



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

MEMORANDUM

TO: All Licensed Assisted Living Programs

FROM: Temitope Okpebho, DNP, MPH, RN
Acting Deputy Director of State Programs

DATE: July 1, 2026

RE: Emergencies, Disaster Planning, and Reporting

With extreme weather events sporadically occurring in the Mid-Atlantic region, it is possible that Assisted Living Programs (ALPs) may experience a loss of power or other emergency related issue such as failure of cooling or heating systems, water outages, flooding, fire or other conditions that could impact the health, safety, and/or well-being of your residents or the operation of your ALP.

All ALPs are required to have emergency plans in place to accommodate any potential disruption of services. Please refer to [COMAR 10.07.14.47](#) Emergency Preparedness. This regulation includes important requirements regarding compliance with local fire and building codes, fire extinguishers, emergency and disaster plans, evacuation plans, staff orientation and drills, and emergency electrical power generators. ALPs should also consider updating their contact information for local emergency management organizations and local health departments.

OHCQ is advised by emergency planning experts that if there is a large-scale disaster, health care facilities should be able to function independently for at least 72 hours before emergency resources may be able to respond. That somber reality underlines the importance of these regulations and the importance of devoting attention to emergency planning. Please refer to [COMAR 10.07.14.47C\(2\)](#) Emergency Preparedness, which states:

C. Emergency and Disaster Plan.

(1) The assisted living program shall develop an Assisted Living Emergency Preparedness Packet in compliance with the requirements of §C(2)—(11) of this regulation, which shall be readily available to all staff.

(2) The assisted living program shall develop an emergency and disaster plan that includes procedures that shall be followed before, during, and after an emergency or disaster, including:

(a) Evacuation, transportation, or sheltering in-place of residents;

(b) Notification of families and staff regarding the action that will be taken concerning the safety and well-being of the residents;

(c) Staff coverage, organization, and assignment of responsibilities for ongoing sheltering in-place or evacuation, including identification of staff members available to report to work or remain for extended periods; and

(d) The continuity of services, including: (i) Operations, planning, financial, and logistical arrangements; (ii) Procuring essential goods, equipment, and services to sustain operations for at least 72 hours; (iii) Relocation to alternate facilities or other locations; and (iv) Reasonable efforts to continue care.

As a reminder, [COMAR 10.07.14.02B\(39\)\(g\)](#) includes an “emergency situation or natural disaster” in the definition of “incident.” [COMAR 10.07.14.33A](#) requires “*Staff of the assisted living program shall complete an incident report within 24 hours of having knowledge that an incident, as defined in Regulation .02B(39) of this chapter, occurred.*”

[COMAR 10.07.14.33B](#) requires that “*The assisted living program shall make incident reports available on the premises to the Department and any government agency designated by the Department.*”

Should you experience emergencies during business hours, you may contact OHCQ at: (410) 402-8018 or Toll Free (877) 402-8218 / (866) 810-0099. The number to call after business hours is 211 or 311 / 911, depending on your jurisdiction.

For more information on emergency preparedness and response information, please visit [OHCQ's website](#) or the Maryland Department of Health's (MDH) [Office of Preparedness and Response website](#).