



Health Care Regulation and Quality Improvement
800 NE Oregon Street, Suite 305
Portland, Oregon 97232
971-673-0540
971-673-0556 (Fax)

The enclosed material is being sent in response to your request for licensure of an Outpatient Renal Dialysis Facility (ORDF). The Health Care Regulation and Quality Improvement Section of the Oregon Health Authority has the responsibility for licensure of outpatient renal dialysis facility providers in Oregon. You will need the following forms or documents:

- Oregon Revised Statute 441, Outpatient Renal Dialysis Facilities, found online at: www.healthoregon.org/hcrqi
- Oregon Administrative Rules for Outpatient Renal Dialysis Facility, found online at: www.healthoregon.org/hcrqi
- License application for Outpatient Renal Dialysis Facilities, found online at: www.healthoregon.org/hcrqi
- Outpatient Renal Dialysis Centers Plans Review Process (attached)
- Emergency Plan Requirements (attached)

When you believe your prospective ORDF is in compliance with the Oregon Administrative Rules for ORDFs, you may send us a letter requesting a licensure survey, along with a completed ORDF license application form and fee. A surveyor from our office will then contact you to schedule the survey. You will be asked to provide evidence of compliance with the rules, including evidence that the agency has qualified individuals prepared to provide services.

If, after the survey, your facility is found to be in compliance with the licensing rules and your license has been approved, you may start providing care to patients in Oregon.

After you are licensed, and have provided care to patients, you may submit a written request for Medicare certification of your ORDF.

If you have any questions regarding this process, please call our office at

971-673-0540.

Sincerely,

Client Care Surveyor
CMS Representative
Oregon Health Authority
Public Health Division
Health Care Regulation and Quality Improvement

**If you need this document in an alternate format please contact our office
at 971-673-0540.**

OUTPATIENT RENAL DIALYSIS CENTERS PLANS REVIEW PROCESS

November 7, 2003

Oregon Administrative Rule (OAR), 333-700-0065 Submission of Plans states that any party proposing to make certain alterations or additions to an existing health care facility or to construct new facilities shall, before commencing such alteration, addition or new construction, submit plans and specifications to the Department, for preliminary inspection and approval or recommendations with respect to compliance with Department. Submission shall be in accordance with the rules of the Licensing Plans Review Program, OAR Chapter 333, division 675-0000 through 0040. Plans should also be submitted to the local building division having authority for review and approval in accordance with state building codes.

The construction requirements for outpatient renal dialysis facilities can be found at OAR 333-700-0130.

Additionally, OAR 333-675-0000 also requires the plans review process to be completed prior to altering or adding to an existing health care facility or prior to constructing a new facility. The Licensing Plans Review Program is located at The Perry House, 880 Winter Street, NE, Salem, OR. 97301, and the telephone number is (503) 373-7201.

Oregon Administrative Rules
DEPARTMENT OF HUMAN SERVICES, PUBLIC HEALTH
CHAPTER 333

DIVISION 700
Outpatient Renal Dialysis Facilities

OAR 333-700-120 (13)
Emergency Preparedness

(1) The health care facility shall develop, maintain, update, train, and exercise an emergency plan for the protection of all persons in the event of an emergency, in accordance with the regulations as specified in Oregon Fire Code (Oregon Administrative Rules 837, Division 40).

(a) The health care facility shall conduct at least two drills every year that document and demonstrate that employees have practiced their specific duties and assignments, as outlined in the emergency preparedness plan.

(2) The emergency plan shall include the contact information for local Emergency Management. Each facility shall have documentation that the local emergency management office has been contacted and that the facility has a list of local hazards identified in the county hazard vulnerability analysis.

(3) The summary of the emergency plan shall be sent to the Department within 1 year of the filing of this rule. New facilities that have submitted licensing documents to the state before this provision goes into effect also have one year from the date of license application to get their plan submitted. The Department shall request updated plans as needed.

(4) The emergency plan shall address all local hazards that have been identified by local emergency management and may include but not be limited to the following:

(a) Chemical Emergencies, Dam Failure, Earthquake, Fire, Flood, Hazardous Material, Heat, Hurricane, Landslide, Nuclear Power Plant Emergency, Pandemic, Terrorism and Thunderstorms.

(5) The emergency plan shall address the availability of sufficient supplies for staff and patients to shelter in place or at an agreed upon alternative location for a minimum of two days in coordination with local emergency

management under the following conditions:

- (a) Extended power outage,
- (b) No running water,
- (c) Replacement of food or supplies is unavailable, and
- (d) Staff members do not report as scheduled.
- (e) The patient is unable to return to pre-treatment shelter.

(6) The emergency plan shall address evacuation, including:

- (a) Identification of individual positions' duties during vacating the building, transporting, and housing residents,
- (b) Method and source of transportation,
- (c) Planned relocation sites,
- (d) Method by which each patient will be identified by name and facility of origin by people unknown to them,
- (e) Method for tracking and reporting the physical location of specific patients until a different entity resumes responsibility for the patient, and
- (f) Notification about status of evacuation to the Department.

(7) The emergency plan shall address the clinical and medical needs of the patients, including provisions to provide:

- a) Storage of and continued access to medical records necessary to obtain care and treatment of patients, and the use of paper forms that would be used for the transfer of care or to maintain care on site when electronic systems are not available
- (b) Continued access to pharmaceuticals, medical supplies and equipment, even during and after an evacuation, and
- (c) Alternative staffing plans to meet the needs of the patients when scheduled staff members are unavailable. Alternative staffing plans could include on-call staff, the use of travelers, the use of management staff or other emergency personnel but not limited to those resources.

(8) The emergency plan shall be made available as requested by the Department and during licensing and certification surveys. Each plan will be re-evaluated and revised as necessary or when there is a significant change in the facility or population of the health care facility.