

DEPARTMENT OF HUMAN SERVICES
SENIORS AND PEOPLE WITH DISABILITIES DIVISION
OREGON ADMINISTRATIVE RULES

CHAPTER 411
DIVISION 86

NURSING FACILITIES/LICENSING –
ADMINISTRATION AND SERVICES

411-086-0320 Disaster Preparedness Emergency and Disaster Planning

~~The nursing facility shall develop, maintain, and enforce a disaster plan for the protection of all persons in the event of a fire, explosion, or other emergency. Fire drills shall be conducted in accordance with the regulations of the State Fire Marshal and documented. Documentation shall include date, time, an evaluation of the drill and follow-up action.~~

An emergency preparedness plan is a written procedure that identifies a facility's response to an emergency or disaster for the purpose of minimizing loss of life, mitigating trauma, and to the extent possible, maintaining services for residents, and preventing or reducing property loss.

(1) The nursing facility must prepare and maintain a written emergency preparedness plan in accordance with the Oregon Fire Code (OFC) in OAR chapter 837, division 040 and the 2009 National Fire Protection Association (NFPA) 101 Life Safety Code.

(2) The emergency preparedness plan must:

(a) Include analysis and response to potential emergency hazards including but not limited to:

(A) Evacuation of a facility;

(B) Fire, smoke, bomb threat, or explosion;

(C) Prolonged power failure, water, or sewer loss;

(D) Structural damage;

(E) Hurricane, tornado, tsunami, volcanic eruption, flood, and earthquake;

(F) Chemical spill or leak; and

(G) Pandemic.

(b) Address the medical needs of the residents including:

(A) Access to medical records necessary to provide care and treatment; and

(B) Access to pharmaceuticals, medical supplies, and equipment during and after an evacuation.

(c) Include provisions and supplies sufficient to shelter in place for a minimum of five days without electricity, running water, or replacement staff.

(3) The facility must notify SPD, or the local AAA office or designee, of their status in the event of an emergency that requires evacuation and during any emergent situation when requested.

(4) The facility must conduct a drill of the emergency preparedness plan at least twice a year in accordance with the OFC in OAR chapter 837, division 040 and other applicable state and local codes as required. One of the practice drills may consist of a walk-through of the duties or a discussion exercise with a hypothetical event, commonly known as a tabletop exercise. These simulated drills do not take the place of the required fire drills.

(5) The facility must annually review or update the emergency preparedness plan as required by the OFC in OAR chapter 837, division 040 and the emergency preparedness plan must be available on-site for review upon request.

(6) A summary of the facility's emergency preparedness plan must be submitted to SPD annually on July 1, and at a change of ownership, in a format provided by SPD.

Stat. Auth.: ORS 410.070, 410.090, & 441.055

Stats. Implemented: ORS 441.055, & 441.615, & OL 2007 chapter 205

411-086-0350 Smoking

(1) ~~Indoor Clean Air Act. The A nursing~~ facility ~~shall~~ must be in compliance with ~~the Oregon Indoor Clear Air Act;~~

(a) ~~The Oregon Indoor Clean Air Act, ORS 433.835- to 433.875;~~

(b) ~~The rules in OAR chapter 333, division 015; and~~

(c) ~~Any other applicable state and local laws.~~

(2) ~~A facility must provide a place of employment that is free of tobacco smoke for all employees.~~

(3) ~~Smoking may only be allowed outside the facility as prescribed by OAR 333-015-0064.~~

(4) ~~Safety. Where residents are allowed and choose to smoke, t~~The facility ~~shall~~ must take adequate precautions to protect all residents from injury where residents are allowed and choose to smoke.

(2) ~~Smoking Prohibited:~~

(a) ~~Smoking shall not be allowed in any resident corridor or hallway, or at a nurses station which is open to resident corridor or hallway;~~

(b) ~~Smoking shall not be allowed in food preparation areas;~~

(c) ~~Smoking shall not be allowed in resident's room unless all residents therein agree;~~

~~(d) Nothing in this rule shall prevent the licensee from designating any part of the facility or the entire facility as a non-smoking area.~~

~~(3) Common Areas. All common areas (areas accessible to residents or visitors, excluding resident rooms) shall be clearly posted with signs stating "NO SMOKING" or "SMOKING AREA" or equivalent wording. In facilities with a single room designated for a specific purpose (e.g., dining or activities), that room shall either be divided into smoking and no smoking areas or designated no smoking in its entirety. If two or more rooms are designated for a specific purpose, at least one of the rooms shall be designated no smoking in its entirety.~~

(5) The facility must develop and implement a smoking policy that includes resident assessment and care planning.

~~(56) Policy Changes:(a) If the facility's smoking policy changes, the licensee shall must provide written notice to all residents 30 days' prior ~~written notice to all residents regarding~~ such change;.~~

(7) Nothing in this rule shall prevent the licensee from designating any part of the facility or the entire facility as a non-smoking area.~~(b)~~ If the facility decides to designate the entire facility as a non-smoking area, all persons admitted thereafter shall must be so notified by the facility prior to or at the time of admission. Such facility must continue to provide an indoor outdoor smoking area as prescribed by OAR 333-015-0064 for residents who smoke and were admitted prior to the facility decision.

Stat. Auth.: ORS 410.070, 410.090, & 441.055

Stats. Implemented: ORS 433.835 to 433.990, 441.055, & 441.615