Business Continuity Plan

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This Business Continuity Template has been developed by Wakefield Brunswick and provided by Santa Cruz County. It is intended to be sample data only. Please modify this document to reflect the policies and procedures at your organization.

Section I: General

The purpose of the Business Continuity Plan is to assist the organization with ensuring that mission critical services and process are maintained, restored or augmented to meet the designated Recovery Time Objectives (RTO).

Following the command/ICS structure, the Business Continuity Operations Branch will lead BCP activities to:

a. Facilitate the acquisition of and access to essential recovery resources, including business records (e.g., patient medical records, purchasing contracts).
b. Support the Infrastructure and Security Branches with needed movement or relocation to alternate business operation sites.
c. Coordinate with the Logistics Section Communications Unit Leader, IT/IS Unit Leader and the impacted area to restore business functions and review technology requirements.
d. Assist other branches and impacted areas with the restoring and resuming of normal operations.

Section II: Activation

In an event that disrupts normal operations and impacts essential operations of the Public Health Department, measures are to be taken to prepare and pre-position resources to ensure continuity of mission critical services and processes. An algorithm of considerations and decisions are illustrated in the table below.

The Command Center (CC) responds to events that can impact the ability of <Insert facility name>\ to perform its normal daily functions. The CC is comprised of personnel with the knowledge and authority to provide support to the Emergency Response and Recovery activities.

<Insert algorithm>

NOTE: If your department cannot operate and/or there is a life safety issue, go directly to Evacuation Procedures located in the EOP.

Section III: Overview

This business continuity plan (BCP) is intended to be implemented when there is an event that disrupts normal business operations. Plan activation is described in Section II: Activation.

This plan defines the mission critical services and processes and procedures to ensure they can be continued and/or recovered when normal operations are not viable.

This BCP was developed in conjunction with the <Insert facility name> emergency planning effort. In developing this plan and all associated procedures, checklists and forms, the continuity between the <Insert facility name> and the associated departments can be ensured. Note that in order for the plan to be effective, exercises and trainings of this plan must be carried out by <Insert facility name> on an annual basis. Additionally, updates to the plan and all associated checklists, forms and procedures will be made on an annual basis in concert with the Office of Emergency Preparedness.

For purposes of this plan and all associated procedures, checklists and forms, an event is defined as any planned or unplanned situation that disrupts the normal operations of the department.

<Insert organization/department description and location>

This plan describes the procedures for continuity or, if needed, contingencies for the recovery of services at an alternate location. Strategies for continuing operations when key services are unavailable are detailed on page X.

Section IV: Continuity Requirements

This section of the BCP includes the Public Health Department's mission critical services and processes, personnel, and alternate operating location(s). This information is to be completed and maintained by Public Health Department Director, unless otherwise noted.

This plan will remain accessible to staff at all times in the Emergency Operations Plan (EOP) in the administration suite.

Updates are to be made in coordination with the Office of Emergency Preparedness.

Mission Critical Services and Processes

For purposes of the BCP, we only used processes deemed mission critical for continuity of the Public Health Department.

Mission Critical Service/Process

RECOVERY TIME 8-24 HOURS

Birth and Death Certificate Processing

Children's Medical Services

Communicable Disease Control

Community Health Education

Emergency Preparedness Planning

Family Health Programs

HIV/AIDS Services

Immunizations

Public Health Field Nursing

Interdependencies

To perform mission critical services, the Public Health Department relies on the following internal and external services:

Dependency	Service	Actions if Service is Unavailable
Emergency Response/Paramedics	Emergency Medical Services	✓ Utilize temporary or trained volunteer staff
Pharmacy	Order prescriptions	✓ Refer patients with written prescriptions to local pharmacy
Clerk's Office	Processing birth and death certificates	✓ Institute emergency receipt and processing practices
Communicable Disease Unit	Surveillance, identify, and handle communicable disease in the community	✓ Quarantine possible or proven infected person's according to the EOP
Clinics	Immunizations and Vaccines	✓ Refer patients with written prescriptions to alternate clinic or hospital
Environmental Health Division	Handling hazardous materials, solid waste management and waste-water management	✓ Contract local waste-management company

Mission Critical Equipment and Supplies

During activations, the On-Duty Manager/Supervisor in coordination with the Public Health Department staff will assess the Public Health Department's Essential Equipment and Supplies and report the status to the Command Center (CC) as requested. During this process the following steps will be taken:

- ✓ Document status of major equipment or critical supplies and how long they can operate with present supply of vital consumable materials.
- ✓ Take inventory of current equipment and supplies and create a resupply list.
- ✓ Check condition of storage or onsite stockpiles to determine the level of damage.

Quantity	Description
	Phone
	Exam table
	Computer
	Prescription book
	Blanket
	Portable O2
	Wheel chair
	Thermometers
	Sanitizing material

Vendors/Resources Call List

Company	Point of Contact	Phone Number	Emergency contract in place? Y/N

Mission Critical IT Applications

Mission Critical Applications

RECOVERY TIME 24-48 HOURS

Birth and Death Certificate Database

Medical Records (EMR)

IT and Communications Downtime Procedures

Administrative responsibility of the downtime procedures resides with each department. Department responsibility includes maintenance of the downtime procedures, which specifies the alternative processes that are to be activated to assure continuity of clinical and other services during a downtime event. The downtime procedures are to be reviewed and tested, at minimum, on a yearly basis.

Downtime Procedures Checklist	

Computer & Network Disruption
 	
Computer & Network Disruption continued
	❒ Activate the downtime procedures.
	❒ Staff will handwrite orders on manual order sheets.
	❒ Pharmacy orders will be faxed.
	❒ Downtime requisitions will be used for non-stat orders. Record all pertinent data on the downtime form. For example:
	   ○ Exam Start Time
	   ○ Exam Completed Time
	   ○ Initials
	❒ Charts are located in _____. A runner/courier will need to walk to this location to retrieve patient charts for the rest of the day.
	❒ Keep track of exams that were entered just prior to the system going down. These exams should be checked when the system comes back up to make sure the information was not lost.
	❒ If a patient schedule has been printed prior to the disruption, the schedule can be used to track patients throughout the day. If a schedule was not printed prior to the disruption, Departmental Staff will not be sure who is scheduled for this day.
	❒ List specific telephone instructions to be given to patients or other parties. (What exactly would you want people who speak to the patients say about the situation? Write this down so that everyone is saying the same thing.)
	❒ As long as phones are working, telephone instructions can be provided to patients

	• or other parties. • Labs will be ordered on paper and hand-delivered to the courier or Labs Department.
Recovery	• Data written on forms will be manually typed into system once operational. • Any new lab orders should be put into the Lab system. All paper orders during disruption will be stored in the patient charts. • Any patient families (or other parties) who were waiting for information from patient charts or other systems will be called. • Any dictation that was held due to the disruption should now be dictated into the restored system.
Downtime Procedures for Telephone Disruption	• Department will immediately activate the downtime procedures for telecommunications. • Department will locate the personal cell phone listing kept within their department and initiate the cell phone call tree. • If possible, the main department phone number(s) will be transferred to one of the remote sites for message taking. • The designated operator will be provided with a contact list of cell phone numbers. This designated operator will triage calls as they come in from patient families, etc. to the correct party. The message should be: ○ "Good Morning (afternoon). Would you kindly provide me with your name and phone number? We are currently experiencing a telephone outage. I will communicate your message to the correct division/individual and they will return your call. Our Telecommunications Staff is working on a resolution to the disruption."
Recovery	• Telephone Operator who has been taking calls will be alerted that main phone systems are back up and running. • Fax machine will be checked for any queued messages and to make sure there is enough paper in machine to print all stored messages. • Any patient families (or other parties) who had tried to contact the department will be called.

Mission Critical Vital Records

Vital Records are documents that have been pre-identified as critical to the continued operations of the Public Health Department, including those of significance to legal and financial rights of the organization.

Personnel will be deployed during an emergency to ensure the protection and ready availability of references, records and information systems needed to support essential functions under the full spectrum of emergencies. Personnel and locations of vital records have been identified before an event in order to have full access to use records and systems to conduct essential functions during a crisis event.

Record Number	Record Type	Location	Record Name/Function
	Paper and Electronic		Patient records
	Paper		Waiver forms and processes
	Paper and Electronic		Call tree
	Paper and Electronic		List of supplies needed to relocate and processes
	Paper and Electronic		Birth and death certificates
	Paper		Information and education handouts

Personnel

The personnel listed in the table below are those that have been deemed essential to their specific department in maintaining mission critical services and operations.

The personnel listed below are also included on the Call Tree Notification, and are to be notified of BCP activation as determined on the Call Tree Notification.

Public Health Department Business Continuity Response Team Roles

Departmental Recovery Team Leader
Each department has identified its Departmental Recovery Team Leader. It is the role of this individual to work with the CC to minimize the impact to departmental operations by resuming and recovering critical functions to the service levels and within the Recovery Time Objectives defined in this Business Continuity Plan.

Last Name	First Name	Home Phone	Cell Phone	Title

Loss of Staffing	
Manager	❏ Evaluate current staffing levels.
	❏ Activate your call list and notify employees as to plan activation and determine availability. Have staff report to department.
	❏ Notify human resources, managers, union representatives and other key personnel as to status and plan implementation.
	❏ Explore alternative staff resource options. If needed:
	▪ Identify similar core competencies that exist, for example, emergency medical services, prescription authorization, etc.
	▪ Request staffing needs update from the labor pool to sustain essential functions.
	▪ Secure contract staff or borrow from another facility.
	▪ Cross train staff with similar competencies by educators.
	❏ Evaluate immediate and ongoing staff needs based on existing and predicted levels of human resources available.
	❏ Identify contractors or other staff options that may alleviate problems resulting from staff loss.
	❏ Assess flexible leave options that would allow employees to address family needs while continuing to support the employing organization through a flexible work plan where feasible.
	❏ Assessment of union issues surrounding overtime issues and sharing of responsibilities among workers.
	❏ Evaluation of potential health and safety issues that might arise through diversion of staff to new job roles and loss of critical staff in various operational positions.
	❏ Prepare and implement contingency staffing schedule.

Section V: Department Continuity and Recovery

Following the occurrence of an event adversely impacting the ability to operate, decisions regarding continuity and/or recovery of operations and patient care will be made. The decision will be based on the results of the damage assessment, the nature and severity of the event and other information supplied by staff, emergency responders or inspectors. If the department experiences major damage, loss of staffing, a dangerous response environment or other problems that severely limit its ability to meet needs, the Incident Commander, in consultation with department leadership, may relocate operations.

Initial Actions

- ❐ Notify employees of BCP activation.
- ❐ Document status of major equipment and critical supplies (see Equipment and Supplies List).
- ❐ Document pharmaceutical availability and determine need for additional pharmaceuticals.
- ❐ Evaluate and document immediate staffing levels.
- ❐ Determine how long you can operate in current state.
- ❐ Assess need to transfer patients.
- ❐ Assess need to close down department and/or relocate services.
- ❐ Communicate department status, including resource needs, department closure requirements and staffing shortages to Command Center (CC).
- ❐ Communicate need to close down department and/or relocate services to CC.
- ❐ Evaluate ongoing staff needs based on existing and predicted levels of human resources available.
- ❐ Implement alternative staff resource options, including contractor staffing options that may supplement staffing needs (i.e., runners).
- ❐ List specific telephone instructions to be given to patients or other parties. *(What exactly would you want people who speak to the patients say about the situation? Write this down so that everyone is saying the same thing.)*

Loss of Corporate Services

Each department depends on corporate services to operate. Department responsibility includes maintenance of the downtime procedures, which specifies the alternative processes that are to be activated to assure continuity of clinical and other services during a downtime event. The procedures are to be reviewed and tested, at minimum, on a yearly basis.

Loss of Power	❑ Outlets served by the emergency generator are identified by red outlets. ❑ Open curtains and drapes to take advantage of natural or off-site lighting, as applicable. ❑ Turn off "unnecessary" electrical equipment to reduce load on generator. Also turn off any equipment that may have been running when the power went out. ❑ Establish activities to compensate for loss of normal room lighting, television, etc., as practical. ❑ Ensure operation and availability of flashlights and batteries. ❑ In the event of the loss of the generator serving the facility, <u>and</u> the commercial power source, the following would be required: o <insert actions>
Loss of HVAC	❑ Notify Facilities. ❑ Should there be a failure of any equipment or portion of the HVAC system that cannot be corrected by the Engineering/Maintenance person on duty. ❑ Consider relocating the patients. ❑ Use fans, if available. ❑ Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. ❑ Open doors and windows, if possible, to take advantage of available breezes. ❑ Turn off lights as well as other heat-producing appliances whenever possible. ❑ Provide plenty of liquids for patients and staff.
Loss of Water	❑ Determine ability to obtain bottled water from outside sources. ❑ Use waterless hand cleaner where possible.

Alternate Location

<Insert facility name>'s overall business continuity recovery strategy is based upon using existing internal resources for recovery of services and operations impacted by a disruptive event, whenever possible. Primarily, this involves the relocation of departmental services to one of three alternates:

   i.   The designated department staff would relocate to an alternate location, as identified in the Business Continuity Plan.
   ii. Designated department staff may be assigned to other work groups.
   iii. Staff equipped to work at home may be assigned to continue to work at home.

In an event where a primary Public Health department location is deemed to be inoperable or unsafe, the Public Health Department Director, or designee, will initiate department closure procedures and activate the alternate location which may provide full or limited operational capability. NOTE: Relocation will be coordinated with the Command Center

Conditions for consideration: Space easily accessible by incoming patients, adequate space for waiting and tiered patients, electricity, internet, water, waste management and removal.

☑ Full Operational Capability	☐ Limited Operational Capability	
Address: Designated Office Space or Tent Setup **Contact Number/s: ###-###-####**		

☐ Full Operational Capability	☑ Limited Operational Capability
Address: Designated Office Space or Tent Setup **Contact Number/s: ###-###-####**	

Department Closure Checklist

Department Manager	❐ Coordinate with CC: criteria to shut down, location of alternate location, set up, supplies needed, transport of patients, equipment/supplies, food/fluids areas designated for staff, security of medications and building, evaluate for Decon site if needed and I.T. accessibility. ❐ Notification of closure and relocation site with exact date/time to staff and departments. ❐ Determine staff schedule that correlates with patient needs in alternate location. ❐ Designated staff to receive patients upon arrival at alternate location. ❐ Suspend non-essential activities as needed. **Equipment and Supplies** ❐ Request par level for patient care supplies and determine essential needs for alternate site. ❐ Collaborate and gather supplies to include vital records to record care. ❐ Contact CC to have transport brought to loading area for supplies. ❐ Designate staff to load supplies in appropriate vehicles with inventory of those being relocated. ❐ Collaborate with I.T. areas for computer access, application availability and areas in need. **Communication** ❐ Notify external agencies of relocation. ❐ Notification of Public Information Officer (PIO) to release information about relocation. ❐ Contact patients informing them of relocation date, time and site.

Relocation Checklist	
Department Manager	**Alternate Location** ❐ Designate location for record collection and privacy with specified personnel. ❐ Place medications in designated area and secure. ❐ Inventory meds with pharmacy personnel. ❐ Collaborate with pharmacy the release process for medications from designated area with record keeping/charges. ❐ Designate staff to unload equipment/supplies and equipment to designated areas. ❐ Designate area for staff breaks and rest periods. ❐ Maintain appropriate area for food storage and preparation for patients and staff. ❐ Separate areas for toileting and showering of patients/staff. ❐ Post signage. ❐ Ensure security of building with IC, Maintenance and local law enforcement agencies. ❐ Provide breaks and rest periods to staff. ❐ Re-evaluate staff schedule and needs per shift and adjust per patient needs. ❐ Assign staff to return and inventory equipment placing back into appropriate areas. ❐ Assign staff to patient care areas.

Relocation Checklist (cont.)

Department Manager	☐ Collaborate with I.T., Business Office and Admissions: assignments of data entry not captured at alternate care site to be inputted into EMR. ☐ Provide all hard copy records to those designated to enter data into EMR. ☐ Inventory medical supplies in each patient care area to identify anything that should be discarded, can still be used or needs to be ordered. ☐ Do not dispose of unsalvageable equipment. Everything must be inventoried and evaluated for insurance purposes. ☐ Use pre-existing order lists of products and supplies for each area to inventory supplies and create resupply lists. ☐ Identify any equipment and/or supplies currently in storage that can be used to replace missing or damaged items. ☐ Ensure that the environmental staff has the chemicals and cleaning supplies needed to begin clean up. ☐ Identify missing or damaged medical equipment. ☐ Alert supply chain team about equipment that was moved. ☐ Assist maintenance team to return and reconfigure medical equipment that was moved or disconnected during the relocation Work with maintenance teams and vendors to ensure that any specialized medical equipment and systems are functioning correctly. ☐ Work with IT and Communications to identify missing or damaged computers or communications equipment.

Recovery and Resumption of Mission Critical Services

Prior to returning to the primary site during the recovery phase, it is essential to determine the status of the facility and equipment. Once it is confirmed that essential infrastructure and supplies are available, services may be resumed at primary workspace/patient care department. Preparations to initiate these actions should be taken at the earliest time possible.

Recovery and Resumption of Mission Critical Services Checklist	
Manager	❑ Confirm with the CC to validate all clear to return to facility. ❑ Notify staff. ❑ Collect hard copy records. ❑ Assign staff to gather necessary equipment/supplies to relocate. ❑ Load supplies, equipment, records and return to facility. ❑ Request facilities to transport equipment and supplies. ❑ Notify incident command team is ready to return. ❑ Request IT/Telecom to mobilize phones at primary site. ❑ Determine inventory of pharmaceuticals, care equipment, and hardware equipment. ❑ Notify stakeholders regarding appointment changes or cancelations. ❑ Return to facility. ❑ Notify agencies of reopening. ❑ Notify PIO to release communication to public of reopening.

Appendix A: Schedules

BCP Update Schedule
BCP Exercise and Training Schedule

BCP Update Schedule

In order to ensure efficacy of the BCP it is to be reviewed and updated on the schedule as outlined below. The Public Health Department is responsible for maintaining and carrying out the Update Schedule. Once updated, the Plan must be provided to all responsible parties and the previous version is to be gathered and destroyed.

NOTE: Following an event it will be determined whether an out-of-cycle update is required. If so, the update will be recorded and then will be revised and distributed as outlined above. BCP updates may occur with:

- ☐ The addition of new employees or transferred employees to your department.
- ☐ The relocation of employees, supply areas or other resources.
- ☐ Changes in departmental procedures that would affect downtime procedures.
- ☐ Changes in staff or management telephone numbers, pagers, etc.
- ☐ Changes in management or reporting structure within your department.
- ☐ New computer systems to be used by your department.
- ☐ Changes in vendors that you are using.
- ☐ After an actual downtime occurs.
- ☐ Annual review.

Scheduled Update	Plan Version

BCP Exercise and Training Schedule

The BCP will be exercised and trained on the schedule outlined below. Exercises and trainings should occur prior to the required plan update in order for the lessons learned to be reflected in the update.

The Public Health Department Director is responsible for ensuring the exercises and trainings are carried out and documented.

Scheduled Update	Plan Version