
The Details: AB 3098 (Friedman) New and Current Requirements

The following are the emergency preparedness requirements that are in place today (black text and regular font) and new provisions added by AB 3098 (blue italic text).

Health & Safety Code Section 1569.695

(a) In addition to any other requirement of this chapter, a residential care facility for the elderly shall have an emergency *and disaster* plan that shall include, but not be limited to, all of the following:

- (1) Evacuation procedures, *including identification of an assembly point or points that shall be included in the facility sketch.*
- (2) Plans for the facility to be self-reliant for a period of not less than 72 hours immediately following any emergency or disaster, including, but not limited to, a *short-term* or long-term power failure. *If the facility plans to shelter in place and one or more utilities, including water, sewer, gas, or electricity, is not available, the facility shall have a plan and supplies available to provide alternative resources during an outage.*
- (3) Transportation needs and evacuation procedures to ensure that the facility can communicate with emergency response personnel or can access the information necessary in order to check the emergency routes to be used at the time of an evacuation and relocation necessitated by a disaster. *If the transportation plan includes the use of a vehicle owned or operated by the facility, the keys to the vehicle shall be available to staff on all shifts.*
- (4) *A contact information list of all of the following:*
 - (A) *Emergency response personnel.*
 - (B) *The Community Care Licensing Division within the State Department of Social Services.*
 - (C) *The local long-term care ombudsman.*
 - (D) *Transportation providers.*
- (5) *At least two appropriate shelter locations that can house facility residents during an evacuation. One of the locations shall be outside of the immediate area.*
- (6) *The location of utility shut-off valves and instructions for use.*
- (7) Procedures that address, but are not limited to, all of the following:
 - (A) Provision of emergency power that could include identification of suppliers of backup generators. *If a permanently installed generator is used, the plan shall include its location and a description of how it will be used. If a portable generator is used, the manufacturer's operating instructions shall be followed.*
 - (B) Responding to *an* individual *resident's* needs *if* the emergency call buttons are inoperable.
 - (C) Process for communicating with residents, families, hospice providers, and others, as appropriate, that might include landline telephones, cellular telephones, or walkie-

talkies. *A backup process shall also be established. Residents and their responsible parties shall be informed of the process for communicating during an emergency.*

(D) Assistance with, and administration of, medications.

(E) Storage and preservation of medications, *including the storage of medications that require refrigeration.*

(F) The operation of assistive medical devices that need electric power for their operation, including, but not limited to, oxygen equipment and wheelchairs.

(G) A process for identifying residents with special needs, such as hospice, and a plan for meeting those needs.

(H) Procedures for confirming the location of each resident during an emergency response.

(b) A facility shall provide training on the plan to each staff member upon hire and annually thereafter. The training shall include staff responsibilities during an emergency or disaster.

(c) A facility shall conduct a drill at least quarterly for each shift. The type of emergency covered in a drill shall vary from quarter to quarter, taking into account different emergency scenarios. An actual evacuation of residents is not required during a drill. While a facility may provide an opportunity for residents to participate in a drill, it shall not require any resident participation. Documentation of the drills shall include the date, the type of emergency covered by the drill, and the names of staff participating in the drill.

(d) A facility shall review the plan annually and make updates as necessary, including changes in floor plans and the population served. The licensee or administrator shall sign and date documentation to indicate that the plan has been reviewed and updated as necessary.

(e) A facility shall have all of the following information readily available to facility staff during an emergency:

(1) A resident roster with the date of birth for each resident.

(2) An appraisal of resident needs and services plan for each resident.

(3) A resident medication list for residents with centrally stored medications.

(4) Contact information for the responsible party and physician for each resident.

(f) A facility shall have both of the following in place:

(1) An evacuation chair at each stairwell, on or before July 1, 2019.

(2) A set of keys available to facility staff on each shift for use during an evacuation that provides access to all of the following:

(A) All occupied resident units.

(B) All facility vehicles.

(C) All facility exit doors.

(D) All facility cabinets and cupboards or files that contain elements of the emergency and disaster plan, including, but not limited to, food supplies and protective shelter supplies.

(g) A facility shall make the plan available upon request to residents onsite, any responsible party for a resident, the local long-term care ombudsman, and local emergency responders. Resident and employee information shall be kept confidential.

(h) An applicant seeking a license for a new facility shall submit the emergency and disaster plan with the initial license application required under Section 1569.15.

*(i) The department's Community Care Licensing Division shall confirm, during **annual** licensing visits, that the **emergency and disaster** plan is on file at the facility **and includes required content**.*

(j) A facility is encouraged to have the emergency and disaster plan reviewed by local emergency authorities.

*(k) Nothing in this section shall create a new or additional requirement for the department to evaluate the emergency **and disaster** plan.*

PLEASE NOTE – The CCRC exemption is being deleted. While CCRCs have been required to have emergency plans, this change makes it clear.

~~(e) This subdivision shall not apply to residential care facilities for the elderly that have obtained a certificate of authority to offer continuing care contracts, as defined in paragraph (5) of subdivision (c) of Section 1771.~~