volunteers, with emphasis s respective responsibilities. The review shall be documented by signing and and review shall cover responsibilities for:
1. Aler	ing emergency personnel and sounding alarms;
2. lmpl	ementing evacuation, shelter in place, and relocation procedures;
3. Usin	g, maintaining, and operating emergency equipment;

4. Accessing emergency medical information, equipment, and medication	ons for residents;
5. Locating and shutting off utilities; and	
6. Utilizing community support services.	
F. The facility shall review the emergency preparedness plan annually or more of document the review by signing and dating the plan, and make necessary plan revisions shall be communicated to staff, residents, and volunteers and incorporated into the oriest semi-annual review for staff, residents, and volunteers.	. Such revisions
G. In the event of a disaster, fire, emergency, or any other condition that may je health, safety, and welfare of residents, the facility shall take appropriate action to protosafety, and welfare of the residents and take appropriate actions to remedy the condition possible.	ect the health,
H. After the disaster or emergency is stabilized, the facility shall:	
1. Notify family members and legal representatives; and	
2. Report the disaster or emergency to the regional licensing office by the specified in 22VAC40-73-70.	ne next day as

#### 22VAC40-73-960. Fire and emergency evacuation plan. A. Assisted living facilities shall have a written plan for fire and emergency evacuation that is to be followed in the event of a fire or other emergency. The plan shall be approved by the appropriate fire official. B. A fire and emergency evacuation drawing shall be posted in a conspicuous place on each floor of each building used by residents. The drawing shall show primary and secondary escape routes, areas of refuge, assembly areas, telephones, fire alarm boxes, and fire extinguishers, as appropriate. \_C. The telephone numbers for the fire department, rescue squad or ambulance, police, and Poison Control Center shall be posted by each telephone shown on the fire and emergency evacuation plan. D. In assisted living facilities where all outgoing telephone calls must be placed through a central switchboard located on the premises, the information required in subsection C of this section may be posted by the switchboard rather than by each telephone, provided this switchboard is staffed 24 hours each day. E. Staff and volunteers shall be fully informed of the approved fire and emergency

evacuation plan, including their duties, and the location and operation of fire extinguishers, fire

alarm boxes, and any other available emergency equipment.

22VAC40-73-970. Fire and emergency evacuation drills	22	VAC40-73-	970. Fire and	l emergency	evacuation	drills.
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A. Fire and emergency evacuation drill frequency and participation shall be in accordance with the current edition of the Virginia Statewide Fire Prevention Code (13VAC5-51). The drills required for each shift in a quarter shall not be conducted in the same month.
B. Additional fire and emergency evacuation drills may be held at the discretion of the administrator or licensing inspector and must be held when there is any reason to question whether the requirements of the approved fire and emergency evacuation plan can be met.
C. Each required fire and emergency evacuation drill shall be unannounced.
D. Immediately following each required fire and emergency evacuation drill, there shall be an evaluation of the drill by the staff in order to determine the effectiveness of the drill. The licensee or administrator shall immediately correct any problems identified in the evaluation and document the corrective action taken.
E. A record of the required fire and emergency evacuation drills shall be kept in the facility for two years. Such record shall include:
1. Identity of the person conducting the drill;
2. The date and time of the drill;
3. The method used for notification of the drill;
4. The number of staff participating;
5. The number of residents participating;
6. Any special conditions simulated;
7. The time it took to complete the drill;
8. Weather conditions; and
9. Problems encountered, if any.

#### 22VAC40-73-980. Emergency equipment and supplies.

A. A complete first aid kit shall be on hand in each building at the facility, located in a
designated place that is easily accessible to staff but not to residents. Items with expiration dates must not have dates that have already passed. The kit shall include the following items:
1. Adhesive tape;
2. Antiseptic wipes or ointment;
3. Band-aids, in assorted sizes;
4. Blankets, either disposable or other;
5. Disposable single-use breathing barriers or shields for use with rescue breathing or CPR (e.g., CPR mask or other type);
6. Cold pack;
7. Disposable single-use waterproof gloves;
8. Gauze pads and roller gauze, in assorted sizes;
9. Hand cleaner (e.g., waterless hand sanitizer or antiseptic towelettes);
10. Plastic bags;
11. Scissors;
12. Small flashlight and extra batteries;
13. Thermometer;
14. Triangular bandages;
15. Tweezers; and
16. The first aid instructional manual.
B. In facilities that have a motor vehicle that is used to transport residents and in a motor vehicle used for a field trip, there shall be a first aid kit on the vehicle, located in a designated place that is accessible to staff but not residents that includes items as specified in
subsection A of this section.

C. First aid kits shall be checked at least monthly to ensure that all items are present and
items with expiration dates are not past their expiration date.
D. Each facility with six or more residents shall be equipped with a permanent connection able to connect to a temporary emergency electrical power source for the provision of electricity during an interruption of the normal electric power supply. The connection shall be of the size that is capable of providing power to required circuits when connected and that is sufficient to implement the emergency preparedness and response plan. The installation of a connection for temporary electric power shall be in compliance with the Virginia Uniform Statewide Building Code (13VAC5- 63) and approved by the local building official. Permanent installations of emergency power systems shall be acceptable when installed in accordance with the Uniform Statewide Building Code and approved by the local building official.
E. By December 1, 2020, the following provisions shall be met:
1. A facility that is equipped with an on-site emergency generator shall test the generator monthly and maintain records of the tests.
2. A facility that is not equipped with an on-site emergency generator shall have a temporary emergency electrical power source connection, which is tested at the time of installation and every two years thereafter by a contracted vendor, and maintain records of the tests.
F. The following emergency lighting shall be available:
1. Flashlights or battery lanterns for general use.
2. One flashlight or battery lantern for each employee directly responsible for resident care who is on duty between 5 p.m. and 7 a.m.
3. One flashlight or battery lantern for each bedroom used by residents and for the living and dining area unless there is a provision for emergency lighting in the adjoining hallways.
4. The use of open flame lighting is prohibited.
G. There shall be two forms of communication for use in an emergency.
H. The facility shall ensure the availability of a 96-hour supply of emergency food and drinking water. At least 48 hours of the supply must be on site at any given time, of which the facility's rotating stock may be used.

#### 22VAC40-73-990. Plan for resident emergencies and practice exercise. A. Assisted living facilities shall have a written plan for resident emergencies that includes: 1. Procedures for handling medical emergencies, including identifying the staff person responsible for (i) calling the rescue squad, ambulance service, resident's physician, or Poison Control Center; and (ii) providing first aid and CPR, when indicated. 2. Procedures for handling mental health emergencies such as, but not limited to, catastrophic reaction or the need for a temporary detention order. 3. Procedures for making pertinent medical information and hist2ory available to the rescue squad and hospital, including a copy of the current medication administration record and advance directives. 4. Procedures to be followed in the event that a resident is missing, including (i) involvement of facility staff, appropriate law-enforcement agency, and others as needed; (ii) areas to be searched; (iii) expectations upon locating the resident; and(iv) documentation of the event. 5. Procedures for notifying the resident's family, legal representative, designated contact person, and any responsible social agency. \_6. Procedures for notifying the regional licensing office as specified in 22VAC40-73-70. B. The procedures in the plan for resident emergencies required in subsection A of this section shall be reviewed by the facility at least every six months with all staff. Documentation of the review shall be signed and dated by each staff person. \_C. At least once every six months, all staff currently on duty on each shift shall participate in an exercise in which the procedures for resident emergencies are practiced. Documentation of each exercise shall be maintained in the facility for at least two years. D. The plan for resident emergencies shall be readily available to all staff, residents'

families, and legal representatives.