

# Checking All the Boxes Considerations in Disaster Meal Planning

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## Disaster Meal Planning

Disasters can strike anytime. Healthcare communities depend on Food and Nutrition Services (FNS) for uninterrupted nutritious meals. Is your facility prepared with the quantity and quality of meals needed during a disaster? FNS has unique considerations when building a comprehensive, regulatory compliant supply with a focus on emergency management tags, patient needs, essential staffing, and available resources in common and less common disasters.



## Complete a Hazard Vulnerability Analysis

A Hazard Vulnerability Analysis (HVA) needs to be completed from a FNS perspective to identify risks with an overview of specific food service expectations before, during, and after a disaster.

## Food & Nutrition Services HVA Considerations :

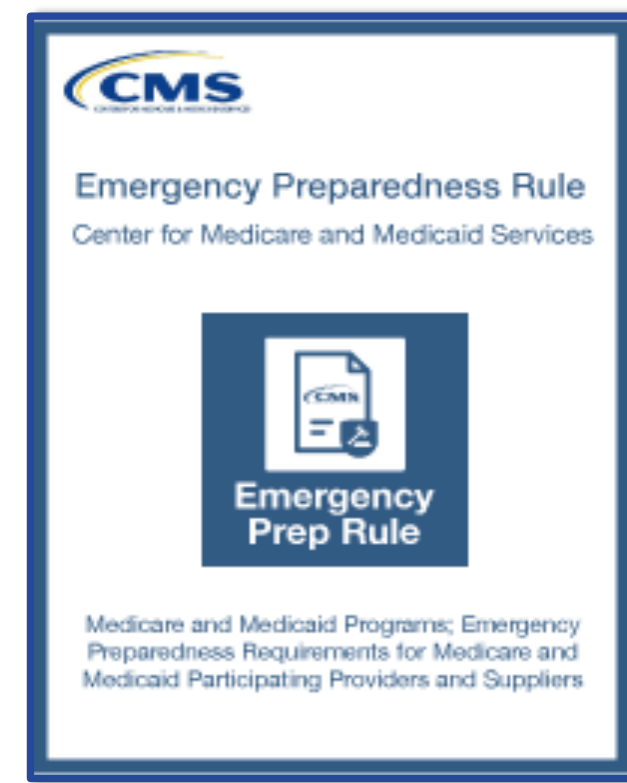
1. FNS staff may not be present during a disaster. Plan logistics for FNS activation & communication in advance.
2. Can FNS staff not present at the onset of the disaster travel to the community for the next meal service?
3. In the absence of FNS staffing, plan for incident command to initiate meal service per policies & procedures.
4. Determine if there is a loss of water, power or gas.
5. Ensure the kitchen is on the disaster physical plant review list & determine if the physical plant secure.
6. Is the FNS on backup generators? If so, are the walk-in's included & where are the kitchen red plugs.
7. Can the disaster meal plan be prepared without utilities? If not, how is the food going to be prepared?
8. Include state, county food safety regulations in meal plan and review for additional public health considerations i.e., hand & ware washing, hygiene.
9. Is there a ware washing plan? Is there an alternative 3 compartment sink available for non-disposables?
10. Alternative sanitization consideration for handwashing. Are alcohol based available?
11. Identify location of emergency/ disaster nutrition policy manual? Is your plan regulatory compliant?
12. Can food be easily prepared by untrained staff or volunteers?
13. Know the location of emergency food, water & disposable storage.
14. Know the location & FNS policy for phone tree activation.
15. Know the location of community diet orders & how often are they updated?
16. What is the water plan & how will water be transported in a disaster.
17. Are menus built around familiar foods?
18. Does your meal plan need to be managed & rotated yearly?

## Regulations

2016 CMS Disaster Preparedness Rule

### Goals of the rule:

- Increase safety during emergencies
- Establish consistent requirements for all providers
- Establish a more coordinated disaster response
- Applies to 17 provider types



## Four Core Elements- Conditions of Participation

### Risk Assessment

- Perform a risk assessment using an all-hazards approach & develop an emergency plan

### Policies & Procedures

- Develop & implement policies based on risk assessment
- Review and update every 2 years (annually for LTC)

### Communication

- Comply with Federal & State laws
- System to Contact Staff, including patients' physicians, other necessary persons
- Well-coordinated within the facility, across health care providers, & with state & local public health departments & emergency management agencies

### Training & Testing

- Complies with Federal & State laws
- Maintain and at a minimum update annually

## CMS Emergency Preparedness Tags

44 total Emergency Preparedness, E tags. 14 of the 44 E- tags may apply to FNS & should be reviewed & incorporated into a comprehensive FNS disaster plan.

Food & Nutrition Services EP Tags	
Emergency preparedness (EP) program	• E 0001, E 0004, E 0006, E 0007, E 0009, E 0013
Policy & procedures subsistence needs for staff & patients	• E 0015, E 0019
Evacuation	• E 0020
Sheltering	• E 0022
Communication	• E 0029
Training & testing	• E 0036
Training program	• E 0037
Emergency power	• E 0041

## E-0015 Subsistence Needs for Staff & Patients

FNS is highlighted in EP tag E-0015. E-0015 states provision of subsistence needs for staff and patients whether they evacuate or shelter in place include, but are not limited to, the following: Food, Water, Medical, Pharmaceutical supplies. <sup>2</sup>

## E-0015 Guidelines

Provisions include, but are not limited to, food, pharmaceuticals and medical supplies. Provisions should be stored in an area which is less likely to be affected by disaster, such as storing these resources above ground-level to protect from possible flooding. Additionally, when inpatient facilities determine their supply needs, they are expected to consider the possibility that volunteers, visitors, and individuals from the community may arrive at the facility to offer-assistance or seek shelter. <sup>3</sup>

There should be a dedicated FNS water plan to meet the best practice of 1 gallon of water per person per day for drinking and food preparations for all persons & days designated by the HVA.

### Provide

- Provide adequate subsistence for all patients & staff during an emergency, or until the facility is evacuated

### Identify

- Identify individual subsistence needs that would be required during an emergency.

### Consider

- Consider surge (volunteers, visitors, & individuals from the community) may arrive at the facility to offer assistance or seek shelter.

## CDPH Requirements

### Food

CDPH regulations, "require facilities to have detailed written plans and procedures to meet all potential emergencies and disasters. These written procedures should include plans for the availability of adequate basic utilities and supplies, including food and water, with consideration for the special needs of the patients/residents/clients treated at the facilities. Special needs can be attributed to age (e.g., pediatrics), therapeutic diet (e.g., renal, diabetic), or mechanically altered diets (e.g., mechanically chopped, puree). Facilities should develop disaster menu plans that can be mobilized in the event of the lack of essential utilities (e.g., gas, electricity, water), that can be easily served by disaster response personnel, and that mirror the nutritional adequacy of the meals routinely served at the facilities." <sup>8</sup>

### Water

Aside from dedicated water for FNS drinking & food preparation, general acute care hospitals (GACHs) are required to have on-site water supply sufficient to operate essential hospital utilities and equipment for 72-hours of operation. GACHs water storage quantity is to be based on the water rationing plan, but must store no less than 50 gallons of water per licensed bed, per 24-hours (e.g., 150 gallons per bed for 72-hours) and must also have no less than a 5,000-gallon water storage tank. <sup>8</sup> A plan to licensing agency are required under current state regulations to submit an evaluation to HCAI by Jan. 1, 2024, for how they plan to meet this and other NPC requirements by Jan. 1, 2030. <sup>4,5,6,7</sup>



## CHA Emergency Food Supply Planning Guidance & Toolkit

CHA toolkit provides guidance to answer the challenging question of who may be at the community when a disaster happens. Can support FNS & Incident Command assess how many patients, staff & community surge members may need subsistence during a disaster. The tool provides auto populating fields based on general census data.

Tab 2- 6 may be used by FNS to evaluate CDPH AFL 14-32 requirement to consider dietary special needs of patients & overall caloric needs of patients, staff and community surge.

## Additional Resources

1. Centers for Disease Control. Emergency Water Supply Planning Guide for Hospitals and Healthcare Facilities. September 6<sup>th</sup>. <https://www.cdc.gov/healthywater/emergency/ewsp.html>. 2020
2. Meals for All Emergency, Disaster, & Nutrition Resources. September 6<sup>th</sup>, 2023. <https://mealsforall.com/resources/emergency-disaster-resources/> (2023)
3. U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, CENTERS FOR MEDICARE & MEDICAID SERVICES. Emergency Preparedness Checklist Recommended Tool for Effective Health Care Facility Planning. <https://aspr.hhs.gov/technical-resources/resource/552/emcy-preparedness-checklist-recommended-tool-for-effective-health-care-facility-planning>. (2013)

## References

1. California Hospital Association, Hospital Emergency Food Supply Planning Guidance and Toolkit. September 6<sup>th</sup>, 2023. <https://www.calhospitalprepare.org/foodplanning>. (2013)
2. Centers for Medicare, Medicare Services (CMS). Emergency Preparedness Rule, Quality, Safety & Oversight Group- Emergency Preparedness Regulation Guidance for Surveyors, Providers and Suppliers Regarding the New Emergency Preparedness (EP) Rule (2022). <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/Appendix-Z-EP-SCM-February-2019.pdf>. (Rev. 186, Issued: 03-04-19)
3. Centers for Medicare, Medicare Services (CMS). State Operations Manual Appendix Z- Emergency Preparedness for All Provider and Certified Supplier Types Interpretive Guidance. September 6<sup>th</sup>, 2023. <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/Appendix-Z-EP-SCM-February-2019.pdf>. (Rev. 186, Issued: 03-04-19)
4. CHA News 19 Dec 2022. HCAI Releases Initial AB 1882 Seismic Public Notice and Reporting Guidance. <https://calhospital.org/hcai-releases-initial-ab-1882-seismic-public-notice-and-reporting-guidance/>. (2023)
5. Department of Health Care Access and Information, Office of Statewide Hospital Planning and Development. POLICY INTENT NOTICE. September 6<sup>th</sup>, 2023. [https://hcai.ca.gov/wp-content/uploads/2022/12/PIN-75\\_Hospital-Seismic-Safety-Enrollment-and-Certification-Status-Reporting\\_121222-A.pdf](https://hcai.ca.gov/wp-content/uploads/2022/12/PIN-75_Hospital-Seismic-Safety-Enrollment-and-Certification-Status-Reporting_121222-A.pdf). (2022)
6. HCAI NPC 5 Water Rationing Plan. September 2023. <https://www.youtube.com/watch?v=TrpSWH0EXmA0>. August 22<sup>nd</sup>, 2023.
7. State of California—Health and Human Services Agency California Department of Public Health, All Facilities Letter (AFL) Summary. AFL 23-21. September 6<sup>th</sup>, 2023. <https://www.cdph.ca.gov/Programs/CHQ/LCP/Pages/AFL-23-21.aspx#>. 2023.
8. State of California—Health and Human Services Agency California Department of Public Health. SUBJECT: Diet Manuals, Orders, Menus, and Disaster Menu Planning Must Meet Patient's Nutritional Needs. September 6<sup>th</sup>, 2023. <https://www.cdph.ca.gov/Programs/CHQ/LCP/Pages/AFL-14-32.aspx>. (2014)