DEPARTMENT OF HEALTH AND **HUMAN** SERVICES **Office of the Secretary**

Assistant Secretary for Health
Office of Public Health and Science
Washington D.C. 20201

DATE: DEC 2 2 1997

TO: See Distribution

FROM: Robert F. Knouss, M.D
Director, Office of Emergency Preparedness

SUBJECT: The Emergency Management and Enterprise Resumption Planning System (EMERPS)

The Department of Health and Human Services (HHS) is responsible for preparing national plans and developing preparedness programs encompassing Federal health, medical, and human services during times of emergencies. Actual response operations must be performed or rapidly resumed under a variety of conditions, including emergencies that may affect the Department.

The attached EMERPS is the latest revision of HHS's system of plans that encompasses our continuity of operations, our response to both domestic and national security emergencies, and emergency management policies. It has been developed by the Office of Emergency Preparedness with contractual assistance and input from the OPDIVs and STAFFDIVs.

It is requested that you and/or your staff review this draft EMERPS and provide concurrences and/or comments by Monday, February 2, 1998. My point of contact for this action is Bob Jevec, 301-443-5708, Fax: 301-443-5146, E-MAIL: rjevec@osophs.dhhs.gov.

Attachment

DISTRIBUTION

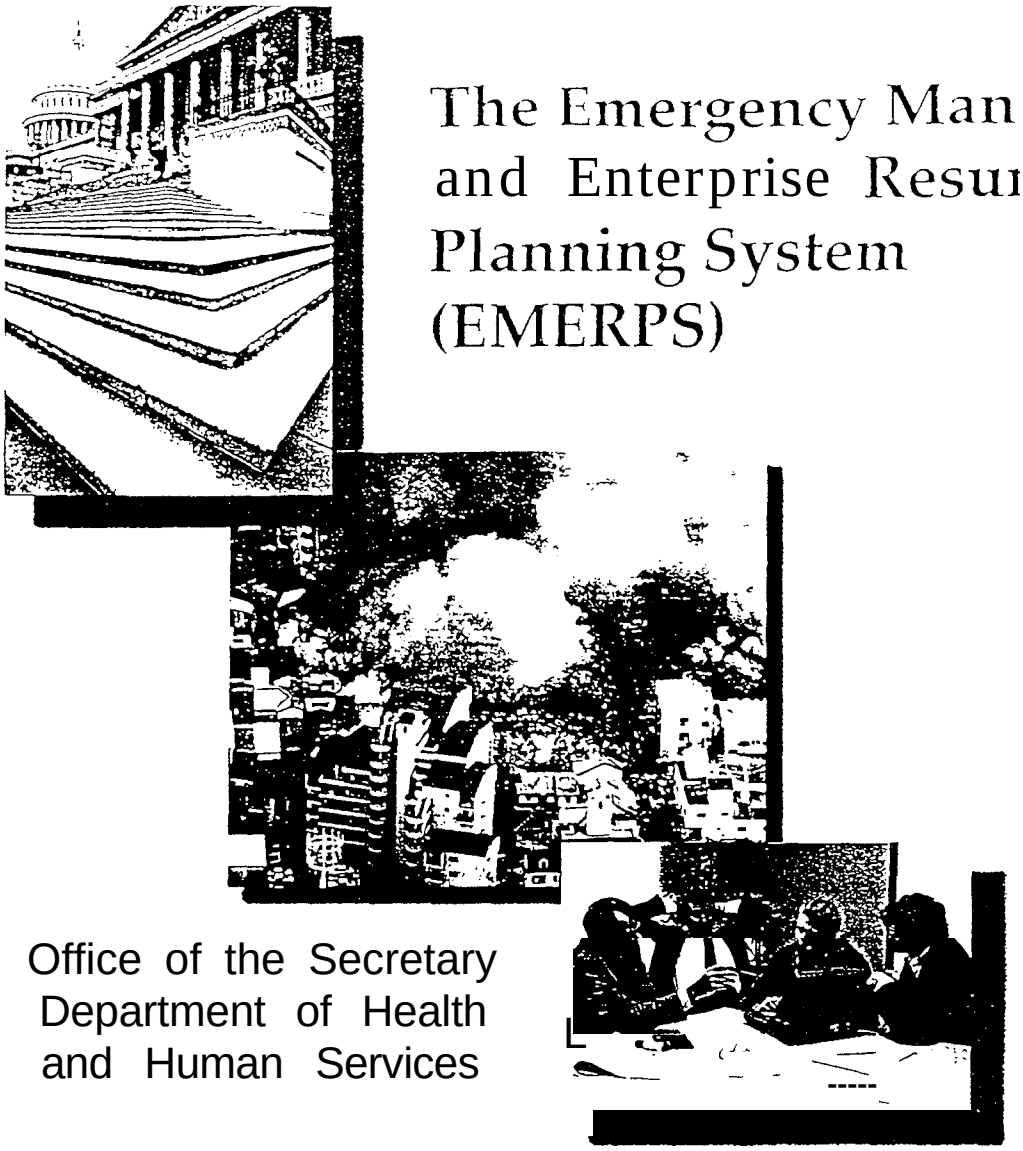
Chief of Staff
Office of the Assistant Secretary for Management and Budget
Office of the Assistant Secretary for Legislation
Office of the Assistant Secretary for Public Affairs
Office of the Assistant Secretary for Planning and Evaluatio
Office of Public Health and Science
Office of Intergovernmental Affairs
Office of General Counsel
Office of the Inspector General
Office of the Surgeon General
Office for Civil Rights

Emergency Coordinators:

Health Care Financing Administration
Administration on Aging
Administration for Children and Families
Program Support Center

Centers for Disease Control and Prevention
Food and Drug Administration
Health Resources and Services Administration
National Institutes of Health
Substance Abuse and Mental Health Services Administration
Indian Health Service
Agency for Health Care Policy and Research
Agency for Toxic Substances and Disease Registry

DRAFT



The Emergency Management and Enterprise Resumption Planning System (EMERPS)

Office of the Secretary
Department of Health
and Human Services

December 1997

THE EMERGENCY MANAGEMENT AND ENTERPRISE RESUMPTION PLANNING SYSTEM (EMERPS)

TABLE OF CONTENTS

Table of Contents i
Foreword vii

BASIC PLAN

I INTRODUCTION 1

II PURPOSE AND BACKGROUND 2

III APPLICABILITY AND SCOPE 3

IV. AUTHORITIES AND DELEGATIONS 13

A. Delegation to Head of Operating Divisions 13
B. Emergency Program Functions 13
C. Coordination Functions 13
D. Specific Delegation of Responsibilities 14
E. Implementation 14

V. POLICY 14

VI OBJECTIVES 15

VII SITUATION AND ASSUMPTIONS 16

A. Situation 16

1 Emergencies 16

a Acts of God (Natural Disasters) 17
b Manmade and Technological Hazards 17
c Internal Disturbances 17
d Terrorism. Including Employment of Weapons of Mass Destruction (WMD) 18
e Attack 18
f Material and Energy Shortages 19

	2	Emergency Definitions and Principles	20
	3	General Principles of Emergency, Response	21
	4	Phases in Emergency Response	21
	5	Myths About Behavioral Responses to Emergencies and Disasters	23
	6	Other Considerations	27
B		Assumptions	27
C		Concept of Operations	29
VI II		RESPONSIBILITIES	53
A.		Summary of Requirements	53
B		Interagency Activities	57
	1	Federal Emergency Management Agency	57
	2	Department of Defense	57
	3.	Department of Agriculture	57
	4	Veterans Administration	58
	5	Other Agencies	58
C.		Financial Management	58
D		Public Information	59
E		Congressional Relations	60
F		Summary of Responsibilities and Programs	61
	1.	Office of the Secretary	61
		a The Secretary	61
		b The Deputy Secretary	62
		c Office of Intergovernmental Affairs	62
		d Office of the General Counsel	63
		e. Office of the Assistant Secretary for Legislation	63
		f Program Support Center	64
		g Office of the Assistant Secretary for Management and Budget	65
		h Office of the Assistant Secretary for Public Affairs	66
		i. Office of Inspector General	66
		j Office of the Assistant Secretary for Planning and Evaluation	67
	2	U S Public Health Service	67
	3	Assistant Secretary for Health	67

TABLE OF CONTENTS

4.	Office of the Deputy Assistant Secretary for Health	69
	a. Office of Emergency Preparedness	69
	b. PHS Commissioned Corps	69
5.	Centers for Disease Control and Prevention	69
	a. Disease Assessment, Surveillance, and Control Activities	70
	b. Environmental Hazard Control	70
	c. Occupational Safety and Health	71
	d. Refugee Health Program	72
6.	Food and Drug Administration	72
	a. Radiation Protection	72
	b. Foods, Drugs, and Biologics	72
7.	Health Resources and Services Administration	73
	a. Resources Data	74
	b. Planning Capacity	74
	c. Health Personnel	74
8.	The National Institutes of Health	75
9.	Substance Abuse and Mental Health Services Administration	76
	a. Research and Training	76
	b. Crisis Counseling	76
10.	Health Care Financing Administration	77
11.	Administration on Aging	78
	a. Disaster Relief for the Elderly	79
	b. Training, Research, and Discretionary Projects and Programs	79
12.	Administration for Children and Families	80
13.	Administration for Native Americans	81
14.	Administration on Developmental Disabilities	81
15.	Office of Family Assistance	82
16.	Aid to Families with Dependent Children	82
17.	Emergency Assistance to Needy Families with Children	83
18.	Low Income Home Energy Assistance Program	84
19.	U.S. Repatriation Program	84
20.	Office of Refugee Resettlement	85

21. Regional Offices-Regions 1 to X 85

IX. CATEGORIES OF CRITICAL INCIDENTS AND EMERGENCIES 87

A. Local Emergencies 87
B. National Security Emergencies 88

X. PLANS FOR SPECIFIC TYPES OF EMERGENCY SITUATIONS 89

A. National Security Emergencies 89
B. Chemical and Biological Terrorism Threats 89
C. National Repatriation Plan 90
D. Public Health Service National Disaster Medical System 90
E. DHHS Response Plan for Radiological Emergencies 95
F. Public Health Service Emergency Response Guides 95
G. Technological Hazards 96
H. Energy/Material Shortages 96
I. Natural Disasters 96
J. Internal Disturbances 97
K. Mass Immigration Emergencies 97
L. Washington, DC, Metropolitan Area Emergencies 97

XI. DISTRIBUTION 98

XII. PLAN MAINTENANCE 98

XIII. AUTHORITIES AND REFERENCES 104

FUNCTIONAL ANNEXES

A	DIRECTION AND CONTROL *(INCIDENT MANAGEMENT SYSTEM)*	A-1
B.	ENTERPRISE RESUMPTION AND CONTINUITY OF OPERATIONS PLANNING (COOP)	B-1
	APPENDIX 1 TO FUNCTIONAL ANNEX B - PLANNING TOOL	B-1-1
	APPENDIX 2 TO FUNCTIONAL ANNEX B - RELOCATION PLANNING	B-2-1
	APPENDIX 3 TO FUNCTIONAL ANNEX B - COOP SUPPLIES. SERVICES. AND EQUIPMENT	B-3-1
	APPENDIX 4 TO FUNCTIONAL ANNEX B - COOP CHECKLIST	B-4- 1
C.	CONTINUITY OF GOVERNMENT PLAN (COG) [Classified-To Be Published Separately]	C-1
D.	EMERGENCY MANAGEMENT	D-1

APPENDICES

A	LIST OF ACRONYMS/ABBREVIATIONS	APP A-1
B.	TERMS AND DEFINITIONS	APP B-1

TABS

A-1	OPERATING DIVISIONS EMERGENCY RESPONSE GUIDES (To Be Provided)	TAB A-1-1
A-2	DELEGATION OF AUTHORITY— EMERGENCY PREPAREDNESS FUNCTIONS	TAB A-2-1

LIST OF FIGURES

Figure 1	DHHS Alerting Chart Office of the Secretary	48
Figure 2 -	Alerting Procedure	49
Figure B-I -	COOP Implementation Stages	B-19
Figure B-2 -	Incident Information Requirements	B-24
Figure B-l-l	Threats and Vulnerabilities	B-l-52
Figure B-l-2 -	Partial List of Threat Agents	B-l-53
Figure B-l-3 -	Factors Effecting Threat Occurrence	B-l-54

FOREWORD

December 1997

The Department of Health and Human Services (DHHS) has the responsibility for preparing national and regional emergency plans and developing preparedness programs encompassing health and human services. These operations must be performed, or rapidly and efficiently resumed, under a variety of conditions, including emergencies that may affect the Department

This Departmentwide system of plans. developed at the national level, encompasses our continuity of operation and Government, and emergency management policies. It has been developed, in cooperation with the Operation Divisions (OPDIVs), by the Office of Emergency Preparedness (OEP) The goal of this system is to ensure our effective management and coordination of the DHHS response to all types of emergencies.

This system of plans encompasses the Department's concept of operations for continuity of operations and response to both domestic and national security emergencies. This concept of operations is based on a national network of emergency coordinators, and on the ongoing programs of the OPDIVs and Staff Divisions (STAFFDIVs)

We must be prepared to respond to the variety of emergencies that may face us, and this system is the foundation for that effort. You need to know where these plans are when you need them. You need to know what is in them. They will be updated as new programs are developed.

Assistant Secretary for Health

THE EMERGENCY MANAGEMENT AND ENTERPRISE RESUMPTION PLANNING SYSTEM (EMERPS)

BASIC PLAN

I. INTRODUCTION

A. The Department of Health and Human Services (DHHS) has the major responsibility for dealing with the health and human services needs people experience during emergencies. including those that directly affect the Department and its employees. The Department's many resources and ongoing programs are brought to bear throughout all phases of the management of emergencies.

B. DHHS has in place a continuity and emergency preparedness and response system through interagency agreements, a network of emergency coordinators, and the ongoing programs of the Operating and Staff Divisions (OPDIVs and STAFFDIVs) The goals of the system are

1. For those citizens in need of emergency care: To be efficient, responsive. and compassionate and thereby save lives, alleviate suffering. and help States and local governments, and other Federal agencies and Departments provide assistance

2. For enterprise resumption (continuity of essential operations) To mitigate risks. ensure the life safety and well-being of employees and visitors during an emergency; reduce disruptions to operations: protect essential equipment, records. and other assets. minimize damage and loss. provide organizational and operational stability. through relocation of critical Departmental functions and achieve an orderly, recovery from emergency operations

3 For Continuity, of Government (COG) To have in place a comprehensive and effective program which has been coordinated with all Federal agency continuity plans to ensure survival of our constitutional form of Government and continuity of essential Department functions in the face of a catastrophic emergency

II. PURPOSE AND BACKGROUND

A The purpose of the EMERPS is to help ensure that our response to all types of emergencies, be they domestic, national security, or threats to our continuity. is effectively managed and coordinated EMERPS sets out some principles (or guidelines and authorities) that guide OPDIV and STAFFDIV emergency management programs. outlines the concept of operations for continuity operations and both domestic and national security emergencies, and provides basic information on DHHS programs that can assist in emergency situations and identify DHHS plans, or other Federal plans, that have been developed to address specific types of emergency situations

B. Every year emergencies take their toll in lives and dollars on our Government, businesses, and industries. These events vary dramatically in scope and magnitude A blizzard shut down much of the east coast for days. More than 150 lives were lost and millions of dollars in damages incurred. Hurricane activity over the past several years increased in severity and destruction, costing dozens of lives and billions of dollars in damage to the east and gulf coasts of the United States A two-alarm fire at the Department of the Treasury (DOTRES) resulted in the evacuation of approximately 1,700 employees, and left one-quarter of the building uninhabitable due to fire and water damage. The World Trade Center bombing resulted in 6 deaths. hundreds of injuries, and the evacuation of 40,000 people; the Alfred P Murrah Federal Center bombing killed 168 and injured more than 500

C These events often strike without warning and have potentially monumental human. economic. and social consequences Proper planning for operations in emergency

conditions can lessen or. in some cases. mitigate the extent of the impact on persons. facilities. and individual agency missions To most effectively respond to emergencies requires a partnership among all DHHS entities with responsibilities and duties of each understood, well defined, and reduced to writing

III. APPLICABILITY AND SCOPE

A. DHHS is the Federal Government's principal agency for protecting the health of all Americans and providing essential human services As such, the DHHS, by law and Executive Order, is required to:

1 Provide essential health and human services to the victims of emergencies. and

2. Have the capability to maintain continuous operations

B Each DHHS organizational element must therefore be prepared to not only provide essential services, but to do so during an emergency or threat of an emergency, and to efficiently and effectively resume critical operations if they are interrupted. Planning for meeting the demands of a wide spectrum of emergency scenarios is necessary. and is accomplished by developing a system of plans.

C. This system of departmental plans serves as the overarching guidance for Continuity of Operations (COOP), COG, and emergency management planning. It provides a foundation for the further development of detailed OPDIV and regional plans and procedures to implement Departmental continuity or emergency response activities in a timely and efficient manner

D You do not need an indepth knowledge of continuity or emergency management to implement the provisions of these plans This document serves as your step-by-step guide to the activities necessary to see the Department through a natural, manmade. or technological emergency or disaster that requires DHHS support, or threatens the DHHS enterprise

1. EMERPS Structure

The system of plans is organized as follows:

a Basic Plan: This Basic Plan provides an overview of the Department's approach to continuity, and emergency operations. It details policies. describes how we organize for response. and assigns tasks. The Basic Plan is an overview of the Department's continuity and emergency response organization and policies. It cites the legal authority for continuity and emergency operations. summarizes the situations addressed by the system. explains the general concepts of operation. and assigns responsibilities for continuity!. emergency' planning. and operations

b. Functional Annexes: Functional Annexes are plans organized around the specific performance of a broad task Each annex focuses on one of the critical emergency. functions that the Department performs in response to an emergency'. These annexes include.

(1) Direction and Control (Incident Management System (IMS)).
(2) Enterprise Resumption/Continuity of Operations Plan.
(3) Continuity of Government Plan. and
(4) Emergency Management Plan (EMP)

2. Direction and Control

a We will employ a system of direction and control called the "Incident Management System" (IMS) to manage emergencies affecting the Department and its operations

b. Emergencies and disasters have been defined as "extreme social crises in which individuals and their social systems become disorganized and dysfunctional." Any emergency requires an organized system of roles. responsibilities, and standard operating procedures to manage and direct operations. IMS was developed in the firefighting community, and has since evolved into an "all-risk/all-agency" means of

(1) Lending consistency to the way team members and agencies function in an emergency, and

(2) Fostering efficiency by eliminating the need to "reinvent the wheel" for each new emergency

c IMS addresses the recurring problems commonly associated with critical incidents and emergencies:

(1) Use of nonstandard terminology among responding agencies,

(2) Lack of capability to expand or contract as required by the situation.

(3) Nonstandard and nonintegrated communications,

(4) Unmanageable span of control.

(5) Lack of designated incident facilities. and

(6) Lack of a comprehensive resource management strategy

d IMS is basic business management techniques. It will aid us in performing the tasks of planning, organizing, directing, coordinating, delegating. communicating, and evaluating during the course of an emergency. For the purposes of this plan, IMS is defined as.

> "The combination of facilities, equipment, personnel, procedures, and communications operating with a common organizational structure, with responsibility for the management of assigned resources to effectively accomplish stated objectives pertaining to an incident and/or event."

e IMS is further defined in Functional Annex A.

f. Policy-level officials and program managers who will provide direction and control through IMS should become aware of the continuity and emergency preparedness aspects of their day-to-day programs, and should participate in the planning process along with emergency coordinators and recognized subject matter experts. This will facilitate the defining of continuity and emergency roles and the training of managers, and will promote the use of ongoing capabilities and resources, rather than relying on a "standby" system that may become obsolete from lack of use.

3. Enterprise Resumption/Continuity of Operations Planning

a Continuity planning represents, in the truest sense, an organization's assurance that it has the uninterruptible ability to meet its essential commitments and reform critical functions no matter what the circumstances COOP is defined as the measures we take to continue to perform or rapidly restore minimum essential critical functions or operations during and after a severe emergency The term applies to activities related to the operational

integrity of our operating elements at the national and regional levels It provides for the uninterrupted availability of all resources necessary to operate our enterprise at an acceptable level. In the event of some form of disruption. we are not trying to maintain normal operation. We are trying to maintain acceptable operations. Our plan charts the course to a return to normal

b. Our continuity planning, much like our emergency planning, provides a graduated response to the full spectrum of the threat-natural, manmade. or technological. It uses, as much as possible, our existing contingency response structure. We document activities in our plan that must be completed prior to an unplanned event, which will allow recovery from that event. Recovery planning is the development of procedures for our return to normal Together, contingency and recovery planning create our overall plan for continuity. This plan describes the actions, resources, and procedures necessary before an unplanned event renders inoperative any of our critical functions or services. COOP is a dynamic process. Planning, though critical, is not the only component. Training, conducting drills, testing equipment. and coordinating activities with the community and other Departments and agencies are other important functions.

c Our COOP defines the capability of the Department to continue to operate, or rapidly resume operations, in an emergency or threat of an emergency. COOP may include the activation of our emergency operations centers at the national or regional level, the evacuation of our personnel from their normal operating locations, the selection and occupation of a relocation site capable of supporting the continuation of our essential activities, and the provision of data processing, logistics. and telecommunications support by temporary use of nonstandard or alternative means. To ensure continued support during a COOP scenario. daily on-line database, word processing, and E-mail backups on all automated systems will be conducted to safeguard loss of critical information These activities could be taking place while we are involved in supporting other agencies/offices/elements in responding to the disaster, or other concurrent disasters

d We will utilize a team approach in implementing Enterprise Resumption (ER)/COOP, and employ the incident management system to direct and control our activities. The use of trained teams provides the infrastructure necessary to direct a response, relocation, and recovery operation The teams will receive special training in managing ER/COOP activities. In addition, the teams will be given special emergency authority over a wide range of areas important to successful response, relocation, and recovery

e Our plans will be periodically tested, and regularly communicated to our employees and management. Employees must know what to do in case of an emergency and how to go about it. Remember that contingency plans most often operate during times of great stress and without key personnel. Trained teams following documented, tested procedures are the best assurance of our success To assist Emergency Coordinators (ECs) at all levels, emergency resumption action teams will be formed to assist ECs in the organizing of initial deploying relocation teams and coordinating follow-on deployment activities.

4. Continuity of Government

It is the policy of the U S. Government to have in place a comprehensive and effective program to ensure the survival of our constitutional form of Government and continuity of essential Federal functions in the face of a catastrophic emergency. COG and COOP programs remain an important hedge against current and future uncertainties and a counter to new threats (including terrorism) in a new era of proliferating technologies and materials related to weapons of mass destruction (WMD). The COG annex to EMERPS is classified. Authorized users may obtain copies of the Annex from the Office of Emergency Preparedness (OEP)

5. Emergencies

a An emergency is any unplanned event that can cause deaths or significant injuries to the public. our employees. or our customers. or that can shut down our

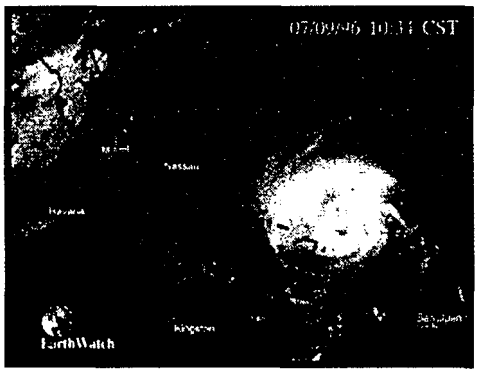
business processes. disrupt operations. cause physical or environmental damage

Paragraph VII B of this annex, "Assumptions." further details categories of emergencies For the purposes of this plan. we will define an emergency and critical incident as

> "Any natural or manmade event, civil disturbance, or any other occurrence of unusual or severe nature which threatens to cause or causes the loss of life or injury, loss of functionality, and/or severe damage to property and requires extraordinary measures to protect human lives. meet human needs. achieve functionality, and recovery. "

b Obviously, numerous events can be "emergencies," including:

(1) Fire,
(2) Hazardous materials incident,
(3) Flood or flash flood,
(4) Hurricane,
(5) Tornado,
(6) Winter storm.
(7) Earthquake,
(8) Communications failure,
(9) Extended computer outage,
(10) Radiological accident.
(11) Terrorism,
(12) Civil disturbance,
(13) Explosion, and
(14) Information warfare



c Many of these events may be preceded by a warning phase in which our operating elements will have varying degrees of time to prepare and mitigate or respond to the

consequences of the event Therefore. for the purposes of EMERPS. a critical incident is an emergency in which forewarning (advance notice) is provided, allowing preparatory actions to be implemented/prestaged.

d Each event must be addressed within the context of the impact it has on our Department and the affected community Impact analysis is described in Appendix 1 to Functional Annex B. "COOP Planning Guidelines "

6. Principles of Emergency Management

The following principles have been developed to guide the development of the DHHS EMERPS and supporting plans.

7. Comprehensive Management of Emergencies

A system of plans, adaptable to the full range of all hazards, will be utilized. (All hazards refers to any number of natural or manmade disasters or emergencies such as hurricanes, earthquakes, forest fires, floods, oil spills, radiological contamination, power outages, nuclear attack, or sabotage. Emergencies and major disasters, as defined by 42 U.S.C. 5 122, are included) An "all hazards" approach to planning incorporates many aspects of national security preparedness with an effective emergency response system. National security preparedness in isolation from preparedness for emergencies results in systems on standby for defense becoming moribund, with staffs assigned to these functions out of the mainstream of ongoing activity. Experiences gained from the full range of natural. manmade, and technological emergencies should be incorporated into the planning and response to maintain currency

8. Interagency Coordination

An effective emergency response. whether it be in support of our citizenry or in support of maintaining our essential Departmental operations. requires the participation of a number of Federal, State. and local agencies with interfacing responsibilities. Interagency coordination is best achieved through the development, coordination, and exercising of specific plans on an annual basis by the respective agencies in advance of the emergency situation

9. Coordination With States and the Private Sector

Because of the key role that State and local governments and the private sector play in responding to emergencies, and in responding to events that affect this Department's continuity, emergency planners should work in close cooperation with State and local officials and representatives of private organizations Such coordination can help in developing more effective plans and programs for all phases of emergency management Region-level plans should be tested in conjunction with scheduled State and Federal regional emergency exercises.

10. EMERPS Measures of Success

a We will develop and maintain plans that.

(1) Are the result of cooperative thinking and design by a cross section of involved and responsible management and key personnel.

(2) Are realistically tested with appropriate stress. and with test results that are acted on

(3) Are updated as a normal course of operations as changes in our enterprise. organization. staffing. processes, and technology occur

(4) Employ of cost-effective prevention as well as reactive measures

(5) For those citizens in need of health and human services emergency assistance are: efficient, responsive, and compassionate and thereby save lives, alleviate suffering, and help States and local governments provide assistance.

(6) For continuity of Department operations

(a) Ensure the safety and well-being of employees and visitors during an emergency;

(b) Reduce disruptions to operations;

(c) Focus on critical functions;

(d) Protect essential equipment, records, and other assets;

(e) Minimize damage and loss,

(f) Provide organizational and operational stability, facilitate decision making during an emergency, and achieve an orderly recovery from emergency operations, and

(g) Are based on complete and realistic impact analysis and periodically revisited to ensure continued viability as our enterprise changes

b This system of plans will achieve these measures of success by promoting an integrated approach to DHHS continuity and emergency preparedness so that the

Department can respond rapidly and effectively regardless of the cause. time. place. or size of the disaster Every employee's efforts are critical to our ability to cope with and overcome emergency responses and/or disruptions to our enterprise. We must be prepared to respond to the emergencies that may face us, and this plan is the foundation for that effort Know where these plans are when you need them Know what is in them

IV. AUTHORITIES AND DELEGATIONS

Authorities and References for the DHHS EMERPS are found in XIII, Authorities and References. on page 104 of this Basic Plan.

A. Delegation to Heads of Operating Divisions

Continuity of Essential Functions. The Secretary has delegated to the head of each OPDIV the authority to develop plans and take actions necessary to assure that the OPDIV will be able to perform its essential functions at headquarters and regional levels, continue as a viable part of DHHS during any emergency, and respond to major disasters Letters of delegation are found at Tab A-2 to the EMERPS Basic Plan.

B. Emergency Program Functions

The Secretary has also delegated to the head of each OPDIV the authority to prepare national and regional plans and develop preparedness programs covering those functions and responsibilities appropriate to the OPDIV in accordance with the requirements of Executive Order (EO) 12656. PL 93-288. and the DHHS EMERPS

C. Coordination Functions

The Secretary has delegated to the Assistant Secretary for Management and Budget. authority to develop and maintain emergency and disaster assistance plans and

measures for the Office of the Secretary,. to direct. coordinate. and monitor the performance by the heads of the OPDIVs and by the Regional Directors of the preparedness responsibilities assigned to them. and to prepare emergency plans covering functions that must necessarily be centralized at Office of the Secretary (OS) levels.

D. Specific Delegation of Responsibilities

The Secretary has assigned responsibility for oversight and coordination of all DHHS emergency preparedness plans and programs to the Assistant Secretary for Management and Budget The focal point for this activity is the OEP. The Secretary has assigned to the Regional Directors (RDs) the responsibility of assuring that these emergency services are provided in their respective regions. Letters of delegation are found at Tab A-2 to the EMERPS Basic Plan.

E. Implementation

The Secretary has not authorized the heads of OPDIVs and the RDs to redelegate the authorities assigned to them. This signifies that each will be held personally responsible for the accomplishment of the functions assigned to him or her.

V. POLICY

A The OS will coordinate Emergency Response Plans across OPDIVS to support the development of Departmentwide response plans at the national level. The Regional Directors (RDs) will coordinate across OPDIVs at the regional level and develop regional emergency response plans with appropriate linkage to the national plans and to State Emergency Response Plans All DHHS plans will be written following the IMS for direction and control during emergency responses The IMS is designed to enhance and reinforce the normal Chain of Command found within all DHHS Regions and OPDIVs The IMS is described in Functional Annex A to EMERPS

B. Current policy guidance places primary reliance upon the regular chain of command and ongoing programs as the mechanism for conducting ER/COOP and COG planning during a critical incident or emergency. All offices and program areas in DHHS share the responsibility for COOP/COG and therefore should define the COOP/COG preparedness aspects of their day-to-day responsibilities and include their emergency preparedness functions in their work plans. Policy officials and program managers must be involved in developing the COOP/COG plans. By means of such activity and involvement, DHHS makes use of its enormous depth and breadth of health and human services experience, and the wide variety of DHHS employees who can be called upon to respond to emergencies.

C The Emergency Coordinators (ECs) of the STAFFDIVs, OPDIVs, and Regional Offices are responsible for leading the development of Emergency Response and COOP Plans that follow the general guidance provided by this plan. These plans will allow all elements of DHHS to be prepared to provide a coordinated emergency health and human services response during all contingencies with a minimum of disruption of critical services and operations. Once completed, these emergency response plans should be tested annually and should be adaptable to any major emergency response required by DHHS at the national, regional, or local level The plans should be tested annually within the framework of the Federal Response Plan (FRP) and all other Federal-level plans

VI. OBJECTIVES

The primary objective of this system of plans is to ensure the provision of emergency health and social services and continuity of operations during any emergency response required of the DHHS. This means that all elements of DHHS should be capable of functioning and providing the full range of essential Government services during the course of any emergency response. The second objective is to ensure that DHHS is able to properly manage all of the Department's resources for health and social services during any emergency response

VII. SITUATION AND ASSUMPTIONS

A. Situation

During the 1980s and early 1990s. much of the DHHS emergency response doctrine was focused primarily on the worst case threat of a massive nuclear laydown on the United States as a result of a confrontation with the former Soviet Union (FSU)

The end of the Cold War and the breakup of the Soviet Union have significantly reduced the probability of a major nuclear attack on the continental United States (CONUS) It has not made us complacent Other threats continue or are even increasing in likelihood, and the Department must remain capable of continuing critical operations in the presence of a wide spectrum of threats from limited military operations to terrorist activities and natural or manmade disasters.

This plan updates DHHS concepts and plans for an all hazard and continuity of operations approach to accommodate the revised threat. The updated plan will retain a worst case approach to developing capabilities and procedures, but increased emphasis will be placed on having an enhanced capability for a broader scope of operations across the full spectrum of emergencies and critical incidents

1. Emergencies

Emergencies cannot be stereotyped-they take many forms. they can involve simple or complicated combinations of consequences resulting from various circumstances. Each may occur alone or in combination with another. In some cases. there may be a secondary emergency resulting from the magnitude or characteristic of the first emergency Emergencies generally fall

into five categories

a. Acts of God (Natural Disasters)

The most commonly recognized forms of disasters in this category include earthquakes, floods. hurricanes, tornadoes. snow storms, forest fires, and droughts Some lesser recognized occurrences might include freezes, extreme cold, and sea surges. Natural events can devastate DHHS facilities and direction. control, and communications infrastructures

b. Manmade and Technological Hazards

With the rapid growth in technology and associated sciences comes new and potentially catastrophic hazards creating monumental emergency response requirements of and for personnel, equipment, and finances. Disasters in this category include nuclear waste disposal spills, hazardous materials accidents, utilities failures, pollution, crashes, explosions, urban fires, toxic substances, radiological. and epidemics. Events such as fires, nuclear power plant accidents, collapse of large structures, and mass transport accidents can cause DHHS facilities to become unusable.

c. Internal Disturbances

This category may not receive the wide-spread media coverage as some others but can be just as costly with localized impact. Some examples include riots. other civil disorders. demonstrations out of control, prison breaks, strikes that result in violence, information warfare (IW), hostage situations, or even disgruntled employees

d. Terrorism, Including Employment of Weapons of Mass Destruction (WMD)

Terrorist activities may involve conventional weapons and materials, or nuclear, biological, and chemical (NBC) WMD. While the most probable threat to the United States is against its overseas facilities, the threat against the CONUS is believed to be on the rise. The 1993 attack against the World Trade Center in New York City and the 1995 attack against the Alfred P. Murrah Building in Oklahoma City illustrate the relative ease with which this type of attack may be executed.

e. Attack

This is the ultimate emergency for any country or people. Generally accepted actions falling into this area include conventional and/or NBC warfare. Portions of the FSU retain a formidable nuclear capability. In addition, several other potentially hostile nations are expected to be able to produce and deliver nuclear weapons within the next few years This threat remains the one requiring the greatest degree of protection and survivability, and is often referred to as the

"worst case" threat A large-scale nuclear attack on the United States. though still possible. is not considered to be highly probable. while the likelihood of small-scale no-warning attacks and terrorist activities is increasing In addition. the possibility of a missing nuclear device appearing in a hostile country or group as a result of the breakup of the former Soviet Union is very high-the world is not a safe place.

f. Material and Energy Shortages

These emergencies usually result from activities such as strikes. price wars, resource scarcity, and labor problems and may not have large geographical impact Nevertheless, they can be quite detrimental to personal resources and emotional stability

2. Emergency Definitions and Principles

a. Disaster. A disaster is a serious disruption of the functioning of a society, causing widespread human, material, or environmental losses that exceed the ability of the affected society (or community) to cope using only its own resources Disasters are often classified according to their speed of onset (slow or sudden), or according to their cause (natural, manmade. or technological)

b. Emergency. Another term closely related to disaster is emergency. An emergency might be regarded as a particular type (or subset) of a disaster "Emergency" suggests an intense time period and level of urgency. An emergency is bound by a specific period in which lives and essential property are immediately at risk A disaster can encompass a more general period in which there is a clear and marked deterioration in the coping abilities of a group or community Unusual initiatives by groups. communities, and external intervention are also evident during this period.

c. Disasters and emergencies are fundamental reflections of normal life. They are consequences of the way organizations and societies structure themselves, economically and socially. the way organizations. societies. and governments interact, and the way relationships between decision makers are sustained It is essential to make a distinction between hazards and disasters (including emergencies). and to recognize that the effect of the

former upon the latter is essentially a matter of an organization's, society `s, or government's vulnerability

d. Hazard. A hazard is a rare or extreme event in the natural or human-made environment that adverseiy affects human life, property, or activity to the extent of causing a disaster It may be a sudden onset hazard. such as an earthquakes, or slow onset. such as pest infestation.

e. Consequences and effects. The variety of consequences and effects makes generalizations difficult, but the following may be experienced by people in varying degrees.

(1) Death, injury,

(2) Loss of means of livelihood,

(3) Displacement, family separation, and lack of shelter and household necessities;

(4) Communities becoming separated from services previously provided;

(5) Lack of potable water;

(6) Communicable diseases and overcrowding,

(7) Possible communications and logistics problems; and

(8) Insecurity,

f Mitigation is the collective term used to encompass all actions taken prior to the occurrence of an emergency or disaster (preincident measures) including preparedness and long-term risk reduction measures

g Preparedness consists of activities designed to minimize loss of life and damage. organize the temporary removal of people and property from a threatened location. and facilitate timely and effective rescue, relief, resumption, and rehabilitation

3. General Principles of Emergency Response

The overall aims of emergency response and assistance (pre-, trans-, and postincident) are to·

a Ensure the survival of the maximum number of people, and maintain them in the best possible health, given the circumstances

b Reestablish self-sufficiency and essential services as quickly as possible, with special attention to those most vulnerable, and underprivileged whose needs are usually the greatest.

c Repair or replace damaged infrastructure and regenerate viable economic activities To do this in a manner that contributes toward long-term development goals and reduces the vulnerability and risks associated with any future recurrence of potentially damaging hazards

3. Phases in Emergency Response

a Alert (Warning/Preimpact Period): The period beginning when a public warning of an imminent threat is issued until its actual impact (or the threat passes and the warning is lifted) During this period. precautionary, or containment measures (mitigation)

are taken to minimize the potential adverse effects of the expected incident This can include evacuation. securing structures. building defenses. and mobilizing resources

b Response Phase (Tramincident): The period immediately following the occurrence of an emergency or sudden disaster. In this phase, exceptional measures are needed to save and sustain the lives of survivors and to help them meet basic needs for shelter, water. food, and medical care Response activities are continued for as long as there are serious and immediate threats to human life and well-being, and people are unable to meet their basic survival needs. Activities include:

(1) Search and rescue to find and rescue trapped or isolated survivors,

(2) Providing the assistance needed to ensure the survival of the most severely affected, and

(3) Establishing essential communications and transport services to support these operations.

c Postincident (Recovery) Phase The period during which actions are taken to enable survivors to resume normal lives and means of livelihood, and restore infrastructure, services, and the economy in a manner appropriate to long-term needs and defined development objectives. Certain relief or welfare measures that favor specific disadvantaged. and more vulnerable groups. may continue for some time during this phase. Recovery encompasses both:

(1) Rehabilitation. the reestablishment of basic community services and the restoration of basic living conditions, and

(2) Reconstruction. the repair or replacement of damaged physical structures and major infrastructure

5. **Myths** About Behavioral Responses to Emergencies and Disasters

a Panic and disorderly flight in the face of danger *Few* people are observed to panic in the face of an emergency or disaster Even when an evacuation is ordered, the majority of personnel are reluctant to act and do not want to leave. When forced to evacuate, most move in a responsible manner

b Disaster survivors are shocked and helpless. On the contrary, the motivation of the uninjured survivors is often the greatest resource in saving others. providing casualty care. restoring essential service, and beginning the process of recovery Their reactions are sometimes more rational than those of the outside relief workers, however, interveners who act as if survivors were helpless can create a sense of helplessness and dependence. Those who take a paternalistic approach to dispensing aid can create unrealistic expectations and demands from the survivors.

c. *Disasters are random killers* The poor are the hardest hit, especially women, children, and the elderly

d Search and rescue depends on formal rescue organizations. The majority is done by fellow survivors

e. *Survivors rely on relief organizations for their immediate needs.* They help each other to seek help from friends, family, and local institutions.

f Public shelters and temporary relief camps are needed after a disaster People go to shelters only as a last resort Resources invested in establishing temporary shelter after a disaster may be better used to support immediate repair and reconstruction efforts. or at least to provide materials that can be reused in such efforts

g *Epidemics are an immediate threat after every disaster* Epidemics do not spontaneously occur after a disaster. and the presence of corpses does not lead to catastrophic outbreaks of disease. The key to preventing disease is to improve sanitary conditions and educate personnel.

h. *News media accounts are generally accurate.* They are often inaccurate. or at least misleading by focusing on the most extreme cases of damage, which are not typical.

i *Things are back to normal within a few weeks* The effects of a disaster last long time-much longer than the media and national interest and sympathy evoked initially by the disaster.

j *Any kind of assistance is useful, and is needed immediately* Hasty responses based on impartial assessments contribute to chaos and consume valuable resources that could be better used for other priority needs. The affected personnel and services often cover immediate lifesaving needs.

k. In practice, outside responders often underestimate the resources and capacity of the affected personnel to take responsibility for their own survival and recovery. Material assistance following sudden emergencies and disasters generally

(1) Far exceeds actual needs,

(2) Is in proportions larger than needed or usable,

(3) Requires services and facilities that could be used for more essential tasks.

(4) Often causes conflicts among relief agencies.

(5) Adds to the problem of congestion. and

(6) Inhibits local initiative.

l Effective emergency response requires:

(1) Professional assessments leading to agreed definitions of need and appropriate assistance strategies,

(2) Close coordination and information sharing between all involved parties, and a concerted effort to mobilize and allocate the required resources,

(3) Efficient management arrangements; and

(4) Continuous monitoring of the situation and operational performance, and responsiveness to new information and changing needs

m. The three aspects of effective response include communications, information, and coordination.

n The rapid establishment of telecommunications links with all affected areas is essential for both reporting assessment data and operational management The latter also demands the capability to link with all locations where supplies could be obtained and stored

0 Information about diverse needs. resources on hand and/or in the pipeline. and logistics capacities and constraints. is the basis for decisions regarding resource

allocations and operations management at all levels Information must be reliable. up to date. and intelligently analyzed It must be shared regularly. with all concerned Systems must ensure the reporting of relevant information and its systematic storage, analysis, and use by policymakers and operational managers

p. Many different groups have roles that may be interrelated. or even overlapping. The coordination of all activities and efforts is essential for achieving objectives and making the most effective use of available resources. Coordination must be both formal and informal. Regular meetings are an absolute necessity During any major emergency. there should be broad-based meetings at all levels. Experience shows the values of subgroups being formed on specific topics (such as movement control, and logistics). Informal meetings of response groups can be helpful.

q. Assessment quality is the key to effective response and achievement of response objectives. The availability of resources is also clearly a factor to the possibilities of mobilizing resources, and is significantly influenced by the perceived quality of the assessment The needs and proposed strategies must be presented convincingly.

r **Timing.** The assessment-at least the initial assessment-must be completed rapidly in all areas in order to provide a basis for allocation of resources

s. **Decisive Action.** Once these prerequisites are assured. effective response depends on decisive action to implement the selected strategies. Leadership and a practical, problem solving approach is required at all levels. While clear overall direction is needed from the responsible authority (setting policies and standards. and defining basic criteria and procedures). management responsibility should normally be decentralized as much as possible

6. Other Considerations

a Establishing Overall Priorities. The focus initially should be on areas where damage and losses are expected to be the greatest, and on saving lives and enabling critical facilities and lifeline services to function State and local civil authorities participate in the definition and establishment of priorities (see the Direction and Control, Functional Annex A to EMERPS)

b. Planners and operational personnel should make constructive use of all available mechanisms to achieve the desired objectives. including the use of the private sector, where appropriate.

B. Assumptions

1. Emergencies or threatened emergencies may adversely affect the U.S or the Department's ability to continue to support essential operations and to provide support to the operations of clients and external agencies

2. Personnel and other resources from DHHS and other organizations outside of the area affected by the emergency will be made available if required to continue essential operations.

3 Communications will be interrupted. Alternate communication means will be heavily relied on. necessitating augmentation of existing Departmental resources. Activities will be conducted according to tested procedures within an agreed upon timeframe until communication is established.

4 Public expectations of a timely State and Federal response to disasters are high. The American public expects al1 Federal agencies will respond to their needs in a timely manner Failure to have a recovery plan is no excuse

5 Incidents may involve events with no impact outside of a local community or area For the purposes of this plan. emergencies will be categorized as

a. ***Minor:*** Minor emergencies involve limited amounts of noncritical records. material, media. or equipment items and which OPDIV staff and/or the property management or facilities department can handle without outside assistance or expertise. The DHHS Operating Unit Head/Responsible Official will manage the response and recovery from the incident Team activation will not be necessary.

b. ***Moderate:*** Moderate emergencies involve substantial numbers of records, material, media, or equipment, or where physical damage is likely to be more severe, and where help or expertise from outside the DHHS Operating Unit is likely. Emergency notifications within the operating unit and Department will be followed as far as the DHHS Operating Unit Head/Responsible Official feels is necessary. Assistance from the Emergency Response Team may or may not be necessary

c. ***Major:*** Major emergencies involve significant numbers of records, facilities, media. material. and equipment where physical damage is severe. and where expertise and assistance outside the Department will be required. Emergency notifications will be followed completely. Assistance of the Emergency Response Team and. if relocation is warranted, the Relocation Team, will be necessary.

d. NOTE: *Because of the varied nature of potential incidents and emergencies, these definitions are provided only as general guidelines*

6. The incident site may also constitute a crime scene. limiting access and warranting special precautions to preserve the scene and protect evidence

7 Access to the facility or facilities affected by the critical incident or emergency will be denied for whatever period of time it takes to stabilize the situation This period of time could vary from hours to months

8 Agencies that commonly support DHHS operations may be unable to continue their support in the event of a large-scale emergency.

9. Efficient and effective restoration of operations requires the use of an emergency management system that organizes the tasks of planning, organizing, directing, coordinating, delegating, communicating, and evaluating. The system DHHS will employ will be the Incident Command System/Unified Command System (ICS/UCS)

C. Concept of Operations

1 This Concept of Operations (CONOPS) explains the Department's overall approach to an emergency situation, i.e., what should happen, when, and at whose direction The CONOPS includes the Department's intentions on who accomplishes missions and tasks, including the DHHS operating elements, teams, and personnel involved. It also outlines the time phasing of emergency and enterprise resumption operations, the genera1 nature and purpose of operations to be conducted, and the interrelated or national arrangements for cross agency/ Department support, coordination, and cooperation needed for successful execution. The CONOPS also includes an estimate of the duration of operations so that operating element supporting plans can be prepared where required.

2. The functional annexes to EMERPS include detailed CONOPS that identify direction and control, alert and warning, divisions of responsibilities; instructions on activation of the appropriate plan(s). "action levels" and their implications; a general sequence of actions before. during. and after the emergency situation: and who requests aid and under what conditions Responsibility for oversight and coordination of all DHHS emergency management activities. including enterprise resumption. rests with the OS

a. Emergency Management and Enterprise Resumption Planning Guidelines

The Departmentwide enterprise resumption and emergency preparedness structure operates within the following operational guidelines

b. Planning Authority

This section provides authority and genera1 policy guidelines for the development and publication of plans by DHHS operating elements. It is primarily applicable to emergency management and enterprise resumption program officials and public information officers at national and regional headquarters. Further details on programs provided by DHHS, or by other Federal agencies and departments are provided in the applicable Federal plans and in FEMA 229(4), November 1995, "Disaster Assistance: A Guide to Recovery Programs. "

c. General

"The head of each Federal Department and agency, as appropriate, shall coordinate with State and local government agencies and other organizations, including private sector organizations, when appropriate. Federal plans should include appropriate involvement of and reliance on private sector organizations in the response to national security emergencies; assist State, local. and private entities in developing plans for mitigating the effects of national security emergencies and for providing services that are essential to a national response. ensure that plans consider the consequences for essential services provided by State and local governments, and by the private sector, if the flow of Federal funds is disrupted " (EO 12656)

d. Specific Plan Publication and Authoring Guidance

(1) In addition to the usual public information clearance, publications intended for non-Federal audiences shall be carefully checked by the author to assure conformance to Federal Emergency Management Agency (FEMA) and Departmental policy guidelines In rare cases in which a significant Federal policy or position is unclear, prepublication review by FEMA, or another agency, may be necessary

(2) DHHS Credit and Imprint will be incorporated in all emergency management and enterprise resumption plans. Materials developed within DHHS shall clearly identify DHHS as the author In the event DHHS operating element emergency management or ER materials are included in another agency's publication (e.g., FEMA), DHHS shall be clearly identified as the author and, if appropriate, the document shall include the DHHS imprint on the title page beside the publishing organization's imprint. Materials developed under DHHS contract, purchase order, grant, etc , may not be published by that organization or author until clearance is obtained from the Director of OEP, and must give full credit to DHHS sponsorship on the title page.

e. Emergency Management and Enterprise Resumption Plan Development

(1) Functional Annex B outlines the process for developing ER/COOP In short, in order to carry out the functions delegated by the Secretary, each OPDIV Head and RD is to have in place emergency operations plans applicable to the full range of critical incidents and emergencies

(2) Written plans for emergency management and ER will be prepared, published. and maintained by the head of each Operating Division. Regional Office. and specified field installations

(3) Plans are to be in place to take actions necessary to assure that OPDIV headquarters and regional organizations will be able to perform their essential functions and continue as a viable part of the Department during a critical incident or emergency, and will be able to respond under the Federal Response Plan (FRP) or other authorities to all hazards events.

f. Office of Emergency Preparedness

(1) The Office of Public Health and Science's OEP is responsible for developing plans and response capabilities for the OS: directing, coordinating, and monitoring the performance of heads of STAFFDIVs, OPDIVs, and RDs; carrying out emergency preparedness and ER responsibilities assigned to them; and preparing Departmentwide plans that consolidate and coordinate OPDIV and STAFFDIV plans at the national headquarters level.

(2) As the focal point for all emergency preparedness planning and operations activities, the OEP provides:

(a) Actual Crisis Management. The OEP professional staff and facilities are available to coordinate DHHS activities during an actual crisis, or to provide staff support and expertise to the Secretary's designated/senior official (Incident Commander (IC) under the IMS). (See Functional Annex A.)

(b) Representation. OEP represents DHHS on committees, task forces. and at meetings concerned with emergency management and ER planning and operations, and arranges for participation in such meetings by concerned DHHS officials

(c) Liaison. Through its established working relationships and interagency committees. OEP can assist DHHS officials in making contact with appropriate officials of other Federal Departments and agencies in establishing improved cooperative working relationships. and in negotiating formal agreements and memoranda of understanding (MOU).

(d) Consultation and Advice. OEP provides direct personal advice, consultation and information to DHHS officials requiring assistance in dealing with specific emergency management or enterprise resumption planning, operations, projects. or problems

(e) Orientation, Briefing, and Training. OEP will, upon request, provide general or classified briefings to individuals or groups concerned with aspects of DHHS emergency management or enterprise resumption activities or programs. Training and audiovisual aids are available on a variety of emergency program subjects.

(f) OEP maintains the central files and reference library on all emergency management and enterprise resumption-related matters, including record correspondence relating to policy, pertinent publications, records, and reports of DHHS involvement in specific operations, and technical reports, manuals, plans, etc.. on a variety of subjects

(g) OEP receives initial stocks of all emergency management and enterprise resumption-related publications from

FEMA and other agencies and organizations, and distributes these to the DHHS officials concerned.

(h) OEP maintains the central library of Federal and regional plans, policy, and procedural guides, and other issuances, and provides secure storage for classified documents.

(i) During major emergencies or disasters or other crises involving several regional offices and/or Operating Divisions, OEP activates DHHS emergency operations and/or Emergency Support Function (ESF) #8 operations, establishes daily situation/problem reporting, compiles summary reports, and informs key officials of current and future activities.

g. Emergency Coordinators

(1) At national headquarters an emergency coordinator shah be designated for the Department and for each OPDIV, and an EC shah be designated for each agency within each OPDIV. In each region, an EC shah be designated for the RD and an EC for each OPDIV within the region. Within the Public Health Service (PHS), each agency shall designate an EC.

(2) Currently there are 22 ECs throughout the Department. Within the PHS, each agency has a person designated as the EC. The DHHS, PHS, National Institute of Health (NM), Food and Drug Administration (FDA), and Centers for Disease Control and Prevention (CDC) coordinators are full time; the others have collateral duties.

(3) The same structure is reflected in the regions. Each RD has an EC and each OPDIV also has a designated coordinator in each region. This chain of

communication is established Departmentwide to coordinate and manage the Departmental response to the full range of emergencies.

h. Emergency Coordinator Responsibilities

(1) The ECs are responsible for emergency management and ER planning and response activities for all hazards, including national emergencies such as a conventional war or nuclear attack. They shall be familiar with emergency management and ER plans and programs of other Federal Departments and agencies, of State governments, and of national non-Governmental organizations such as the American National Red Cross (ANRC), that are concerned with the health and welfare of the nation.

(2) This network of ECs establishes Departmentwide coordination and management of the Departmental response to the full range of critical incidents and emergencies.

(3) The network of coordinators also assists policy-level officials and program managers in preparing for and responding to emergencies of all kinds.

(4) ECs provide continuity, experience, and skill in dealing with the full range of disasters, emergencies, and threats to enterprise continuity. Other officials provide necessary subject matter expertise to plan for and respond to emergencies.

(5) The OEP shall provide Departmentwide policy guidance and coordination. The OPDIV headquarters and regional office ECs shall implement such guidance and provide additional direction to the OPDIV or region.

(6) Because the scope and magnitude of emergency preparedness responsibilities and requirements involve the entire Department and require frequent contact with officials in other agencies within and without the Department, the emergency preparedness

function can be most effectively performed if the headquarters. OPDIV. and principal regional coordinators are located in the Offices of the Secretary, OPDIV heads, and RDs, and have a grade level high enough to deal with all requirements

(7) The OPDIVs are responsible for developing the capability for emergency management and ER operations. These functions are essential to national survival and recovery and the OPDIVs responsible for them are required to support one full-time Emergency Coordinator, plus other staff, as necessary.

(8) It is mandatory that selected OEP personnel (designated by the Director, OEP) and each OPDIV EC have Top Secret security clearances, and each regional EC have at least a Secret clearance

(9) The OEP shall ensure the network of ECs have Emergency Response Action Teams (ERATs) formed to assist in organizing initial disaster response, deploying the DHHS Relocation Team, and coordinating follow-on deployment activities The EC cannot do the entire mission alone

(10) The concept for emergency coordination is such that:

(a) **Before** occurrence of emergencies. DHHS Emergency' Coordinators work with policy officials and program managers to develop plans and maintain a workable continuity and emergency response system.

(b) **During** emergencies. including operations to restore Departmental operations (" ER"). coordinators help to identify the appropriate programs to be activated and individuals to manage the DHHS response Coordinators

prov ide support to the managers as necessary throughout the emergency

(c) **After** emergencies. including ER. coordinators collect After-Action Reports (AARs) that help the Department learn from the experience and better prepare for and mitigate the effects of such events in the future

i. Operating Division Plans

Plans should specify:

(1) Resources and capabilities of each program that can be utilized in management of critical incidents or emergencies:

(2) How these programs and resources can he brought to bear in all phases of management of critical incidents and emergencies: mitigation. preparedness activities. response, to short- and long-term recovery; and

(3) Legal, financial. or other barriers that may inhibit an effective response. and how they can be overcome.

j. Operating Division Responsibilities

(1) DHHS responsibility for developing domestic, national security emergency. and COOP program plans and response capabilities rests with the OPDIVs. covering their programs at the headquarters and regional levels

(2) Within the OPDIVs, primary reliance is placed on day-to-day programs for continuity and emergency preparedness and response capabilities

(3) Administrators. policy-level officials, and program managers in each OPDIV should assess how their programs and capabilities could best be brought to bear in emergencies. including ER. With the assistance of their ECs, they will develop adequate continuity and emergency plans, legal authorities, budgetary, and other procedures for an effective response system

k. Regional Plans

Plans are to be in place to take such actions necessary to assure that the offices under the line supervision of RD will be able to perform their essential functions, and continue as a viable part of the Department during a critical incident or emergency, and will be able to provide the regional response under the FRP or other authorities to all hazards events. Measures will be in place to consolidate and disseminate the plans prepared by the Operating Division in the Regional Offices.

1. Region Responsibilities

The Regional Director (RD), with the assistance of the Regional Emergency Coordinator (REC), is responsible for consolidating and disseminating regional plans prepared with the assistance of the Operating Divisions, for developing plans and response capabilities for offices under the direct line supervision of the RD, and for coordinating the HMS Regional Office response during an emergency or ER situation

m. External Coordination

(1) Under the overall coordination of OEP. all elements of the Department should develop close working relationships with other Federal, State and local agencies and with private organizations in the development of emergency and ER plans

(2) Under the overall coordination of the FEMA. DHHS is the Lead Federal Agency (LFA) for health and human services preparedness planning. including primary agency responsibility for ESF #8. Health and Medical Services. Thus. the Department's plans should provide for a coordinated Federal response by DHHS, the Department of Defense (DoD). the Veterans Administration (VA), and other agencies to assist States in providing emergency health and human services.

n. Communication Channels

> **"National security emergency preparedness functions that are shared by more than one agency shall be coordinated by the head of the Federal Department or agency having primary responsibility and shall be supported by the heads of other Departments and agencies having related responsibilities."**
>
> **EO 12656, Sec. 104(d)**

(1) Policy and guidance for emergency preparedness matters originate in OEP The line of communication is from the Director, OEP, to the OPDIV ECs and RECs. and from the OPDIV ECs to their regional counterparts The Department's contacts with the State Emergency Managers are through the RD's EC.

(2) When a major disaster or emergency occurs in a given Federal region the appropriate REC shall promptly report relevant information to the RD The coordinator shall then immediately report all relevant information to OEP by telephone. including Departmental support being provided. anticipated support. and the impact on

departmental operations This notification should include an assessment of whether or not Departmental operations have been or will be disrupted. and what enterprise resumption/ continuity of operations actions are being. or will be implemented Reports are required as long as the Department's involvement warrants reporting The Director. OEP. will keep the Secretary and key Department senior officials apprised of the Department's activities and actions When the critical incident or emergency begins to level off, the Regional Coordinator shall forward a written summary (AAR) to OEP.

o. Interagency Communications

(1) The Director, OEP is the primary contact with FEMA and with other Departments and agencies on policy and precedent matters concerning emergency preparedness. Principal RECs are the prime contacts with FEMA in the regions, and attend Regional Interagency Steering Committee (RISC) meetings, but policy decisions must be cleared through the Director, OEP

(2) In routine matters, maximum utilization shall be made of informal communications and direct discussions between coordinators at all levels within the Department and with other agencies, States, and health and human services-oriented non-Governmental organizations.

(3) This section describes policies and procedures governing working relationships. liaison, and the development of formal agreements with other Governmental Departments and agencies, and with nonprofit and charitable organizations having emergency health and social services responsibilities This section is applicable to headquarters, regional offices. and major field installations.

p. Policy

(1) Official correspondence between DHHS components and other Federal Departments or agencies on matters relating to emergency management and enterprise resumption shall normally be transmitted through or over the signature of the Director of OEP or, if appropriate, higher level officials in the OS. Routine communications within the scope of delegated authority, however. may be routed directly, provided that an information copy is sent to the Director of OEP.

(2) All requests to security officials of other Federal agencies shall normally be made by the DHHS Director of Security, rather than by the specific office or agency concerned. Example: request for information about security clearances of employees of other agencies

q. Interagency Agreements

Other organizations sharing emergency health or human services responsibilities shall be asked to concur in DHHS emergency plans.

r. Genera1

A written MOU may pertain to emergency management and ER programs and/or emergency operations. Such agreements shall be treated as statements of official policy and shall be designed for mutual guidance and joint issuance.

s. Initiation

(1) A formal agreement may be proposed by any DHHS official having delegated authority in the particular program area concerned

(2) The title of the agreement shall name both parties and shall briefly describe the subject(s) of the agreement

(3) The agreement should contain policy. procedures, and information on the following matters:

(a) Specific purpose and scope of the agreement;

(b) Authority of each party to enter into the agreement.

(c) Citation of pertinent officially assigned or statutory responsibilities of each party,

(d) Constraints or limitations, if any, of authority,

(e) Description of any DHHS resources committed by the agreement,

(f) Specification of any commitments by the other party (e.g., for participation in DHHS emergency management or enterprise resumption operations),

(g) Channels and protocols for interagency working relations, liaison, and communications,

(h) Period of agreement, including self-canceling clause. if appropriate,

(i) Arrangements for joint issuance.

(j) Provisions for future motiification or cancellation of agreement.

(k) Reporting requirements, if any; and

(l) Other content as mutually agreed upon

(4) For DHHS, the signer shall normally be the official having delegated authority Signature at a higher level should be requested only when required by the other party to the agreement

(5) The Department's General Administration Manual provides general policy and requirements for the development, clearance, and filing of interagency agreements

t. Alerting and Communications

Specific alert and notification procedures can be found in the COOP Functional Annex B to EMERPS.

u. Facilities

The Department employs existing, or establishes, as required. emergency facilities to manage the ore-, trans-, and postincident phases of critical incidents and emergencies. These facilities may include incident command posts, Emergency Operations/ Emergency Coordination Centers (EOC/ECCs), assembly areas or rendezvous points, and relocation sites. The Office of Emergency Planning has a facility at 12300 Twinbrook Plaza. Suite 360. Rockville, MD. which serves as a 24-hour EOC/ECC The EOC/ECC will coordinate the DHHS response to domestic disasters and emergencies. national security emergencies. and threats to DHHS continuity It has working space. telephones on separate

lines. and radio. facsimile (FAX). and other equipment ready for emergency use Arrangements have been made with the Nuclear Regulatory Commission (NRC). also located in Rockville, MD. to use their EOC/ECC space should 12300 Twinbrook Plaza become nonoperational and a classified alternate facility is not required. The Department has an alternate facility located outside the Washington (DC) area in a classified location. In the regions. if no EOC/ECC currently exists, an emergency operations or emergency coordination center should be identified, formally designated, and outfitted. Conference or briefing rooms or other comparable facilities can be equipped with telephones. reference materials, and space for the IC, coordinators, managers, and assigned emergency or ER team members to function

v. Other Facilities

(1) Relocation Sites. OEP maintains emergency operational readiness for employment of a (classified) facility and the FEMA Emergency Operating Facility in Berryville. VA

(2) Other Facilities. OEP can assist RDs and heads of the OPDIVS in establishing and maintaining relocation site(s) at either the Federal Regional Centers maintained by FEMA. or other sites identified during the Stage 1 COOP process (See Functional Annex B).

w. Alert and Notification

Should conditions require that team members be informed of a state of heightened readiness. a Departmental alerting system will be activated. (See the COOP Functional Annex B and Figures 1 and 2 for alert and notification form formats). This system should be tested regularly. and alert and notification rosters periodically (quarterly) updated.

x. Readiness Levels

Readiness levels are provided to guide preparations and actions in the preincident phase of a critical incident or emergency Since events can occur with or without warning. preparations and actions may be accelerated or compressed. or executed concurrently

y. Watch

This is our DHHS normal or near normal preparedness posture. Increased alert measures during the watch readiness level may be warranted when. for example. a hurricane approaches the coast of the United States, or when a general threat of terrorist activity is reported.

z. Warning

When notification of an impending critical incident or emergency (e.g., a law enforcement warning of a credible terrorism threat, or an imminent severe weather incident) is received by OEP, central monitoring of official voice and record communications will be extended. This may entail monitoring on a 24-hour basis OEP will conduct an internal review of DHHS emergency readiness plans and procedures, and direct actions in accordance with current plans. policies, and procedures. This response will generally involve few DHHS personnel. have virtually no effect on DHHS activities, and be carried out without public disclosure. Operating Division or Regional Office action may or may not be involved. DHHS personnel may or may not be involved in supporting increased alert activities under other Federal plans. such as the FRP.

aa. Special Instructions (Watch or Warning)

(1) A watch or warning condition may be accompanied by *special instructions.* These may include.

(a) Continuous manning of EOCIECC,

(b) Corrective action to overcome any deficiencies in DHHS emergency management and ER plans and procedures.

(c) A 24-hour communications watch at each DHHS Regional Office and major headquarters office building. when directed by the Director, OEP; and

(d) Activation of EOC/ECCs, with staffing limited to ECs and Emergency Response and/or Relocation Team members required for maintenance of a 24-hour communications watch and performance of directed tasks. Actions will be carried out with minimum disclosure

(2) Maximum emergency readiness, which may include

(a) All headquarters and regional EOCs manned by respective Emergency Response Teams (ERTs), and a 24-hour communications watch.

(b) All headquarters and regional EOC ERAT team activities to manage RT deployment

(c) Preparation of predesignated or identified relocation sites for activation and reception of Relocation Team(s) and key personnel. functions, equipment. and vital records.

(d) Immediate correction of deficiencies in plans and procedures.

(e) Preparations by RTs and key personnel to relocate.

(f) Deployment of selected personnel or teams to relocation sites;

(g) Conducting of refresher training, where required, to staff, team members, or other key personnel on communications procedures, equipment, and plans, polices. and procedures;

(h) Arrangements for parking permits and other support activities for affected personnel;

(i) Maintenance of continuous monitoring of communications and event status;

(j) Review of adequacy of plans, procedures, and systems. (Identify any deficiencies and prepare an action plan (as required) to correct deficiencies), and

(k) Status reporting to appropriate senior managers/designated officials

DHHS ALERTISG CHART: OFFICE OF THE SECRETARE

Figure 1

ALERTING PROCEDURE

1 This updated alerting network diagram supersedes all previous diagrams Keep one copy in your office. another copy at home Destroy both copies of the previous diagram

2 This procedure applies to either (a) an actual Federal alert, or (b) a test of the HHS telephone alerting system It is to be used *only* for relaying an official alert or test message as specified below If a message is not an authorized official message. *do not relay it*

3 During an actual alert or simulated alert test you may receive a telephone call at either your office or residence It will be a "live" call. *not a recorded message* The caller will say

THIS IS [name of person above you on alerting diagram] I HAVE AN EMERGENCY MESSAGE FOR [your name]

4 Once the identities of the parties are established and the communication is authenticated, the caller will proceed by dictating *one* of the following official messages

READINESS LEVEL [name of level*] HAS BEEN DECLAREDCANCELLED REPEAT READINESS LEVEL [name of level] HAS BEEN DECLAREDCANCELLED
OR
REQUEST YOU BE AT EMERGENCY OPERATING CENTER, ROOM [number, name] BUILDING, AT [date/time] TO MEET ON CIVIL READINESS ACTIONS.
OR
THIS IS A ROUTINE TEST - REPEAT - TEST OF FEDERAL AGENCY ALERTING.
OR
EXERCISE [name of exercise] EXERCISE CONDITION [exercise term*] - REPEAT - EXERCISE CONDITION [exercise term]

5 Following the message, the caller will say

PLEASE ACKNOWLEDGE BY REPEATING THE MESSAGE I HAVE GIVEN YOU

6 You will repeat the message verbatim, and-upon confirmation of correctness-write it verbatim, note the date and time, and-if any persons are named below you on the diagram

a Relay the message verbatim to all persons in the block(s) immediately below yours on the diagram Note the time that each contact is completed

b If you cannot immediately contact one of the people at office, home, or alternate number, you *must* make his or her calls, if any as indicated on the diagram The *chain must not be broken* Continue calling until you reach each person Then attempt to contact the person whose calls you have made inform him of all calls completed by you

READINESS LEVEL	*INDIVIDUAL ACTIONS*	*EXERCISE TERM*
COMMUNICATIONS WATCH	None required of you	QUICK STEP
INITIAL ALERT	Prepare to relocate	TIGHT REIN
ADVANCED ALERT	Stand by for orders	FLOOD TIDE
ATTACK WARNING	Take shelter	CHECKERBOARD
TERMINATION OF ATTACK WARNING	All clear	TERMINATION OF CHECKERBOAR

Figure 2. Alerting Procedure

(3) Members of Emergency Response and Relocation Team(s) will deploy to relocation sites only upon receipt of specific instructions and authorization. Automatic relocation is not authorized

bb. Emergency Management

(1) The DHHS emergency response system responsible official is the Secretary of the Department of Health and Human Services (HHS). The Secretary has designated the Assistant Secretary for Health (ASH) as the Department's Executive Agent. The Action Agent is the Director. OEP, who is responsible for coordinating implementation of EMERPS with the DHHS agencies and providing staff support to DHHS policy officials The DHHS Regional Health Administrator (RHA) is the operating agent assisting OEP and is responsible for coordinating regional EMERPS activities. The collocated national DHHS EOC, or DHHS/EOC and National Disaster Medical System (NDMS) Operations Support Center (OSC), or NDMS/OSC, coordinate and facilitate the overall health and medical response, and provide liaison between the DHHS/NDMS Headquarters and the appropriate regional officials

(2) The Department provides U S Government coordinated assistance to supplement State and local resources in response to public health and medical care needs following a significant natural disaster, manmade, or technological event. This support is described in Functional Annex #8, "Health and Medical Services Annex," to the 1992 FRP Resources are furnished when State and local resources are overwhelmed and medical and/or public health assistance is requested from the Federal Government. The DHHS mission under ESF #8 involves supplemental assistance to State and local governments in identifying and meeting the health and medical needs of victims of a major emergency or disaster This support is categorized in the following functional areas

(a) Assessment of health/medical needs.

(b) Health surveillance.

(c) Medical care personnel.

(d) Health/medical equipment and supplies.

(e) Patient evacuation.

(f) In-hospital care,

(g) Food/drug/medical device safety,

(h) Worker health/safety,

(i) Radiological Hazards,

(j) Chemical Hazards,

(k) Biological Hazards,

(l) Mental health,

(m) Public health information

(n) Vector control,

(o) Potable water/wastewater and solid waste disposal, and

(p) Victim identification/mortuary services.

(3) The Public Health Service (PHS), in its primary agency role for ESF #8, directs the provision of U.S Government provided health and medical assistance to fulfill the requirements identified by the affected State/local authorities having jurisdiction Included in ESF #8 is overall public health response. triage, treatment and transportation of victims of the disaster, and the evacuation of patients out of the disaster area. as needed, into a network of Military Services, Veterans Affairs. and preenrolled non-Federal hospitals located in the major metropolitan areas of the United States. The intent of ESF #8 is to supplement and assist the State/local governments affected by the disaster by utilizing resources primarily available from the following sources

(4) Resources available within DHHS from its operating divisions and supporting Departments and agencies to ESF #8

(5) Emergency response resources are available from within and without the Department. Resources internal to DHHS include those available from the OPDIVS. and specialized response assets. including the Medical Support Unit (MSU). DMAT. and Disaster Mortuary Teams (DMORTs). The NDMS is a nationwide medical mutual aid network between the Federal and non-Federal sectors that includes medical response. patient evacuation. and definitive medical care. At the Federal level. it is a partnership between DHHS, DoD, VA, and FEMA. Direction and control of Department resources is performed through the network of ECs. and/or the Department's IMS

cc. Critical Incident and Emergency Information

(1) OEP is the central focus in the Department for disaster. emergency, and continuity information. OEP serves as the center for collecting and disseminating information on the total DHHS response in emergencies. All FEMA and other outside agency contacts should be reported to OEP to help coordinate the needed plans or response. OEP alerts the OS staff and the OPDIVs, assists in the process of identifying the expertise and services that could be brought to bear upon the situation, maintains communications. and an awareness of the Department's involvement as a unified entity

(2) Information on emergencies or threats to continuity may enter the system at any point In order to expedite alert and notification, and enact necessary measures, recipients must inform their OPDIV EC, who will then inform his/her chain of command, the RD, the REC, and simultaneously the OEP Program personnel responding to emergencies should keep both the emergency coordination network and the policy level officials of their own operating division informed of their activities Specific alert and notification guidance is provided in the COOP Functional Annex B to EMERPS.

(3) Headquarters and field DHHS personnel should report mission assignments made to any segment of DHHS under the FRP to ESF #8, so that it can monitor the situation and coordinate the comprehensive DHHS response This pattern is replicated in

each region with the RD's designated coordinator as the central point for information dissemination across OPDIVs and FEMA staff in the region

VIII. RESPONSIBILITIES

A. Summary of Requirements

1. This section provides brief descriptions of DHHS operating element emergency preparedness requirements essential for the fulfillment of the Department's emergency management and ER responsibilities. DHHS emergency capability, preparedness. personnel. material, and planning are applicable to all hazards

a. Plans. Prepare and maintain written all-hazards plans

b Emergency Action Documents. Prepare and maintain standby operating procedures, orders, delegations. vital operating records. and other documentation necessary for the performance of emergency functions

c Emergency Management Assignments. identify essential emergency functions and staffing requirements, make emergency management/ER team assignments, and maintain rosters.

d Leadership. Establish and maintain succession orders to assure continuity of leadership and command responsibility during emergencies

e. Security. Maintain the security of classified information, documents, facilities. and personnel clearance.

f Identification. Issue proper identification credentials to personnel having emergency assignments or authority to enter classified facilities. and maintain the integrity of the identification sy stem

g Training. Provide training and orientation to prepare emergency management and ER assignees to perform their duties

h. Facilities. Establish. protect. and maintain facilities required for emergency management and ER operations

i. Communications. Identify existing (or where necessary), establish, and maintain command and control (C2) telecommunications equipment and automated systems required for emergency management and ER operations.

j Alert and notification. Establish and maintain alert and notification lists and procedures to assure that emergency management and ER team members and other key officials receive prompt notification of critical incidents and emergencies, including "watch" and "warning" notifications.

k Records. Select and pre-position files, regulations, and critical documents at emergency operating facilities. or assemble in flyaway kits, those vita1 operating records and reference materials that will be required for emergency management and ER operations.

l Resource Management. Develop and promulgate plans, systems, guides. standards. and procedures required for emergency management and ER management of assigned resources and facilities

m Resource Data. Gather and maintain resources information required for evaluation of emergency management and ER requirements

n Tests and Exercises. Periodically test emergency management and ER plans. measures. facilities. and sy stems. and accomplish necessary improvements

o. Status Report. Collect and maintain preparedness status information. and make periodic reports of progress

p Coordination. Coordinate the development of DHHS plans with OPDIVS and the other Federal agencies and Departments, as appropriate

q State and Local Governments. Be familiar with the emergency management plans of State and local governments and assure DHHS plans are compatible with and support the health and human services aspect of State plans

r Non-Government Organizations. Develop cooperative plans with non-Governmental national organizations with health and human services responsibilities, such as the American Medical Association (AMA), the American Hospital Association, and the ANRC.

s Performance of essential emergency functions in the primary operating facility when feasible

t Relocation upon authorization from the Department and FEMA to the appropriate Federal Regional Center

u. Reconstitution of the primary operating facility in an area designated by DHHS (national or regional) and. where required. FEMA, if return to primary operating facility is not feasible.

v Compliance with all applicable circulars and orders and guidance provided by the respective FEMA RD

w Detail of personnel to State or local government agencies upon request for assistance from a Governor or his representative

x. Resource claimancy and allocation. including determination of relative priorities. development of justifications. establishment of effective working relationships with resource controlling agencies. and conformance to established resource management policies and procedures.

y Reporting to Headquarters of significant program trends and problems and need for establishment and/or expansion of State assistance programs

z. Organization and functions similar to headquarters

aa. Establishment of Special Purpose Facilities. Subregional Offices, or State Liaison Offices, as required for more direct provision of DHHS assistance to State and local governments.

bb. Specified Field Installations having predesignated Departmental (as contrasted to local support) missions shall provide for·

(1) Post-incident relocation of essential personnel, functions. equipment, and vital records outside the anticipated or actual area of damage, and

(2) Coordination with State and local emergency managers and the DHHS RD This may be accomplished by providing information copies of plans and subsequent revisions to these two officials

2 The unprecedented nature and extraordinary requirements of operations after a catastrophic incident. emergency. or disaster are such that regular operating procedures may be totally inadequate or inappropriate Emergency action documentation may be dev eloped by the process of analyzing the anticipated postincident national or regional situation and assigned

responsibilities. and by identify-ins the most probable types of Departmental or operating element actions. decisions. and measures that would be required in the crucial preincident. transincident. and postincident periods

B. Interagency Activities

1. Federal Emergency Management Agency

The Director of FEMA is responsible for the coordination of national policies. plans, and programs for emergency preparedness. FEMA has delegated to DHHS responsibility for those areas related to health and human services under the FRP, ESF #8, "Health and Medical Services " DHHS also makes policy recommendations to FEMA for the allocation of national health and human services resources.

2. Department of Defense

Available DoD resources not required for military operations may be employed to assist civil authorities in preventing unnecessary loss of life and in alleviating suffering DHHS has developed plans with DoD and other agencies for use in critical incidents and emergencies as part of the FRP and other Federal planning documents.

3. Department of Agriculture

The U S Department of Agriculture (USDA) develops programs to assure the safety and wholesomeness of meat, poultry, and other food products in establishments under continuous inspection of the Department It is also responsible for prevention. control, or eradication of chemical or biological agents used against animals or crops or the products thereof

3. Veterans Administration

The U S Department of Agriculture VA assists DHHS in fulfilling the Department's responsibilities. and participates in planning for use of VA resources

5. Other Agencies

DHHS initiates joint plans to coordinate emergency civilian health and human services programs of other agencies and will use the capabilities of these agencies to assist in or perform assigned functions (EO 12656)

C. Financial Management

1. DHHS funding for response activities will be made available to operating elements performing tasks under the EMERPS in a manner consistent with applicable Departmental regulations.

2 Presidential EO 12656 requires that "Emergency plans and programs, and an appropriate state of readiness. including organizational infrastructure, shall be developed as an integral part of the continuing activities of each Federal Department and agency Heads of Federal Departments and agencies shall appoint a senior policy official as Emergency Coordinator, responsible for developing and maintaining a multi-year, national security emergency preparedness plan for the Department or agency to include objectives. programs. and *budgetary requirements . .* "

3 DHHS work. services. and resources provided in response to requests by another Federal Department or agency may be offered on a reimbursable basis The Robert T Stafford Disaster Relief and Emergency Assistance Act Public Law (PL) 93-288 provides means *for* reimbursement of the Department tor mission assignments accomplished under the FRP

4 Presidential Decision Directive (PDD)-39 directs Federal Departments and agencies participating in the resolution of terrorist incidents or conduct of counterterrorism operations to bear the costs of their participation. unless otherwise directed by the President. This does not preclude Federal Departments ands agencies from reallocating funds from current operating budgets. accepting reimbursable work orders offered by other Federal agencies or Departments. and/or submitting requests for supplemental appropriations to the Office of Management and Budget (OMB) for consideration.

D. Public Information

1. Public relations is a sensitive area, and the greater the emergency or disaster, the greater the level of media interest The media will go to the source that is most willing to furnish information. whether that source is an authorized, authoritative source or not. While Public Affairs (PA) guidance from higher authority should be gained if time permits, local ground rules for media contact must also be established

2 One of the key questions the media always asks is the dollar value of damage or loss Once given, such a figure can take on a life of its own. and has often been an embarrassment to the official or office that furnished it Great care must be taken in responding to questions relating to the extent and number of personnel injured or otherwise affected by the emergency, as well as the dollar value of loss.

3 Emergencies and disasters generate keen public and news media interest The designated or senior official will designate a spokesperson for the organization to interface with the media. as required. HHS guidance for dealing with the news media in the event of an emergency or disaster will be sought. and brought to the attention of all personnel

3 Public information activities will be undertaken to ensure the coordinated. timely. and accurate release of a wide range of information to affected employees. the news media. and to the public about emergency management and ER activities These activities

will be carried out. when required. in a Joint Information Center (JIC) established in the affected area and staffed with DHHS and other affected Department or agency Federal. State. and local PA representatives Information intended for the news media and the public will be coordinated prior to release with the appropriate DHHS senior official(s), other Federal Departments and agencies. and with State and local officials Contingent on the nature and magnitude of the event, an information center or JIC may be set up both at DHHS Headquarters and in the affected region, based upon the need to provide support to the regional or field activities

E. Congressional Relations

1. It is the policy of DHHS that the Congress will be kept informed of all major emergency and disaster response efforts. The Assistant Secretary for Legislation will be the single point of contact for all information being passed to the Congress concerning DHHS emergency and disaster support. The Office of Congressional Liaison (OCL) will be kept informed of any DHHS critical incident, emergency, or activation of DHHS resources under other Federal plans or statutory authorities.

2 Congressional liaison will be established to provide information to the Washington. DC, and district offices of Members of Congress and to respond to questions, concerns, and problems raised by their constituents These activities will be managed by the Assistant Secretary for Legislative Affairs and the assigned liaison officers. who will be managed by a Congressional Liaison Officer (CLO) and/or other Congressional liaison personnel from the Assistant Secretary for Legislation (ASL) and other Departments and agencies involved in the response, and, when necessary, by a Congressional liaison element at DHHS Headquarters. On-scene Congressional relations staff will be located at the information center or JIC. when established. At the information center or JIC. a deputy CLO will maintain continuing liaison with the PA personnel at the headquarters JIC and with the Congressional liaison element at DHHS Headquarters The on-scene Congressional relations staff also will

provide information pertaining to requests for hearings and special legislation to the headquarters Congressional liaison element

3 Information to be released to Congressional offices and constituents will be coordinated among participating DHHS operating elements. and. when involved. with Federal Departments and agencies and State and local officials, as appropriate. prior to release.

4. Both the Congressional relations staff on scene and at the national level will conduct briefings for Members of Congress and their staffs. Timing. format. and content of these briefing will be determined by the CLO in coordination with Department senior officials and the IMS IC. as appropriate

F. Summary of Responsibilities and Programs

1. Office of the Secretary

Responsibility for oversight and coordination of all DHHS emergency management activities rests with the OS.

a. The Secretary

Contact. The Secretary of Health and Human Services
(202) 690-7000

The Secretary provides leadership and direction to all components of the Department in the management of emergencies

(1) As Departmental head. the Secretary leads the headquarters. regional. and field oreanizations in carrying out emergency management functions The Secretary has delegated to the

Assistant Secretary for Management and Budget (ASMB). responsibility for coordination of emergency management responsibilities of the Department. The Department operates through the regular chain of command in emergency situations

(2) The Secretary serves as a Presidential successor under the Presidential Succession Plan

b. The Deputy Secretary

Contact The Deputy Secretary of Health and Human Services (202) 690-743 I

(1) The Deputy Secretary acts for the Secretary during the absence or disability of the Secretary.

(2) The Deputy Secretary directs emergency preparedness and planning activities of the Department through his or her participation as a member of the President's Emergency Mobilization Preparedness Board (EMPB).

c. Office of Intergovernmental Affairs

Contact. Deputy Under Secretary for Intergovernmental Affairs (202) 690-6060

The Office of Intergovernmental Affairs (OIA) is the central reference point in the Department for problems and questions involving intergovernmental affairs at the headquarters. regional. State. and local levels as they pertain to emergency situations Its responsibilities in the management of emergencies include

(1) Serving as point of contact (POC) between the RDs and the Secretary and Deputy Secretary.

(2) Advising on how DHHS emergency-related programs may be administered to best suit the needs of State and local governments, and

(3) Serving as liaison to the White House in emergency management matters of inter-Governmental interest.

d. Office of the General Counsel

Contact. General Counsel
(202) 690-774 1

The Office of General Counsel (OGC) is responsible for ensuring that all actions taken by the Department in preparation for, and in response to, emergency situations are consistent with applicable laws and regulations, such as:

(1) Representing the Department in legal matters. and

(2) Ensuring that Departmental regulations do not hamper the rapid response required in domestic and national security emergencies.

e. Office of the Assistant Secretary for Legislation

Contact Assistant Secretary for Legislation
(202) 690-7627

(1) The Assistant Secretary, for Legislation is responsible for working with the Congress to ensure that appropriate legislative authority exists to ensure that the Department will be able to respond appropriately to any emergency situation, and

(2) Servicing Congressional requests regarding DHHS programs that may be utilized to provide assistance in emergencies.

f. Program Support Center

Contact. Director
(301) 443-3921

(1) The Program Support Center (PSC) mission is to provide qualitative and responsive "administrative support services" on a cost-effective, competitive, fee-for-service basis to DHHS components and other Federal agencies This distinctive, self-supporting operation brings a pioneering business enterprise approach to Government administrative operations.

(2) Services and products are available in the areas of human resources. financial and property management, and information technology. PSC primary customers include Government agencies and organizations with personnel (both civil service and commissioned corps). grants and contracts (including services, research, and demonstrations). computer and information technology services (including telecommunication. networks. and research); and administrative services (including property, warehouses, printing/publications. libraries, claims, supplies, and conference/training facilities) The PSC's expertise and resources are currently being utilized by more than 30 Federal agencies

g. Office of the Assistant Secretary for Management and Budget

Contact Assistant Secretary for Management and Budget
(202) 690-6396

(1) The ASMB provides Departmentwide policy guidance and coordinates planning and response among the OS, STAFFDIVs. OPDIVs. and the 10 regions through the OEP

(2) OEP is headed by the Director who oversees the network of EC across the Department

(3) ASMB has been delegated the authority to:

(a) Develop national plans and programs and take actions necessary to assure that the OS will be able to perform its essential functions and continue as a viable part of the Department during any national emergency. and will be able to respond to major disasters

(b) Direct. coordinate, and monitor the performance of the heads of OPDIVs, STAFFDIVs. and the RDs, in carrying out the emergency preparedness responsibilities assigned to them

(c) Prepare national emergency plans and develop preparedness programs covering functions and responsibilities that must necessarily be centralized at the OS level in accordance with the EMERPS

h. Office of the Assistant Secretary for Public Affairs

Contact Assistant Secretary for Public Affairs
(202) 690-7850

The Office of the Assistant Secretary for Public Affairs (ASPA) is responsible for coordinating and supervising emergency PA activities, including.

(1) Issuing emergency information to the public concerning health and human services, in coordination with FEMA and other Federal agencies; and

(2) Development of plans to inform the public regarding preparedness measures.

i. Office of Inspector General

Contact. Inspector General
(202) 619-3148

The Inspector General is responsible for:

(1) Coordination of Departmental investigative and security activities, and for obtaining security clearances of employees; and

(2) Examining the effectiveness of the administration of Departmental emergency management programs.

j. Office of the Assistant Secretary for Planning and Evaluation

Contact Assistant Secretary
(202) 690-7858

The Office of the Assistant Secretary for Planning and Evaluation (ASPE) is responsible for reviewing policy options, including legislative proposals, to ensure that the Department will be able to respond appropriately to emergencies.

2. U.S. Public Health Service

a PHS, under the leadership of the Assistant Secretary for Health, through the PHS agencies, directs Federal health efforts in management of emergencies. In general, PHS is responsible for the following types of emergency assistance:

(1) Providing consultation and advice,
(2) Assisting in damage estimation,.
(3) Establishing public health controls,
(4) Providing specially trained and experienced personnel, and
(5) Arranging for medical care for disaster casualties.

b Specific responsibilities of the offices and agencies within PHS are outlined below

3. Assistant Secretary for Health

Contact Assistant Secretary for Health
(202) 690-7994
Office of Emergency Preparedness
(301) 443-1 167

ASH, in coordination with other components of DHHS and other Federal agencies, has lead responsibility for planning and developing the overall emergency health services program. Specific responsibilities include the following:

a. ASH provides leadership and guidance to all PHS components, including PHS RHAs, in the management of emergencies.

b. ASH has been delegated responsibility for developing plans and taking necessary actions to assure that PHS headquarters and regional offices will be able to perform their essential functions and continue as a viable part of the Department during an emergency situation, and will be able to respond to a major disaster; and for preparing national and regional emergency plans and preparedness programs covering PHS functions and responsibilities.

c. In times of emergency, PHS officials would restructure into a streamlined organization called the NDMS. The NDMS provides a cadre of officials to determine national health policy, and to manage those health functions most critical to the survival and recovery of the nation. ASH heads the NDMS, which is composed of officials from PHS.

d. ASH serves as Chairman of the Principal Working Group on Health of the President's EMPB. The Working Group, made up of representatives of other Federal agencies, is developing plans to improve the nation's capability to mobilize health resources in the event of a major domestic or national security emergency.

4. **Office of the Deputy Assistant Secretary for Health**

a. Office of **Emergency Preparedness**

Contact: Director, OEP
(301) 443-l 167

The PHS OEP is located within the Office of the Assistant Secretary for Health (OASH), and reports to the Deputy Assistant Secretary for Health (DASH). The OEP is responsible for coordination of PHS activities in all phases of emergency preparedness planning and response management, and is the principal POC concerning PHS emergency preparedness programs.

b. PHS Commissioned Corps

Contact: The Surgeon General (SG)
(202) 6906498

The PHS Commissioned Corps, under the leadership of the SG, provides a trained cadre of mobile health professionals that can be called to duty to assist in responding to emergencies. The Corps may be activated by a Presidential declaration of a national emergency, or by Secretarial directive.

5. Centers for Disease Control and Prevention

Contact: Director
(404)-639-7000

The CDC are the focal point within the Department for disease prevention and control. environmental health. and health education and promotion activities Specific programs in the management of emergencies are outlined below

a. Disease Assessment, Surveillance, and Control Activities

(1) The CDC play a major role in assisting State and local authorities and other related organizations in the control and prevention of the spread of diseases and ether health-related conditions in the aftermath of a disaster Assessment and surveillance are essential to assuring that proper health responses are established early in the disaster.

(2) The CDC can (1) help identify specific health needs and establish surveillance systems to monitor populations; (2) carry out field studies and investigations, as needed, (3) monitor potential disease outbreaks; and (4) provide technical assistance and consultation on disease control measures and precautions.

(3) The CDC have approximately 90 medical Epidemic Intelligence Service Officers. about one-third of whom are stationed across the country for quick response In addition, senior epidemiologists, laboratory staff, and field investigators are available to assist.

b. Environmental Hazard Control

(1) The CDC also provide assistance in cases in which environmental hazards or emergencies affect public health, and participates, along with the National Institute of Health (NIH). in management of a "Superfund" for responding to such emergencies (with the Environmental Protection Agency (EPA))

(2) Activities include (1) consultation and on-site investigations by environmental health experts. (2) development and maintenance of surveillance systems. and (3) performance of epidemiological research and investigations

c. Occupational Safety and Health

The CDC's National Institute for Occupational Safety and Health (NIOSH) has a number of programs that can contribute to all phases of emergency management These programs are

(1) A clearinghouse for receiving. storing, and disseminating information on occupational safety and health hazards.

(2) Testing and certification of personal protective devices and occupational hazard measuring devices.

(3) Assistance to industrial hygiene laboratories in assessing and evaluating their capability in measurement of specific hazardous substances found in the workplace

(4) Provision of financial assistance for research and demonstration projects relating to occupational safety and health

(5) Aid in the detection and assessment of job-related illness, exposures. and hazardous agents, and identification of occupational causes of diseases. and determination of the incidence and prevalence of disease caused by work-related exposures to toxic and hazardous substances

(6) Provision of grants to aid in the training of specialized personnel in occupational medicine. nursing. industrial hygiene. and safety,

d. Refugee Health Program

The CDC assist the States and localities in meeting the public health needs of their refugee populations and in providing general health assessments of refugees when necessary

6. Food and Drug Administration

Contact Commissioner
(301) 827-2410

The FDA is responsible for ensuring **the safety, purity, and wholesomeness of foods; the safety and effectiveness of drugs. medical devices, and biological products, the safety of cosmetics; and minimizing exposure to potentially injurious radiation." Selected activities of the FDA in management of emergencies are described below

a. Radiation Protection

Development and coordination of programs of radiation measurement and assessment.

b. Foods, Drugs, and **Biologics**

(1) Planning and direction of national programs for the maintenance of purity, and safety in the manufacture and distribution of foods. drugs. and biologics in the event of emergency

nss

(2) Prov iding technical and scientific assistance with regard to radioactive, chemical. and microbiological contaminants in food and drug products, inc uding

(a) Review of radiological training programs for emergency medical personnel,

(b) Assistance in analysis of radioactivity of foods.

(c) Environmental monitoring and sampling of foodstuffs.

(d) Analysis and interpretation of data from foods, environmental, and biological specimens,

(e) Adherence to guidance issued by the FDA on thyroid blocking agents to be used during radiological emergencies: and

(f) Consultation, technical, and scientific assistance regarding protective actions for food and animal feed.

7. Health Resources and Services Administration

Contact Administrator
(301) 443-2194

The Health Resources and Services Administration (HRSA) is responsible for identifying health resource problems through assessment of health care systems. with consideration to improv ing access to care. continuitv and reasonable costs. and improving health status.

and for providing assistance in obtaining emergency health care services HRSA has the following capabilities that can contribute to all phases of emergency management

a. Resources Data

(1) Provision of information on the capacity of community facilities and service delivery system resources suitable for response to any disaster or emergency in terms of medical care

(2) Provision of information on any extraordinary impact on resources or any special resources needed to assist in coordinating interstate or interregional reallocation of casualties, health manpower, or supplies.

b. Planning Capacity

Through programs aimed at enhancing the capacity of localities and States to carry out effective health resources planning and facility development, communities can be better prepared to deal with emergency situations.

c. Health Personnel

(1) HRSA can provide for capable medical personnel to assist in emergency triage and treatment of victims

(2) Another potential resource exists through the U S Coast Guard (USCG) medical service program. with its full time medical, dental. and ancillary staffs available where sufficient concentrations of USCG personnel exist

(3) The facilities of the Indian Health Service provide capacity that can contribute to care in emergency situations

8. The National Institutes of Health

Contact Director
(301) 496-2433

The NIH promote research into the diseases of man, processes of growth and development, and related sciences, and direct the dissemination of medical and health-related information. The personnel and facilities of NIH represent a valuable national resource for use in managing emergencies Examples of NIH activities include the following:

a. Researchers can provide consultation and technical assistance regarding the health effects of disasters, and undertake short- and long-range studies of the health effects of exposure to a range of substances.

b. Through its Institutes, NIR conducts and provides funds to establish, expand, and improve biomedical and clinical research and research training in a wide range of areas. This research contributes to improvements in our capability to manage the health impacts of all emergencies

c Limited analysis of laboratory specimens can be conducted in NIH facilities.

d. The NIH Clinical Center will respond to a community disaster situation when requested by the appropriate authority. Following assessment of inpatient needs and available staff, the Director may send staff to assist the community disaster teams in a supportive role

e The Director. NIH, chairs the Federalwide Interagency Radiation Research Committee

9. Substance Abuse and Mental Health Services Administration

Contact Administrator
(301) 443-4795

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers Federal efforts to reduce or eliminate health problems caused by the abuse of alcohol and drugs, and to improve mental health. Emergency management activities of SAMHSA are outlined below

a. Research and Training

Through its Center for Mental Health Studies of Emergencies. the National Institute of Mental Health (NIMH) carries out the following activities.

(1) Analyzes and evaluates current research and related program developments in the area of mental health during response to disasters;

(2) Stimulates, develops. and supports programs of research and research training in this area, and

(3) Develops and disseminates information on significant research results in emergency mental health to researchers. service providers, and the public.

b. Crisis Counseling

(1) Through its Center for Mental Health studies of Emergencies. NIMH provides grants for professional counseling services to victims of major disasters and

training for service providers in order to alleviate mental health problems caused by. or aggravated by. major disasters or their aftermath The funds for this activity come from FEMA

(2) After a Presidential declaration of a major disaster. project grants are made available for the provision of counseling services to disaster victims and training of disaster workers to appropriate public agencies and private. nonprofit mental health organizations

(3) Victims in need of counseling are identified both at Federal assistance centers established by FEMA and through outreach efforts by designated disaster assistance project personnel

(4) Technical assistance is also available to State mental health authorities by the NIMH disaster staff in terms of (a) decisions regarding the appropriate local service provider for disaster counseling; and (b) assisting appropriate agencies in developing the required materials and data to apply for assistance

10. Health Care Financing Administration

Contact Administrator
(202) 690-6726
HCFA Emergency Coordinator
FTS 987-3602 or 597-3603

a The Health Care Financing Administration (HCFA) administers the Medicare program to help finance medical care for the aged and disabled and. together with the individual States. helps to finance medical assistance for certain low income people through the Medicaid program The Medicaid program IS administered by the States w irhin broad requirements and guidelines established by law and regulations

(1) HCFA has been delegated responsibility for developing plans and taking such actions necessary to assure that HCFA headquarters and regional offices will be able to perform their essential functions and continue as a viable part of the Department during an emergency situation. and will be able to respond to a major disaster: and for preparing national and regional emergency plans and preparedness programs covering HCFA functions and responsibilities

(2) HCFA is responsible for development of plans for the payment of health insurance claims for reimbursement for items or services provided by hospitals, physicians. and other providers of medical services submitted by or on behalf of individuals eligible under the Medicare program. Such plans would utilize the existing system of intermediaries and carriers to review and pay claims.

b Since the Medicaid program is administered by the States, each State is responsible for development of such plans to assure that benefits continue in emergency situations

(1) HCFA is responsible, in conjunction with PHS and other components of the Department, for assisting in planning and program development of the overall emergency health services program.

11. Administration on Aging

Contact. Assistant Secretary
(202) 40 l-3634

The Administration on Aging (AoA) is responsible for examining the characteristics. circumstances. and needs of older people in emergencies and for development of policies. plans. and programs designed to promote their welfare and to alleviate suffering during emergencies

a. Disaster Relief for the Elderly

(1) The program of disaster relief for the elderly provides a mechanism by which AoA, State, and area agencies on aging, nutrition service providers, and other related aging organizations comprising the National Network on Aging can prepare for and respond to emergencies, and address the recovery aspects of the special needs of elderly disaster victims.

(2) The Older Americans Act provides for a percent of the funds reserved for demonstration projects to be set aside for emergency-related services

(3) These funds are used to reimburse State agencies on aging for resources they make available to area agencies, which along with their affiliated organizations, are responsible for delivery of needed services.

(4) Presidential declaration of a major disaster is needed to activate disbursement of grants.

(5) The National Network on Aging. through its area agencies, can assess the scope of a disaster in terms of its effects on the elderly, identify the services required to meet special needs. and monitor recovery of the elderly from the disaster

(6) In addition, AoA and the NIMH have an MOU on improved mental health services for the elderly that includes provisions for cooperation during disasters between the community mental health centers and State and area agencies on aging.

b. Training, Research, and Discretionary Projects and Programs

(1) The Older Americans Act. Title IV, under the program of Special Programs for the Aging. provides funds to adequately train personnel in the field of aging.

improve knowledge of the problems and needs of the elderly,. and demonstrate better ways of improving the quality of life for the elderly. Project grants and contracts are awarded to entities for a variety of research and training projects

(2) The special programs for the elderly can improve the knowledge base for managing emergencies through research on such topics as the provision of services to the vulnerable, including, for example, how community programs can be designed to provide intervention and support to the elderly following emergencies. It can also provide for more adequate training of emergency social services personnel to assist the elderly in such circumstances

12. Administration for Children and Families

Contact. Commissioner
(202) 2058347

a. As the lead agency on issues concerning children and families. the Administration for Children and Families (ACF) seeks to expand and improve the range of human services that promote sound development of children and families

b. ACF administers a number of programs aimed at improving the quality of life for children and families. and funds research and demonstration projects to measure the impact of existing programs and develop improved methods

c. ACF programs could assist in improving the knowledge base for managing emergencies through research on such topics as how community programs can be designed to provide intervention and support to children following emergencies

13. Administration for Native Americans

Contact Commissioner
(202) 690-7776

a. The Administration for Native Americans (ANA) administers a program to promote social and economic self-sufficiency for American Indians. Alaskan Natives, and native Hawaiians. The program includes financial assistance grants: research. demonstration, and evaluation projects, and training and technical assistance projects. ANA also serves as the primary resource in the Department on policy. legislation, and program matters with respect to Indians

b The ANA could assist in the development and implementation of programs to provide support to these population groups in the event of a disaster

14, Administration on Developmental Disabilities

Contact. Commissioner
(404) 639-06 10

a The Administration on Developmental Disabilities (ADD) is concerned with increasing the provision of quality services to those with developmental disabilities through grants and research and demonstration projects.

b. ADD can help design programs to ensure that the special needs of the developmentally disabled, often hardest hit and most helpless, are met in emergency situations.

15. Office of Family Assistance

Contact Director. Office of Family Assistance
(202) 401-9275

The Office of Family Assistance (OFA) directs and coordinates public assistance programs. including Aid to Families With Dependent Children (AFDC), the U.S Repatriate Program. and the Low Income Home Energy Assistance Program (LIHEAP)

16. Aid to Families with Dependent Children

Contact. Director. Office of Policy and Evaluation
(202) 401-9289

a. AFDC, authorized by Title IV-A of the Social Security Act, is intended to encourage the care of dependent children in their own homes, or in the homes of relatives, by providing financial assistance to needy dependent children and the parents or relatives with whom they live. The program is administered or supervised by a single State agency and is financed jointly by Federal and State governments, with the Federal Government matching rate varying by State from 50 to 77 36 percent.

b. Assistance is provided through cash payments to eligible families with dependent children who are deprived of parental support or care by reason of the death, continued absence from the home, or physical or mental incapacity of a parent or. at State option. the unemployment of the parent who is the principal earner

c The State agency determines need by taking into consideration income and resources of any person included in the assistance unit

d All 50 States. the District of Columbia, Puerto Rico. the Virgin Islands. and Guam participate in the program State plans must be approved by the OFA

17. Emergency Assistance to Needy Families with Children

Contact. Office of Policy and Evaluation
(202) 401-9220

a. Emergency assistance, authorized by Title IV-A of the Social Security Act, is a program that provides temporary financial assistance and social services to needy families with children under 21 years of age in emergency situations, to prevent the destitution of those children or to provide living arrangements for them. Assistance is limited to 30 consecutive days per family during any 12 consecutive months.

b States are free to develop their own definition of the kinds of emergencies and the groups to be covered under the program. To receive funds, States must include provisions for emergency assistance in their Title IV-A plans. State plans must specify (1) eligibility conditions; (2) whether migrant workers with families will be included, (3) the emergency needs that will be met. and whether mass feeding or clothing distribution is included: (4) how payments, medical care, and remedial care will be provided; and (5) which of the following services will be provided: information and referral, counseling, securing family shelter, child care, legal, or other services

c. The program. which is optional to States. is financed at a Federal matching rate of 50 percent. Fewer than half of the States have elected to operate this program.

18. Low Income Home Energy Assistance Program

Contact Director, Office of Energy Assistance
(202) 401-9352

a LIHEAP was established to assist low income households to meet the costs of home energy.

b. Assistance is in the form of block grants to States

c. States set aside a reasonable amount for energy crisis intervention. The statute defines "energy crisis intervention" as weather-related and supply shortage emergencies

d. DHHS does not prescribe the amount of funds to be used for energy crisis intervention nor the specific nature of the situations that qualify for this type of assistance.

19. U.S. Repatriation Program

Contact. Director, Office of Refugee Resettlement (ORR)
(202) 401-9246

a The U S Repatriation Program provides temporary assistance to U S citizens or dependents returning from a foreign country due to destitution, illness. war, threat of war, or similar crisis. The ongoing program provides assistance to repatriates based on individual referrals from the Department of State (DOS)

b In an emergency situation. the Department is responsible for providing assistance to all U S citizens and dependents returned to the States Based on this

responsibility,. the National Emergency Repatriation Plan has been developed in coordination with numerous Federal agencies. national voluntary organizations. and State governments

c Temporary assistance may include financial assistance, medical care. temporary billeting, transportation, and other goods and services necessary for the health or welfare of individuals. State agencies are reimbursed 100 percent for assistance provided to repatriates.

20. Office of Refugee Resettlement

Contact. Director
(202) 401-9246

a ORR plans, develops, and directs implementation of a comprehensive program for domestic refugee and entrant resettlement assistance

b. ORR provides direct payments to States, project grants, and voluntary agencies to help refugees resettle throughout the country by providing funds for assistance and social services for needy refugees In the case of the State administered programs, the State must submit a plan to DHHS to become eligible for Federal funds. State agencies may purchase training and services from other providers. Assistance is provided regardless of national origin

21. Regional Offices-Regions I to X

a. DHHS Regional personnel representing the OS and the Operating Divisions in Regions I to X are responsible for emergency preparedness activities as part of their ongoing programs

b The RD has been delegated the authority to

(1) Develop plans and take actions necessary to assure that the offices under their line supervision will be able to perform their essential functions, continue as a viable part of the Department during any national emergency situation. and coordinate the DHHS regional response to major disasters

(2) Consolidate and disseminate the regional plans prepared with the assistance of the Operating Divisions

c The REC is appointed by the RD and charged with the following responsibilities.

(1) Managing and coordinating regional DHHS planning for all types of emergencies

(2) Representing the RD in emergency management activities.

(3) Collecting and providing information and statistical data pertaining to emergency assistance and relief activities.

(3) Serving as liaison to the OS, the FEMA regional office. and related agencies.

(5) Linking regional and national plans to State plans. Regional coordinators should review State plans from the health and human services aspects germane to their OPDIV at least annually to assure that HRSA plans are supportive to State plans

IN. CATEGORIES OF CRITICAL INCIDESTS AND EMERGENCIES

A. Local Emergencies

1 To help ensure appropriate responses to local emergencies. local and State officials responsible for management of emergencies in their areas should be made aware of the resources and capabilities of DHHS that can be utilized in emergencies, both under the FRP. and through support provided short of a Federal emergency or disaster declaration Such resources would include DHHS personnel and facilities, and communications capabilities. ECs at headquarters and in the regions should work with State and local officials to ensure that DHHS capabilities and resources are incorporated as part of local emergency response plans To accomplish this. RECs should contact the State and local emergency management officials in their regions and provide them with an inventory of DHHS resources in the region that could be utilized to augment local and State capabilities. Emergencies and events occur frequently. and often do not result in activation for the FRP and a Stafford Act declaration The Public Health Service Act authorizes the Secretary of DHHS to provide emergency medical assistance on request of State or local authorities. and the NDMS is an authorized vehicle for such assistance. In many cases. DHHS can provide significant aid and assistance to State and local authorities when requested. Establishing a relationship with State and local emergency management officials is an important facet of both emergency and ER planning

2 Regardless of whether or not a major disaster has been declared, if and when State and local resources are inadequate to meet urgent disaster health needs. the PHS may. upon receipt of a State Health Officer request. authorize the release of certain medical supplies and equipment or other reserves to assist in meeting health and welfare needs If a major disaster has not been declared, the State request must have the Governor's concurrence.

3 Every possible effort shall be made to assure prompt response to State Health Officer. and RHA requests for materiel assistance subject only to statutory limitations

4 When a request is received from other than the State Health Officer. the RHA shall secure State Health Officer confirmation of need before assistance is provided If a major disaster has not been declared and materials are required. the State Health Officer's request must be concurred in by the Governor before materials may be released.

5 Unless he is in possession of contrary information, the RHA shall assume that the State health agency has exhausted all State and local resources before requesting assistance.

6 If, in the judgment of the RHA. the State's needs may be satisfactorily met by regular commercial suppliers. he may so recommend to the State and. if necessary, assist the State in locating sources or expediting deliveries.

7. Complete and detailed accounts shall be maintained on all items released, recovered, used and/or damaged, and all costs incurred (including transportation).

8. Appropriate billing forms shall be used for itemization of costs incurred. Request for reimbursement shall be submitted to the appropriate FEMA RD

B. National Security Emergencies

While the threat of general war has abated, the advent of new technologies and more accurate and faster means of weapon delivery mean warning time in advance of an attack might be very short. The policy of the United States is to have sufficient capabilities at all levels of Government to meet essential defense and civilian needs during any national security emergency. A national security emergency. as defined in EO 12656. is "any occurrence, including national disaster. military attack. technological emergency. or other emergency, that seriously degrades or seriously threatens the national security of the United States " In such circumstances. Federal agencies take preparatory measures geared to the criticality' of the situation Our ability to act in a timely manner to the threat requires a predetermined alerting

system and a plan that establishes a sequence of actions for phases of increased readiness This system will serve as the alert and notification process for all emergencies and events. however. in the event of an attack that warrants specific COG actions. specific instructions will be included to direct the required personnel and actions In DHHS. key employees and designated relocatees are part of an alerting network to receive and, in some cases. to relay to other employees in the network notifications, warnings, and alerts at whatever hour of the day or night they are received These actions are detailed in the EMERPS Functional Annexes.

X. PLANS FOR SPECIFIC TYPES OF EMERGENCY SITUATIONS

A series of plans has been developed by the operating components of the Department to prepare for specific types of emergency situations. Many of these plans predate more recent Federal plans. including the FRP, the Federal Radiological Emergency Response Plan (FRERP), and the Mass Immigration Emergency Plan (Operation Distant Shore [Draft]), and will be rewritten to comply with EMERPS requirements These are outlined below

A. National Security Emergencies

Attack or Act of War. EO 12656 outlines Federal Department and agency responsibilities under conditions of attack or war. Functional Annex C of EMERPS outlines the COG requirements for the Department, including continuity of essential functions. succession to office; emergency delegation of authority; safekeeping of essential resources, facilities. and records. and establishment of emergency operating capabilities.

B. Chemical and Biological Terrorism Threats

1. PDDs. EOs. and recent legislation call for the development and coordination of programs for the prevention. detection, and identification of human exposure to chemical and biological (C B) warfare agents. and for the provision of guidance and consultation to Federal. State. and local authorities on measures for minimizing the effects of C B warfare or

acts of terrorism DHHS has published a C/B Support Plan. and is establishing National Medical Response Teams (NMRTs) and Metropolitan Medical Strike Teams (MMSTs) across the nation to combat a threat or act of C/B terrorism The Terrorism Incident Annex to the FRP and the FBI's C/B Incident Contingency Plan also spell out the Federal response to incidents of WMD terrorism.

2 DHHS response is available and on 24-hour standby through telephone communication procedures. and is prepared to rapidly respond to a notice from the FBI. the FEMA, DoD. or DOS to a C/B threat or act.

C. National Repatriation Plan

1 A plan for the repatriation of noncombatant U S. citizens evacuated from overseas has been developed by the Social Security Administration (SSA), working in conjunction with other Federal agencies DHHS will support this plan under ESF #8, of the FRP.

2. The plan outlines respective responsibilities in the reception, temporary care, onward transportation. and assistance at final destination for all U.S noncombatant evacuees returned to the States under a Presidential declaration of emergency

D. Public Health Service National Disaster Medical System

Contact Director, Office of Emergency Preparedness
(301) 443-l 167

1 The NDMS is a cost-effective cooperative effort of public and private organizations and individuals to provide emergency medical treatment. casualty evacuation. and definitive medical care to victims of natural and manmade catastrophic disasters This system is a cooperative effort among tour Federal Departments and agencies DHHS. DoD. VA. and

FEMA Emergency medical treatment is provided through DMATs administered by DHHS that are made up of volunteer health care professionals and sponsored by private and public organizations around the country. as well as by health professionals from DHHS. VA. and DoD Casualty evacuation is administered by DoD using military and civilian resources Inpatient medical care is provided through DoD and VA hospitals. and by a network of over 1.800 non-Government hospitals that commit a limited number of beds for that purpose. This network is coordinated by program offices in 72 military and VA medical facilities around the country

2 NDMS is a young program, having been formed 10 years ago by a series of interagency agreements It is not formally recognized in Federal legislation; however, under the FRP for catastrophic disasters. NDMS represents a significant part of the Federal Government's health and medical response Since 1989, NDMS has proved its value in a number of actual disaster response situations. DHHS has the responsibility for administering NDMS in partnership with DoD, VA, and FEMA. These four agencies interact on program affairs through a series of committees culminating in the NDMS Senior Policy Group that is made up of the top health officials of the three Cabinet Departments and the Director of FEMA.

3 The NDMS is an organizational structure administered by the Federal Government to provide emergency medical assistance to States following a catastrophic disaster or other major emergency. It is usually activated when the catastrophic disaster overwhelms both local and State resources It is designed to supplement other resources and is oriented primarily to large-scale disasters in which local medical care capabilities are severely strained or overwhelmed NDMS has two primary missions.

a To supplement State and local medical resources during major domestic natural and manmade catastrophic disasters and emergencies. and

b To provide backup medical support to DoD and VA medical systems in providing care for U.S Armed Forces personnel who become casualties during overseas conventional conflicts

4. Although NDMS is administered as a partnership. the DHHS is charged with overall direction of the program This responsibility is delegated to the DHHS OEP This office maintains operational control of the program during periods when it is not activated and during peacetime activations Control of the program is transferred to DoD in wartime support situations

5. In peacetime activations that generally consist of domestic natural or manmade catastrophic disasters, NDMS has three objectives.

a. To provide health, medical, and related social service response to a disaster area in the form of medical response units or teams and medical supplies and equipment;

b To evacuate patients who cannot be cared for in the affected area to designated locations elsewhere in the nation; and

c. To provide hospitalization in Federal hospitals and a voluntary network of non-Federal acute care hospitals that have agreed to accept patients in the event of a national emergency.

6 To carry out these three objectives. NDMS has three sets of organizational resources

a **DMATs** and Medical Professionals from DHHS, VA, and **DoD.** DMATs are voluntary medical manpower units organized and equipped to provide austere medical care in a disaster area or medical services at transfer points or reception sites

associated with patient evacuation Hospitals. volunteer agencies. or health and medical organizations sponsor DMATs and recruit interested medical and paramedical personnel to participate DMATs are classified into four readiness levels. as follows

(1) Level One: DMATs that are fully deployable with standardized equipment and supply sets, are self-sustaining for up to 72 hours. and are capable and willing to meet the following mission assignments:

(a) Pre-hospital care,
(b) Ambulatory care,
(c) In-patient care.
(d) Medical transportation,
(e) Patient disposition and evacuation.
(f) Patient administration and processing, and
(g) Collateral health and medical duties, as required.

(2) Level Two: DMATs that are deployable with personnel and person carried personal equipment and supplies. Primary mission is to augment on-ground Level One teams

(3) Level Three: DMATs that have local response capability only

(4) Level Four: DMATs with MOU executed in some stage of development but have no response capability

b An activated DMAT generally consists of 3.5 members. and a team roster may include more than 100 individuals to ensure sufficient personnel on activation Two or three DMATs may he combined to form emergency medical response units with larger treatment capabilities

c OEP administers the DMAT program by maintaining memoranda of agreement (MOA) with sponsors for approved teams. rating readiness levels of teams, maintaining personnel files with the credentials of team members, monitoring and approving training, and supplying teams with certain articles of equipment Upon activation of NDMS, OEP establishes an NDMS OSC that calls up and deploys DMATs. federalizes DMAT personnel for performance of medical tasks outside of their State of licensure, and maintains overall control of DMAT utilization. In the field, DMAT activities are supported and coordinated by MSUs. Besides general DMATs, specialized units have been formed for pediatric care. burn care. mental health, disposition of the deceased (DMORTs). and assistance to Urban Search and Rescue units. In addition, field medical and related services are provided by Federal health professionals from DHHS, DoD, and VA

d. Casualty Evacuation System. Movement of patients from disaster sites to locations where definitive medical care can be provided is administered through DoD Casualty tracking is conducted by the Global Patient Movement and Regulating Center (GPMRC), and the U.S. Air Force (USAF) provides airlift through the Air Mobility Command that can be supplemented by civilian resources through the Civil Reserve Air Fleet (CRAF) Other types of transportation, such as specially outfitted AMTRAK trains, can be called into service through this system

e Definitive Medical Care Network. NDMS has enrolled more than 110.000 reserve beds in nearly 2.000 participating civilian hospitals to receive casualties from disaster areas DoD and VA can provide additional beds, if required. These hospitals are located in 67 geographic areas. Maintaining this network is the responsibility of DoD and VA under the current concept of NDMS operations. This administration is performed through liaison offices. Federal Coordinating Centers (FCCs), in 72 DoD and VA facilities around the United States FCCs control patient distribution within their areas during catastrophic disaster casualty reception situations

f The entire NDMS. or selected components. can be activated in a number of ways The Governor of a State can request assistance from the President who. in turn. can either declare a disaster or order activation of Federal assistance to that State Currently, such activations are authorized under the Stafford Act of 1988 and administered through the FRP of 1992. which is coordinated by the FEMA The Public Health Service Act also authorizes the Secretary of the DHHS to provide emergency medical assistance on request of State or local authorities: NDMS is an authorized vehicle for such assistance. The Secretary of Defense (SECDEF) can also activate NDMS in situations of national emergency. In practice. the Director of the OEP would be the principal operating agent for NDMS in all of these cases

E. DHHS Response Plan for Radiological Emergencies

Contact: DHHS Office of Emergency Preparedness, (301) 443-l 167
Food and Drug Administration, National Center for Devices and Radiological Health (NCDRH)
Chief, Cancer Branch, Center for Environmental Health, CDC

DHHS has developed a plan in support of the FRERP. The plan identifies DHHS resources. authorities, responsibilities, functions, and interfaces, and describes the kinds of actions that comprise the Department's response during radiological emergencies The kinds of emergencies it addresses include, but are not limited to. accidents at fixed nuclear facilities. accidents involving transportation of radioactive materials, peacetime nuclear weapons accidents. and occasional unusual incidents such as the reentry into the earth's atmosphere of nuclear powered satellites

F. Public Health Service Emergency Response Guides

l The PHS developed a series of response guides to be used as a ready reference in responding to various domestic hazards and emergencies These guides predate

several Federal plans. including the FRP. the FRERP. and rhe Mass Immigration Emergency Plan (Operation Distant Shore [Draft]). and will be rewritten to comply with EMERPS requirements A brief description of each follows

2. The PHS response guides define the incident. describe response steps, and cite the PHS organizations responsible for each step. They are to be read and used in the context of regular PHS authorities and activities. The following is a list of the PHS guides, accompanied by key contacts for each type of emergency

G. Technological Hazards

The PHS Response Guide for Technological Hazards addresses the following types of hazards.

1 Radiation emergencies,
2. Acute chemical emergencies.
3. Toxic waste crises,
4 Air pollution emergencies, and
5 Biological emergencies.

H. Energy/Material Shortages

The PHS Response Guide for Energy/Material shortages is a guide to PHS actions to be taken in any situation where public health is sufficiently threatened by a diminution in the supply of energy or medical materials so that Federal assistance is required

I. Natural Disasters

The PHS Response Guide for Natural Disasters outlines procedures that should be followed in a natural disaster emergency or catastrophe such as a flood hurricane. earthquake.

drought. etc . which is severe enough to warrant Federal aid in addition to relief activities of State and local governments

J. Internal Disturbances

The PHS Response Guide for Internal Disturbances outlines procedures that should be followed in response to a civil catastrophe such as a prison break. strike, or act of disruptive terrorism of sufficient magnitude to warrant Federal assistance in addition to State and local measures.

K. Mass Immigration Emergencies

Contact: Director, Office of Refugee Resettlement
(202) 401-9246

PHS actions to be taken in response to mass immigration emergencies. including refugee influxes, are outlined in this guide. In the case of a mass immigration emergency, when large numbers of aliens enter the country over a short time span, it may be necessary to intensify normal PHS screening and health care activities for persons detained by the Immigration and Naturalization Service (INS). An illegal alien influx refers to the mass immigration of entrants who have not been aided, abetted, or granted prior approval by the U. S Government

L. Washington, DC, Metropolitan Area Emergencies

This response guide was developed to delineate PHS responsibilities in responding to local health emergencies when and if PHS is called upon to provide medical and/or public health assistance to local authorities in the DC Metropolitan area

MI. DISTRIBUTION

You should determine who needs copies of your plan internal to your organization. for your chain of command, and external agencies, e g., other agencies and other emergency response organizations. Distribution should include as a minimum your next senior and next subordinate level Copies should go to everyone who had input to the plan and on whose services you will rely for implementation of the plan

XII. PLAN MAINTENANCE

A Maintaining the plan means keeping it current Office organization and physical configurations change. as do clients and other internal and external interfaces. The availability of the relocation site may also change. To be effective, the COOP must be amended periodically to reflect these changes.

B. Ensuring that the plan reflects ongoing changes to resources is crucial. This task includes updating the plan and revising this document to reflect updates, testing the updated plan. and training personnel. The ECs and OEP are responsible for this comprehensive maintenance task Annually. the ECs and OEP initiate a complete review of the plan, which could result in major revisions to this document. These revisions will be distributed to all authorized personnel. who exchange their old plans. or the updated portions of the plan, for the newly revised plans or portions. At that time the coordinators will also provide an annual status report on continuity planning to the OEP

C The EMERPS provides the system for delivering DHHS assistance and protecting our enterprise before, during. or after critical incidents or emergencies. Our goal is to maintain an efficient. coordinated response whether in support of other Federal agencies and Departments. State and local governments, or in support of enterprise resumption operations While responsibility is vested in the ECs for updates. all DHHS program offices are to ensure that their programs and responsibilities are appropriately reflected or referenced in the

EMERPS The appropriate DHHS operating elements are responsible for working uith their partners in other operating elements. State and local governments. and private/volunteer organizations to ensure that plans reflect current status and result in efficient and effective emergency management and ER service and operations

1. Procedures for Changes

a Plans are dynamic-they are never really "finished" or "complete" due to constantly changing situations and experience gained during disaster drills, readiness exercises, and real-world emergencies. Each new event provides an opportunity to critique and evaluate our plans and correct deficiencies. Lessons learned should be fed back promptly into the plans for a better future response.

b. Based on experience in operations and periodic testing and exercising of emergency management and ER plans, the EMERPS will require changes over time The following section describes how changes will be developed and issued on an interim basis and later incorporated into periodic revisions of the document.

2. Applicability and Scope

The provisions of this procedure apply to all operating elements of the Department

3. Types of Changes

Changes developed and published under this notice include both additions of new or supplementary material to further describe. expand upon. or implement the EMERPS. and deletion of material from the plan Changes uill not contravene authorities or other plans now contained in statute or regulation

4. Format for Changes

Proposed changes will be developed using the EMERPS format so that additions or deletions of a word. sentence. paragraph. or section are clearly shown for review and coordination purposes Proposed additions or deletions of text or figures should clearly indicate the specific changes to be made The shading or redlining of changes to mark new text and the strikeout method to mark old text is the preferred method of modification

5. Coordination and Approval

A change may be proposed and developed by any operating element of the Department The operating element proposing the change has the responsibility to coordinate it among the other operating elements of the Department directly affected by the change. The proposing operating element is then responsible to (a) obtain the official written approval for the change from the appropriate senior officials of the affected operating elements, (b) provide a copy of the proposed change to members of emergency management or ER planning or operations teams for information, and (c) provide the final change to the Office of Emergency Preparedness, 12300 Twinbrook Parkway, Rockville. MD 20852. (301) 443-l 167. fax· (301) 443-5 146 for the purposes of tracking, review. and official issuance.

6. Notice of Changes

After the above coordination actions have been accomplished, including receipt of the necessary signed approvals supporting the final change language, OEP will issue the official Notice of Change signed by the Director, OEP. or higher departmental authority. where required The notice will specify the date, number, subject, purpose, supercession. background. and action required. and provides the change language on one or more numbered and dated insert pages that will replace the previous pages in the EMERPS Once published. the changes will be considered part of the EMERPS for operational purposes. pending a formal

revision and reissuance of the entire document Interim changes can be further modified or updated using the above process

7. Distribution

OEP will distribute each Notice of Change to all emergency coordinators, headquarters. and regional offices. and, where required, to other Federal agencies and Departments and State emergency managers Other organizations will be provided Notices of Change upon request to DHHS.

8. Official Files

OEP will maintain the official files of all changes and supporting material, and will periodically publish and distribute an index of changes made to date

9. EMERPS Revision

OEP is responsible for coordinating the review and revision of the EMERPS. OEP will distribute a revised EMERPS for concurrence and request the signatures of the head or a designated official of each of the DHHS operating elements participating in, and involved in review and revision of. the EMERPS.

10. Additional Copies

Additional copies of each Notice of Change will be available from OEP. 12300 Twinbrook Parkway. Rockville. MD 20852. (301) 443-l 167. fax (301) 443-5146

11. Reporting

a OPDIV Heads and RDs are to provide annual reports to the ASMB on any emergencies responded to during the year, lessons learned, and plans to mitigate the effects of similar future emergencies. Reports are to include a review of progress in emergency preparedness programs during the past year and should address deficiencies in the DHHS emergency management and ER program with recommendations for improvement

b These reports are required by the current EMERPS , and should be submitted on September 30 of each year.

12. Daily Situation Reports

When emergencies occur, situation reports should be provided as often as appropriate to the DHHS OEP by the OPDIV ECs and the RECs concerned Detailed instructions are provided in the COOP Functional Annex. Specific instructions regarding reporting when the FRP and ESF #8 are activated will be established at or shortly after activation

13. After-Action Reports

After emergencies, OPDIV and/or the appropriate RECs will submit AARs to the DHHS OEP no more than 2 weeks after the emergency is over. These should describe lessons learned and recommendations for avoiding or mitigating the effects of future similar emergencies AAR(s) may be incorporated into a Departmental or interagency AAR following a major event such as a catastrophic disaster, large-scale special event such as the Summer Olympic Games. etc

14. Evaluations and Updating

a The most important element of DHHS's emergency management and ER program is the day-to-day exercise of DHHS capabilities The constant use of these emergency resources is in itself the most viable and useful way of maintaining readiness for a critical incident or emergency Every time DHHS responds, then we are exercising on a smaller scale the same response plans and resources we would use in the event of a large-scale critical incident or major emergency

b. As DHHS plans for and responds to each new crisis. the Department maintains readiness for the worst possible future incidents and emergencies In all emergencies. the same basic health and human services resources are generally called upon Thus. each lesser event serves as preparation and training for more severe possibilities

c. Short of real events, exercises and drills provide "final accountability" for our preparedness to meet emergencies and disasters, both large and small. The Department routinely participates in a variety of national, State, and local exercises designed to hone our collective ability to provide health and human services to victims of emergencies and disasters

d These exercises also serve to evaluate and update plans Following each exercise a critique (AAR) is prepared that identifies major issues and problem areas found during the training Followup action should be taken on every item requiring correction The Planning Appendix to the COOP Functional Annex describes evaluation and testing of plans in detail

XIII. AUTHORITIES AND REFERESCES

This Annex contains the authorities and references for the DHHS EMERPS

A EO 12148. Federal Emergency Management. July 20. 1979. as amended.

B EO 12656, Assignment of Emergency Preparedness Responsibilities. November 18. 1988. Sections 104 (c) and 202, and Part 17.

C. EO 12472, Section l(c)(l), Assignment of National Security and Emergency Preparedness Telecommunications Functions, dated April 3, 1984

D. Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law 93-288, as amended by Public Law 100-707

E. Presidential Decision Directive 39, U S Policy on Counterterrorism, (S), 21 June. 1995.

F Comprehensive Environmental Response Compensation and Liability Act (CERCLA). Public Law 96-510. December 11. 1980.

G. The National Security Act of 1947, dated July 26, 1947, as amended.

H The Federal Response Plan (FRP) for Public Law 93-288, as amended, dated April 1992, with changes l-11.

I The Federal Radiological Emergency Response Plan (FRERP). May 1, 1996.

J The Mass Immigration Emergency Plan (Operation Distant Short:). Department of Justice. (Draft) June 1994

K Federal Bureau of Investigation Nuclear and Chemical: Biological Incident Contingency Plans (classified)

L DHHS Health and Medical Support Plan for the Federal Response to Acts of Chemical/Biological Terrorism, June 2 1. 1996.

M FEMA 229(4). November 1995. "Disaster Assistance A Guide to Recovery Programs. "

N Federal Planning Circular (FPC) 60, Continuity of the Executive Branch of the Federal Government at the Headquarters Level During national Security Emergencies

0. FPC 61, Emergency Succession to Key Positions of the Federal Departments and Agencies

P. FPC 62. Predelegation of Emergency Authorities

Q FPC 64. Continuity of the Executive Branch of the Federal Government at the Headquarters Level During National Security Emergencies.

R Occupant Emergency Plan, 44 CFR 101-2

S Vital Records During an Emergency. 36 CFR 1236

T. FEMA 229(4). Disaster Assistance. A Guide to Recovery Programs. (Supersedes DAP-21 (June 1989). dated November 1995

U Federal Information Processing Standards Publication (FIPS PUB) 87. March 27. 1981. Guidelines for ADP Contingency Planning. U S Department of Commerce/National Bureau of Standards.

V National Bureau of Standards Special Publication 500-134, Guide on Selecting ADP Backup Processing Alternatives. U S Department of Commerce/National Bureau of Standards. Irene E Isaac, issued November 1985

W ADM P 1025 2C. Emergency Plan for Protecting Classified Documents and Communications Security (COMSEC) Material

X. ADM 2100 ID. Security of Automated Information Systems, March 10. 1993.

Y ADM 2400 1 1B, National Security Emergency Preparedness Program, July 6. 1990.

Z. ADM P 2400.16A, The Domestic Emergency Assistance Program, January 8, 1992

AA. ADM P 2400.17. National Security Support Program, June 1, 1990

BB IRM P 2500.5, Automated Information Systems Security, October 26, 1987.

CC IRM P 2100 5, Automated Information Systems Security

DD PBS P 2400.4B, Public Buildings Service Emergency Preparedness Plan. May 30, 1990

EE PBS Office Relocation Guide

FF Occupant Emergency Program Guide. Master Plan. Public Building Service. Federal Protective Service

GG General Services Administration (GSA) Continuity of Operations Planning (COOP) Student Manual, Course #591, (03196). GSA Interagency Training Center

XIV. TABS

Tab A-l-Operating Divisions Emergency Response Guides (To Be Provided)

Tab A-2-Letters of Delegation

ANNEX A

DIRECTION AND CONTROL

THE INCIDENT MANAGEMENT SYSTEM

Many emergencies the Department may face require a response from a number of different offices. For years. operational elements of the Department have expertly managed interagency responses to critical incidents across the emergency spectrum. The Department supports a variety of Federal plans, and routinely provides health and human services support to other Federal Departments and agencies, and State and local governments. In doing so, they have accumulated a wealth of expertise in what works, and does not work, when faced with a critical incident.

When incidents directly affect the continuity of the Department. we will have to coordinate local operations with a variety of agencies and Departments. including other Federal. State, and local response elements. To coordinate and use all the necessary resources most efficiently, a system for organizing the resources must be functioning. Such a system has been employed successfully across the nation to lend consistency to the way agencies and Departments function in an emergency, and to foster efficiency by eliminating the need to "reinvent the wheel" for each new emergency. This system, called the Incident Management System or Incident Command System (IMS/ICS), uses an integrated approach to emergency management This system is familiar to all of us who support the Federal Response Plan (FRP) or other disaster response and recovery activities It has been successfully employed across the nation by emergency responders at every echelon of Government and the private

sector The Department of Health and Human Services (DHHS) will implement the IMS when faced with critical incidents and emergencies

IMS is basic business management practices The IMS organizational structure and the tasks performed are similar to the organizational structure and tasks performed by business or Government managers It organizes the tasks of planning, organizing, directing. coordinating. delegating, communicating, and evaluating. and it does this during critical incidents that require extraordinary measures to protect lives, meet human needs, and achieve recovery

For a critical incident to be handled effectively, "economy of resources" must be considered. Economy of resources is a management practice applied to on-scene management and requires establishing goals, setting priorities, and assigning resources IMS achieves its goals by utilizing a preestablished command structure. The system identifies an Incident Commander (IC), a Command Staff, and General Staff positions. The system takes accepted business practices and applies them to emergency response.

I. UNITY AND CHAIN OF COMMAND

A In IMS, unity of command means that every individual has a designated supervisor Chain of command means there is an orderly line of authority within the ranks of the Department with lower levels subordinate to. and connected to, higher levels. In probably 95 percent of the incidents we are likely to face. the organizational structure for our operations will consist of

1. Command. and
2. Single resources

B However. as incidents expand. the chain of command is established through an organizational structure that can consist of several layers. as needed

II. ESTABLISHMENT AND TRASSFER OF COMMAND

A Command at an incident is initially established by the highest ranking DHHS authority at the scene Transfer of command at an incident may take place for the following reasons

1 A more qualified person assumes command

2 The incident situation changes over time to where a change of command is legally required, or it makes good management sense to make a transfer of command

3. Normal turnover of personnel on long or extended incidents

B. A system designed to handle critical incidents should have

1 Common terminology,
2. Modular organization.
3. Incident plans,
4 Manageable span of control,
5. Designated emergency coordination center, and
6. Comprehensive resource management.

III. COMMON TERMINOLOGY

Common terminology is essential in any emergency management system. especially when dealing with outside agencies

IV. MODULAR ORGANIZATION

A The IMS organization adheres to a "form follows function" philosophy In other words, the organization at any given time should reflect only what is required to meet planned tactical objectives. The IMS management system organizational structure develops from the top down at any critical incident. "Top down" means that at the very least the command function is established. The first-arriving departmental supervisor or manager is designated the IC and starts organizing the incident As the incident's management needs dictate. 'additional responsibilities in other functional areas may be assigned below the IC. The IC position could change many times as the "next ranking" DHHS staff member arrives on the scene

B. The system's organizational structure may include five functional areas

1 Command: Responsible for overall direction and control of the incident. May include management staff positions responsible for public information.

2 Operations: Responsible for all initial response operations at the incident.

3 Planning: Responsible for collection, evaluation. dissemination, and use of information about incident development and the status of resources.

4. Logistics: Responsible for providing facilities, services, and materials for the incident

5. Finance/administration: Responsible for all costs and financial considerations of the incident.

C A modular organization can shrink or expand depending on the magnitude of the incident or operational necessity The specific IMS organizational structure for any incident we may face is based on the management needs of the incident.

V. INCIDENT PLANS

Every incident needs some sort of action plan. either verbal or written. Written action plans should be used whenever resources come from an outside agency. when more than one operating division is involved, or when the incident is complex. Our plans will cover goals, objectives. and support activities needed during the entire operational period. In prolonged incidents. it may be necessary to develop action plans covering specific operational periods.

VI. SPAN OF CONTROL

A Manageable span of control is defined as the number of personnel one supervisor can manage The desirable range of personnel per supervisor is three to seven, and the optimal number is five.

B When the span of control starts to become a problem. the person in charge needs to delegate responsibilities so that fewer individuals report directly to him or her.

VII. DESIGNATED EMERGENCY COORDINATION CENTER

A command post or other temporary facility, is established based on the requirements of the incident. The location can be prearranged. or in the case of an emergency relocation, can be in a temporary location designated by the IC

VIII. COMPREHENSIVE RESOCRCE MANAGEMENT

Resources may be organized in numerous ways, depending on the needs of the incident Comprehensive resource management. when performed effectively.

A. Maximizes resource use,

B Consolidates control of large numbers of single resources,

C. Reduces the communications load,

D Provides accountability. and

E Reduces freelancing.

IX. SUMMARY

A The IMS will enable us to work together to take control of the situation

1 It can be used for any type or size of emergency we may face, ranging from a minor incident involving a single operating division or office, to a major emergency.

2 It applies to "all hazards."

3 Incident management fosters the timely combining of resources during an emergency

4 Incident management contributes to the safety of our employees. visitors. and the public

B IMS is a model emergency management system It is an all-risk. all-hazard. all-agency system that is ideal for emergencies and critical incidents that require intra- and interagency cooperation The more complex the emergency becomes. the more likely it is tha many components of the Department, and other agencies and Departments will respond. The responders need a system to facilitate their cooperation The leadership of the Department is committed to employing the IMS. The implementation process. including training. exercises. evaluation, and feedback will prepare us to protect our employees, the public, and our enterprise from the consequences of minor and major emergencies

X. INCIDENT RESPONSE PROCESS *(THE INCIDENT MANAGEMENT SYSTEM)*

A. Stabilization

Any incident, large or small, requires a six-step process to stabilize the incident. These steps include.

1. Size up the situation,
2. Identify contingencies.
3 Determine goals and objectives,
4. Identify needed resources,
5. Build a plan and structure, and
6. Take action.

B. Step 1

1 Sizeup involves assessing the situation as it currently exists Sizeup is the responsibility of the first arriving person. It includes problem identification and an assessment of the possible consequences. Sizeup begins by asking

a What is the nature of the incident"

b What hazards are present"

c What hazards exist for employees. response personnel. and the public?

d Do warnings need to be issued'?

e Are there injured employees who need to be treated or assisted'?

f Is evacuation required'?

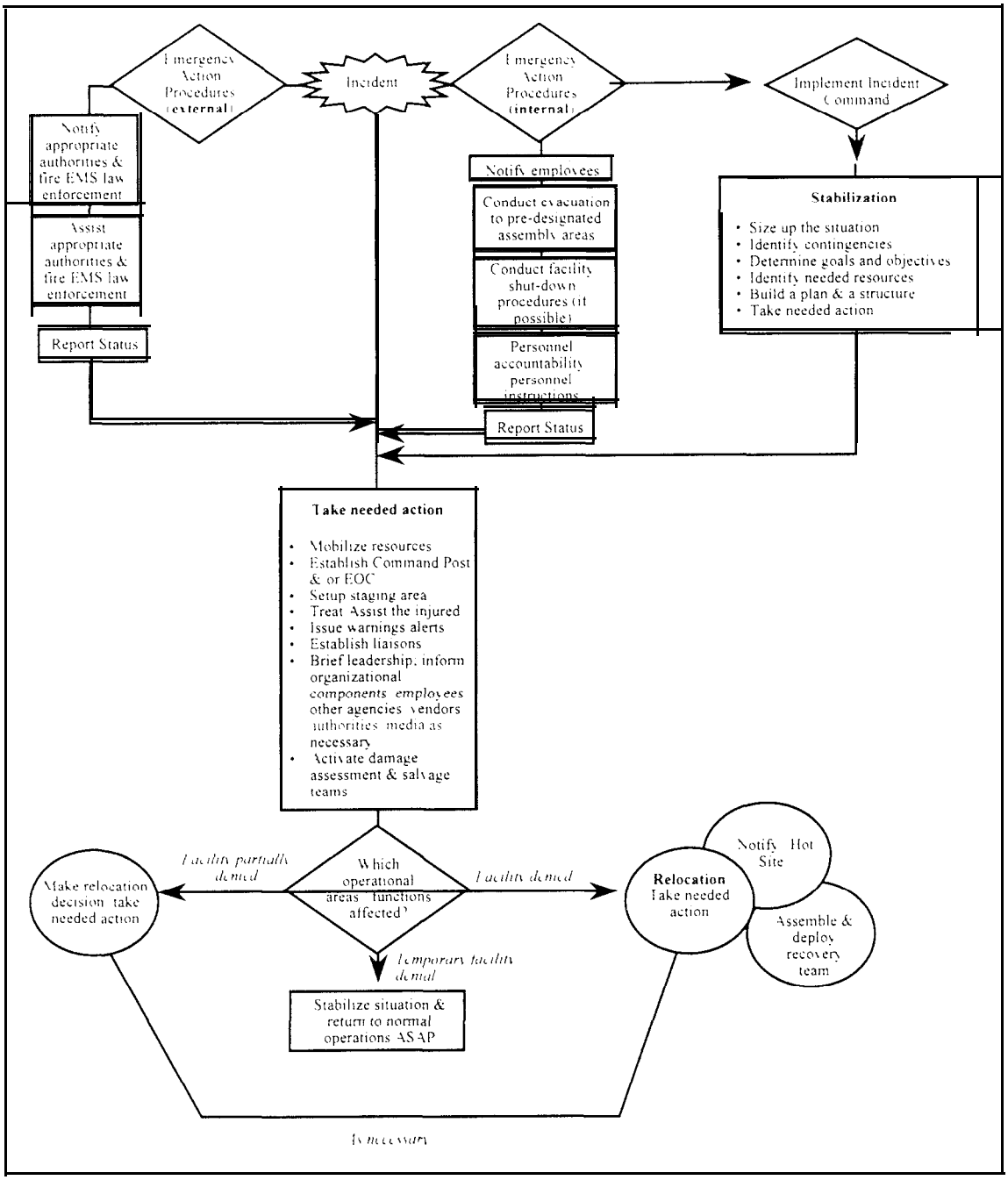
g What portion of the facility(ies) and how large an area are affected'?

h Have local law enforcement or other security or fire services personnel isolated the area'?

i. What locations would make a good staging area for Departmental and other resources supporting the Departmental response'?

j What location would make a good site for a command post. if required"

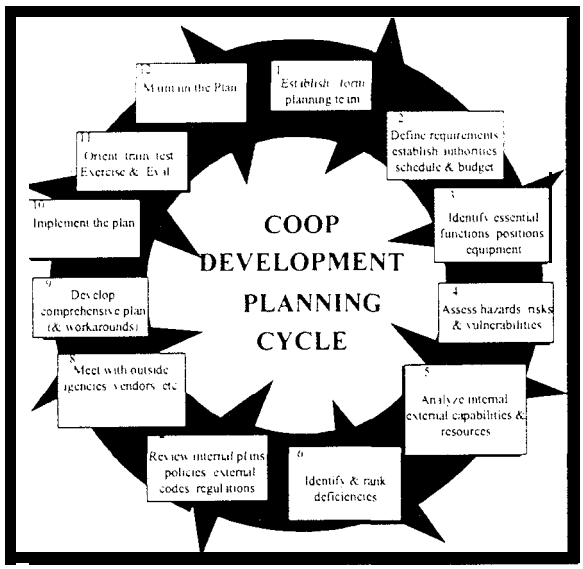
2 Making a good assessment is critical to the subsequent decisions we will make It is important the first responding DHHS personnel constantly review the initial sizeup because of the dynamic nature of critical incidents


Emergency Action Procedures (external)
Incident
Emergency Action Procedures (internal)
Implement Incident Command
Notify appropriate authorities & fire EMS law enforcement
Assist appropriate authorities & fire EMS law enforcement
Report Status
Notify employees
Conduct evacuation to pre-designated assembly areas
Conduct facility shut-down procedures (if possible)
Personnel accountability personnel instructions
Report Status
Stabilization
• Size up the situation
• Identify contingencies
• Determine goals and objectives
• Identify needed resources
• Build a plan & a structure
• Take needed action
Take needed action
• Mobilize resources
• Establish Command Post & or EOC
• Setup staging area
• Treat Assist the injured
• Issue warnings alerts
• Establish liaisons
• Brief leadership, inform organizational components employees other agencies vendors authorities media as necessary
• Activate damage assessment & salvage teams
Which operational areas functions affected?
Facility partially denied
Facility denied
Temporary facility denial
Make relocation decision take needed action
Relocation Take needed action
Notify Hot Site
Assemble & deploy recovery team
Stabilize situation & return to normal operations ASAP
As necessary

3 Sizeup can be substantially improved by stepping back from the incident-not only mentally. but physically, if possible. Distancing oneself from the incident may help to focus on the sizeup process and reduce the chances of becoming emotionally and/or physically involved in the rescue activities taking place.

C. Step 2

1 Identify contingencies



THE EMERGENCY MANAGEMENT AND ENTERPRISE RESUMPTION PLANNING SYSTEM (EMERPS)

FUNCTIONAL ANNEX B ENTERPRISE RESUMPTION AND CONTINUITY OF OPERATIONS PLANNING (COOP)

OFFICE OF PRIMARY RESPONSIBILITY: Office of Emergency Preparedness

SUPPORTING OFFICES: Operating Divisions
Staff Divisions
HHS Regional Offices

I. INTRODUCTION

A. The Department of Health and Human Services (DHHS), by law and Executive Order (EO). is required to have the capability to maintain continuous operations across the spectrum of potential hazards and threats. Each DHHS organizational element must therefore be prepared to continue to function during an emergency or threat of an emergency, and to efficiently and effectively resume critical operations if they are interrupted. Planning for meeting the demands of varied emergency scenarios is necessary. and is accomplished by developing Continuity of Operations Plans (COOPs)

B Planning for the continuity of DHHS in the aftermath of an emergency is a complex task Preparation for. response to. and recovery from an emergency affecting the functions of the Department requires the cooperative efforts of many support organizations in partnership with the functional areas supporting the "business" of' DHHS This document

records the planning process and plan that outlines and coordinates these efforts. reflecting the analyses by representatives from DHHS operating elements and by the Office of Emergency Preparedness (OEP)

C. DHHS senior management recognizes the low probability of severe damage to operating elements of the Department. Nevertheless, because of the potential impact to DHHS. a plan for reducing the risk of damage from a critical incident or emergency however unlikely is vital The Department's Enterprise Resumption (ER) (COOP) Plan is designed to reduce the risk to an acceptable level by ensuring the rapid restoration of essential functions The plan provides guidelines for ensuring that needed personnel and resources are available for both emergency preparation and response and that the proper steps will be carried out to permit the timely restoration of services.

D Every year emergencies take their toll on our Government, businesses, and citizenry-in lives and dollars. They often strike without warning, may be minor or catastrophic in nature, and have human, economic, and social consequences. A recent two-alarm fire at the Department of Treasury (DOTRES) resulted in the evacuation of approximately 1,700 employees, one-quarter of the building was left untenable due to fire and water damage More than 200 personnel were forced into long-term relocation The World Trade Center bombing resulted in 6 deaths, hundreds of injuries. and the evacuation of 40,000 people. the Alfred P. Murrah Federal Center bombing killed 168 and injured more than 500.

E Our enterprise is also vulnerable to "virtual" assault and emergencies Computer programming errors, system crashes. and even "digital terrorism" could wreak havoc with DHHS operations In 1988. a young computer enthusiast created a "worm" (a worm operates much like a virus, but can travel along a network on its own) to seek out sites on the Internet by traveling along its many connections and copying itself onto remote computers The author had not intended to damage any systems. but made an error in designing the program This error caused the worm to begin propagating itself at an exponential rate. slowing down

Internet sites and causing communications to come to a standstill The reaction among Internet users and system administrators was mass hysteria Within 3 hours, effects were evident across the nation. and within 12 hours more than 2.000 systems. including the Lawrence Livermore National Laboratory. National Aeronautics and Space Administration (NASA) Ames Laboratory. Los Alamos National Laboratory. and the Department of Defense's (DoD's) Milnet network were infected. resulting in a million dollars in damage

F. Enterprise resumption studies show that 85 percent of organizations are heavily or totally dependent upon computer systems. Private sector experience suggests that on the average, by the 6th day of a disruption, companies experience a 25-percent loss in daily revenue: by the 25th day it is 40 percent Financial and functional loss increases rapidly after the onset of an emergency Within 2 weeks of the loss of computer support. 75 percent of organizations reach critical or total loss of functioning. Of the companies that experience a disaster but have no business recovery plan in place, 43 percent never reopen. Only 1 in 10 are still in business 2 years later. As a group, organizations with plans that experienced an emergency estimated that their revenue losses would be 2 5 times as severe if their contingency plans were not activated.

G. Proper planning for operations under emergency conditions can lessen, or in some cases mitigate, the extent of the impact on our employees, facilities, and missions. Effective planning requires a partnership among all DHHS entities with responsibilities and duties of each understood, well defined, and reduced to writing in a COOP.

H Continuity of operations, often referred to as enterprise or business resumption. is defined as the measures we take to continue to perform or rapidly restore essential national or regional-level functions or operations during and after a severe emergency COOP plans include a comprehensive set of action steps to be taken before. during. and after an emergency It provides for the uninterrupted availability of all the resources necessary to operate our enterprise at an acceptable level The plan is documented and tested to ensure the

continuity of operations and availability of critical resources after an emergency In the event of some form of disruption. we are not trying to maintain normal operations-we are trying to maintain acceptable operations. Our COOP charts our course for a return to normalcy

I. To coordinate and use all the necessary resources most efficiently, a system for organizing the resources must be functioning To direct and control our response to an emergency or critical incident. we will employ an Incident Management System (IMS). Such a system has been employed successfully across the nation to lend consistency to the way agencies and Departments function in an emergency, and to foster efficiency by eliminating the need to "reinvent the wheel" for each new emergency This system uses an integrated approach to emergency management. Many emergencies the Department may face require an integrated response from a number of different offices. The Department will also have to coordinate operations with a variety of agencies and Departments. including other Federal, State, and local response elements. DHHS will implement the IMS when faced with critical incidents and emergencies. The IMS is detailed in the IMS annex to the Emergency Management and Enterprise Resumption Planning System (EMERPS).

J The IMS is basic business management practices. It organizes the tasks of planning, organizing, directing, coordinating, delegating, communicating and evaluating, and does this during critical incidents. which require extraordinary measures to protect lives, meet human needs, and achieve recovery. For a critical incident to be handled effectively. "economy of resources" must be considered. Economy of resources is a management practice applied to on-scene management, and requires establishing goals, setting priorities, and assigning resources.

K. The IMS achieves its goals by utilizing a preestablished command structure The system identifies an Incident Commander (IC) (in our case. the on-scene, first-arriving, or subsequently appointed senior/designated DHHS official) or. in the case of an incident involving multiple operating units or agencies. a Unified Command System (UCS) Unified Command is the process. in a multi-agency or element incident. of establishing a common set

of objectives and strategies without losing individual organization authority. responsibility. or authority All involved operating units contribute to the command process by determining overall goals and strategies, jointly planning tactical activities, conducting integrated tactical operations, and maximizing the use of all assigned resources. Under an IC or Unified Command Group (UCG). management of the incident is supported by a Command Staff and General Staff. Unified Command shares responsibility for the overall incident, and employs consolidated plans that cover strategic goals, tactical objectives, and support activities Establishment of an IC or UCG is predicated on the extent and consequences of the incident. If, for example, the incident can be handled within the boundaries of an operational element, or within a facility, and no outside impact is expected (e.g., a minor office fire with limited damage), then UCS may not be appropriate If the incident affects multiple operational elements. and outside impact, including affecting the community is expected. then UCS may be appropriate.

L. The IMS supports utilization of a team approach in implementing the COOP The use of trained teams provides the infrastructure necessary to direct a response. relocation. and recovery operation. Each team will have specific duties and responsibilities once the decision is made to invoke the COOP The teams will receive special training in IMS and in managing COOP activities In addition, the IC or UCG and teams will be given special emergency authority over a wide range of areas important to successful continuity of operations response, relocation, and recovery.

M It should be emphasized that this document is addressed particularly to the members of the COOP teams, since they have the responsibility of preparing for. responding to, and recovering from any critical incident or emergency that impacts DHHS. Stage 2 of this document (Containment and Relocation) describes the composition of the COOP teams in detail.

N COOP is a dynamic process Planning. though critical. is not the only component Training, conducting drills. testing equipment. and coordinating activities with the community and other Departments and agencies are other important functions. Our plans will be periodically tested. and regularly communicated to our employees and management. Employees must know what to do in case of an emergency and how to go about it Remember that contingency plans most often operate during times of great stress and without key personnel Trained teams following documented, tested procedures are the best assurance of our success

1. Purpose

a This COOP provides policy and guidance for DHHS personnel to ensure that critical operations are continued in the event of an emergency or threat of an emergency

b Use this document to learn about the issues involved in planning for the continuity of the critical and essential business functions at DHHS operating elements, as a checklist of preparation tasks. for training personnel. and for recovering from an emergency

2. Task

Provide for the continued operations of the Department and its divisions under all hazards.

3. Objectives

The objectives of this COOP are to direct and guide appropriate actions to:

a Mitigate risks.

h Ensure the life safety and well being of employees and visitors during an emergency.

c Reduce disruptions to operations:

d Protect essential equipment. records, and other assets:

e Minimize damage and loss.

f Provide organizational and operational stability.

g. Facilitate decision making during an emergency,

h Achieve an orderly recovery from emergency operations;

i Provide a real sense of security,

j Ensure the reliability of backup systems;

k Provide a standard for plan testing;

l Reduce legal liability; comply with legal and regulatory requirements, and

m Reduce reliance on key personnel.

II. POLICIES

A General policies and procedures outlined in the Reference Section of the Basic Plan shall be followed in responding to critical incidents and emergencies under this EMERPS annex

B. This annex establishes specific COOP policies. guidance. procedures, and responsibilities It sets forth concepts, procedures, and necessary actions to ensure a continuous capability to execute critical DHHS functions

C. The classified EMERPS Continuity of Government (COG) annex establishes policies. guidance. procedures, and responsibilities for the DHHS COG It sets forth concepts, procedures, and necessary actions to ensure the survivability of the DHHS national and regional-level leadership and headquarters.

D. The emergency coordinators of the appropriate Staff Divisions (STAFFDIVs), Operations Divisions (OPDIVs), and Regional Offices are responsible for the development of COOPs They are responsible for having the plans in place prior to critical incidents or emergencies. for involving the policy officials and program managers in the development of the plans. and for providing support to officials and program managers in responding to emergencies

III. RESPONSIBILITIES

A. Department Level

1 The Secretary of Health and Human Services (HHS) will direct the preparation of COOPS.

? To ensure that this COOP can be effectively and rapidly implemented with little or no notice. each Operating Div ision will

a Appoint a COOP point of contact (POC) for coordination and implementation of this COOP In most cases. this will be the organization's Emergency Coordinator (EC).

b. Identify essential functions. personnel, records and equipment

c Maintain current personnel notification and relocation rosters. and employee assembly procedures

d Ensure preparation of backup copies of vita1 records (including key computer files) required to perform essential office functions. pre-position records and update them periodically, and prepare (or identify items to be included in) driveaway kits consisting of essential operating information and equipment

e Ensure that appropriate provisions are made for employees who have special medical needs.

f. Conduct periodic tests of the office telephone notification procedures.

g. Conduct periodic visits to designated relocation site(s)

h Provide current information to the relocation site manager concerning any unique requirements if a site has been selected and prior arrangements have been made.

i Ensure procedures for restriction or movement of classified documents and materials are in place

j Support implementation of this Annex and prov ide resources as directed

3 DHHS ECs will

a. Be responsible for coordinating the development of a COOP for their organization, as directed.

b Provide advice and assistance to other ECs in the development of COOPS.

c. Assist in the development, conduct, and evaluation of COOP exercises for their organization and subordinate organizations

d. Assist in the development, conduct, and evaluation of COOP exercises for their central and outlying offices

4. Regional Directors (RDs) will be responsible for developing, or coordinating the development of COOPs for their service, office. or site RDs will advise and assist designated officials at facilities within their regions in developing COOPs for individual operating sites. when required

5. Designated officials will assume responsibility. as appropriate and directed, for developing a site-specific COOP, and will:

a Provide ongoing training in COOP procedures for personnel assigned to emergency staff positions. and continually evaluate the effectiveness of the training program

b Ensure that the performance of essential functions can be accomplished from a relocation site. if activated

c. Develop methods to ensure that COOP procedures are followed during emergencies

d Contact Federal, State. and local emergency response organizations and develop a working relationship compatible with COOP activities and plans

e Develop plans and procedures to protect and store vital records/data required for performance of essential functions at a relocation site. if activated.

f Establish procedures for the physical relocation of equipment, if unique items are required, and are not available or are not in the required quantity at the relocation site. if activated

g. Develop plans and procedures for the redirection or termination of office-specific shipments during an emergency that results in relocation or home site shutdown (this will require vendor, procurement office. and/or depot notification).

h Establish procedures for the backup of their organizational element's time and attendance records

i Ensure (organization) COOPs are coordinated as appropriate. with the emergency plans and procedures of other site tenants and entities likely to be affected by COOP execution

j Identification of all equipment to be kept current A quarterly report should be stored off site The listing should show all current information, such as value, lessor, configuration, etc. Emergency equipment, including portable lighting, hard hats, boots. portable two-way radios, floor plans, and equipment layouts should be maintained for use. as needed

k. A listing of all vendor sales personnel, engineers, and regional offices should be kept and reviewed quarterly. Names, addresses, and phone numbers (normal, home, and emergency) should also be kept

6 Incident Commander For the purposes of this annex. "Incident Commander" refers to the on-scene, first-arriving, or subsequently appointed DHHS designated or senior official with responsibility for emergency or incident management. The IC will operate under the delegated authority of the Secretary of HHS.

7 Unified Command Group. In an instance involving multiple DHHS elements, UCS may be employed. The UCG will operate under the delegated authority of the Secretary of HHS

8 The IC or UCG will be responsible for:

a Performing activities required to stabilize the emergency or critical incident:

b Protecting life and property.

c Controlling resources. including personnel and equipment.

d Emergency Response and Relocation Teams.

e Personnel accountability for safety and task accomplishment.

f Effective liaison with outside agencies and resources:

g. Damage assessment and reporting. and

h. Direction and control of relocation.

IV. SITUATION

A. COOP Conditions

DHHS elements must retain the capability to perform critical unilateral and interagency functions across the full spectrum of natural or manmade disasters, civil emergencies, and conflicts. Such events may occur singly or in any simultaneous combination The EMERPS Basic Plan provides a synopsis of emergency conditions.

B. Planning Assumptions

1 Emergencies or threatened emergencies may adversely affect the Department's ability to continue to support essential internal operations and to provide support to the operations of clients and external agencies.

2 Personnel and other resources from DHHS and other organizations outside of the area affected by the emergency will be made available if required to continue essential operations

3 Communications will be interrupted. Alternate communication means will be heavily relied on, necessitating augmentation of existing Departmental resources. Activities will be conducted according to tested procedures within an agreed upon timeframe until communication is established.

4 Incidents may involve events with no impact outside of the operating unit. or with impact for other operating units and/or the community For the purposes of this annex. emergencies will be categorized as

a *Minor:* Minor emergencies involve limited amounts of noncritical records. material. media. or equipment items that OPDIV staff and/or the property management or facilities department can handle without outside assistance or expertise The DIIHS Operating Unit head/responsible official will manage the response and recovery from the incident Team activation will not be necessary

b Moderate: Moderate emergencies involve substantial numbers of records, material. media, or equipment, or where physical damage is likely to be more severe. and where help or expertise from outside the DHHS Operating Unit is likely Emergency notifications within the operating unit and Department will be followed as far as the DHHS Operating Unit head/responsible official feels is necessary. Assistance from the Emergency Response Team (ERT) may or may not be necessary

c ***Major:*** Major emergencies involve significant numbers of records, facilities, media, material, and equipment where physical damage is severe. and where expertise and assistance outside the OPDIV and/or Department will be required. Emergency notifications will be followed completely. Assistance of the ERT, and. if relocation is warranted, the Relocation Team (RT) will be necessary

d NOTE: *Because of the varied nature of potential incidents and emergencies, these definitions are provided only as general guidelines.*

5 The incident site may also constitute a crime scene. limiting access and warranting special precautions to preserve the scene and protect evidence

6 Access to the facility or facilities affected by the critical incident or emergency will be denied for whatever period of time it takes to stabilize the situation This period of time could vary from hours to months.

7 Agencies that commonly support DHHS operations may be unable to continue their support in the event of a large-scale emergency.

8 Efficient and effective restoration of operations requires the use of an emergency management system, which organizes the tasks of planning, organizing, directing, coordinating, delegating, communicating, and evaluating. To ensure the efficient and effective restoration of operations. DHHS will employ the Incident Command System (ICS) to manage all stages of COOP operations

9 For planning purposes, the COOP is implemented in four stages:

a Stage I: Pre-Emergency, during which plans and preparation to implement the COOP are made, maintained. and exercised.

b. Stage 2: Containment and Relocation, in which the situation is stabilized (contained) and all or part of the affected DHHS organization leaves an untenable site, or implements options other than relocation. The duration of Stage 2 operations can generally be established as 1 to 24 hours. Actions during Stage 2 include incident stabilization, relocation of key staff, conduct of limited essential operations as possible, and preparation of relocation site(s) for follow-on personnel.

c Stage 3: Relocation Site Operations. which describes DHHS operations at the new site The duration of Stage 3 operations can generally be established as from 34 hours to the 5th day Actions during Stage 3 include continuing essential functions. relocation of

employees as required. and implementation of other operations. as possible

d. Stage 4: Ending Relocation Site Operations. which describes the transition from the relocation site to the original home site or a new home site. The duration of Stage 4 operations can generally be established as from the 5th day of relocation operations until termination of relocation site operations Actions during Stage 4 include sustainment of DHHS functions from the relocation site, and ending of relocation site operations.

V. CONCEPT OF OPERATIONS

A. General

1. The Office of the Secretary (OS) will manage and coordinate the Department's overall continuity of operations activities This will be accomplished by mobilizing DHHS resources and, where necessary, requesting resources from organizations external to the department DHHS will use existing operations and support policies. procedures, and protocols.

2 Actual COOP operations will be managed under the IMS as outlined in the EMERPS Basic Plan and IMS annex.

3. Requests for assistance and resources will be transmitted from the IC or UCG at the designated Incident Command Post (ICP) Or Emergency Coordination Center (ECC) Shortages or unavailability of needed resources will be addressed through the DHHS chain of command for resolution

B. COOP Organization and Structure

1. Office of the Secretary of Health and Human Services. Responsibility for oversight and coordination of all HHS emergency management activities, including COOP. rests with the OS

2 Assistant Secretary for Health. The Assistant Secretary for Health (ASH) has been delegated responsibility for developing plans and taking necessary actions to assure that headquarters and regional offices will be able to perform their essential functions and continue as a viable part of the Department during an emergency situation

3 Office of Emergency Preparedness OEP manages and coordinates Federal health, medical, and health-related social service response and recovery to federally declared disasters under the Federal Response Plan (FRP). OEP also coordinates and delivers Departmentwide emergency preparedness activities. including COG. continuity of operations. and emergency assistance during disasters. OEP is the central focus in the Department for disaster and emergency information OEP collects and disseminates information on the total HHS response in emergencies OEP alerts the OS staff and the OPDIVs, assists in the process of identifying the expertise and services that could be brought to bear upon the situation. and maintains communications and an awareness of the Department's involvement as a unified entity. OEP is responsible for the maintenance of this annex

C. Specific

1 The concept is such that in Stage 1. before occurrence of emergencies. HHS emergency coordinators work with policy officials and program managers to develop COOPs and maintain a workable response system

2 In Stages 3 to 3. during emergencies. the IC/UCG identifies and notifies the appropriate COOP components to be activated and individuals to manage the HHS COOP response Coordinators provide support to the IC and DHHS managers, as necessary. throughout the emergency

3 In Stage 4, after the emergency, coordinators collect After-Action Reports (AARs) that help the Department learn from the experience and better prepare for and mitigate the effects of such events in the future

COOP IMPLEMENTATION STAGES

STAGE 2	*STAGE 3*	*STAGE 4*
(Initiating Event) Containment and Relocation	Relocation Site Operations	Ending
COMMAND	**COMMAND**	**COMMAND**
Emergency Response On-site personnel react to situation in accordance with emergency procedures	Management of relocation (or other options) vested in the IC/UCG and Relocation Team. supported by Emergency Response Team and DHHS operating elements	The IC/UCG and Relocation Team leader meet with each relocated operating unit to assess the relocation and any additional requirements
Implement emergency action procedures and notification		Transition of command from IC/UCG to DHHS managers of relocated operating elements
On-scene or first responding senior DHHS official assumes direction and control as IC and **conduits** Six-Step Stabilization Process		
CONTROL	**CONTROL**	**CONTROL**
Minimal control over initial employee reaction to crisis. routine drills in emergency action procedures help ensure adherence to procedures	Control of relocation activities accomplished through management channels established by the COOPs–Emergency Response and Relocation Teams performing tested procedures	Transition from emergency to normal levels will he controlled in accordance with the COOP and DHHS management guidance
Safeguard staff and property	Relocation Team controls acquisition and preparation of relocation site. directs facility preparation, oversees relocation of personnel. functions. and equipment	Sustainment of DHHS functions from the relocation site
Management of organizational response to emergency vested in IC/UCG and. as necessary Emergency Response and Relocation Teams	Voice and data network restoration is a priority. with channels for management reporting/receiving emphasized	Ending of relocation site operations and return to primary operating facility or other permanent site
Damage assessment and communication of situation may be enhanced it team members are present	Activities will be conducted according to tested procedures within an agreed upon timeframe until communication established	
IC/UCG determines necessary actions	Communication of management plan for preparation of and relocation of follow-on personnel to the relocation site	
Response may he phased	Continuing essential functions	
DHHS leadership controls emergency declaration **and** relocation decisions	Relocation of employees, as required	
Relocation of key staff	Implementation of other operations as possible	
Conduct of limited essential operations **as** possible	Communication of management **plans**	
Preparation of relocation site(s) for follow-on personnel		
Communications with news media regarding details of emergency controlled through Emergency Response Team that designates a spokesperson		

Figure B-l. COOP Implementation Stages

STAGE 2

Containment and Relocation

Stage 2. Emergency or critical incident occurs.

Stage 2 actions:

- Incident stabilization by implementation of the organization's COOP.
- Consideration of relocation for all or part of the affected DHHS organization. (Consideration of options other than relocation is included in this stage)
- Relocation of key staff.
- Conduct of limited essential operations, as possible.
- Preparation of relocation site(s) for follow-on personnel.

Stage 2 duration: Generally established as 1 to 24 hours.

VI. STAGE 2

A. General

1 Stage 2 starts with the onset of the emergency or, in the case of a threat. with warning of an approaching emergency. Stage 2 of COOP operations focuses on the immediate emergency and its aftermath, and positioning the operating unit to successfully reestablish operations at the primary operating facility or at a relocation site

NOTE: This plan assumes that a major emergency has severely crippled the operating unit. forcing it to reestablish partial or full operations at a relocation site Procedures included herein will apply to a broader scope of operations across a lesser spectrum of emergencies

Stage 2 Summary

a Implement emergency procedures

b Establish (and transfer. when required) IMS Command

c Stabilize the situation.

d Organize an ICP or ECC.

e. Assemble teams.

f Conduct damage assessment and salvage and recovery operations

g Provide public information

h Procure equipment and supplies

i. Transition key personnel and critical functions, equipment and records to the relocation site(s) Prepare the relocation site(s) for receipt of follow-on personnel (see Relocation Appendix to this annex).

j. Prepare for Stage 3 (relocation site operations).

B. Implement Emergency Procedures

Effective implementation of the COOP hinges on two actions detection and determination of the emergency condition. and proper notifications The COOP may be executed under several conditions that address whether or not warning can be given. e g .

severe weather. or will not be available. e g . an earthquake In addition. warning. or the emergency itself. may happen during nonoffice hours when the majority of our employees are not at work. or during routine office hours

In all emergency situations, the primary objective is the safety of human lives. Continuity of operations will be of secondary importance to saving lives and preventing suffering.

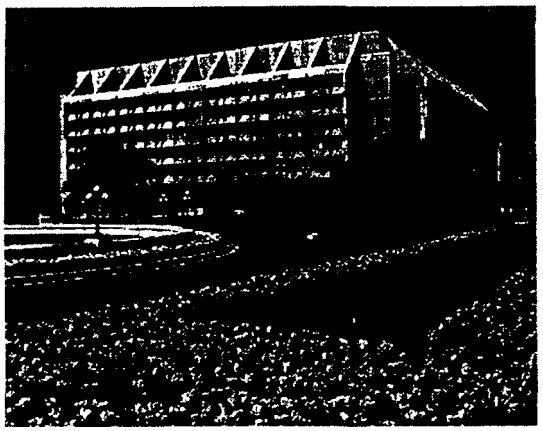
1. Warning

There are some threats to operations that may afford advance warning that will permit the orderly alert notification, evacuation and. if necessary, the relocation of employees Situations that might provide such warning include a severe storm. a transportation accident resulting in the threat of a release of a Hazardous Material (HAZMAT). or a warning of a terrorist incident.

2. No Warning

a. During Nonoffice Hours. Incidents may not be preceded by warning (e.g., earthquakes, arson, or HAZMAT incidents), or may occur while the majority of on-site staff are not at work. In these circumstances. while operations from our home site may be impossible. the majority of our employees will still be able to respond to instructions. including the requirement to relocate following proper notification

b During Office Hours. Incidents may also occur with no warning during normal office hours In these circumstances. execution of the COOP, if indicated by the circumstances of the event, would begin by execution of the site's Occupant Emergency Plans/ emergency evacuation plans to move employees out of the building expeditiously (or to shelter in place. when warranted)



3. Incident Identification

a Individuals rather than teams typically provide the initial emergency response function. Information on emergencies or critical incidents affecting continuity may enter the system at any point. It may flow from the regions to the OS or from OS to the regions An alert employee or security guard may report a fire. then evacuate him or herself from the facility Security over the area is established as local support services such as the Police and Fire Departments are enlisted through existing mechanisms. These responses and implementation of emergency procedures can only be expected if procedures are developed and employees are trained in them.

b Employees should be trained in emergency procedures and know the evacuation routes from various parts of the building Drills should be conducted periodically to refresh the memory of long-term employees and give instructions to new employees The drills will also inform employees as to which personnel are responsible for directing the

evacuation and ensuring that all areas have been properly cleared Appropriately trained and knowledgeable employees can quickly detect and determine an emergency condition. make proper notifications. and alert management to a potential COOP event Proper training leverages our most valuable resource-time.

	Incident Information Requirements
1	Identity, title, and phone number of caller or reporting individual
2.	Time of incident.
3	Location of incident.
4.	Summary and nature of incident or potential threat
5.	Potential secondary threats (fire = smoke and water damage, etc.)
6	Personnel/employee status (evacuation implemented, casualties (injuries and/or deaths). deployment of personnel to relocation site(s). reporting instructions)
7.	Affected organization(s) status
8	Actions taken by affected organization(s) as of time of call
9.	Expected actions over next operational period.
10	Assessment of incident's impact (damage, if known).
11.	Name, location, and phone/pager number of IC (senior on-scene or first arriving DHHS official)
12	Assistance or potential assistance required. (IMS COOP team(s), supplies. transportation, technical specialists, services, facilities).
13.	Location or anticipated location and primary phone and fax numbers of the ECC or temporary ICP
14	Status of media interest
15	Next anticipated information update

Figure B-2. Incident Information Requirements

4 Readiness Levels

Readiness levels are provided to guide preparations and actions in the preincident phase of a critical incident or emergency Since events can occur with or without warning. preparations and actions may be accelerated or compressed, or executed concurrently

a. Description of Individual Actions

(1) For receipt of alert:

(a) Repeat the alert message verbatim to the caller. Receive a confirmation that the message is correct

(b) Do not disclose readiness measures to personnel without the a "need to know."

(2) Refer to your operating element's alert and notification roster. and call personnel according to the instructions

(a) If you cannot reach an individual, complete the calls that individual would have made Do not allow a break in the sequence of alert and notification

(b) Follow the alerting procedure exactly as outlined.

(c) Keep the personnel above you on the alert and notification roster aware of your whereabouts.

(d) Stand by. as directed. for further instructions

(e) Make arrangements for yours and your family's personal safety Make arrangements for possible deployment if you are a member of a Relocation Team or are designated as key personnel (See the Supplies. Services, and Equipment Appendix to the COOP annex for personal items and equipment recommendations)

(f) Participate in meetings, briefings. teleconferences, or other activities. as directed

(g) Report, as directed, to the designated site (ICP. ECC/EOC. Relocation Site, or Assembly Area/Rendezvous Point).

b **Description of Organizational Actions**

(1) Establish, when necessary, 24-hour continuous duty.

(2) Provide refresher training. where required, to staff, team members, or other key personnel on communications procedures. equipment, and plans, polices. and procedures.

(3) Arrange for parking permits and other support activities for affected personnel

(4) Maintain continuous monitoring of communications and event status

(5) Review adequacy of plans. procedures. and systems Identify any deficiencies and prepare an action plan (as required) to correct deficiencies

(6) Upon completion of steps. report status to appropriate senior managers/designated officials

c Watch

This is our normal or near normal preparedness posture Increased alert measures may be warranted when, for example. a hurricane approaches the coast of the United States, or when a general threat of terrorist activity is reported.

d Warning

When notification of an impending critical incident or emergency (e g., a law enforcement warning of a credible terrorism threat. or an imminent severe weather incident) is received by the OEP, central monitoring of official voice and record communications will be extended. This may entail monitoring on a 24-hour basis. OEP will conduct an internal review of DHHS emergency readiness plans and procedures, and direct actions in accordance with current plans, policies, and procedures This response will generally involve very few DHHS personnel, will have virtually no effect on DHHS activities, and will be carried out without public disclosure. Operating Division or Regional Office action may or may not be involved. DHHS personnel may or may not be involved in supporting increased alert activities under other Federal plans, such as the FRP.

e Special Instructions (Watch or Warning)

(1) A watch or warning condition may be accompanied by special instructions These may include.

(a) Continuous manning of Emergency Operating Centers (EOCs)

(b) Corrective action to overcome any deficiencies in DHHS emergency management and ER plans and procedures

(c) A 24-hour communications watch at each DHHS Regional Office and major headquarters office building, when directed by the Director. OEP

(d) Activation of EOCs, with staffing limited to ECs and Emergency Response and/or RT members required for maintenance of a 24-hour communications watch and performance of directed tasks Actions will be carried out with minimum disclosure

(e) **Maximum emergency readiness,** which may include:

1) All headquarters and regional EOCs manned by respective ERTs, and a 24-hour communications watch;

2) Preparation of predesignated or identified relocation sites for activation and reception of RT(s) and key personnel, functions, equipment. and vital records.

3) Immediate correction of deficiencies in plans and procedures,

4) Preparations by RTs and key personnel to relocate. and

5) Deployment of selected personnel or teams to relocation sites

(2) If a critical incident or emergency occurs during office hours, employees shall take immediate protective action and follow local emergency services and building security instructions. Members of ERTs and RT(s) will report. as directed, to the ICP. EOC/ECC, or a designated assembly/rendezvous area.

(3) Members of ERT(s) and RT(s) will deploy to relocation sites only upon receipt of specific instructions and authorization. Automatic relocation is not authorized

(4) Because of the multitude and dispersal of DHHS office locations. a single central transportation arrangement is not feasible.

(5) During Office Hours: When watch or warning has been called, team members having no regular means of transportation from the office to relocation sites should begin to make standby arrangements; then, if there should be an advanced alert and an order to relocate, transportation will be available.

(6) Nonoffice Hours: After-hours and weekend movement shall be by private automobile unless otherwise directed

5 Initial Actions

a Following the all-hazards watch and warning procedures outlined above, all available information on the event and its potential impact to DHHS operating elements should be collected

b Alerted IMS COOP team members. when directed. should respond immediately to the designated site with their copies of the EMERPS and those personal items and equipment identified in the Supplies, Services. and Equipment Appendix to this annex Not all personnel may be called on site until the situation warrants or, in the event the incident has occurred. until initial assessments have been completed, though all should be ready to respond without delay

c. While IMS COOP teams assemble and take necessary actions, all other personnel are directed to other facilities, assembly areas. or to their residences to await further instructions.

d. If time permits, designated personnel back up Automated Data Processing (ADP) equipment and databases and prepare communications, ADP, and other equipment and important records for relocation. These can include measures such as 'powering down' and protecting equipment with plastic sheeting, or removal from the threatened area.

e If full relocation is implemented, selected personnel may serve in a stay-behind, caretaker capacity to assist security personnel in shutting down equipment and securing headquarters facilities and equipment against loss or compromise Designated security personnel provide physical security for documents and equipment.

6 Establish (and Transfer, When Required) IMS Command

NOTE: Specific responsibilities of the IC or UCG are spelled out in the *Incident Management System (IMS) annex* to EMERPS.

a Command at an incident is initially established by the highest ranking on-scene or first-arriving DHHS authority. In the beginning. the IC may be able to handle everything alone: he or she is responsible for expanding the organizational structure from the top down and adding other functional areas. as needed If the incident involves multiple operating units. or the size and consequences of the event warrant, Unified Command may be established through a UCG

b The IC position may change several times as the "next ranking" DHHS staff member arrives on the scene. or as Unified Command is established. Transfer of command at an incident may take place for the following reasons

(1) A more qualified person assumes command.

(2) The incident situation changes over time to where a change of command is legally required, or it makes good management sense to make a transfer of command.

(3) Normal turnover of personnel on long or extended incidents

(4) Unified Command is established

c Transfer of command is accomplished by the following

(1) The DHHS official or UCG assuming command will communicate with the person presently in command by telephone. radio. or face to face Face

to face is preferred (Once a fixed ICP or ECC is established. a face-to-face meeting is carried out easily'.)

(2) The person being relieved will brief the new IC or UCG assuming command and review at least the following.

(a) The incident conditions (casualty count, priority, hazards. damage, etc.).

(b) The incident action plan.

(c) Progress toward achieving objectives.

(d) Safety considerations and concerns.

(e) Activities of DHHS operating units and personnel (including, if implemented? activation of and/or deployment to the relocation site), and

(f) Appraisal of the need for additional resources

(3) The operating unit and DHHS chain of command should be advised of the change in command and the identity of the new IC or UCG members

7 Stabilize the Situation

Any incident. large or small. requires a process to stabilize the incident These steps include

a Size up the situation.

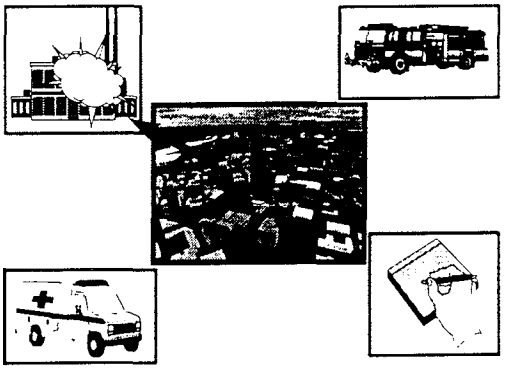
b Identify contingencies.

c Determine goals and objectives.

d Identify needed resources.

e Build a plan and a structure, and

f. Take action.



(1) Step 1. **Sizeup** involves assessing the situation as it **currently** exists

(a) The highest ranking on-scene or first-arriving DHHS official uses the "Six-Step" IMS Stabilization Process It includes problem identification and an assessment of the possible consequences Sizeup begins by asking:

1) What is the nature of the incident'?

2) What hazards are present?

a) What hazards exist for employees, response personnel, and the public'?

b) Do wa nings need to be issued')

c) Are there injured employees who need to be treated or assisted')

HSSD

d) Is evacuation required"

e) What portion of the facility(ies) and how large an area are affected?

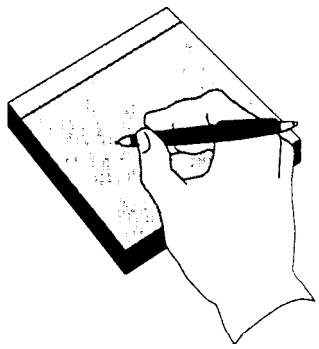
f) Has local law enforcement or other security or fire services personnel isolated the area'?

g) What locations would make a good staging area for Departmental and other resources supporting the Departmental response'?

h) What location would make a good site for an ICP/ECC, if required?

(b) Making a good assessment is critical to the subsequent decisions we will make. It is important that the first responding DHHS personnel constantly review the initial sizeup because of the dynamic nature of critical incidents.

(c) Sizeup can be substantially improved by stepping back from the incident-not only mentally, but also physically if possible Distancing oneself from the incident may help focus on the size up process and reduce the chances of becoming emotionally and/or physically involved in the rescue activities taking place

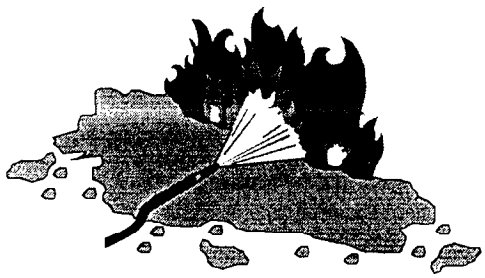


(2) Step 2. Identify Contingencies

(a) Identifying contingencies means thinking about what can happen. Because emergency events are unplanned and involve danger, risk and confusion; direction, control. and communications are inherently more difficult

1) Nothing is as easy as it looks,
2) Everything takes longer than you think it will. and
3) If anything can go wrong, it will

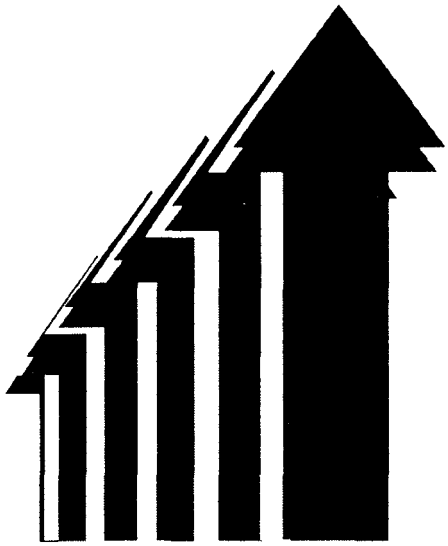
(b) It is important, therefore. that the on-scene or first-arriving DHHS official take into account not only the current situation but also any possible developments For example, a fire in a building may cause minor damage. but the use of significant quantities of water to douse the flames may cause significant damage to records and equipment



(c) The IC or UCG will ensure that the situation is monitored for changes throughout the its duration The situation, contingencies, and objectives may change. or resources may be unavailable The plan/structure should change to reflect these changes

(3) Step 3. Determine Goals and Objectives

(a) The third step is to decide what to do, based on the size up and the identified contingencies. Goals and objectives are established to ensure proper resource employment and completion of critical tasks.



1) Goals comprise the overall plan that will be used to control the emergency. Goals are broad in nature and are achieved by completion of objectives.

2) Objectives are specific operations that must be accomplished to achieve goals. They must be both specific and measurable One goal may have several objectives.

3) In setting goals and objectives. two things are important to remember.

a) The clock cannot be turned back. Injuries and damage that have occurred cannot be changed

b) However. further damage and personal suffering can be mitigated

(b) When the goals and objectives have been identified. they should be prioritized according to how important or critical they are

(4) Step 3. *Identify* Seeded Resources

The next step involves identifying what resources are needed to accomplish the objectives. and mobilizing them Section V, Resource Support. of Appendix 3 to Functional Annex B identifies suggested lists of materials. Every incident is different. and no list can be absolutely comprehensive The following questions guide determining resource needs.

(a) What resources (people and equipment) are needed to accomplish the objectives? (See Section V, Resource Support, of Appendix 3 to Functional Annex B for materials lists and team structure.)

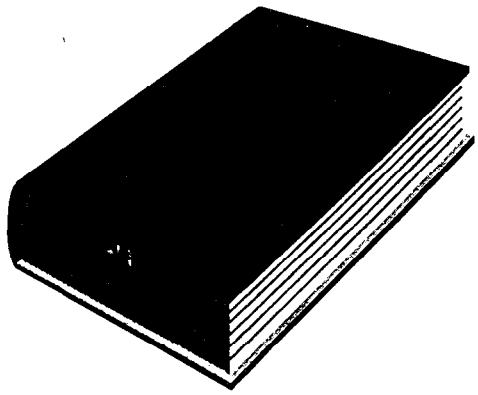
(b) Who will provide them?

(c) How long will it take them to arrive'?

(d) What other agencies need to be involved'?

(e) Are there special resource requirements for the incident'?

(5) Step 5. Build a Plan and a Structure



Develop a plan of action and a structure based on the objectives and needed resources (See the IMS Annex for details on Incident Action Plans.) For simple incidents. the action plan may be organized solely by the IC and may not need to be written down In more complex incidents. the action plan will be a written

document developed by the team/staff under the direction of the IC/UCG The incident plan generally identifies

(a) Responsibilities and tasks Who will do what (explained in detail in the IMS Annex to EMERPS)

(b) The chain of command Who will report to whom

(c) Coordination issues. How different groups will work together and communicate.

(6) Step 6. Take Action

(a) The final step is to take action on the plan. Incident actions to accomplish established objectives depend on the extent of damage to the site and the duration of the incident and its consequences.

1) Sites may be temporarily uninhabitable (e.g . due to a chemical spill). while the facility. equipment. and records are undamaged

2) Sites may be partially damaged, with some portions of the facility essentially unaffected by the event.

3) At the opposite end of the spectrum. the facility may be totally destroyed by the incident. forcing complete relocation

(b) The IC or UCG determine the timing and actions The decision to execute a specific step does not necessarily imply the execution of one or more subsequent steps (especially in a situation with advance warning) In such a case. the IC/UCG

may choose to reassess the situation before the execution of any subsequent step and to retain the option to terminate or reverse the process at any phase For incident stabilization. taking action may include

1) Mobilizing resources,

2) Setting up a staging/receiving area.

3) Assisting in isolation of the area,

4) Treating/assisting the injured.

5) Controlling entrance and exit,

6) Issuing warnings,

7) Initiating an evacuation.

8) Establishing liaison.

9) Initiating relocation by deploying key personnel and equipment to a relocation site,

10) Providing DHHS chain of command with status information as expeditiously as circumstances permit. and

11) A primary role of the on-scene or first arriving senior DHHS official is to

a) Provide a concise. complete. and accurate Brief Initial Report (BIR) to the operating unit and DHHS chain of command. A BIR should be provided on any and ail incidents involving a response to an emergency or critical incident. The following elements, in the order listed, should be included in the initial report of any and all incidents when such reports are required

b) Identification of reporting official.

c) Location of official in relation to the overall incident

d) Description of the situation found

e) Operating unit(s) actions at the incident site

f) Other activities at the incident site (fire. rescue. emergency medical services: facilities. bomb squad. etc)

g) Any requests for additional support

h) Identification of a staging area for DHHS or other support

i) Address the command function (whether current IC. command be transferred. Unified Command be established. etc.)

(c) These elements are illustrative and meant to convey the minimal essential information; reporting additional matters are at the discretion of the IC This may take place telephonically, in person, or during a situation briefing at a temporarily established ICP or ECC

(d) This initial information will be supplemented by regular status reports provided in accordance with IMS procedures (see the EMERPS IMS Annex). The IC/UCG will conduct regular meetings for teams and staff These may be as frequent as at the beginning and end of every workday to assign tasks and to assess the situation. A general meeting, or dissemination of update reports for all employees, should be held every day or every other day to give an update on salvage. recovery, and relocation operations.

(e) Use of a toll free number with recording. Worldwide Web (WWW) Department Home Page. or other media should be employed to disseminate information

8 Organize an Incident Command Post or Emergency Coordination Center

- Identify location for ICPIECC,
- Assemble team(s)/staff,
- Equip the ICPIECC,
- Provide goals and objectives,
- Monitor resource and work status and report progress, and
- Close ICP/ECC when direction and control functions are passed to operating unit heads.

After the stabilization process is completed, the IC or UCG. in consultation with each affected organizational element and DHHS leadership. will implement necessary actions During a relatively small incident, staff at the operator and operations levels of the operating unit is better trained and able to get the job done, however. as an emergency escalates to a major emergency. with a multi-operating unit and/or wide impact, some central coordination is needed. This "point of overlap" is usually the area of disconnect in incident management; establishing an ICP and/or coordination center is designed to accommodate the directing, organizing, coordinating, planning, communicating, and evaluating associated with the event

a. Temporary Incident Command Post

The IC or UCG may establish an ICP in a fixed, either temporary or permanent location from which initial incident operations are directed. There is only one ICP Ideally, the ICP houses the IC or UCG, the planning function, adequate communications, and operating unit representatives. If housing all persons at the ICP is impractical, separate areas may be designated The ICP may be run from a command vehicle, or in a building, and may ultimately transfer responsibilities to an ECC, or become the ECC if the situation warrants

b Emergency Coordination Center

(1) An ECC provides a central, stationary location where key personnel assist the incident command and control. It serves as the hub for management functions such as gathering. analyzing. and disseminating information Generally an ECC is established because of an incident's size or complexity. such as in a high-hazard operation or a long-term incident There should be only one ECC Having more than one adds confusion to those working in the ECC or responding to the incident

(a) The ECC should be isolated from the noise and confusion of the incident

(b) The ECC needs status boards and effective communications capability (see Section V. Resource Support, of Appendix 3 to Functional Annex B)

(c) A view of the incident is nice but not essential

(d) The ECC must be large enough so that sufficient working area is available for the potentially large number of individuals working there

(e) The ECC location should be announced as soon as possible so those individuals with certain functional assignments know where to report.

(2) Coordination Centers generally consist of a subset of current operational equipment. This may include communications (voice and data), a local area network (LAN): shared print capability; incoming and outgoing faxes; cabling; cubicles and conference/meeting areas; furnishings; lighting, desk supplies and paper forms; bathrooms and. if necessary, showers; monitors (news intercept); power generation; cameras (still and video); videocassette recorders (VCRs), wall boards (incident and resource status); scanners. radios, pagers and cellular phones. contact lists/phone books; and lists of disaster recovery service providers

(3) At the national level. the HHSIEOCINDMS Operating Center is located in the Parklawn Building in Rockville. MD. This facility has working space, telephones. conferencing capability. radio. facsimile (FAX). and other equipment ready for emergency' use

(4) In the regions where no standing ECC or EOC exists. an ICP/ECC should be established in predesignated conference rooms with telephones. reference materials. and space for coordinators and managers to function as a team In the event the ECC is made untenable by the emergency. regions should follow the previously referenced guidelines for ECC establishment and those in Section V. Resource Support. of Appendix 3 to Functional Annex B

(5) In the event the existing emergency coordination facilities are rendered unusable by the emergency or critical incident. the IC or UCG, in consultation with OEP and DHHS leadership, is responsible for designating an alternate ICP/ECC using the guidelines above, and those in Section V, Resource Support, of Appendix 3 to Functional Annex B.

9 Assemble Team(s)

- Alert team(s),
- Assemble team(s) and assign tasks,
- Monitor progress and worker safety, and
- Reassign personnel or dismiss teams as tasks are completed.

Plans provide procedures to organize resources to meet an emergency. Teams of trained personnel provide the means to execute the plan. Team organization identifies where personnel will be needed in order to implement the strategies that have been developed for response and recovery from the emergency. Teams are created in response to a specific function or task defined in the plan Teams are not static entities and may dissolve after performing their function(s) Teams may also change and their members may be shifted to other responsibilities as the response and relocation gives way to normalized operations and Stage 4. "Ending Relocation Site Operations "

a Alert Teams

Among the notifications made in response to the emergency, COOP plans must include measures to alert primary and alternate team members. A notional "notification tree" in the Basic Plan may be used as a guideline for alert and notification

b Assemble Teams and Assign Tasks

(1) Teams will be placed on alert. or directed to report to the ICP or ECC Team functional areas are activated as the situation warrants. Each of these can shrink or expand depending on the magnitude of the incident or operational necessity. Functional responsibilities for any positions that are not staffed remain with the IC/UCG The specific IMS organizational structure for any incident DHHS may face is based on the management needs of the incident Not all personnel may be called on site until initial assessments have been completed, though all should be ready to respond without delay. The IMS functional organization is depicted below.

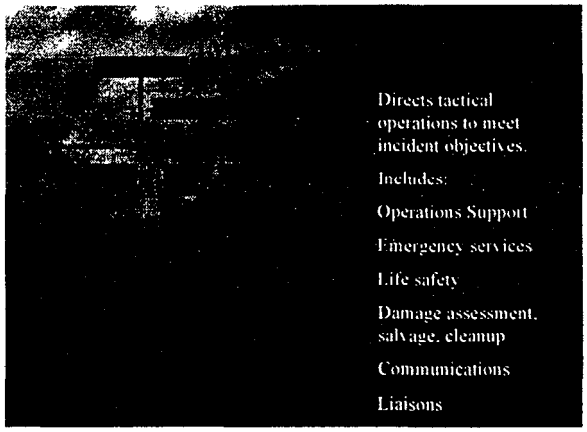
(2) In keeping with the principles of IMS, our response to an emergency will be functionally organized *IMS employs* ***a general and command staff concept*** As incidents increase in complexity and size. it becomes necessary for the IC/UCG to delegate major functional responsibilities to maintain an effective workload and span of control.

(3) Command: As outlined, the on-scene or first arriving senior DHHS official, a succeeding official, or a Unified Command Group Responsible for overall direction and control of the incident May include special and command staff positions responsible for public information, legal. etc

c General Staff

The four functions of the general staff (Operations. Planning and Information, Logistics, and Planning and Information) support the IC/UCG command function Each staff section can be further subdivided as required (e g., transportation. records management, services. contracting, etc)

(1) Operations.



Responsible for all initial response operations at the incident. Responsible for directing the tactical actions to meet incident objectives

(a) Established only when necessary-not to "overmanage" the incident

(b) Assists the IC/UCG when there are spans of control problems. the incident covers a large geographic area, or the incident is complex and the IC/UCG needs assistance in determining goals and objectives.

(c) Directs and coordinates "tactical" operations

(d) Develops operational plans

(e) Requests or seeks release of resources through the IC/UCG

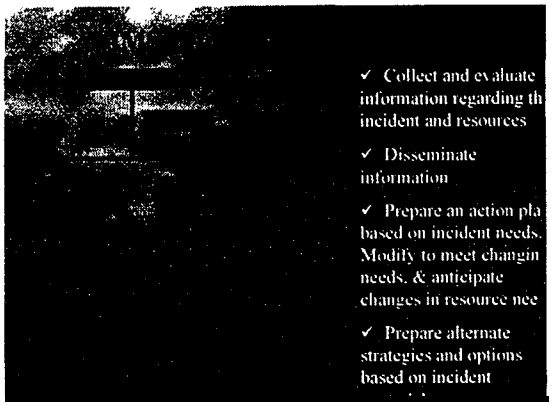
(f) Consults with the IC/UCG about the overall incident action plan

(g) Keeps the IC/UCG informed of situation and resource status

(h) Supervises the staging area manager

(2) Planning:

Responsible for collection, evaluation, dissemination. and use of information about incident development and the status of resources. Prepares the incident action plan and incident-related documentation.



(a) Collects information regarding the incident and resources.

(b) Evaluates information received from a variety of resources

(c) Disseminates information to the IC/UCG. operations, and incident personnel. as necessary

H58 D

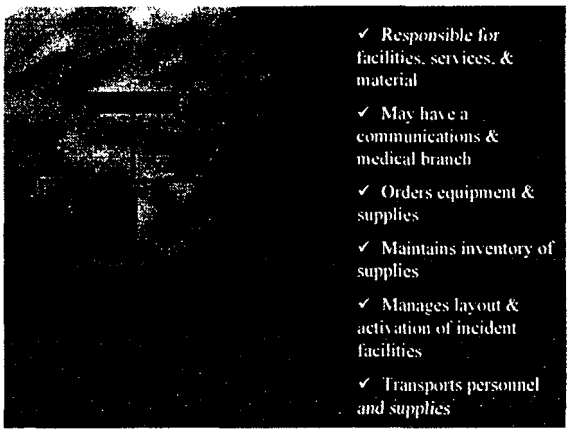
(d) Assists the IC/UCG in developing an effective incident action plan based on projected needs

(e) Modifies the plan to meet changing needs

(f) Anticipates changes in resource needs

(g) Prepares alternate strategies and tactical operations based on incident potential.

(3) Logistics:



Responsible for providing facilities. services, and materials for the incident The Logistics Section will

(a) Initiate requests for supplies. material, facilities, food, water. toilet facilities, and establish a first aid and rest area.

(b) Make arrangements for supplies and equipment (see Appendix 3 to Functional Annex B

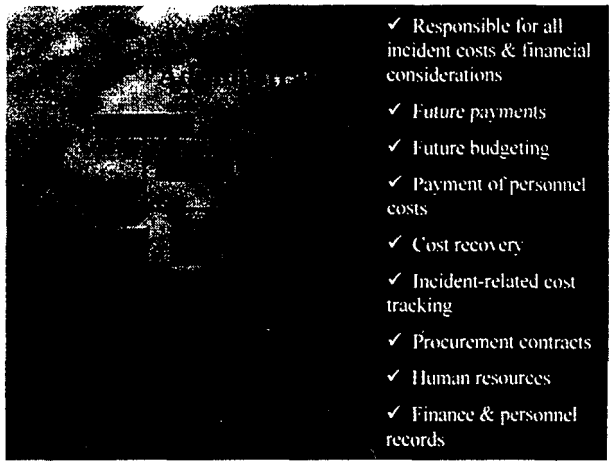
(c) Procure transportation and other support (material handling equipment. etc).

(d) Arrange delivery of supplies and material

HSA D

(e) Procure specialized support such as freezer company' facility space. refrigerated trucks. etc

(4) Finance/Administration



(a) Responsible for all financial considerations of the incident. keeping track of incident-related costs, human resources, personnel and equipment records, and administering procurement contracts associated with the emergency or incident.

1) Create hourly diary and file for events and costs.

2) Document meetings, conversations, telephone calls.

3) Record names and addresses of witnesses.

4) Gather loss and cost information from planning sessions

5) Gather emergency service invoices

6) Gather photographic inventories

7) Gather latest inventories.

8) Gather records-accounts receivable. payroll. etc

9) Commence establishing the scope of' loss

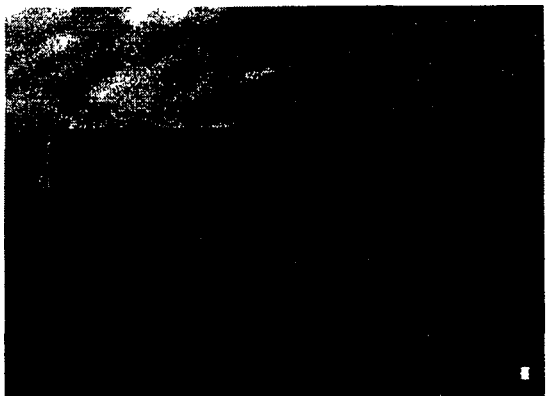
10) Notify appropriate contractors that bids are needed

(b) Functional areas are activated as the situation warrants Each of these can shrink or expand depending on the magnitude of the incident or operational necessity Functional responsibilities for any positions that are not staffed remain with the **IC/UCG.** The specific IMS organizational structure for any incident DHHS may face is based on the management needs of the incident.

d. Command Staff

(1) The Command Staff further assists the IC/UCG in maintaining an effective workload and span of control. It can include safety, liaison(s), public information, legal, and other necessary representation.

(2) The Command Staff works directly for the IC/UCG and has the authority to make decisions in order to reduce the IC/UCG's responsibilities.



(a) A Safety Officer may be appointed to monitor and assess safety hazards and unsafe situations to ensure personnel safety.

(b) Liaisons serve as the POC for assisting or coordinating agencies.

(c) The Public Information Officer (PIO). with the appropriate media release authority,. can establish an incident information center. arrange for

support for media representatives. coordinate all releases of significant information. prepare information summaries, and conduct tours of the emergency scene, as directed by the IC/UCG

e. COOP Teams

(1) For the purpose of DHHS COCP, two types of teams will be established under IMS to assist in developing, authoring, rehearsing COOP, and managing Stages 2 to 4 of the COOP. These include.

(a) Emergency Response Team, and

(b) Relocation Team.

(2) Primary and alternate members will be rostered for both; if additional teams are required, trained primary and alternate team members will form the core for establishing additional teams.

(3) The circumstances of each emergency and each operating element of the Department differ; these notional team structures outline potential functional requirements for COOP implementation.

f Emergency Response Team

This is the "home team." The ERT is responsible for conducting operations at the affected primary operations facility or facilities. In accordance with IMS principles, the team will.

(1) Organize. under the IMS. five functional areas

- Organize under IMS functions
- Support incident management
- Provide informational support and assistance to local responders
- Act as the Emergency Coordination Center staff
- Conduct damage assessment
- Oversee salvage, restoration and recovery at the affected facility
- Handle public information

(Command. Operations. Logistics. Finance/ Administration. and Information and Planning) (as required). and with a Command Staff (as required)

(2) Manage the emergency in support of the IC

(3) Provide informational support and assistance to local emergency responders, explaining security systems or structural features of the facility(ies)

(4) Act as the coordination center staff during the recovery process

(5) Determine the extent of damage (damage assessment).

(6) Conduct or oversee salvage, restoration. and recovery operations at the affected facility.

(7) Begin reconstruction of the damaged site.

(8) Provide emergency financing.

(9) Manage human resources. injuries, family assistance. time and attendance.

(10) Manage legal affairs

(11) Handle public information and the media.

(12) Provide administrative support

(13) Prov ide liaisons. as required

(13) Support the Relocation Team and relocation effort

g Relocation Team

(1) This is the "away team " The RT is responsible for preparation of, and deployment to the relocation site to initiate critical functions such as relocation of key staff, conduct of limited essential operations as possible. and preparation of relocation site(s) for follow-on personnel

- ↳ Organize under IMS functions
- ↳ Configure new location, establish infrastructure
- ↳ Relocate key staff
- ↳ Conduct limited essential operations
- ↳ Prepare relocation site for follow-on personnel
- ↳ Reestablishes voice and data networks

(a) Configures new location.

(b) Establishes infrastructure;

(c) Relocates key staff;

(d) Conducts limited essential functions,

(e) Prepares relocation site for receipt of follow-on personnel,

(f) Arranges travel, when required, for employees to the relocation site.

(g) Coordinates all relocated operating unit functions, and

(h) Reestablishes voice and data network

(2) The teams will be staffed with personnel from the appropriate operating unit or Departmental elements Where insufficient staffing exists within an operating unit to staff all function of the team(s), the team will be augmented with representatives from other DHHS operating units

(3) The COOP teams remain active until recovery is complete or termination is directed by the proper DHHS authority to ensure that the operating element will be ready in the event the situation changes.

10 Conduct Damage Assessment and Salvage and Recovery Operations

- Make entry into the facility,
- Assess and document the damage,
- Stabilize the environment,
- Make relocation decision,
- Conduct salvage and recovery, and
- Begin reconstruction of damaged primary operating facility.

An accurate assessment of the incident's consequences. both near- and long-term. serves as the basis for subsequent decision making. The assessment process should begin only after the emergency has been brought under control. The first concern should always be the safety of individuals The IC/UCG. or designated representatives, and operating unit or supporting specialists. as required. shall tour the building and make an initial evaluation of damage They w ill determine whether to activate COOP teams in total. or

selected functions. and/or if other people and resources should also be notified and/or activated

As a general policy. operating units should avoid using unit personnel for salvage/restoration work: however. the circumstances of the incident may require employment of unit personnel until contract support can be arranged.

All staff will be expected to participate in salvage and recovery work. performing under the direction of the IC/UCG, until such time as contract or other support can be obtained Employees and volunteers must take food/rest breaks every 2 hours. Employees and volunteers should not work more than 8 hours in a 24-hour period. unless deemed necessary by the Team Leader

a. Entry

(1) If necessary, the IC or Operations Section Chief will obtain permission to enter the affected building. They or their representatives will consult with the emergency responders (fire chief. police chief. structural engineers, etc) regarding facility stability and safety. In many cases, a fire or safety official must declare a building safe to reenter before assessments can begin If in doubt. do not enter the building Safety for people is the highest priority

(2) Salvage and recovery will be appropriate only after human needs are attended to and buildings are declared safe for entry A great deal of on-site. common sense decision making will have to be done. In some instances. it is likely salvage and recovery efforts may not be possible for several days or weeks

(3) In the event the critical incident or emergency stems from a criminal act. such as an act of terrorism. the incident site may constitute a crime scene A

"Golden Rule" for public safety activities at a crime scene states Nothing should be touched or removed from a crime scene unless (1) it is absolutely necessary for performance of your official duties (life safety), or (2) it is done with the concurrence of law enforcement personnel A second rule for public safety activities at a crime scene includes "doing your job using as few people entering the scene as possible "

(4) Personnel entering the affected facility should be provided with appropriate personal protection to ensure safety (e g . hard hats, respirators, gloves, etc)

(5) Assess damage to all areas of the facility as possible The worst damage may not be readily apparent Identify where water, fire, destruction. and contamination are worst.

(6) If the facility has been closed, or if access is restricted (e.g , if the incident site is a crime scene). the IC may need to provide a list of team members to emergency response officials (fire, law enforcement). As people arrive, they may be asked to show their driver's licenses and Departmental identification (ID). Access may be restricted to daylight hours or periods when electricity is available.

b Assessment

(1) *The IC or his or her designee and selected members of the COOP teams* will assess damage by inspecting affected areas to determine the nature and extent of damage The objective is to report to operating element or DHHS senior management. within 2 to 4 hours after access to the facility is permitted. on the extent of the damage to the affected site. and to make recommendations regarding possible reactivation and/or relocation

(2) This effort evaluates the initial status of the damaged functional area. and estimates both the time to reoccupy the facility and the salvageability of the remaining equipment This effort may draw members from facilities. property management, physical plant, operations. information technology and telecommunications, or other specialized areas depending on the nature of damage.

(a) Following emergency notifications, the IC has all participants report to the designated staging area. Participants are briefed on incident status and then make preparation for entry and damage assessment

(b) The IC requests permission site from Fire Department to enter (if required).

(c) The IC notifies team members, facilities, building/property management, vendors, or other specialists to report to the site and assist in the assessment process and cleanup.

(d) Do a walkthrough to get an overview of the problem (They will not attempt to start recovery operations)

(e) Participants review and assess the damage to the facility. All equipment and the extent of damage is listed, including damage to all support systems (power. air-conditionins (A/C), fire suppression, communications, etc.). Decisions are made as to what efforts can be initiated locally. what assistance is needed. and what services must be contracted out.

(f) Determine if operations can be continued at the site and plans started to repair damage and repair or replace unusable equipment

(g) Determine it‘ special recall of personnel is required

(h) Determine if the operation can be continued or restarted with the assistance of only certain functions of the recovery teams.

(i) Determine the anticipated duration of the disruption As a general guide. duration could be categorized as·

1) Less than 1 day
2) Two to 6 days
3) One week or more

(j) Determine if limited essential operations must be relocated (either through internal backup or mutual support. or to a relocation site)

(k) Determine if the affected primary operating facility is damaged or destroyed to the extent that the relocation site must be used and the full COOP initiated

(l) Obtain approval from the OPDIV/Department officials to initiate purchase orders and contract outside help

(m) Determine who is needed to help with recovery efforts and make the necessary calls

(n) Determine what Departmental supplies are needed and what items need to be purchased or procured from outside sources

(o) Determine if the damage to the facility and records. facilities. media. material. and equipment is of sufficient magnitude and potential duration to implement relocation

(P) Determine the extent of damage and which areas need immediate attention

(q) Determine if damaged records. equipment. etc . should be recovered or discarded.

(r) Decide if items to be saved should be packed for freezing, packed for removal to a drying area, or moved to a nearby drying area

(s) Assemble any additional supplies, and initiate procedures to acquire and/or purchase necessary items

(3) The IC/UCG, in consultation with the COOP teams, will decide on its plan of action and then notify senior management If the action plan requires assistance from outside of the Department. DHHS senior management will be notified of the need to conduct coordination with the other Federal agency or Department.

(4) The COOP teams' Operations Sections and heads/designated representatives of the affected operating units will develop an incident action plan based on established objectives and priorities

c. Document

The Operations Section will oversee documentation of damage with photographs and/or videotape and logs Responsible officials of affected operating units are

responsible for documentation and for tracking disposition of records. material. media. and equipment

d Stabilize Env ironment

(1) Measures to stabilize the environment commonly include.

(a) Reducing air temperature

1) In winter. turn off heat.
2) In summer, turn air-conditioning down to 65 °F

(b) Reduce humidity

1) Increase air circulation turn on blowers if outside air is not warmer or more humid than inside air and utilize portable fans and dehumidifiers. (Note: If necessary to open doors for air circulation, arrange for security of area/equipment.)

2) Eliminate source of water. Remove or pump out standing water

(c) Make emergency repairs to ensure personal safety inside facility.

(2) Be aware of potential electrical hazards.

(3) The Logistics and Operations Sections. and appropriate facilities/ building representatives will work to eliminate hazards and stabilize the environment. They will

(a) Give immediate attention to pumping out standing water and starting drying procedures Carpets, furniture. and equipment may need to be removed Mold and mildew will begin to grow in 48 hours.

(b) Turn on A/C and use fans and dehumidifiers to reduce humidity (if heating, ventilation, and air-conditioning (HVAC) systems are working).

(c) Clear debris from aisles and stairs. and install portable generators and lights (if required).

(d) Arrange for protection of undamaged records, material, and equipment by removal, covering with plastic, boarding up broken windows. or repairing damaged roofs

(e) Arrange for 24-hour security of the building and records. facilities, media. material, and equipment.

(f) Contact outside vendors for dehumidification and salvage work.

(4) Note: Any adjustment to the environmental control systems (other than turning the system off) requires contacting the property management company or facilities management The IC or Operations Section Chief should consult with them on

(a) Restoring electricity and water,
(b) Using emergency power for lighting.

(c) Getting HVAC working. and

(d) Pumping out standing water

(5) The IC or UCG will prepare for salvage and recovery operations at the primary operating facility by either contracting for salvage. recovery and cleanup. or by assembling and organizing the ERT. RT, and volunteers The Operations Section will

(a) Brief team members on priorities and objectives,

(b) Direct teams to carry out different recovery functions in accordance with the established incident objectives, and

(c) Maintain contact with designated team leaders.

e. Salvage and Recovery Staging Area

The Operations and Logistics Sections will designate and set up a staging area for removal of records, media, material, and equipment to the relocation site or to special handling facilities. and for receipt of supplies, materials, and assistance

(1) Area Salvage Coordinators

(a) Critical incidents and emergencies often result in damage to facilities. equipment. and records Salvage operations must be initiated as promptly as possible to prevent additional loss or damage from the consequences of the event The Operations Section and affected operating unit will appoint *Area Salvage Coordinators* who will initiate and manage salvage work As a general policy, operating units should avoid using unit personnel for salvage/restoration work. however. the circumstances of the incident may require employment of unit personnel until contract support can he arranged Use of outside

resources whenever possible affords employees with time to deal with the loss and worh on arrangements for transportation, to a relocation site. etc

(b) Area Salvage Coordinators will

1) Supervise contract cleaning crews to ensure vital and/or salvageable records, facilities, media, material, and equipment are not inadvertently disposed of during the cleaning process.

2) Supervise contract specialists to ensure identification and prioritization of vital and/or salvageable records, facilities, media, material. and equipment are not inadvertently disposed of during the cleaning process.

3) Work in the assigned area of their operating unit or. as directed, work in support of another Area Salvage Coordinator. A recorder (or assistant) should be appointed to maintain a log to document activity and track disposition of records, media, material, and equipment.

4) When necessary, assemble a work crew from operating unit personnel If additional personnel are required, requests will be forwarded to the ICP/ECC Supervise personnel and volunteers in the salvage and recovery of records. facilities. media. material. and equipment

5) Concentrate on practical salvage; work from best condition to worst.

6) Determine where materials can be packed, stored, or dried. Requirements exceeding available resources should be forwarded to the ICP/ECC.

7) Assemble supplies and set up work areas.

8) Protect property from further losses. Arrest ongoing damage, if possible, by covering and saving undamaged items first. Use makeshift covers such as lumber, pieces of building, etc., to protect records, material, facilities, media, and equipment.

9) Place records, material, facilities, media, and equipment on makeshift pallets to air and/or stay dry.

10) Provide security if possible-especially for sensitive or rare records, material, facilities, media, and equipment.

11) Keep track of what goes where.

12) When authorized, assist employees in recovery of personal belongings.

f **Relocation Decision**

(1) Based on the assessment of damage, the duration of the disruption, and the anticipated recovery time, the IC/UCG will recommend that operations resume from the primary operating facility, or that a phased relocation be implemented.

(2) Circumstances vary from emergency to emergency, and the "tolerance" of essential functions to disruption varies. The following broadly defined parameters provide a baseline for the relocation decision, and reflect the categories of emergencies outlined in this annex's Planning Assumptions.

(a) ***Minor Damage.*** Operations can be restarted in a short tune with no special recall of personnel. The event involves limited amounts of noncritical records, material, media, or equipment items that DHHS operating element staff and/or the property management or facilities Department can handle without outside assistance or expertise. The DHHS Operating Unit head/responsible official will manage the response and recovery from the incident. Full team activation will not be necessary. Anticipated downtime is less than 1 day. Damage could be to the facility, mechanical equipment, electrical equipment, or hardware or software.

(b) ***Moderate Damage.*** Selected teams will be called to direct restoration of normal operations at current site. Estimated downtime is 2 to 6 days. Major damage to hardware or facility. Moderate emergencies are those that involve substantial numbers of records, material, media, or equipment, or where physical damage is likely to be more severe, and where help or expertise from outside the DHHS Operating Unit is likely. Emergency notifications within the Operating Unit and Department will be followed as far as the DHHS Operating Unit head/responsible official feels is necessary. Assistance from the ERT may or may not be necessary.

(c) *Major Damage (Catastrophic).* Damage is extensive. Restoration will take upwards from 1 week. Facility could be completely destroyed. All teams will be called to begin a total implementation of the COOP. Major emergencies are those that involve significant numbers of records, facilities, media, material, and equipment where physical damage is severe, and where expertise and assistance outside the OPDIV and/ or Department will be required. Emergency notifications will be followed completely.

(d) **NOTE:** *Because of the varied nature of potential incidents and emergencies, these dejinitions are provided only as general guidelines.*

(3) Relocation Site Policies

(a) Once the decision to relocate is made, key officials and RTs, with necessary supporting personnel, may be directed to relocate to relocation site(s). This may occur prior to an event when notification of a critical incident (forewarning) is provided.

(b) Officials responsible for the DHHS assigned areas in relocation sites, or for entire relocation sites, shall maintain such areas in a condition of readiness for activation. A long lead time for preparation may not be assumed. The responsible officials shall perform the following functions:

1) Annual review and confirmation of tenancy or use arrangements and agreements.

2) Annual inventory of furniture, equipment, supplies, and vital operating records designated for emergency use.

3) Periodic testing of communications and other standby equipment or systems available to HHS.

4) Prompt correction of any deficiencies.

5) To help assure that each predesignated facility will accommodate and support its assigned relocation mission, the appropriate EC(s) shall perform an annual physical inspection and submit a written report to the responsible official of findings and recommendations for improvements. Information copies of all inspection reports shall be provided to OEP.

(4) Rendezvous Points

In the event that employees are unable to return to work because of the moderate or severe damage to their primary operating facility, they shall report to designated rendezvous points for assignment to a new duty station. Rendezvous points or assembly areas should be located, when possible, within no more than 20 minutes driving time of the primary operating facility.

11. Provide Public Information

d. Public Information

(1) Public relations is a sensitive area, and the greater the emergency, the greater the level of media interest. The media will go to the source that is most willing to furnish

information, whether that source is an authorized, authoritative source or not. While public affairs guidance from the Assistant Secretary for Public Affairs (ASPA) or other DHHS higher authority should be gained if time permits, local ground rules for media contact must also be established.

(2) One of the key questions the media always asks is the dollar value of damage or loss. Once given, such a figure can take on a life of its own-and has often been an embarrassment to the official or office that furnished it. Great care must be taken in responding to questions relating to the extent and number of personnel injured, or otherwise affected by the emergency, as well as the dollar value of loss.

(3) Emergencies and disasters generate keen public and news media interest. The Designated Official/Senior Official will designate a spokesperson PIO for the operating element to interface with the media, as required. DHHS guidance for dealing with the news media in the event of an emergency or disaster will be sought, and brought to the attention of all personnel.

(4) The PIO will assess the public relations scope of the emergency, in consultation with senior management if necessary, and determine the appropriate public relations course of action.

(5) The most difficult time to maintain good public relations is when there is an accident or emergency. Public relations planning is required so that when an emergency arises, inquiries from the news media, friends and relatives of staff, or the public can be handled effectively. While we cannot expect to turn a bad situation into a good one, we can assist in making sure facts presented to the public are accurate and as positive as possible, given the situation.

(6) It is in our best interest to cooperate with the media as much as possible, so that they will not be forced to resort to unreliable sources to get information that could be untrue and more damaging to the Department than the facts.

(7) Therefore, it is the policy of DHHS in time of emergency, to:

(a) In instances where media are notified immediately, due to fire department or police involvement, have the PIO proceed to the scene at once to gather initial facts. Emphasis must be placed upon getting pertinent information to the news media as quickly as possible.

(b) Have the ASPA serve as the authorized spokesperson for the Department. All public information must be coordinated and disseminated by his/her staff.

(c) Refrain from releasing information on personnel casualties until families have been notified. Once families have been notified, names of those personnel should be released quickly to alleviate the fears of relatives of others.

(d) Provide factual information to the press and authorities as quickly as facts have been verified, and use every means of communications available to offset rumors and misstatements.

(e) Avoid speculating on anything that is not positively verified, including cause of accident, damage estimates,

losses, etc., (fire officials normally release their own damage estimates).

(f) Emphasize positive steps taken by the Department to handle the emergency and its effects.

(g) Maintain a log of all incoming calls to ensure a quick response to media and other requests.

(h) Maintain a log of all information released to the media.

(i) Prepare news releases on a periodic basis for distribution to the local media list.

(j) If employee injuries or fatalities are involved, notify personnel representatives to send appropriate management personnel to the homes of the involved families. Personnel representatives will notify the PIO and staff as soon as families have been informed. This will permit the release of names and addresses of victims so that families of those not involved can be relieved of anxiety.

(k) Contact the public relations director(s) at the hospitals where injured have been taken to coordinate the release of information.

(l) Schedule periodic press conferences, taking into consideration DHHS management personnel who will be participating.

(m) If the media wants to photograph physical damage, the PIO will clear the request with the IC prior to approving the request. The PIO or representative will accompany all photographers.

(n) Coordinate followup news releases after the immediate emergency has passed to present the Department in as positive a light as possible. Possible topics could include:

1) What has been done to prevent recurrence of this type of emergency?

2) What are plans for reconstruction?

3) What has been done to express gratitude to the community for its help?

4) What has been done to help employees?

(o) Situations calling for implementation of emergency public information measures may include, but are not limited to:

1) Systems malfunctions disrupting the normal course of operations;

2) Accidents, particularly when personal injury results;

3) Natural disasters, such as fires, floods, or tornadoes;

4) Terrorist incidents; and

5) Civil disorders, such as riots and sabotage.

b. **Public Information Organization**

The ASPA, with representatives on the COOP teams, will act or direct a representative to the PI0 for the Department's response to the incident. In their absence the responsibility will revert to the IC or UCG representative on the scene.

The PIO will be the interface between DHHS and the public or news media. Copies of all status reports from the IC/UCG will be forwarded to the PIO for potential value in information distribution for good public relations.

(1) **Preparation Requirements**

(a) Existing relationships with local media will be utilized to notify the public of emergency and recovery status. The PIO will maintain up-to-date contact information for the media and other required parties.

(b) In cases where long-term media coverage is anticipated, a Press Room or Joint Information Center (JIC) will be established in the ICP or ECC, or in a facility in proximity to the incident site and the ICP/ECC. Support and services for the media will be provided by the PIO in consultation with the IC/UCG. Coordination with information technology or telecommunications providers for additional voice and data communication, if required, will also be made.

(c) **Transition Key Personnel, Critical Functions, Equipment, and Records to the Relocation Site(s), and prepare the Relocation Site(s) for Receipt of Follow-on Personnel**

1) Identify key personnel, critical functions, records, and equipment (from Stage 1).

2) Identify key personnel, critical functions, records, and equipment (from Stage 1).

3) Move essential personnel, functions, records, and equipment to the relocation site.

4) Conduct limited essential operations as soon as possible.

5) Prepare the relocation site(s) for receipt of follow-on personnel (see the Relocation Appendix to this annex).

6) Phase follow-on movements of functions, personnel, records, and equipment to the relocation site.

(d) In Stage 1 (Pre-Emergency) of the COOP, operating units must (1) determine the most critical functions that the agency must perform if it must operate under other than normal business conditions and in a facility other than its normal place of business; (2) identify which records are required to support those critical functions and the reconstitution of normal operations; (3) identify which personnel are essential to maintaining critical functions; and (4) determine what equipment is needed to support the relocated personnel and functions.

(e) The RT's task is to establish a functioning relocation site as quickly as possible. The goals are, as soon as practical, to provide capabilities for personnel to perform, or assist senior officials in performing, essential functions from the relocation site, and to prepare the site for receipt of follow-on personnel.

(f) The initial cadre (the RT) should be able to ensure performance of these functions:

1) Monitoring the situation;

2) Monitoring the status of personnel and resources;

3) Assessing the situation;

4) Reporting the status of relocation operations to other DHHS components;

5) Planning and scheduling relocation site operations;

6) Providing decision making and other office support to relocated key personnel;

7) Preparing and disseminating instructions, and reporting back, as required;

8) Monitoring DHHS field elements and other deployed personnel, as required; and

9) Terminating relocation site operations, when directed.

(2) Flyaway Kits

Each operating element has a relatively small number of references, databases, procedures guides, and the like that are used repetitively. Assembling these documents in a briefcase(s) or box(es) so that they could be carried out of the facility to a new site "on the way out" assists in resuming operations rapidly at a relocation site. Such documents and media should be identified in accordance with Department vital record and automation security procedures. Compiling a "flyaway kit" of essential documentation for key personnel speeds reestablishment of essential functions.

Stage 3

VII. STAGE 3

A. The first personnel designated to relocate in Stage 2 ensure the continuity of critical headquarters functions, and prepare the relocation site for receipt of the follow-on elements. Stage 3 then provides for a phased transfer of follow-on essential personnel, functions, equipment, and records.

B. Once a decision to execute a phased relocation of follow-on personnel, functions, equipment, and records has been made, personnel identified by management to go home pending recall are placed on administrative leave. If the situation is anticipated to continue past 5 days, such personnel will be notified that they are either to report to the relocation site or some other site, or be placed on furlough. Personnel put on furlough at this point may use earned annual leave to continue their pay until such time as it is exhausted, or they are notified to report to their original, or another designated, duty station.

C. If the decision is to execute full relocation, all personnel are expected to report to the relocation site. Those employees who are unable to relocate (single parents with small children who cannot make arrangements for child care, persons handicapped in a way that renders them unable to relocate, persons requiring medical attention that would be unavailable at their relocation site) will be placed on annual leave or leave without pay until they are notified to report to their original, or another designated, duty station.

D. The Designated Official/Senior Official at each site has jurisdiction over the activities conducted at the relocation facility. Relocated personnel begin operations at the relocation facility as quickly as possible.

E. Once operations are established at each relocation facility, the normal reporting process within the operating element begins. The Designated Official/Senior Official at each site is advised of all internal administrative or logistical matters at the facility and serves as the designated spokesperson for all communication and coordination between that facility, other relocation sites, and all external entities, unless otherwise directed.

Stage 4

VIII. STAGE 4

A. Ending Relocation Site Operations

1. In Stage 4 the organization and functions are being transitioned from the relocation site back to the organization's original home site, or to a new home site, as dictated by events and conditions.

2. The organizational objective is to continue essential operations during the relocation and to make the move as safely and efficiently as possible. Relocation considerations are documented in the Relocation Appendices to this annex.

3. Relocation operations will end when the Designated Official/Senior Official determines that:

a. The threat to the home site has ended, is not likely to recur, and the home site can be reoccupied; and

b. A new home site can be occupied.

4. The process of moving from the relocation site to the old or new home site is generally the same as that of moving to the home site, in that it is the objective to continue essential operations during the move, and to make the move as safely and cost effective as possible.

5. If the move from the relocation site is to a repaired or rebuilt original home site, then a number of considerations must be addressed, not the least of which is to ensure the State/local authorities requirements for safety, etc. (unless specifically exempted) have been met.

6. The specifics of the move are addressed in the Relocation Appendix to this annex.

IX. RESOURCE REQUIREMENTS

A. Logistics Support

1. In general, it is the policy of DHHS not to stockpile supplies and repair parts solely to support emergency operations.

2. If there is adequate warning, logistical support-supplies, tools, parts-may be moved to an alternate location; however, there are regulations and procedures that address removal of material (by type) from its assigned site. You should be familiar with these before identifying items to be moved. If there is no warning, logistics support may have to be

procured from operating element or Department assets, borrowed, or obtained by local purchase contract.

3. In an emergency necessitating relocation, if warning permits, the supplies and parts necessary to sustain the organization will be moved with the organization until it is estimated that resupply can be made through normal sources.

4. When the emergency is of a nature or duration that precludes the movement of supplies, repair parts, operating and maintenance manuals, tools, test equipment, etc., to the relocation site, supply and maintenance support will be obtained from Government sources if feasible (operating element, Department, or other Government assets), borrowed, or obtained by local purchase contract.

X. REFERENCES

See the EMERPS Basic Plan.

XI. TERMS AND DEFINITIONS

See Appendix B.

APPENDIX 1 TO FUNCTIONAL ANNEX B

PLANNING TOOL

THE EMERGENCY MANAGEMENT AND ENTERPRISE RESUMPTION PLANNING SYSTEM (EMERPS)

STAGE 1

Preemergency

Stage 1: Plans and preparation to implement the Continuity of Operations Plan (COOP) are made, maintained, and exercised.

I. INTRODUCTION

A. The message from those who have experienced emergencies is that, without a plan that provides for top down direction and coordination of recovery tasks, inefficiencies will result that extend the length and severity of the disruption to our enterprise. Most emergencies happen without warning; those with a plan stand a significantly greater chance of successfully weathering the event.

B. Since every operating unit of the Department is different, plans will need to reflect the difference in core functions, relocation sites, recovery timeframes, and so forth. A well developed plan will provide the guidance required during a climate of crisis, and will

ensure vital issues will not be overlooked. When designed properly, the plan will guide even inexperienced employees in helping the organization recover.

C. COOP should be a concern for the entire organization. It is not limited to the emergency coordinator, or computer network management. All Department managers must be responsible for the development of the COOP procedure: within their own areas as well as participating in the recovery plan for other elements of the Department, and the Department as a whole. Each organization must be able to activate its own portion of the plan in concert with the overall Departmental effort. Support functions such as building maintenance and facilities need to be part of the plan.

II. CONTINUITY OF OPERATIONS PLAN DEVELOPMENT

A. This appendix offers an overview of Stage 1 COOP planning. It:

1. Outlines a COOP planning process;

2. Provides a suggested format for a system of plans, including a basic plan, functional annexes, and incident or hazard-specific appendices;

3. Details key steps in COOP planning; and

4. Details components of the suggested plan format.

B. COOP requires extensive, detailed planning that is inappropriate for inclusion in total in this appendix. Both Government and private sector courses, publications, and programs are available to provide indepth plan development and COOP training.

C. This appendix incorporates current planning doctrine from both the Federal Emergency Management Agency (FEMA) and the General Services Administration (GSA)

regarding emergency and COOP plan development. References are cited in the EMERPS Basic Plan.

III. PLANNING GUIDANCE

A. The process of developing a COOP includes organizing the project, conducting a risk assessment and impact analysis, developing a recovery strategy, documenting the plan, and training and testing the plan.

B. There are a variety of documents that are key to developing a COOP. They start with the Occupant Emergency Plan (OEP) developed for each operating unit site, and may also include those national-level plans, such as the Federal Response Plan (FRP) or National Oil and Hazardous Substances Contingency Plan (NCP) for which your operating element has some role and responsibility. Each has a different focus and purpose. The OEP focuses on protecting life and property in federally occupied space under certain emergency conditions, and directs the formation of an occupant emergency organization to perform emergency tasks. The FRP, NCP, and other comparable plans focus on our role in providing support for domestic emergency operations in which there is Federal involvement. Additionally, the national plans put DHHS in the broad context of Federal response to a major disaster or emergency, while the OEP is concerned with getting DHHS employees and customers safely out of a facility under a variety of threat conditions.

C. Because these two entities are different in their scope and purpose, there necessarily needs to be a bridge or some means to bring them together in a productive working relationship. A system of plans, which includes generic components that provide universally applicable guidance, and specific components that identify each DHHS operating element's roles and responsibilities under a variety of emergency conditions, serves that purpose.

D. The COOP focuses on each element's responsibility to continue essential functions, both internal and external, under emergency conditions, including emergency

relocation to an alternate site. For the purposes of this appendix, a "function" includes the task and necessary personnel, equipment, and records to perform the task.

E. The classified Continuity of Government (COG) annex focuses on DHHS' roles and responsibilities in a comprehensive and effective program designed to ensure survival of our constitutional form of Government and continuity of our essential Governmental functions in the face of a catastrophic emergency.

F. The Emergency Management annex identifies DHHS' roles and responsibilities under the various national response plans, and our own statutory authorities, to save lives and prevent human suffering. Much has changed since the Department first published the Emergency Management and Operations Plan in 1983. The FRP, published in 1992; the 1996 Federal Radiological Emergency Response Plan (FRERP); and the 1996 Terrorism Incident Annex to the FRP have dramatically improved the capability of the Federal Government to respond to the nation's needs in time of crisis.

G. The following discussion centers on drafting a COOP, and provides an overview of the process; however, this guidance may be applied to any emergency planning process, and the broad range of threats and hazards that threaten our enterprise. Individual site-specific plans will necessarily require tailoring to fit the organizational mission and needs.

1. Project Organization

a. The drafting of a system of emergency plans is best accomplished by capitalizing on the wide array of talents and disciplines available within your and other DHHS operating elements. To orchestrate this undertaking, project organization includes the following steps.

(1) Establish and form a planning team,

(2) Establish authority,

(3) Issue a mission statement,

(4) Establish a schedule and a budget, and

(5) Conduct risk and impact analysis.

b. The team members typically develop, implement, exercise, evaluate, and maintain the plan, and execute it if necessary. In the case of co-located operating elements, such as those located in the Parklawn Complex, planning team members may be drawn from elements outside of the element drafting the plan. For example, if the Program Support Center (PSC) provides information technology support to the operating element(s), then participation by PSC in the planning process is important to ensure all aspects have been addressed. This requirement must be coordinated with PSC, or the other elements from which you must draw specialized support.

c. Having planners from the areas for which the plans are being developed is important in two ways. Much of the success in getting resumption plans developed in a timely fashion comes from the relationship that the planners have with the functional areas. Not only are the planners familiar with the areas, which gives them knowledge of the key people and resources, but the areas are familiar with them. With this relationship already established, the development of the plans goes more smoothly and quickly. Members identified to fulfill roles on the COOP teams (Emergency Response Team (ERT) and Relocation Team (RT)) should participate in the planning process to ensure familiarity with, and input to, the planning process.

d. The support from DHHS and operating element senior management is critical both at the beginning of the development effort, and through to completion. Periodic status updates should be provided to keep management abreast of plan development. Tests (exercises) should incorporate management representatives to ensure their familiarity with the plan, gain input, and sustain the commitment of all parties to plan completion.

e. Once the planning team is formed, the organization is in place, and the planners trained, the scope of our project (time and resources) should be gauged. For large

operating divisions, it may take a long-term effort to address all the necessary planning requirements. Before actually beginning development of the plans, a work plan and objectives should be established to focus attention on, and prioritize critical tasks.

2. Risk and Impact Analysis

The planning team starts the detailed COOP planning process by considering any possible threat to the organization's ability to maintain continuous direction and control over DHHS resources. Risk and impact analysis conducted during development of the COOP identifies a range of scenarios for which the plan could be implemented. (An extract from the GSA's COOP Student Manual and other sources is included following this COOP development overview to provide an overview of risk management.)

3. Risk Assessment

a. A risk assessment identifies the type of disasters a specific DHHS location is likely to endure. Risk management encompasses the entire spectrum of activities (including physical, technical, and administrative controls and procedures) that leads to cost-effective security solutions. Risk management seeks to achieve the most effective safeguards against critical incidents or emergencies. Managing risks means not only identifying threats, but also determining their impact and severity. Some threats require extensive controls while others require few.

b. Analyzing risks includes steps to:

(1) Analyze capabilities and hazards;
(2) Review internal plans and policies;
(3) Meet with outside groups;
(4) Identify codes and regulations;
(5) Identify critical functions, positions, records, and equipment;

(6) Identify internal resources and capabilities;

(7) Identify external resources;

(8) Conduct a vulnerability analysis;

(9) List potential emergencies;

(10) Estimate probability; and

(11) Assess impact.

4. Impact Analysis

a. Impact analysis involves determining the cost of not being able to transact essential functions. This includes tangible (cost of damage, loss of function) and intangible (negative publicity, erosion of image) costs. Assets may be categorized as tangible and intangible and include the following:

Tangible	Intangible
Facilities	Reputation
Personnel	Motivation
Hardware	Morale
Software	Goodwill
Supplies	opportunity
Documentation	
Data	

b. It may be fairly straightforward or more abstract; in any event, the intent is not to get an exact answer, but to identify what is critical to keeping the organization in operation. This step will determine the breadth of the COOP. Overprotecting may cost unnecessary resources, while underprotecting may give a false sense of security. Impact analysis must:

(1) Assess the potential human impact;

(2) Assess the potential enterprise (i.e., business) impact on:

(a) Personnel,
(b) Physical plant/facilities/property,
(c) Vital records,
(d) Essential functions,
(e) Software integrity,
(f) Teleprocessing network security,
(g) Database integrity and security,
(h) PC and microcomputer security,
(i) Sensitive information protection,
(j) Classified information protection,

(3) Assess internal and external resources;
(4) Add/sum the above; and
(5) Develop a recovery strategy.

5. **Recovery Strategy**

a. Once the tangible and intangible impacts have been determined, decisions can be made regarding a strategy of how best to provide support following a disruption. There are a variety of strategies available to planners and management-options are limited only by your imagination and the available resources. Required decisions include taking measures to:

(1) Determine feasible safeguards:

(a) Consider several options,
(b) Eliminate those not meeting COOP requirements,
(c) Avoid overly sophisticated or costly solutions, and
(d) Mix to ensure the most cost-effective solution.

(2) Conduct tradeoff analysis:

(a) Security requirements,
(b) Cost/benefit,
(c) Availability,
(d) Reliability, and
(e) Maintainability.

(3) Select best recovery measures:

(a) Maximum protection/minimum cost, and
(b) The best solutions are often a combination of high and low cost alternatives supported by strong administrative controls.

(4) Conduct feasibility study:

(a) Preliminary cost/benefit analysis
(b) Impact on current organization

b. The relocation appendix to this annex outlines options when emergencies impose a disruption, or cause relocation of key personnel and essential DHHS functions, equipment, and records. Strategic approaches can, for example, include leveraging

internal resources, investing in mutual support agreements, utilizing outsourcing of tasks during disruptions, shifting recovery responsibility to service providers, or shifting workloads to other locations. Described briefly, some options include the following.

(1) Temporarily assigning the responsibility to perform your functions to another component of your organization, or another DHHS organization, which performs those functions using its personnel and equipment, or augmented by your personnel until your operational element is able to resume operations.

(2) Using another site's facilities during periods when they are not normally utilized until your primary operating facilities can be restored or a permanent facility placed into operation.

(3) Performing your essential functions from a "relocation site" (a site equipped to support designated operations) until routine operations from the primary operating site or a permanent site may be resumed. Relocation site options generally include :

(a) "Hot site. " A prepared site with work areas, hardware, telecommunications, technical support personnel, etc.

(b) "Cold site." An empty facility or lease space that is ready for occupancy. Immediately after the emergency work areas are established, and equipment, materials, and support services are shipped to the location.

(c) "Internal backup. " Another DHHS facility in another region is used to provide services on an emergency basis. This requires coordination and possible displacement of personnel at the backup site.

(d) "Mutual support agreement." An agreement with another agency or Department to share resources after an emergency.

(e) A combination of these options. For example, in an internal backup or mutual support agreement, while essential functions and processes are assumed and continued for a short time by another agency or Department, the operating unit may deploy key personnel and records to a relocation site, and procure and configure replacement hardware. When the relocation site becomes operational, functions can be "cut over" from the internal or mutually supporting agency or department to the relocation site. As soon as the operating unit's permanent facility is available, the functions, personnel, equipment, and records would be moved from the operational cold site to the member's own facility.

6. Documentation

A well thought out, documented plan will provide step-by-step directions on implementing the COOP strategy. It will prescribe functional teams of employees who are trained in the skills necessary to initiate and execute the COOP. Documenting the plan ensures that a critical component is not overlooked in the high stress situation of a recovery effort. It is important to ensure that change control procedures are in effect to keep the plan up to date. Appendix 2 of Functional Annex B provides a useful format for compiling an enterprise resumption, or COOP.

a. Develop:

(1) The plan,
(2) Executive summary,
(3) Emergency management elements,
(4) Emergency response procedures, and
(5) Supporting documents;

b. Identify challenges and prioritize activities;
c. Write the plan;
d. Continue to coordinate with outside agencies;
e. Maintain contact with your other organizational elements;
f. Review and revise;
g. Seek final approval;

(1) Management Review,
(2) Senior management approval, and
(3) Appropriate budget.

h. Distribute the plan;
i. Implement the plan; and
j. Integrate into operations.

7. Exercises and Training

Training the team members is essential to ensure each person knows their roles and responsibilities. Alternate members should also be included in the training.

- Establish a training schedule,
- Plan and conduct training activities for team(s), and
- Conduct employee training.

The plan must be tested on a regular basis. A simulated emergency will exercise the plan, identify any weaknesses, and demonstrate interaction between the participants. A critique of the plan's performance will normally result in minor modifications to the plan. Few COOPs operate perfectly as initially designed. Since adjustments and corrections are needed regularly, recovery plans should be easy to update and change, and periodic testing contributes to maintaining currency.

- Conduct periodic tests, and
- Evaluate and modify the plan.

All DHHS operating units will establish an internal exercise and training program to ensure personnel are familiar with the contents of the COOP, and are able to perform their essential functions from their relocation site.

a. Awareness Training

(1) Enterprisewide training is an important part of an ongoing, proactive approach to preparedness. The most important audiences for COOP training include :

(a) Senior management,

(b) Functional management and employees involved in COOP and implementation, and

(c) The general employee population.

(2) Senior management, functional management, and employees should be given awareness-level training through both the development and sustainment phases of COOP.

(3) As the project is initiated, senior management should be briefed on the project work plan, and a commitment should be sought to support the planning process with the necessary resources. Senior management should also be apprised of the following.

(a) The results of risk and impact analysis should be provided in a summary briefing to educate management on the methodology and standards employed.

(b) Plan development and implementation to identify approaches and to gain buy-in to enforce standards across the organization.

(c) Test (exercise), evaluate, and maintain the plan in order to gain support, and to ensure procedures and standards are followed.

(4) Employee awareness training is an important tool in ensuring that all understand their roles and responsibilities. While the intent is not to make every employee a professional COOP planner, raising the level of awareness and knowledge provides "lifeguards" for the safety of employees and the continuity of HHS operations. Awareness training also provides a sense of security and assurance. This knowledge instills a sense of comfort in employees by identifying the commitment of senior management to their protection, and the preservation of the assets of the organization. Since most response to emergencies start with individual responses, employee awareness ensures successful implementation of emergency procedures, and implementation of the COOP. Benefits include :

(a) Employee awareness of their roles and responsibilities.

(b) Awareness of emergency response procedures, thereby mitigating losses in a critical incident or emergency.

(c) Awareness of prior preparations required of employees to prevent or mitigate losses, especially when advance warning may be available for certain events.

(d) Knowledge of what to do prior to, during, and after an event, based on the policies, procedures, plans, and preparations contained in the written plan

(e) Knowledge of the personal and professional impact of disasters and procedures to avoid or mitigate such impacts.

(f) Identification of personal and professional roles in implementation of the COOP.

(g) Training for employees should begin with new employee orientation. General employee population awareness training should emphasize HHS' commitment to their protection and COOP's role to that end. The training should avoid overburdening employees with details, but instead should emphasize examples, and a generic overview of the plan. Areas worthy of detailed review include alert and notification, evacuation procedures, reporting of critical incidents or emergencies, and management of bomb threats and security matters.

(h) Training for selected and potential team members in the Incident Management System (IMS) and its application in the Operating Unit's COOP.

Suggested Training Contents
Mission and Objectives of the COOP.
A review of COOP policies.
A review of critical functions.
Brief examples or case studies.
Pamphlets, brochures, or other handouts concerning both personal security and safety measures, and those that apply to family disaster safety, handling of bomb or security threats, etc.
Emergency procedures in the COOP.
Evacuation procedures and routes.
Employee information (how to obtain information regarding an incident that occurs during nonoffice hours .)
Assistance available to families.
Critical incident stress assistance available to employees.
A wallet-sized card with emergency contact employee information phone numbers and names of points of contact (POCs), and other vital information necessary in an emergency, such as the Six-Step Process outlined in Stage 2 of the HHS COOP annex.

(5) Training for selected and potential COOP team members should begin from the very beginning of their involvement in the COOP process. The training should emphasize:

(a) A general overview of COOP and how it relates to and augments Department policies and procedures, objectives, and assumptions in COOP.

(b) An overview of policies and regulations pertinent to the organization, guidelines, and a conceptual understanding of essential functions, supporting equipment, and vital record requirements.

(c) Specific procedural aspects of developing and implementing the COOP. Team member training must review in detail the roles and responsibilities of members.

(6) This approach provides a clear understanding of COOP terminology, utilization of an accepted methodology, and enforcement of documentation standards throughout the organization.

(7) FEMA's Emergency Management Institute (EMI) offers training in Incident Command either in residence, at your site, or through distance learning or independent study. GSA Interagency Training Center offers continuity of operations training either in residence or at your site. Both provide the means to train team members and selected key personnel in plan development, plan implementation, and incident management.

b. Role and Responsibility Training

(1) After the plan is developed and implemented, personnel assigned to COOP teams need training with regard to the provisions in the COOP. Although these team members have developed and implemented the plan, training is essential in order to gain an understanding of the plan from several perspectives. These include:

(a) The team members' specific roles and responsibilities in the execution of the plan;

(b) Description and location of relocation site (if predesignated), including unclassified map showing route(s) to relocation sites, if applicable;

(c) Alerting diagrams and instructions on use;

(d) Individual team assignment and copy of official order appointing member to a team;

(e) Guidance on personal and family preparedness and protection planning;

(f) Interdependencies of individual operating elements' plans;

(g) Ongoing evaluation and maintenance of the COOP; and

(h) A thorough understanding of procedures, including notification procedures.

(2) Cross-training is encouraged (i.e., joint visits by team members to relocation sites, training among teams from different operating elements, etc.). Individual visits to relocation sites are recommended. Arrangements should be made through OEP. Assignees unable or unwilling to participate in group orientation activities should be contacted and a personal briefing offered.

(3) Emergency management and enterprise resumption planners and officials shall maintain current records of briefings, orientation, and participation of emergency management and enterprise resumption team members. As a minimum, these records shall include the name, organization, and date of visit or other training activity for each member.

8. Sustainment Training and Exercises

a. While COOP team members may have been well trained in their roles and responsibilities in the plan, exercising the plan is essential for verification and validation of

the strategies and procedures. Periodic exercises, including a written scenario, guidelines for employee actions, and an evaluation program ensure we maintain and sustain a capability to respond. Exercises that test the entire COOP can involve either end-to-end execution of the plan, or partial execution of the plan in a series of smaller exercises.

b. DHHS operating elements will conduct a semiannual COOP workshop, or a scenario-based seminar or tabletop exercise. This event will include the following objectives:

(1) Familiarize new team members and key personnel with the COOP;

(2) Review the adequacy of the plan; and

(3) Review the currency of the plan in the light of organizational, personnel, or equipment changes in the proceeding period.

c. **Tabletop** Exercises, Seminars, and Workshops. These exercise events should involve participants from your operating element and from other elements of the Department that supports your operating element, such as facilities, security, information technology services, etc. It is highly desirable that representatives from the local response community, such as county emergency management, fire, emergency medical, or police be invited to ensure their roles in the process are understood, and measures are taken to ensure they are familiar with the operating element's plan for response and facilities. A variety of scenarios or topics may be used, and are only limited by your imagination and resources.

d. The facilitated sessions during tabletop exercises are intended to stimulate discussion of various predetermined COOP issues concerning a hypothetical situation (the scenario, such as a fire, flood, power outage, etc.). Participants typically receive scenario briefings and respond as they would in an actual critical incident or emergency. Tabletops

generally last from ½ to as much as 3 (8-hour) days. Each tabletop is generally expected to require one facilitator and recorder for each group of 20 participants. Facilitators can be drawn from your own resources, or from external sources.

e. Tabletop exercise documentation usually includes:

(1) A participant handbook, including scenario, issues lists, expected outcomes and administrative details;

(2) A facilitator guide including issues lists and expected outcomes with more detailed information than that found in the participant handbook;

(3) Evaluation/results summary: summarizes discussion paths, decisions taken, results, and recommendations; and

(4) Presentation materials: transparencies or computer-aided graphics; talking points to explain the seminars and the evaluation report.

f. Seminars differ from tabletops and workshops in that no facilitators are required, and no breakout sessions occur. Seminars may involve up to 200 participants. They require an agenda and minutes.

g. Workshops involve briefings similar to those occurring at seminars, and use facilitated breakout sessions where preestablished COOP topics are discussed. Plenum sessions, where results from breakout sessions are presented to all participants, usually occur at the close of workshops. A workshop usually requires one facilitator and one recorder per 20 to 25 participants. Workshop results are generally captured in a summary of breakout session discussions and plenum session results.

TESTS AND EXERCISES

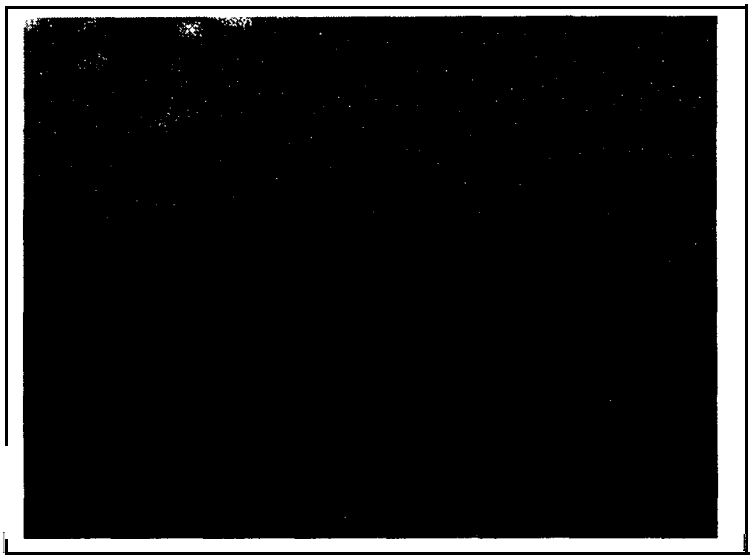
At least annually, COOP s will be tested by exercising COOP team(s) and selected key personnel. The test will include a written scenario to evaluate the teams' and selected key personnel's ability to execute Stages 2 and 3 of COOP operations. The test will include alert, notification and assembly of teams, designation of an incident commander or unified command group, and selected Stage 2 and 3 activities.

This test may be accomplished over the course of the year by taking a component, or "slice" of the COOP team(s) and selected key personnel and testing each component or "slice" on a quarterly basis.

h. **Note:** Assistance in planning and conducting exercises and training is available through the OEP).

9. Team Organization and Staffing

a. Any emergency requires an organized system of roles, responsibilities, and standard operating procedures to manage and direct operations. The DHHS will employ the IMS to organize our response to emergencies. The structure and staffing of COOP teams will be based on proven IMS practices. During Stage 1 (Preemergency), planning will include the assignment of personnel to primary and alternate positions for each of the team positions/sections on both the Command and General staffs. The IMS is described in the IMS Annex to EMERPS.



b. Team membership is designed according to functional needs and required technical or specialized expertise. Team activation, either by function or in toto, is based on the incident's needs.

c. Teams are functionally organized to meet the requirements of COOP planning and execution. The General Staff consists of the Operations, Logistics, Information and Planning, and Finance/Administration sections. The Command Staff consists of advisors to the Incident Commander (IC) such as Public Information, Safety, Legal, liaisons, and others, as required.

d. The team members typically develop, implement, exercise, evaluate, and maintain the plan, and execute it, if necessary. In the case of collocated operating elements, such as those located in the Parklawn Complex, team members may be drawn from elements outside of the element drafting the plan. For example, if the Program Support Center (PSC) provides information technology support to the operating element(s), then positions such as the systems coordinator(s) may be drawn from PSC. This requirement must be coordinated with PSC, or the other elements from which you must draw specialized support. If you are writing a common plan for collocated elements, then this support can serve multiple needs. Assignments to teams should identify alternates in the event the primary member is unavailable.

e. Organizing for operations at both the primary operating facility and the relocation site(s) should take place during Stage 1 (the preemergency stage). The Stage 2 section of the COOP annex describes two teams, an ERT and an RT. The ERT serves as the "home" team, and operates in support of the IC at the affected facility. When relocation of a portion or all of an operating element is required, the RT operates as the "away" team; deploys to the relocation site(s) to transfer key personnel, critical functions, records, equipment, and supplies; and prepares the relocation site for Stage 3, "Relocation Site Operations." The needs and circumstances of the incident dictate which teams, and what functions on the teams are activated. During planning, primary and alternate team member

assignments should be applied against notional sections/positions (e.g , "Operations, System Coordinator, " "Logistics, Transportation Coordinator"). This ensures that the function is filled with qualified personnel but reliance is not vested in one person. Key personnel assignments should be identified on rosters and in COOP documentation.

f. Stage 2 of this annex, "Containment and Relocation," outlines recommended team structure by function.

10. Essential Resources

In developing a COOP, it is obvious resources play an important part and place. Resources essential to developing and executing a successful COOP are human, financial, equipment and supplies, and communications/data.

a. Human Resources

In terms of qualifying, prioritizing, or determining importance, there is no essential resource more important than human resources, both in numbers and qualifications of personnel to plan, organize, manage, and execute the COOP. Personnel should be thoroughly familiar with their organization's COOP, what part they play in it, and what is expected of them if the COOP is executed.

b. Financial Resources

How to fund efforts associated with a COOP is always an ongoing dilemma. The best approach to economical application of resources stems from a thorough risk analysis and comprehensive planning effort. As vulnerabilities are noted, the planning effort should identify countermeasures to prevent or mitigate damage or loss from a critical incident or emergency. Countermeasures can be no cost, as in the case of a procedural change, such as updating alert and notification rosters. A low cost option might be to take

personal computers (PCs) that have been replaced by acquisition of upgraded PCs, install overdrive processors and Random Access Memory (RAM) upgrades, and then transfer them in your designated relocation site. More expensive measures may include leasing an alternate operating facility, or installing backup power generation or uninterruptible power supplies (UPSs). As a general rule, the preferred process would be to first implement no cost, then low cost, and finally higher cost countermeasures. Remember that training and exercises should be reflected in budget requirements.

11. Equipment and Supplies

a. The first step in identifying what equipment and supplies are essential is to conduct an indepth inventory of organization assets. To facilitate ease of determining what meets the criteria for being classified as "essential," develop a matrix and record each item as the inventory is taken. A rating of each piece of equipment is developed using two factors: how essential the item is and how easily it can be repaired or replaced. The two ratings are combined to determine how critical the item is overall. The essential rating is determined using the following ratings.

(1) Absolutely Essential-Equipment is required for operations. Mission cannot be accomplished without it.

(2) Essential to the Process-Equipment that would stop the mission if it were not available. An alternative process with lower capability could be substituted.

(3) Essential for Normal Operations-Equipment that is required for normal operations. Effectiveness is affected by how many are available.

(4) Nonessential-Equipment used only occasionally.

b. The repair or replacement rating is determined using the following ratings.

(1) Impossible-Items not repairable without new parts and outside assistance.

(2) Difficult-Items that would work better if sent to an outside vendor for repair or replacement.

(3) Possible-Items that could be repaired using on-site personnel and materials with little difficulty.

(4) Easy-Items for which many spares or substitute parts are commonly available on and off site. Repairable with resources on hand.

12. Communications and Data

a. Communications and data are critical factors in achieving accuracy in gauging an event's magnitude. There are multiple important aspects of communications. One is the technical ability to communicate quickly, effectively, and efficiently. This translates into having designated electronic mechanisms (telephone, radio, etc.) available, on frequencies that are compatible, and with backup equipment that can be activated if the primary systems fail. The ability to communicate over a wide area locally, as well as nationally, is very important. The element of your organization, or an external organization that provides your voice and data communications, should be included in your COOP planning effort and, obviously, in the staffing of your COOP teams.

b. The key issue is the adequacy of all communications resources to meet your operating element's need to communicate with.

(1) Organizational staff,

(2) Subordinate and superior headquarters and staffs,

(3) Other Federal organizations,

(4) State and local government/emergency/organizations/Emergency Operations Centers (EOCs),

(5) Resources for replacement/repair of system components, and

(6) Operators/skilled personnel.

c. For most operating elements, ready access to local telephone systems (called the Public Switched network (PSN) and the Federal Telecommunications System (FTS) will be the key to successful communications. Other DHHS organizations, however, may have additional communications resources, such as high frequency (HF) radios, cellular phones, or local or wide area networks (LANs/WANs) that can be used in an emergency.

d. All available communications resources that are, or can be, made available for use in an emergency should be included in the planning effort:

(1) HF radio;

(2) Cellular phones, Government, and staff owned;

(3) Amateur radios owned and operated by the staff;

(4) Telegraph,

(5) PSN and FTS phones; and

(6) Secure means of communications Secure telephone Unit-Third Generation (STU-IIIs), secure E-mail, etc.).

e. Warning of the disaster may make it possible to acquire, alert, and test secondary communications media for use in a situation in which there is the probability that electronic power and communications will be lost.

f. It should be noted that cellular phones, whether Government or private, can provide a valuable alternative to normal phones in an emergency; however, during the aftermath of a large-scale disaster, cellular phones may be viable only for the initial postdisaster period. As soon as users (the public) found them to be an alternative source, the networks were saturated and not generally useful.

g. Accessing the local or State Emergency Broadcast System (EBS) should be included. It would be helpful to make contact with the officials managing these communications systems, since there are criteria that must be met before your operating element's message may be transmitted.

h. Priorities for communications during an emergency are:

(1) DHHS operating element personnel who may be threatened by the emergency,

(2) DHHS chain of command,

(3) Emergency response organizations, and

(4) Other.

i. When routine communications media are available, the primary communications media during an emergency in which the PSN and FTS are operational are, in order:

(1) Public telephone,
(2) FTS, and
(3) Other, as available.

j. When routine communications are not available, primary communications media during an emergency in which the PSN and FTS are not operational are, in order:

(1) What is available, e.g., HF radio; and
(2) Other.

k. Access to the EBS. Access to the local EBS may be generally gained by contacting the county emergency manager or county communications manager for an announcement to be made over local radio stations. Access to the State EBS may generally be gained by contacting the State emergency manager or the State communications director/manager.

13. Identifying Critical and Essential Functions

a. Critical functions include all information, processes, activities, equipment, and personnel needed to continue operations should a portion or all of an operating unit facility be destroyed or become inaccessible. Some guidance is already available to determine what might constitute essential or critical functions. Executive Order (EO) 12656, "Assignment of Emergency Preparedness Responsibilities," issued in November 1988, defines particular functions certain agencies must continue under a national security emergency declared by the President. This EO assigns FEMA lead responsibility in providing guidance to Federal agencies about emergency preparedness. FEMA has supplemented the requirements outlined in EO 12656 by issuing Federal Planning Circulars (FPCs) 60 and 64. These FPCs outline which Federal agencies have the most critical and the least critical functions in terms of a declared national security emergency.

b. Determining which of your organization's operations must be continued is one of the most difficult continuity of operations planning tasks. The first reaction to such a requirement is to assume that every operation is essential, or it would not be staffed and funded. But further analysis usually reveals that some operations are, in fact, more essential to the organization's core reasons for existing than others, particularly during a time of emergency. This statement is obviously more relevant to large, multi-function organizations than to smaller organizations, but it is basically true for either. Carefully identifying essential functions assists in other COOP planning activities, such as identifying key personnel and equipment. (Always keep in mind the general rule of thumb that "20 percent of an organization's systems are responsible for 80 percent of production.")

c. There are general guidelines to identify essential, noninterruptible, and first priority functions and activities that the Department (headquarters and regional offices) must perform in the immediate aftermath of a critical incident or emergency. They include:

(1) Performance of actions required by Presidential EOs, standby emergency action documents, and Federal or Departmental emergency management or enterprise resumption plans.

(2) Reporting operational capability to the next higher level.

(3) Provision of advice and consultation on emergency health and human services policy formulation.

(4) Preparation and promulgation of information concerning public health and human services.

(5) Other activities, as assigned or requested by higher authority.

d. **Note:** During some emergencies, particularly a major disaster, DHHS typically provides support to the response agencies, as well as to clients. This focus should not obscure the requirement to support essential internal operations, e.g., continuity of our critical functions, time and attendance, hardware and software security, and the like.

e. To determine the mission critical functions of the organization, each unit or Department should document all important functions performed within that Department. This information can be gathered by **documenting daily activities** within each Department. An analysis over a period 2 weeks to 1 month can indicate the principal functions performed inside and outside the operating element, and assist in identifying the necessary systems (voice, data) and equipment requirements for the element to conduct its daily operations satisfactorily. In order to assess the criticality of these functions, review the following questions.

(1) What specialized equipment is used and how is it used?

(2) What are the lead times for replacing critical equipment?

(3) If the online systems were not available, how could the operating element continue to function?

(4) What is the minimum staff and floor space needed to continue operations at another facility?

(5) What special forms and supplies are needed for each area?

(6) What communication devices (telephones, faxes, data transmission equipment) would be necessary to continue operations?

(7) Which employees have been trained to carry out several jobs or responsibilities and could fill positions of key employees if they were unavailable?

f. The following factors also assist in considering and identifying essential functions.

(1) Identify what functions would be essential if only a portion (e.g., one-quarter) of your operating unit was able to relocate and establish essential functions. Consider what operations must be supported first, and what could be phased over time.

(2) Identify what functions would be essential if the period of dislocation is relatively short, and conversely, if the period is lengthy.

(3) Identify what functions would be essential for an emergency that affects only your operating unit and support for its usual client population, and those that would be essential for an event with a broader impact (regional, national).

(4) Identify what functions would be essential for an emergency such as a declared disaster that involves your organization in providing support to agencies responding to the disaster, such as DHHS' responsibilities under the FRP or other national plans.

(5) Review existing plans. By extension, snow emergency and other plans that address personnel also address essential operations.

g. Criticality

(1) The object of COOP planning is to restore critical functions as rapidly as possible, and less essential functions within a longer, phased timeframe. The initial risk assessment of essential functions that support your operating element's administration should assign a criticality category to each function. This risk category identifies functions that have the highest priority and must be restored within an established standard following disabling of a functional area. Specifically, each function should be evaluated and allocated a place in one of four suggested risk categories.

(a) Category I-Critical Functions: a disruption in service of less than 1 day would seriously jeopardize the operation of the organization.

(b) Category II-Essential Functions: a disruption in service exceeding 1 day would seriously jeopardize the operation of the organization.

(c) Category III-Necessary Functions: a disruption in service exceeding 1 week would seriously jeopardize the operation of the organization.

(d) Category IV-Desirable Functions: this information would be convenient to have, but would not detract seriously from the operating capabilities if it were missing.

(2) **Note:** Category IV functions are functions considered to be of administrative importance, but due to their nature, and the frequency with which they are performed, they can be suspended for the duration of the emergency.

(3) Once the mission critical functions have been documented, it is important to determine the impact of an outage to the critical systems and functions. The impact depends on the type of outage that occurs and the time that lapses before normal operations can be resumed. From a systems perspective, outages are typically the result of the following:

Cause	Percentage
Power Related	31
Storm Damage	20
Flood and Burst Pipes	16
Fires and Bombings	13
Earthquake	9
Hardware	7
Other	4

(4) Other considerations may include the timing of the disaster and the potential impact on the organization (e.g., end of month). The following information should be carefully analyzed.

(a) Function Description:

1) Size of the function (e.g., total value/revenue, number of employees, number of customers, etc.);

2) Main purpose of the function (e.g., operational, policy, administrative, customer service, support function, ancillary function, etc.); and

3) Critical operations performed.

(b) Critical Systems:

1) Systems relied on to perform the critical functions,

2) System or application interfaces, and

3) Maximum outage acceptable for the system considering both the user perspective and technical perspective.

(c) Dependencies:

1) Dependencies between functions,
2) Dependencies between Departments,

3) Dependencies between systems, and
4) Dependencies between applications.

(d) Flow Impact:

1) Loss of controls,
2) Major bottlenecks, and
3) Potential stop in the workflow.

(e) Future Function Changes:

1) Systems,
2) Procedures,
3) Operations,
4) Personnel,
5) Organization, and
6) Other changes.

(f) Impact of Not Functioning/Processing:

1) Impact on customer service,
2) Noncompliance with regulations,
3) Noncompliance with existing agreements/contracts,
4) Increase in personnel requirements,
5) Loss of revenue,
6) Loss of business,
7) Increased operating costs,
8) Penalties,
9) Loss of management capability,
10) Loss of goodwill,
11) Negative media coverage,
12) Legal actions, and
13) Other impacts.

(g) Redundancy Levels:

1) Existing and required redundancy ievels throughout the organization to accommodate critical systems and functions,

2) Hardware/equipment,

3) Information.

4) Personnel, and

5) Services.

(h) Alternate functioning/processing methods:

1) Alternate methods for the critical functions in the event of a disruption or systems outage,

2) Impact of using the alternate method, and

3) Alternate functioning/processing costs.

14. Contingency Planning Costs

The results of the impact analysis, and especially the costs associated with not being able to perform critical and essential functions, should be compared to the costs related to the contingency planning effort, including:

a. Plan development costs,
b. Testing,
c. Temporary location costs,
d. Administrative time,
e. Management time,
f. Redundancy costs,
g. Prevention/preparation costs,
h. PC business recovery software costs (if automated planning tools are required/desired),
i. Subscription fees for recovery processing,
j. Declaration fees,
k. Usage fees,
l. Consulting costs,
m. Relocation costs,
n. Travel expenses,
o. Unplanned expenses, and
p. Other contingency planning costs.

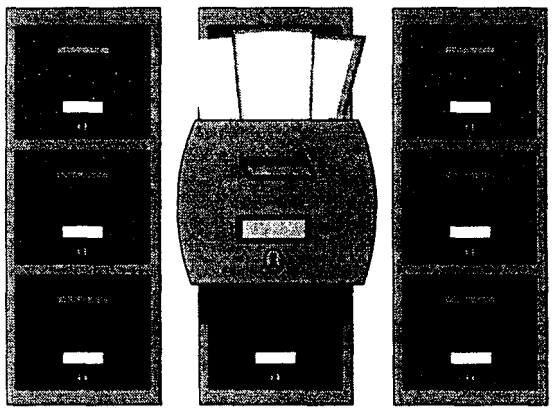
15. Essential Positions

Having identified essential functions, the next step is to identify essential positions. Essential positions will be considered in relationship to the functions and phases of COOP operations and as members of teams. Again, essential positions should be viewed in light of the factors used to identify essential functions.

16. Essential Equipment

Having identified essential functions and positions, the final step is to identify essential equipment. This process must include a review of the procedures required to move it under both warning and no warning scenarios.

a. Vital Records



(1) Having identified essential functions, positions and equipment, the next step is identifying vital records. The National Archives and Records Administration (NARA) provides Federal Government oversight and policy for records management. NARA regulation (36 Code of Federal Regulations (CFR) 1236, "Management of Vital Records") prescribes policies and procedures for establishing a program for the identification and protection of vital records. Vital records are those records needed by agencies for continuity of operations before, during, and after emergencies, and those records needed to protect the legal and financial rights of the Government and persons affected by Government activities. The records may be maintained on a variety of media including paper, magnetic tape or disk, photographic film, and microfilm. The management of vital records is part of an agency's COOP. Health and Human Services (HHS) Information Resources Management

Service (IRMS) Circular 2 1, "Records Management," provides policies, procedures, and responsibilities for records management within HHS. HHS IRMS Circular 22, "Electronic Records Management," provides policies, procedures, and responsibilities for electronic records management within HHS.

(2) Operating units must exercise caution in designating records as vital and in conducting the vital records inventory. A review of the available literature suggests that from 1 to 7 percent of an agency's records may be vital records.

(3) Records likely to be selected as vital include the following.

(a) Emergency operating records:

1) Emergency plans and directive(s), or similar authorizing issuances, including information needed to operate the emergency coordination center and its equipment, and records recovery plans and procedures.

2) Orders of succession.

3) Delegations of authority.

4) Emergency staffing assignments, including lists of personnel, along with their addresses and telephone numbers (and comparable data on their alternates), assigned to the emergency coordination center, to other emergency duties, or authorized access to damaged facilities to assess the extent of such damage.

5) Emergency coordination center access credentials and classified or restricted access container documentation (as required).

6) Building plans and building systems operations manuals for all agency facilities.

7) Equipment inventories for all agency facilities.

8) Files plans describing the records series and electronic information.

9) Systems maintained at official filing stations for all agency facilities.

(b) Vital records inventories.

(c) Copies of agency program records (whatever the media) needed to carry out continuing, critical functions.

(d) System documentation for any electronic information systems designated as emergency operating records.

b. Classified Documents and Equipment

Procedures for protecting or moving classified documents and materials (e.g., communications security equipment) are spelled out in a number of regulations. The plans and procedures identified are detailed and specific; the requirement is to integrate them into the overall COOP at every phase of COOP operations.

17. Relocation Sites

a. If your operating element's mission requires identification of a relocation site to continue operations in the event of a disaster or emergency, your plan should include a section on selecting a relocation site. Relocation Planning Appendix 2 to the COOP Functional Annex B outlines planning for relocation site requirements. These elements could be considered minimum considerations.

(1) **Staff to be Relocated:** The site must be able to accommodate your essential personnel and functions (identified as outlined in previous sections).

(2) Structural Requirements: Special requirements such as unusual floor loadings, electrical or air-conditioning requirements.

(3) Parking: Use of a relocation site may cause a significant change in your staffs commuting patterns, and the site may need more parking space than is currently required.

(4) Sanitary Facilities/Facilities for the Handicapped: Some Federally owned facilities that come readily to mind as potential relocation sites, such as National Guard or Reserve armories, may lack adequate facilities for female and handicapped employees.

(5) **Commute:** The site selected should be within a reasonable commuting distance; if it is not, then special arrangements may be necessary to address travel, overnight accommodations, etc. Busing may be an alternative.

(6) Public Transportation: Can the site be reached by public transportation? Can it be reached by busing from the nearest convenient public stop'?

(7) Safety: Is the site in an area that your employees consider safe to walk to from public transportation; from the parking lot or to work late at night?

(8) Medical Support: Does the site have adequate medical support available on site or at a reasonable distance?

b. If a site is found that meets these criteria, the planning team can institute procedures to establish an agreement with the site/facility ownership.

c. If your organization's relocation would be a major undertaking, considering its complexity, size, etc. An evaluation should be made if moving in phases would be appropriate or advantageous; if so, a separate section should cover the direction and control of the phases. This process is outlined in more detail in Stage 2 of the COOP annex.

d. Communication is vital to any organization and becomes even more so in the event of a disaster or emergency necessitating relocation. A section on communication must be included in the COOP and address the adequacy of all communication resources needed at the relocation site to meet the organization mission and communicate with staff, Federal organizations, State and local governments, contractors, and other skilled personnel.

e. A section on logistical support must be included in the COOP. A thorough review and understanding of agency policy, regulations, and procedures on what logistical support may be prepositioned at, or moved to the relocation site, should be conducted by the planning team.

f. Training in and exercises of the COOP, as outlined in this appendix, should be discussed in a separate section. Assistance in planning and conducting training and exercises may be obtained from the OEP.

g. There is no doubt in the event a disaster or emergency affects your operating element or site, whether a relocation is required or not, it will attract media attention. This a sensitive subject and must be treated with care and diplomacy, especially in responding to inquiries by the media. The COOP must be as specific as possible in establishing procedures on this subject and public affairs (PA)/public information should be covered in a separate section.

h. Keeping the plan current based on changing conditions is very important. As a minimum, an annual review should be conducted to ensure it is up to date. Procedures for maintaining currency should be described in a separate section.

18. **Summary**

a. The reincident, deliberate planning process leverages time to create an environment where actions are formulated in advance to mitigate potential critical incidents or emergencies. The process projects planners into an imaginary pseudocrisis, allowing them to plan as if the emergency had already occurred. Time is on the side of deliberate planners as crucial details are discovered and illuminated, thereby acquainting participants with what they may face during the crisis.

b. Plans serve as benchmarks. Plans prepared under this process are benchmarks for training, exercises, and fiscal planning. These plans identify the types of resources, agreements, or understandings that may be required to support emergency or enterprise resumption operations nationally.

c. Plans provide the framework for our response. Plans prepared in this way provide a framework for action during an actual crisis. Time constraints in planning are leveraged through the use of deliberate plans created when time was not the enemy. They become the template-and through modification or tailoring can be rapidly executed.

d. The following sections provide:

(1) Detailed guidance regarding your assessment of risk and the impact hazards may pose to your operating element, and

(2) A recommended format for a COOP.

Iv. RISK

"Take calculated risks. That is quite different from being rash. "

-- Patton

Risk Definition

A measure of the potential for loss of assets resulting from uncertain harmful events.

(This overview of risk management includes an extract from GSA's "COOP/Planning for Business Resumption in the Event of an Emergency. ")

Risk Management Definition

The total processes of identifying, controlling, and eliminating or minimizing uncertain events that may effect system resources. The term applies to the overall methodology for addressing this problem. It includes Risk Management Analysis, Preventive and Recovery Measures Design, Management Decisions, COOP Implementation, and overall COOP Ongoing Planning.

Risk can be defined through a simple formula: **R** = **P** x C, where R = Risk, P = probability, and C = consequences. Risk is, in essence, the degree of potential loss. Risk management, in turn, is "the element of management science that deals with the identification, measurement, and control of uncertain events. " It is the term applied to the overall methodology for addressing this problem. This definition of risk management is general in nature, but states the problem adequately. Risk management is a management problem that concerns the organization as a whole. Management's responsibility to ensure performance of the enterprise's mission is threatened by the possibility of uncertain events ranging from a natural disaster, to vandalism, to sophisticated attempts to create chaos. The task of identifying and understanding these threats, and then doing something about them, is what risk management is all about. The magnitude of the risk management problem is imposing. The systems to be protected are so complex and threatened by so many potential sources of harm that it is impossible to address every potential problem; therefore, an orderly approach to dealing with the problem is needed.

A. Functions of Risk Management

The risk management function covers the entire spectrum from initial identification of risk potential; to implementation of safeguards to protect your functions, systems, and assets; to providing for the recovery of the functions and systems in the event an emergency does occur.

B. Concepts of Risk Management

As an activity becomes increasingly dependent upon its organizational resources for supporting mission accomplishment, the need to protect these resources takes on a greater degree of importance. Uncertain events must be accounted for to ensure that the organization's mission is neither interrupted nor interfered with at any time. Management must know and understand the kinds of events that could happen, the vulnerability of the mission to an occurrence of those events, and the overall uncertainty faced by the mission when operating in the threat environment. When these things are known, steps can be taken to anticipate occurrences of uncertain events and minimize their harmful effects. Attention to this management responsibility has become both more important and more difficult in light of recent events, such as the bombing of the World Trade Center and the Federal Building in Oklahoma City. Each Government activity must implement a risk management program to determine how much protection is required, how much exists, and what enhancements, if any, must be made to reduce vulnerability.

C. Risk Analysis

Risk Analysis Definition

The quantitative or qualitative measure of the potential for losses resulting from the occurrence of uncertain events in some undefined future time period.

Risk analysis is a function of risk management.

1. Risk analysis is the cornerstone of risk management. It is the systematic investigation of the environment for the purpose of identifying threat potential and then quantifying the impact of that potential on the organization and/or its mission. Risk analysis identifies not only critical assets that must be protected, but considers the environment in which these assets are stored and employed. The ultimate purpose of risk analysis is to help in the selection of cost-effective safeguards that will reduce risks to an acceptable level. The result produced by analysis is a statement of what risk situations exist and what potential for harm they impose. When properly done, this statement can be used to generate a series of functional requirements for COOP protection. All locations and facilities should be included in the risk assessment. The analysis should provide for the "worst case" situation: destruction of the main facility. Rather than attempting to determine the exact probabilities of each disaster, a general relational rating system of high, medium, and low can be used to initially identify the threats with the highest probability.

2. The risk analysis should also determine the rate of occurrence of each type of potential threat on various operating elements and functions within the organization. (Likelihood of occurrence is a measure of the probability of a loss causing event.) It is important to assess the impacts and consequences resulting from the loss of:

a. Information,
b. Services,
c. Technology,
d. Facilities,
e. Personnel, and
f. External service providers.

Components of Risk Analysis

Risk Analysis-Threat Analysis-Vulnerability Analysis-Risk Assessment

3. Risk is a quantitative measure of the potential for losses resulting from the occurrence of uncertain events in a time period. The function of risk analysis is to calculate and report that expected loss at a detail level. A loss occurs when a threat agent acts upon a function or system in some harmful way. The threat agent acts as a result of some opportunity. That opportunity is called the **vulnerability,** and must be accounted for in trying to assess the level of risk. Essential elements contributing to the level of risk are threat, vulnerability, and impact on the function or assets. The primary function of risk analysis is to quantify these risk components: (1) threat analysis, (2) vulnerability analysis, and (3) risk assessment.

4. Risk analysis has become a specialized discipline of its own. The task of looking at all aspects of an organization with assurance that all sources of harm have been accounted for is formidable. A complex enterprise, such as an information processing activity, often includes vast operations, large numbers of users, diverse types of hardware, and communications facilities. The potential sources of harm are endless, including such things as power failure, fire, flood, disgruntled employees, system failure, etc.

5. To meet these varied threats, risk analysis technology has continued to evolve. There are many risk analysis techniques being used today, all of which have value. A variety of nonautomated and automated risk analysis tools are currently in use. Current techniques for measuring loss include orders of magnitude estimates, fuzzy reasoning, event trees, fault trees, and others. Some automated risk analysis tools use traditional quantitative approaches for calculating risks. These result in an approximation of loss (i.e., Annual Loss Expectancy (ALE)) by estimating the frequency of occurrence of events that affect assets and the impact (in dollars) that could result. Often exact impact and frequency cannot be specified and an "orders of magnitude approach" for estimating the consequences of undesirable events

is employed. The qualitative approach takes the point of view that many potential losses are intangible; therefore, risks cannot be easily specified monetarily. Risk results are characterized verbally (i.e., "no risk" to "very high risk").

6. All methodologies attempt to provide a systematic approach to the problem. Most methods of risk analysis initially require the identification and valuation of assets. From this point on, they proceed differently in developing loss computations (quantitative expresses results in monetary or economic terms, while others make use of qualitative expressions or approximations). Based on the outcome of the analysis, a series of countermeasures or safeguards are selected that are both cost effective and that provide the necessary level of protection. One common approach is based upon quantifying the probability of occurrence of harmful events, quantifying the loss to be sustained by an occurrence, and calculating an **ALE.** When dollar values can be attached to the threatening elements of the environment, it is possible to make straightforward decisions about which risks deserve the greatest attention and how much can be practically spent to respond to the various identified threats. A common measure of risk is the ALE. This expresses loss based upon an average yearly dollar value. ALE is normally computed using a multiplication function where risk is equal to the probability of occurrence of a harmful event in 1 year times the dollar value of each event occurrence. Where data are available to support this estimate, it is quite useful. It tells how much an organization can expect to lose. It arranges individual risk in priority ranked by dollar value, and indicates the amount of money that can be justified for the construction of defenses to lower or minimize the risk.

ALE = Frequency of occurrence x loss per occurrence

7. Many of the formal methodologies are quite elaborate, involving extensive probability calculations and sophisticated reporting techniques. The result of all risk applications is simply a list of risk elements and a statement of their importance.

8. The output of the risk analysis is carried forward for use in the risk assessment process to provide the basis for **countermeasure (or safeguard)** design. It is important to note that this activity should encompass all functions and systems of the operating element. This comprehensive approach is important, since it is intended to promote the efficient construction of defenses to protect the enterprise. A comprehensive risk assessment should cross all the boundaries of the organization and address all the functions and individual systems. It is equally important that the results of the risk analysis be clearly understood by those charged with generating and/or implementing the countermeasure design.

Objectives of Risk Analysis
Provide systematic approach to identify and measure sources of potential harm
Produce a rational set of guidelines for design of business recovery measures.
Prepare information adequate to support management decision.

D. Criteria for Successful Risk Analysis

1. Comprehensive

The risk analysis results should ideally account for every source of potential harm. An even more demanding requirement is that the methodology used should itself demonstrate to the reader how completeness was obtained.

2. Understandable

The risk analysis results are intended to serve as input to management decisions and the countermeasure design process. Documentation, therefore, must be produced in terms that relate to these dissimilar audiences.

3. Technically Sound

Risk analysis is a multi-disciplinary task. Indepth investigation of many diverse technical areas, such as in the information processing arena, must be performed. That requires detailed input from such diverse disciplines as personnel management and systems support and maintenance.

4. Cost Factoring Risk Analysis

The cost factors to be considered when selecting countermeasures are those arrived at initially during the risk analysis. They are guidelines of what may be spent to protect the function or asset.

Risk Analysis Cost Considerations
Value of the Function or Asset to Be Protected
Expected Frequency of Loss
Impact of Expected Loss

V. THREAT ANALYSIS

A. Threat Analysis Definition

1. Threat analysis is the "function that identifies things that can cause harm and attaches some measure of the threat importance to the organization's mission. " Understanding what elements of the environment pose a threat to the mission is a prerequisite to the analysis of risk.

Threat Definition

Any aspect of the environment that, when given an opportunity, can cause a harmful event (i.e., destruction, disclosure, modification, and/or the denial of service) by acting upon an asset.

2. A threat is "any aspect of the environment that, when given an opportunity, can cause a harmful event by acting upon an asset."

B. Harmful Event Definition

A harmful event is a partial or complete loss of a function or an asset.

C. Categories of Threats

1. Accidental acts
2. Intentional acts
3. Environmental acts
4. Acts of God/nature

a. Generally speaking, it is possible to achieve the necessary levels of COOP cost-effective safeguards. But prior to establishing recovery measures, you must first identify and quantify the threats and vulnerabilities that an organization is subject to.

Threats and Vulnerabilities

Accidental Acts
Incompetence
Curiosity
Interruptions
Industrial Accident
Fraud

Natural Acts
Fire
Windstorm
Hurricane
Tornado
Lightning
Earthquake
Explosion
Flood
Water Damage
Snow and Ice
Rain and Mud

Intentional Acts
Theft of Physical Assets
Theft of Information
Internal Sabotage
External Sabotage
Riots
Strikes
Mischief
Espionage

Environmental Failures
Sewer
Power
Communications
Air Conditioning
Water
Steam

Figure B-l-l. Threats and Vulnerabilities

b. The following is a list of possible threat agents, although not all inclusive, commonly considered pertinent by risk analysts when conducting risk analysis at Government facilities.

Partial List of Threat Agents	
Agent Access	Airborne Particles
Alteration	Data Alteration, Denial, Entry Error
Communication Alteration	Disgruntled Employee
Earthquake	Eavesdropping
Aircraft Mishap	Arson
Application Alteration	Communications Failure
Bomb Threat	Civil Disorder
Electromagnetic Interference	Environmental System Failure
Embezzlement	Fire
Explosion	Flood
Hardware Failure	Hardware Denial
Hurricane	Ice and Snow
Landslides	Power Blackout
Sabotage	Terrorist Action
Tornado	Tsunami (Tidal Wave)
Water Damage	Volcanic Eruption

Figure B-l-2. Partial List of Threat Agents

Factors Effecting Threat Occurrence

- General Location
- Topography of the Area
- History of the Areas Susceptibility to Natural Threats
- Facility Environment
- Nature of the Activity
- Proximity to Population Centers
- Proximity to Power Sources, Water Bodies, and Airports
- History of the Local Utility Companies in Providing Uninterrupted Services
- Degree of Accessibility to the Organization
- Visibility
- Protection/Detection Attributes
- Proximity of Major Highways or Rail Lines That Transport Hazardous Waste and Combustible Products
- Proficiency Level
- Security Awareness
- Emergency Training
- Written Procedures
- Redundancies
- Compliance Level
- Proximity to Nuclear Power Plants
- Other Factors

Figure B-l-3. Factors Effecting Threat Occurrence

D. Vulnerability

Vulnerability Definition
Any characteristic that could allow a threat to act upon a function or an asset causing a harmful event. A weakness in security procedures, systems design, implementation, internal controls, etc., that could be exploited to violate security.

1. Vulnerability is a characteristic of a function or a system that could allow a threat to act upon an asset causing a harmful event.

2. During the process of identifying actual threats, the risk assessment will begin to identify many vulnerabilities, or possibilities for harm, associated with the threats. Each of the identified threats may exploit vulnerabilities or weaknesses in existing protection and successfully attack a function or an asset; therefore each function or asset's vulnerabilities should be considered individually.

E. The Vulnerability Analysis

1. Effective planning begins with the recognition, identification, and indepth analysis of potential or existing hazards and vulnerabilities that are peculiar or specific to an operating building, facility, or site. The desired outcome of effective planning is to identify what responses would be appropriate for these hazards and vulnerabilities, and then to develop those responses in detail, considering any known constraints at the time.

To effectively analyze and assess a hazard or vulnerability, one must know or have some "feel" for the likelihood such an event would occur considering what is known about the specific facility or site. An example of "specifics" would be what the site does, its purpose, or its mission; another would be how the facility or site is constructed and its characteristics. With this type of information, a probability or risk of a threat could be determined. It stands to reason that if, in this case, no aspect of risk is readily evident, then there is basically no

risk. Said another way and more simply, the subject of the analysis or assessment may be extremely vulnerable to a situation or occurrence that happens infrequently (like being hit by an airplane) or possess an extremely low vulnerability to a situation or occurrence that happens frequently (flooding in the area, but of no effect to the particular facility). These two examples of threats would not constitute any significant risk.

3. "Primary" hazards have their attendant "secondary" hazards. A "secondary" hazard is defined as a hazard that surfaces from the impact of a "primary" hazard. As an example, your facility or site may not be concerned about fires because it is a relatively new building, constructed of the latest materials, contains a total sprinkler system, and adjacent to a municipal fire house. However, suppose your facility or site was hit by a tornado with its resultant destruction of power lines and extensive debris field, which made it inaccessible to rescue operations. If your operating element made use of flammable materials or other combustible substances, no matter how well protected, it would constitute cause for fire to be considered a serious "secondary" hazard.

4. All threats are cause for concern. As in many situations, good or bad, there are degrees of severity, and actions are prioritized based on circumstances or characteristics. In the case of threats, a threat is considered significant when it is associated with some **measure of value** such as life, property, operations, or resources. A vulnerability analysis developed for a specific facility or site will be based on three distinct standards; they are (1) probabilities of occurrence, (2) vulnerabilities, and (3) value of the entity at risk. When initially reviewing and analyzing the hazards identifiable to a specific facility or site, there is also an opportunity to overlook the impact that off-site hazards can have. If, for example, you depend on information technology services from a site that is within a hazard area, the impact of an event that affects the processing facility will likewise affect your operations.

5. A vulnerability analysis is needed for each Department facility or site. Situations may arise where there are multiple organizations at the same location and each thinks they need to do a vulnerability analysis-not necessarily nor probable. A vulnerability

analysis applies to the facility or site, not the individual organization. Individual organizations, however, can contribute to heightening the threat to a facility if for some reason they have been targeted by individuals or groups. It is advisable and certainly appropriate to invite each organization located at the facility or site to participate in developing and conducting the analysis. Their individual and specific input through verbal and written comments, which would be based on different missions, objectives, personnel, and equipment, could prove vital to developing an effective vulnerability analysis. This is not to say that each organization should not develop their own unique COOP considering those factors in the previous sentence and the associated and potential risk to the organization.

6. Developing a matrix assists in assuring as many factors are considered as possible in the analysis. In addition to hazards, the matrix should also include an estimate of the degree of vulnerability associated with a particular hazard, i.e., **low, intermediate, or high.** Once the analysis and matrix are completed and all parties participating in the analysis have reviewed the results to ensure their interests and objectives have been included, the analysis and matrix should be made an integral part of the COOP. The analysis, matrix, and any accompanying notes that explain how and what was done are made a part of the COOP to assist interested parties at a later date in understanding the types and severity of hazards that have been identified as potentially applicable to the specific facility or site. The objective of the matrix and notes is to provide the reader with an understanding of the types and relative importance of the hazards facing the site.

7. This process can be portrayed in a series of steps.

a. Identify threats and list applicable threats that can cause the most harm.

Threats (Samples)	Threat Evaluation	Loss Estimate	Risk Factor
Fire			
Water damage			
Theft			
Tornado			

b. Each member of the team conducting risk analysis then estimates the frequency of each applicable threat. The numbers are then averaged to provide a consensus for each threat.

Low	Low To Medium	Medium	Medium To High	High
1	2	3	4	5

c. Enter the average into the threat evaluation column.

Threats	Threat Evaluation	Loss Estimate	Risk Factor
Fire	3		
Water damage	2		
Theft	2		
Tornado	3		

d. Each member estimates the loss impact if a threat event should occur (do it for each threat).

Low	Low To Medium	Medium	Medium To High	High
1	2	3	4	5

e. The average is entered into the loss estimation column.

Threats	Threat Evaluation	Loss Estimate	Risk Factor
Fire	3	5	
Water damage	2	5	
Theft	2	3	
Tornado	3	5	

f. Calculate risk factors-Add the threat evaluation and loss estimate columns together to produce a risk factor. The number will range from a low of 2 to a high of 10. Enter this number in the risk factor column.

Threats	Threat Evaluation	Loss Estimate	Risk Factor
Fire	3	5	8
Water damage	2	5	7
Theft	2	3	5
Tornado	3	5	8

g. Sort the worksheet by the values in the risk factor column, in order of priority, from highest to lowest value on a safeguard identification worksheet as follows:

Safeguard Identification Worksheet			
Threats	Risk Factor	Possible Safeguards	Safeguard Cost
Fire	8		
Water damage	8		
Theft	7		
Tornado	5		

h. Analyze vulnerabilities-team members analyze weaknesses of points of susceptibility in the facility or system (search against goals of prevention, detection, and recovery).

i. Identify safeguards (countermeasures). Consider possible additional preventive or recovery measures and the costs for procuring and maintaining them. Enter them and their costs in the appropriate columns.

Safeguard Identification Worksheet			
Threats	Risk Factor	Possible Safeguards	Safeguard Cost
Fire	8	Fire Suppression System	$8,800
Tornado	8	Contingency Plan	$10,000
Water damage	7	Contingency Plan	See above
Theft	5	Security Guard	$75,000

Several measures may be listed for a single threat. It is also possible for a single measure to reduce the risk exposure of more than one threat. Concentrate on identifying measures for the threats with risk factors of six or greater.

j Perform cost/benefit analysis of safeguards. The overall costs should be considerably less than the possible losses if the measures were not implemented. Identify those measures that afford the maximum amount of protection at the minimum cost. Rank safeguards in priority order for management's selection decision. Since resources are limited, management will decide the level of risk to accept and cost effectiveness of implementation. As stated previously in these appendices, no/low cost measures may be immediately implemented. Other requirements may be mandated by regulatory measures. Implementation can be phased based on available resources.

VI. IMPACT ANALYSIS

Impact Definition
A measure of the amount of loss that might be caused by a harmful event.

Impact is a measure of the amount of loss that might be caused by a harmful event. The levels of threat and vulnerability determine whether or not a harmful event will occur, but say nothing of the effect that the event will have on the organization's mission. Predicting the impact of a hypothetical threat occurrence requires the analysis of several factors.

Impact Factors

Type of Effect	
Loss/Disruption of	**Target Asset Importance**
Data	Kinds of Assets
Programs	Dollar Value
Services	Mission Dependency
Physical Property	Agencies Served
Political Damage	Agency Visibility

Current security measures that "contain" effects

Current security measures that maximize recovery

VII. RISK ASSESSMENT

Risk is quantitative by nature. It is an estimate of the amount of impact that can be expected, on the average, to result from the occurrence of uncertain harmful events over a given period of time. To determine risk, we must know what harmful events can happen, the probability of occurrence, and the expected amount of loss if they do occur. Clearly, there are some complex components of this measure, each of which must be identified and quantified. Ideally, we would express risk as an amount of money that would be lost, on an average, over some period of time.

Purpose of Risk Assessment

To Determine:

- Compliance Requirements
- Assets to Be Protected
- Threats to Protect Against
- Probabilities of Threat Occurrence
- Adequacy of Controls In Place
- System Vulnerabilities
- Measure of Loss Exposure
- Cost Benefit of Business Recovery Measures

Benefits of Risk Assessment

Provides guidance for resource expenditure

Alerts management to near-term risks

Pinpoints areas for corrective action

Relates COOP program to organization mission

Enhances COOP awareness

Provides criteria for contingency planning

Components of Risk Assessment

Asset analysis

Threat identification

Vulnerability analysis

Risk assessment

Calculation of loss exposure/severity

Limitations of Risk Assessment

Predicting future events is difficult

Estimates based upon imperfect data

Assumptions not always valid

Large numbers of potential variables

A. Countermeasure Design

Once a set of COOP requirements has been defined, it is possible to design a set of defenses that can be implemented to satisfy those requirements. Typically, a number of alternate responses, or business recovery measures, are formulated in order to provide management a choice of ways to respond to the given risk situation.

B. COOP Requirements Design Specification

1. When the risk analysis is completed, a set of recovery measures must be designed to respond to the risks that have been documented as being the most imminent.

2. The risks documented in the risk analysis report are used to generate functional requirements for countermeasure implementation or design. These requirements may be treated much like those functional requirements with which we are more familiar. The risk analysis report is the starting point for finding those risk elements that must be addressed.

3. "Countermeasures, " or "safeguards" are physical controls, mechanisms, policies, and procedures that protect assets from threats. Examples of safeguards are fences, alarms, guards, sprinklers, passwords, access controls, policy statements, offsite storage, tempest shielding, and so forth. In order for a threat to occur, one or more of the safeguards must be bypassed or circumvented entirely or in part. The kinds of safeguards selected will depend upon the intended function of the assets and their value. In civilian government agencies, availability and integrity of assets may be of primary concern, while confidentiality may play a greater role in the military community.

4. A system of countermeasures is the complete collection of all countermeasures/safeguards. The ability to identify systems of countermeasures or safeguards that will reduce vulnerabilities and thereby the risks is an essential component of managing risks. Resulting expenditures should be cost justified just like every other expenditure; thus, the key to the selection of optimum countermeasures is the ability to estimate the reduction in

loss after the implementation of the countermeasure(s). A cost/benefit analysis enables development of the justification for the acquisition of each countermeasure. The cost of countermeasures should compare favorably with the reduction of expected future losses.

C. Developing the Requirements

To develop the requirements, you must review each documented risk and specify requirements for reducing that risk. Each requirement must identify the risk being addressed, the kind of countermeasures to be provided, and the level of countermeasures needed.

1. **Completeness and accuracy** ensure that information and data are all inclusive and up to date.

2. **Protection** addresses the loss of information, data, equipment, or physical facilities to intentional or unintentional threats.

3. **COOP** attempts to prevent or mitigate the loss of information, data, equipment, or physical facilities to intentional or unintentional threats.

Types of Recovery Measures

PREVENTION:
Keep harmful events from occurring

CONTAINMENT:
Minimize the damage when harmful event does occur

RECOVERY:
Reconstruct lost asset following a harmful event

D. Types of Recovery Measures

1 **Prevention.** Recovery measures prevent harmful events from occurring at all. A major part of fire precaution must be preventive, and this is just as important as all other COOP breaches. Would-be embezzlers should be discouraged from ever beginning.

2. **Containment.** Recovery measures minimize the damage that does occur. An intruder who succeeds in bypassing the physical or programmed controls that were intended to keep him out should still be very restricted in what he can accomplish. A fire, once started, should be prevented from spreading. A virus infected disk should be prohibited from use in other systems.

3. **Recovery.** Recovery measures provide methods for recovering from damage. It must be possible to reconstruct vital records or whole files if they are accidentally or willfully lost. It is possible to recover from a disastrous fire sufficiently quickly and keep the organization running. It is important to attack the COOP problem in depth; recovery procedures are vital to the overall plan. The designer's preventive measures must be developed in concert with recovery techniques.

Criteria for Countermeasure Selection

Criticality
Size
Economic
Security level
Type of control
Effectiveness
Ability to address multiple threats
Simplicity of use
Overhead
Applicability to new and existing systems
Svstem examination reauirement

4. Criteria must be prioritized by order of importance.

Recovery Measure Selection Process

- List candidate recovery measures
- Rank by selection criteria
- Select all mandatory business recovery measures
- Discard all inappropriate business recovery measures
- Select all zero/low cost business recovery measures
- Select other recovery measures by priority
- Cost of recovery measures
- Ratio of risk reduction to recovery cost:
  - Recovery measure cost versus expected loss
  - Vulnerability cost versus expected gain

LOCATION OF FACILITY:
Leased Building

TRAINING:
Unavailable
Too Costly

LIMITED PERSONNEL:
Team members
Technical Support
Operations Personnel

ASSET AVAILABILITY:
Equipment

TIME:
Sufficient planning, training, and testing time

1. Countermeasure Selection Constraints

a. The training to obtain certain COOP skill and knowledge is often unavailable or simply not in the budget.

b. Some recovery measures may not be usable due to a lack of skilled personnel. A limited number of operations personnel make some COOP functions all but impossible.

c. Deadlines associated with development often cause COOP recovery measures to get short-changed. COOP too often "gets the axe" when time becomes short.

2. Management Decision

A critical part of the risk management process is the direct involvement of management in the implementation decision. The question of which risks can be tolerated and which must be responded to is complex, and must be answered considering mission goals, budget constraints, and operating element policies.

3. The Implementation Process

a. Once the recovery measures have been selected, we must consider the activities, resources, and costs necessary to get them implemented.

b. Most of these activities should come as a natural result of the preplanned process established by the risk analysis conducted at the initiation of the risk management task.

c. One-time costs usually associated with the initial development and implementation are generally annualized over the life of the system.

d. Ongoing costs that occur as a result of carrying out the recovery measures are usually annualized.

E. Alternative Countermeasure Selection

1. It is very important when developing the asset values that we include any intrinsic values the asset may have. This will better enable us to identify those recovery measures that are simply too expensive to implement.

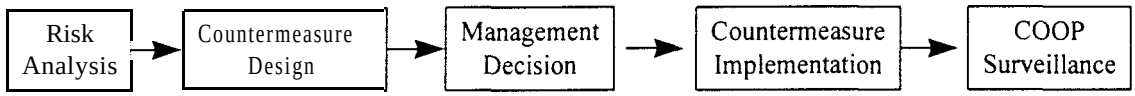
2. We should never lose sight of the fact that sometimes it is simpler and more cost effective to accept the risk, than to bear the cost of the countermeasure. As the cost of the countermeasure approaches the value of the asset, the countermeasure's cost-benefit diminishes and it becomes easier to justify the risk than support the implementation of the countermeasure. Occasionally, a countermeasure is deemed too expensive, but there is a clear need for some form of protection. In the event of such an occurrence, there are three options that may be used for considering alternative recovery measures.

Alternatives for "Too Expensive" Recovery Measures

Review recovery measures for alternative design
Comparable protection at lower cost
Restructure data to COOP requirement
Remove sensitive data from file
Choose less effective or less costly countermeasure
Take the chance (least desirable choice)

F. COOP Surveillance

Management needs to continually reevaluate the effectiveness of COOP to ensure effective countermeasure design. After recovery measures are installed, they must be monitored to ensure their continued effectiveness. Additionally, the risk environment must be continually reevaluated. The assessment of COOP requires judgement. Unless specific objectives are established, the assessment may well be an ineffective use of resources, and not provide meaningful information. A sound program of periodic tests and exercises provides a means of monitoring the COOP.



VIII. FORMAT AND PLAN ORGANIZATION

An emergency operations plan is a document that assigns responsibility to organizations and individuals for carrying out specific actions at projected times and places in an emergency. The plan:

- Sets forth lines of authority and organizational relationships, and shows how all actions will be coordinated.

- Describes how people and property will be protected in emergencies and disasters.

- Identifies personnel, equipment, facilities, supplies, and other resources available-within the organization or by agreement with other organizations-for use during response and recovery operations.

- Identifies steps to address mitigation concerns during response and recovery activities.

- Cites its legal basis, states its objectives, and acknowledges assumptions.

An effective plan requires a format that meets certain basic standards. The planning team should consider the following:

- Organization. Do the plan's subdivisions help users find what they need, or must users sift through information that is irrelevant? Can single subdivisions be revised without forcing a substantial rewrite of the entire COOP?

- Progression. In any one section of the COOP, does each element seem to follow from the previous one, or are some items strikingly out of place? Can the reader grasp the rationale for the sequence and scan for the information he or she needs?

- Consistency. Does each section of the COOP use the same logical progression of elements, or must the reader reorient himself or herself in each section?

- *Adaptability*. Is information in the COOP organized so that the COOP may be used in unanticipated situations?

- Compatibility. Does the COOP format promote or hinder coordination with other Departments and agencies?

A. Format

There are no mandated formats for emergency or continuity of operations plans. The EMERPS functional annex and this appendix provide minimum standards for a COOP plan, and guidance to promote consistency and continuity throughout the Department. In the

final analysis, a format is "good" if the users understand it, are comfortable with it, and can use it to extract the information they need. The test of a good plan is met through training, exercises, actual response, plan review, and coordination meetings, and the like.

B. The COOP

There is no prescribed size for the COOP. It may be lengthy or brief, depending on the site or facility being reviewed. Where there are multiple organizations at a single site, and each has or would have their individual COOP, senior Department management must determine if an integrated COOP would be appropriate or advantageous. It is incumbent upon all levels of Department management to ensure that personnel are aware of and understand their responsibilities and duties within the COOP.

C. Plan Components

Using a standard format with a ***basic plan, functional annexes, and*** *incident-specific* ***appendices*** will make the COOP easier to use. These parts of the COOP can be structured around the problem to be solved, the objective to be attained, or the task to be performed. The following plan components are based on an easily understood, common-sense approach.

1. Basic Plan

The Basic Plan provides an overview of approach to COOP operations. It details policies, describes the COOP organization, and assigns tasks. Although the Basic Plan guides development of the more operationally oriented functional annexes, its primary intended audience consists of senior management, their staff, and division heads.

2. Functional Annexes

Functional annexes are plans organized around the performance of a broad task. Each annex focuses on one of the critical COOP functions that will be performed in response to an emergency. The number and type of functional annexes included in the COOP may vary from one division to another, depending on needs, capabilities, and organization.

Since functional annexes are oriented toward operations, their primary audience consists of those who perform the tasks. They do not repeat general information contained in the Basic Plan.

3. Incident-Specific Appendices

Incident- or hazard-specific appendices provide additional detailed information applicable to the performance of a particular function in the face of a particular hazard. They are prepared when incident characteristics and regulatory requirements warrant and are attached to the relevant functional annex(es).

4. Standard Operating Procedures and Checklists

Standard Operating Procedures (SOPs) and checklists provide the detailed instructions that an organization or an individual needs to fulfill responsibilities and perform tasks assigned in the COOP. They may be attached to the COOP or referenced, as deemed appropriate.

5. Format

a. FEMA publications recommend a plan format consisting of Purpose, Situation and Assumptions, Concept of Operations, Assignment of Responsibilities, Administration and Logistics, Plan Development and Maintenance, and Authorities and References.

b. The GSA COOP student manual recommends a format including Introduction, Purpose, Applicability and Scope, Authorities and References, Policy (optional), Objectives, Assumptions, Definitions, Responsibilities, Distribution, Site, Warning Conditions, Essential Operations, Essential Positions, Essential Equipment, Assembly and

Relocation Site, Implementing the COOP, Direction and Control, Communications, Logistics Support, Exercises and Training, Public Relations, and Plan Maintenance.

I. Elements Common to Basic Plans

1. Introductory Material

The COOP should be prefaced by certain items that enhance accountability and ease of use. Among these are the promulgation document, the signature page, the dated title page and record of changes, the record of distribution, and the table of contents.

2. Promulgation Document

The promulgation document enters the COOP "in force"; it gives the COOP official status and provides both authority and responsibility for organizations to perform their tasks. The promulgation document is usually a letter signed by the head of the Operating Division. In it, the senior official might declare simply that the COOP is in force, perhaps citing the legal basis for his or her authority to make that declaration; however, the promulgation document also should mention tasked organizations' responsibility to prepare and maintain SOPs and commit them to the training, exercises, and plan maintenance efforts needed to support the COOP. The promulgation document also allows the senior official to affirm his or her support for emergency management.

3. Signature Page

Some organizations may choose to include a signature page to show that, prior to seeking the senior manager's signature, all response organizations tasked in the COOP have coordinated in the plan's development and are committed to its effective implementation.

4. Dated Title Page and Record of Changes

The title page should bear the date of publication; a record of changes can be a chart containing a number assigned to any change, a description of the change and/or the affected part of the COOP, the date of the change, the date of its actual entry into the COOP, and the signature or initials of the person responsible. These items should be included so users of the COOP can be certain that everyone is using the most recent version of the COOP.

5. Record of Distribution

This is a list of individuals and organizations that receive a copy of the COOP. The record of distribution can be used to provide evidence that tasked individuals and agencies have had the opportunity to read and understand their responsibilities, which is a basic assumption of an COOP. To that end, copies may be numbered and the record may show both a date of transmittal and a date on which receipt is confirmed. The record of distribution also serves as a convenient checklist for distributing later revisions to the plan. Note that the list need not be limited to response organizations. Neighboring organizations should also receive copies of the COOP. For the sake of convenience, a long record of distribution may be treated as a standalone annex and placed at the end of the COOP, or kept separate as an "administrative" document.

6. Table of Contents

A table of contents makes finding information easier. It provides a quick topical overview of the COOP. The table of contents should list all sections of the COOP and be supported with clearly labeled tabs for each section.

7. Purpose

The rest of the COOP flows logically from its purpose. The Basic Plan should contain a general statement of what the COOP is meant to do. The statement should be supported by a brief synopsis of the Basic Plan, the functional annexes, and the incident-specific appendices.

J. Situation and Assumptions

After the broad statement of purpose, the situation and assumptions section narrows the scope of the COOP by outlining what hazards the COOP addresses, what characteristics of the operating element may affect response activities (and how), and what information used in preparing the COOP must be treated as assumption rather than fact. Policies also circumscribe and affect response activities, and could be treated either as part of the situation or in a separate section, if desired.

1. Situation

The situation section characterizes the "planning environment"-and so makes clear why planning is necessary. The situation section should, at a minimum, draw from the threat identification and risk analysis. The situation section may include relative probability and impact of the hazards, geographic areas likely to be affected by particular hazards, vulnerable critical facilities (labs, computing centers, etc.), characteristics of the facilities, critical resource dependencies on other organizations, and more. The level of detail is a matter of judgment; some information may be deemed useful to a few specific functional annexes and presented there. In any event, maps should be included (as tabs) to support the situation description.

2. Assumptions

Assumptions are simply what, in developing the COOP, has been treated as true for the COOP's execution. These should be included to show the limitations of the COOP, allowing COOP users (and others) to foresee that some improvisation or modification may become necessary. It is valid to include "obvious" assumptions-that identified hazards will occur (scenarios, if used, can be outlined), that individuals and organizations are familiar with the COOP and will execute their assigned responsibilities, that assistance may be needed, and that-if so-assistance will be available.

K. Concept of Operations

1. The audience needs to picture the sequence and scope of the planned emergency response. The concept of operations section explains the overall approach to an emergency situation, i.e., what should happen, when, and at whose direction. Topics should include:

a. Division of responsibilities;

b. Activation of the COOP;

c. "Alert levels" and their implications;

d. General sequence of actions before, during, and after the emergency situation; and

e. Who requests aid and under what conditions.

2. The concept of operations will touch on direction and control, alert and warning, or continuity of operations matters that may be dealt with more fully in annexes.

L. Organization and Assignment of Responsibilities

This section establishes the emergency organization that will be relied on to respond to an emergency situation. It includes a listing by position and organization of what kinds of tasks are to be performed; such a listing permits a quick grasp of who does what, without some of the procedural details included in functional annexes. When two or more organizations perform the same kind of task, one should be given primary responsibility, and the other(s) should be given a supporting role. For the sake of clarity, a matrix of organizations and areas of responsibility (including functions) should be included to show at a glance the primary and supporting tasks.

1. Responsibilities

A list of common responsibilities includes the following tasks.

a. Maintain current internal personnel notification rosters and SOPs to perform assigned tasks.

b. Negotiate, coordinate, and prepare mutual aid agreements, as appropriate.

c. Analyze need and determine specific communications resource requirements.

d. Work with EOC communications coordinator to ensure equipment and procedures are compatible.

e. Identify potential sources of additional equipment and supplies.

f Provide for continuity of operations by taking action to

(1) Ensure that lines of succession for key management positions are established to ensure continuous leadership and authority for emergency actions and decisions in emergency conditions.

(2) Protect records, facilities, and organizational equipment deemed essential for sustaining Government functions and conducting emergency operations.

(3) Ensure, if practical, that relocation sites are available should the primary location suffer damage, become inaccessible, or require evacuation.

(4) Ensure relocation sites provide a means to continue organizational functions during emergency conditions.

(5) Protect emergency response staff. This includes actions to:

(a) Provide security at facilities,
(b) Rotate staff or schedule time off to prevent burnout, and
(c) Make stress counseling available.

(6) Ensure the functioning of communications and other essential equipment. This includes actions to:

(a) Test, maintain, and repair communications and warning equipment; and

(b) Stockpile supplies and repair equipment.

M. Administration and Logistics

This section covers general support requirements and the availability of services and support for all types of emergencies, as well as general policies for managing resources. Mutual assistance or aid agreements with other organizations should be referenced. The section should provide the operating element's general policies on keeping financial records, reporting, tracking resource needs, and tracking the source and use of resources.

N. Plan Development and Maintenance

The overall approach to planning, including the assignment of planning responsibilities, should be discussed in the Basic Plan. Statements should focus on the planning process, participants in that process, and how development and revision of different "levels" of the COOP (Basic Plan, annexes, appendices, and SOPs) are to be coordinated. This coordination task should be assigned to the appropriate person or team. Provision should also be made for a regular cycle of testing, reviewing, and updating the COOP.

0. Authorities and References

The Basic Plan should indicate the legal basis for emergency operations and activities. Laws, statutes, executive orders, regulations, and formal agreements relevant to emergencies should be listed. The legal basis should include predelegation of emergency authorities, i.e., enabling measures sufficient to ensure that specific emergency-related authorities can be exercised by the elected or appointed leadership or their designated successors. It is important to specify the extent and limits of the emergency authorities granted to the "IC," the circumstances under which these authorities become effective, and when they would be terminated. Citing reference materials-including related plans of other elements of Government-can be valuable for indicating what has influenced the writing of the COOP. References also help reduce the size of a COOP by directing the user to the full text of procedures, data analyses, and other pertinent information,

P. Functional Annex Content

1. Content

a. Annexes are the parts of the COOP that begin to provide specific information and direction. Annexes should focus on operations: what the function is and who is responsible for carrying it out. While the Basic Plan provides information relevant to the COOP as a whole, annexes should emphasize responsibilities, tasks, and operational actions that pertain to the function being covered. Annexes should cover, in general terms, the activities to be performed by anyone with a responsibility under the function. An annex should identify actions that not only ensure effective response but also aid in preparing for emergencies.

b. Annexes should clearly define and describe the policies, processes, roles, and responsibilities inherent in the various functions before, during, and after any emergency period. To ensure adequate planning for all appropriate COOP contingencies, it may be necessary to spend time projecting the consequences of various emergencies. This should not be restricted to those hazards found to be most threatening during the hazard analysis. The term "generic" has been used to describe these functional annexes that are generally applicable to all hazards, such as our Incident Management Annex. The generic annexes are critically important parts of the plan, since they must enable us to cope with any unforeseen emergency.

c. In general, the organization of the annexes parallels that of the Basic Plan. Specific sections can be developed to expand upon-but not to repeat-information contained in the Basic Plan.

Q. Functions to Include as Annexes

1. One of the more important things to be done early in the planning process is to select the functions that will be the subjects of separate annexes. The DHHS EMERPS includes both generic (IMS) and specific (COOP, COG, Emergency Management) annexes and appendices. These may be adapted in whole or in part by DHHS operating elements; additional annexes or appendices may be added to meet the specific needs of the operating element. No single listing of functional annexes, therefore, can be prescribed for all DHHS organizations.

2. Each operating element's planning team should assess its own need for functional annexes. Additional or different functional annexes should be prepared at the discretion of the planning team. The primary concern is that all important activities be covered properly in the plan. The location or categorization of these activities is of secondary importance, though the structure and guidelines of the EMERPS is designed to promote consistency and facilitate coordination.

IX. INCIDENT-UNIQUE PLANNING CONSIDERATIONS

A. Introduction

Incident-specific appendices offer a means of extending functional annexes to address special and unique response procedures, notifications, protective actions, emergency information, and other needs generated by a particular incident or hazard. They allow the operating element, in its COOP, to address priorities identified through hazard analysis and to meet detailed regulatory requirements associated with some hazards. An incident-specific appendix should be prepared for any functional annex that does not, by itself, give enough information to perform the function adequately in the face of a particular high priority incident or hazard. Some hazards may require that appendices be prepared for various functional annexes; others may affect planning for only one or two functions. Appendices may be long

or very brief, depending upon need. *Think of incident-specific appendices as* supplements *to functional annexes. Planning considerations common to all hazards should be addressed in functional annexes, not repeated in incident-specific appendices*

X. DEVELOPMENT OF AN INCIDENT-SPECIFIC APPENDIX

The decision to develop an incident- or hazard-specific appendix should be based on special planning requirements not common to other hazards addressed in the functional annex, and on regulatory considerations that may require extensive, detailed planning that is inappropriate for inclusion in the annex. For example, if an operating element has laboratory facilities that require special security or handling measures, those procedures would be appropriately detailed in an incident- or hazard-specific appendix. If there are special requirements to notify the public in the event of an emergency or critical incident at a laboratory or other operating facility, then a specific appendix for emergency public information, for example, may be deemed necessary. As the planning team develops each of the functional annexes, close scrutiny must be given to the "unique" characteristics of those incidents or hazards that require special attention. Further, the planning team must know the regulatory requirements associated with the hazards their operating element faces. This approach promotes consistency and continuity and provides the flexibility to include an incident-specific appendix or not, based on the need to cover information that is relevant to the incident or hazard, but is not appropriate for inclusion in the functional annex.

A. Content of an Incident-Specific Appendix

1. The content of an incident-specific appendix focuses on the special planning needs generated by the hazard and should not duplicate the information in the functional annex. The appendix contains unique and regulatory response planning details that apply to a single hazard. It addresses the essential operational actions that must be accomplished to facilitate the successful completion of a particular response function. As appropriate, the appendix should quantify the considerations that apply to the hazard. It is recommended that incident-specific

appendices follow the same structure-i.e., include, as appropriate, the same content sections (Purpose, Situation and Assumptions, Concept of Operations, Organization and Assignment of Responsibilities, Administration and Logistics, Plan Development, and Authorities and References)-as the functional annexes. Tabs may be used to:

a. Identify incident-specific risk areas and evacuation routes,

b. Specify provisions and protocols for warning the public and disseminating emergency public information, and

c. Specify the types of protective equipment and detection devices for responders, etc.

2. Tabs serve as work aids and include such things as maps, charts, tables, checklists, resource inventories, and summaries of critical information.

3. The responsibility for making the decision on what to include in an incident-specific appendix is vested with the operating element's planning team. The flexibility of the planning approach described in this appendix should make it possible to accommodate and satisfy:

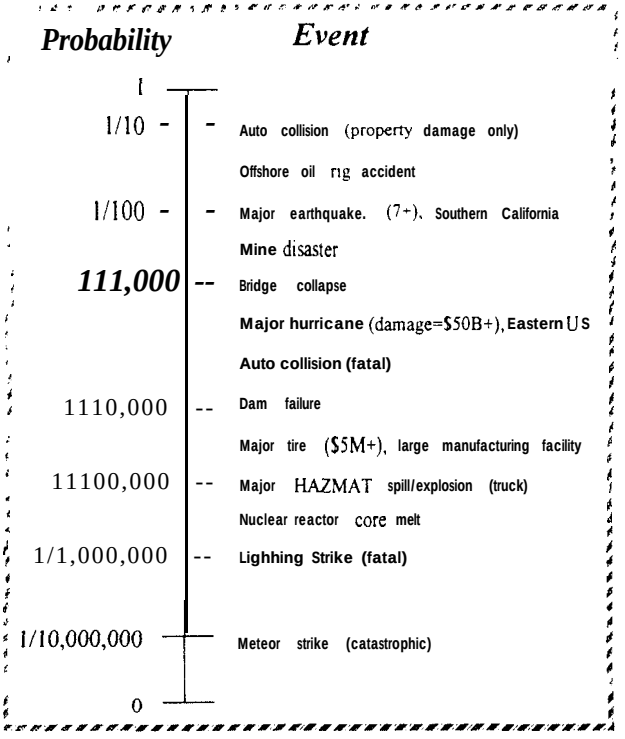
a. The planning requirements associated with unique aspects of the incident or hazards and with various regulatory authorities,

b. The planning requirements of the operating element, and

c. The members of the planning team.

XI. HAZARDS AND VULNERABILITY CHECKLIST

Effective planning begins with the recognition, identification and indepth analysis of potential or existing hazards and vulnerabilities that are peculiar or specific to an operating building, facility or site. The desired outcome of effective planning is to identify what responses would be appropriate for these hazards and vulnerabilities and then to develop those responses in detail considering any known constraints.

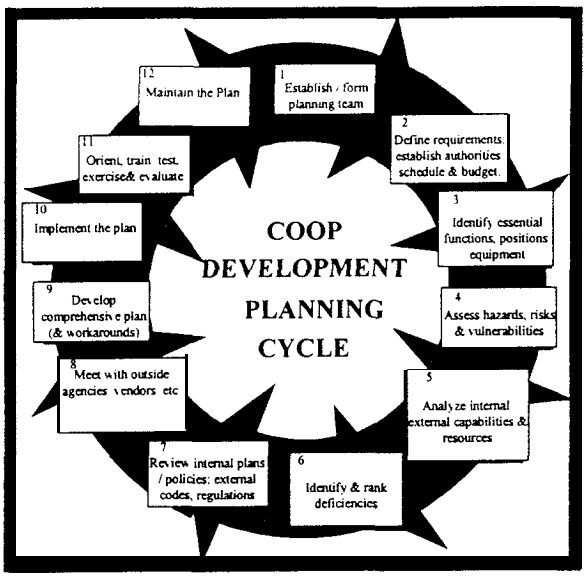


HAZARD	VULNERABILITY			SECONDARY HAZARDS				
	ESTIMATE			Earth-			HAZ-	Severe
	L	I	H	quake	Fire	Flood	MAT	Storm
Examples:								
Earthquake	X			X				
Fire		X			X			
Flood	X					X		
HAZMAT		X					X	
Severe Storm			X					X
Airborne Particles								
Aircraft Mishap								
Application Alteration								
Arson								
Civil Disorder								
Communications Failure								
Data Denial								
Data Alteration								
Data Entry Error								
Disgruntled Employee								
Eaves-dropping								
Electromagnetic Interference								
Emanations Interception								
Embezzlement								
Enemy Attack								
Environmental System Failure								
Earthquake								
Explosion								
Flood								
Fraud								
Hardware Failure								
Hardware Alteration								
HAZMAT								
Hurricane								
Ice and Snow								
Improper Data Handling								

Improper Media Handling								
Improper Media Marking								
Landslides								
Lightning								
Mechanical Shock								
Vibration								
Misuse of Com-puter Resources								
Operating System Alteration								
Operator Error								
Personal Injury or Death								
Postemployment Access								
Power Blackout								
Power Brownout								
Power Failure								
Privacy Act Violation								
Programmer Error								
Sabotage								
Radio Frequency Interference								
Riots								
Software Denial								
Static Electricity								
Strike								
Terrorist Attack								
Tornado								
Unauthorized Disclosure								
Uncleared Personnel Access								
Vandalism								
Volcanic Eruption								
Water Damage								
Winds								
Vandalism								
Sewer								

L: Low
I: Intermediate
H: High

Figure B-l-4. Hazards and Vulnerability Checklist



APPENDIX 2 TO FUNCTIONAL ANNEX B

RELOCATION PLANNING

THE EMERGENCY MANAGEMENT AND ENTERPRISE RESUMPTION PLANNING SYSTEM (EMERPS)

OFFICE OF PRIMARY RESPONSIBILITY: Office of Emergency Preparedness

SUPPORTING OFFICES: Operating Divisions
Staff Divisions
Health and Human Services (HHS) Regional Offices

I. INTRODUCTION

It is easy to identify circumstances that could result in the necessity to operate out of a relocation site for an extended period of time. Emergencies such as fire or earthquakes could result in lengthy periods during which the home site undergoes repairs before reoccupation, or during which the search for a new permanent site is completed. Even those agencies with the luxury of having a "hot site" might find themselves seeking a relocation site if the "hot site" can be affected by the same emergency as the home site.

Implementing the Continuity of Operations Plan (COOP) is an action not to be taken lightly; multiple factors enter into the decision to do so. The responsibility to issue the directive rests with the Secretary or through the Secretary's delegation of authority to a

senior/designated Department of Health and Human Services (DHHS) official. In the event immediate action must be taken to protect life or property, the Incident Commander (IC) (on scene or first arriving senior/designated DHHS official) may issue the order to implement the COOP.

A. Purpose

1. This appendix provides guidance for survey and identification of assembly and relocation sites for DHHS operating elements. It provides a "model" outline of what to consider when surveying facilities for use as a relocation site.

2. The following options, in order, will be considered for continuing an organization's operations in the event the home site or facility is untenable or unusable. Described briefly, these are as follows.

a. Temporarily assigning the responsibility to perform your functions to another Operations Division/Staff Division (OPDIV/STAFFDIV) that performs those functions using its personnel and equipment, or augmented by your personnel until your operational element is able to resume operations.

b. Using another site's facilities during periods when they are not normally utilized until your primary operating facilities can be restored or a permanent facility placed into operation.

c. Performing your essential functions from a "relocation site" (a site equipped to support designated operations) until routine operations from the primary operating site or a permanent site may be resumed.

3. Your response to this requirement may take several forms, from a contingency agreement (memorandum of agreement (MOA) or understanding (MOU)) with the

ownership of a site that meets your relocation needs, to a listing of criteria and requirements that your organization has for a relocation site.

B. Task

Provide a model outline for relocation site selection.

C. Objectives

The objectives of this appendix are to direct and guide appropriate actions to:

1. Provide guidelines for procuring space, telecommunications, equipment, and supplies to support relocation site operations; and

2. Provide rapidly executable measures to identify requirements to Departmental and other agency (i.e., General Services Administration (GSA)) realty, contracting, telecommunications, and other specialists.

II. POLICIES

Policies and procedures outlined in the References in the Basic Plan shall be followed in responding to critical incidents and emergencies under this Appendix.

III. RESPONSIBILITIES

A. The Office of the Secretary (OS) will coordinate plans across OPDIVs to support relocation requirements at the national level.

B. The Regional Directors (RDs) will coordinate across OPDIVs at the regional level and develop regional plans for relocation. Where necessary, these plans will comport

with other Federal agency or State plans (where, for instance, the Region shares a facility with other agencies and Departments).

C. Operating Divisions. OPDIVs will ensure that the performance of essential functions can be accomplished from a relocation site, if activated.

D. Staff Divisions. STAFFDIVs will ensure that the performance of essential functions can be accomplished from a relocation site, if activated.

Iv. SITUATION

A. Conditions

Management's responsibility to ensure performance of the enterprise's mission is threatened by the possibility of uncertain events ranging from a natural disaster, to vandalism, to sophisticated attempts to create chaos. The systems to be protected are so complex, and threatened by so many potential sources of harm, that it is impossible to protect primary operating facilities against every potential problem. The necessity to relocate one, several, or all operating elements may occur with or without warning. These operations are a complex undertaking, ranging from short-lived temporary efforts, to permanent relocation when a primary operating facility is destroyed or otherwise unusable.

B. Planning Assumptions

1. See Functional Annex.

2. For the purposes of this appendix, the COOP is implemented in four stages.

a. **Stage 1:** Preemergency , during which plans and preparation to implement the COOP are made, maintained, and exercised.

b. **Stage** 2: Relocation, in which all or part of your organization leaves an untenable site. Consideration of options other than relocation are included in this stage.

c. **Stage 3:** Relocation site operations, which describe operations at the new site.

d. **Stage 4:** Ending relocation site operations, which describe the transition from the relocation site to the original home site or a new home site.

V. CONCEPT OF OPERATIONS

A. General

This model has been created to give DHHS elements an understanding of relocation service and space requirements. It outlines what to consider when surveying facilities for potential or actual use for a relocation site. Every emergency or critical incident is different. It is important, therefore, that the COOP/emergency coordinator work closely with the Program Support Center (PSC) and other Departmental elements, as well as GSA to identify requirements.

B. Relocation Coordination

1. COOP/Emergency Coordinators (ECs) should conduct relocation planning and consultation with internal and external operating elements in Stage 1. (Preemergency, during which plans and preparation to implement the COOP are made, maintained, and exercised.)

2. Relocation under the stresses associated with emergency or critical incident operations is a complex undertaking requiring continual coordination among the operating elements being moved, supporting elements, GSA organizations, and contractors. The

Relocation Team (RT) leader (IC or his or her designee) serves as the focal point for internal and external Departmental coordination. This ensures that all necessary Departmental and other agency actions are completed on time and in a coordinated fashion so that the relocation site space is ready when occupied.

C. Specific

1. When surveying facilities for use as a relocation site, DHHS operating elements will assess, in order: internal DHHS capacity under their control, internal DHHS capacity, and external capacity (GSA controlled in Federally owned or leased space).

2. When space in the existing Federally owned or leased inventory is not available or suitable to meet the defined needs, OPDIVs and Regions will lease suitable office space elsewhere.

3. The four primary criteria for selecting a relocation site are proximity to the primary operating facility, capacity of the building's infrastructure to handle the required telephone and electrical requirements, the amount of space available, and the availability of parking in close proximity to the building under consideration.

4. For planning purposes, space requirements can be established in square foot increments. If relocation occurs with little or no warning, an initial increment of available space can be employed to rapidly initiate recovery operations. As the phased relocation of operational elements continues, space can be expanded to accommodate the entire operation. Those buildings with adjacent expansion space, or in the buildings in the immediate vicinity, are especially suitable. A site that will preclude the relocating element from expanding operations should not be selected.

Suggested Planning Factors
Total Number of Staff X 125 square feet = Primary Space Required
Copy center: 300 sq. ft.
Mail Room: 250 sq. ft.
Supply Center/Room: 1,500 sq. ft.
Computer Network Room With File Servers: 300 sq. ft.
Conference Room: 600 sq. ft.
Snack Bar/Vending (in the absence of a cafeteria in the building): 50 sq. ft.
Administrative and Support Functions: 3,000 sq. ft. minimum

5. Immediate space requirements for the RT and key personnel are paramount. The RT will be the first element arriving at the designated relocation site. The size and staffing of the team are contingent on the scope of the emergency and relocation requirement. In a major relocation, they may include:

a. Space for the IC (if the IC deploys to the relocation site), TR leader, or his or her designee, and immediate support staff.

b. Space for the IC's special staff (General Counsel, Public Affairs, Legislative, Safety Representative, Liaisons, Congressional Affairs, support staff, etc.). (See the IMS Functional annex.)

c. Space for each activated section of the General Staff (Operations, Planning and Information, Logistics, and Finance/Administration). (See the IMS Functional annex.)

6. Warehouse. Relocation situations often generate the need for warehouse space to accommodate the distribution of materials, office supplies, and equipment. The

warehouse location should be within no more than 20 minutes travel time of the relocation site. The space assigned or acquired generally requires a minimum ceiling height of 18 to 24 feet; concrete floors with appropriate floor loading; heating, ventiliation, and air-conditioning (HVAC); some office space; and restrooms. In addition, the warehouse generally requires at least two loading docks to handle the deliveries and turnaround space for semitrailer trucks. Such space will generally be classified as "light industrial" space once it is assigned.

7. The most suitable configuration is space with a combination of private offices and open spaces. The private offices can be used by supervisors or lead personnel, and the open space can be used by the different support function elements. Buildings that have support features such as kitchenettes can be especially helpful during the early critical stage of the relocation when the building may be staffed continuously.

8. Some supporting staff will not require a full time workstation, since they will be working outside of the facility supporting relocation operations or restoral of the primary operating facility.

9. Parking. Official vehicle, staff, and visitor parking will be a critical relocation requirement. There will also be a need for parking directly at the relocation site for Very Important Persons (VIPs) and staff. At a relocation site there will be a need for a large portion of a parking lot to handle the fleet cars/vans/trucks and delivery vehicles. When parking is not available for primary vehicles at the relocation site, it should be acquired or assigned within a couple of city blocks to ensure easy access. Use of a relocation site may cause a significant change in staff commuting patterns; the site may need more parking space than is currently required.

10. Location. Ideally, when selecting a relocation site, acceptable space will be located near the affected primary operating facility, and close to warehousing locations, parking, and personal services. In highly populated areas, the relocation site should be located on or near major transportation arteries that have public transportation. Personnel transferred

to the relocation site may be required to alter the method in which they go to work, and access to public transportation can ease the transitional turbulence. The site selected should be within a reasonable commuting distance; if it is not, then special arrangements may have to be made to address travel, overnight accommodations, and the like. Busing may be an alternative means of reaching the site.

11. Proximity to Services. All of the basic services need to be within close proximity of the relocation site. These services include, but are not limited to, restaurants (eating establishments), lodging, and retail stores, such as drug and grocery stores.

12. Sanitary facilities/facilities for the handicapped. Some Federally owned facilities that come readily to mind as potential relocation sites, such as National Guard or Reserve armories, may lack adequate facilities for female and handicapped employees.

13. Other considerations.

a. If the operating unit has special structural requirements, e.g., unusual floor loading, electrical, or air-conditioning requirements, etc., these must be included in the relocation site criteria.

b. Safety: Is the site in an area that your employees consider safe to walk to from public transportation, from the parking lot, to work late at night?

c. Does the site require and have adequate medical services available?

14. Communications Requirements. Antennas and satellite "dishes" may be required at the relocation site to supplement existing communications capability. This may require wiring and access to roofs and other parts of the structure to allow for installation.

15. Office Equipment. Office equipment includes office furniture, copiers, facsimile (FAX), computers, calculators, printers, televisions, videocassette recorders (VCRs), public address system, radios, display boards, etc. Use of a standard workstation makes it easier to move and affords flexibility in layout and organization. For relocation planning purposes, a "workstation" can be considered to consist of a folding table approximately 5' long by 2' wide with a desk chair. The workstation will require a phone for each individual, and a computer connected to a local area network (LAN), with printer access.

16. Telecommunications/Electrical and 24-Hour Requirements. Communications and information are the two most important items in restoring operations. The building's infrastructure must be able to immediately accommodate potentially hundreds of telephone lines and electrical requirements for hundreds of personal computers (PCs). In addition, the relocation site may be required to operate 24 hours a day, or with a schedule sufficient to sustain emergency operations. If 24-hour or extended operations are required, HVAC and security services may be required to cover the operational period.

17. Policies regarding information security and relocation of computer systems are covered in DHHS Information Resources Management Service (IRMS) Circular No. 10, "Automated Information Systems Security Program (AISSP)," along with the AISSP Handbook. It establishes policies, procedures, and responsibilities for the implementation and administration of the AISSP. Each OPDIV is required to administer an Automated Information System (AIS) security program that meets statutory, regulatory, and Departmental requirements and the needs of the OPDIV and the public. Each OPDIV is also required to have contingency or disaster recovery plans to provide for continuity of operation. All DHHS organizations must ensure that AIS contingency plans are developed, maintained, and tested for an AIS that supports critical OPDIV functions. The AIS contingency plan details how an organization would continue its mission and provide continuity of data processing in the case of a disruption of service expected to last for an extended period of time. Items 6 to 9 are extracts from the AISSP Handbook.

18. A contingency plan must be developed for each AIS facility, Information Technology Utilities (ITUs) (including LANs and wide area networks (WANs)), or standalone microcomputer that processes applications critical to the performance of the organizational mission. However, there are major differences in the level of detail required for a large AIS facility/ITU based on mainframe computers, minicomputers, LANs, WANs, and for stand-alone microcomputers.

19. Each DHHS organization should make every effort to administer the contingency planning process in an integrated manner across all its systems, facilities, and networks, in order to allocate resources equitably and discover and address points of interface. Moreover, contingency planning for entire service and delivery systems, such as electricity and telephone service, must be considered. For example, the alternate power source at the mainframe facility will not provide coverage for the end user who processes critical applications at a workstation.

20. The following list includes key steps in the contingency planning process that are common to both AIS facilities/ITUs and standalone microcomputers.

a. Identify critical applications.

b. Rank applications according to priority for recovery.

c. Define the maximum permissible outage (i.e., disruption of service, use, or access) for each application, in conjunction with the program manager.

d. Back up critical applications, data, operating software, and databases regularly.

e. Explore alternate AIS processing sites within or outside the organization.

f. Select and commit to an alternate site, based on a mutual aid, building, leasing, or contracting agreement.

g. Develop alternate site operating procedures.

h. Arrange for delivery of backup data and software from an off-site security storage facility.

i. Implement tests at the alternate site using backup data and software from the off-site security storage facility.

j. Continue to test regularly.

k. Update the contingency plan based on test results.

21. Contingency Planning Process for AIS facilities/ITUs. The following elements should be included in the contingency plans for AIS facilities/ITUs, including LANs and WANs.

22. Alternate Site. The contingency plan should provide for an alternate site to perform the data processing functions of the organization if a disaster seriously disrupts the services of a principal AIS facility/ITU. Furthermore, there should be reasonable assurance that the alternate site will be available in the event of a disaster, and that it will be available for testing the contingency plan. The first choice for an alternate site is within the organization. For example, an organization that processes data within a distributed processing environment or uses multi-site systems architecture could design its contingency plan so that each site serves as a backup to others. This strategy requires the ability to divert inputs to and outputs from a disabled site, and requires excess processing capacity to handle increased workloads on a temporary basis.

23. If alternative sites do not exist internally, then the organization should consider fully redundant sites, mutual aid agreements, cold sites, or hot sites. Fully redundant sites are usually not a viable alternative. Since they must be built to the exact specifications of the primary site and located elsewhere, they will generally be costly and impractical.

24. Mutual-aid agreements (e , g . , Inter-Agency agreements) with other organizations to use their data processing resources can work effectively if each involved organization commits to increasing its data processing capacity.

25. Cold sites are shells that must be equipped to operate as alternate sites. Since they require a 2- to 3-week delay while the necessary equipment is installed, cold sites may not be an acceptable alternative for an organization that depends on online data processing; however, they could be an acceptable alternative for an organization that only requires batch processing.

26. Hot sites are fully equipped AIS facilities that include PCs, support systems, and telecommunications capability. They are available nationwide for lease. The leasing fee entitles the user to access to the facility when needed. Additional user fees are usually charged for using the site for testing or during an actual contingency situation. Hot sites are usually the most expensive alternative following fully redundant sites, and availability is on a first-come first-served basis.

27. COOP/ECs should consult with Department POCs prior to coordinating with agencies external to DHHS.

28. Assistance Internal to the Department. The PSC offers the following services related to relocation planning.

a. The Administrative Operations Service (AOS). Acquisition management for Automated Data Processing (ADP), program, supplies, equipment,

information processing, and telecommunications support. Real Property Management, including leasing, building security and safety, building management and operations, warehousing and inventory control, motor pool, and disposition of Federal surplus real property. Technical Support and Communications Management for telecommunications, visual communications, printing and publications, reprographics, automated library and reference management, and mail and messenger services.

b. Information Technology Services (ITS). ITS provides a variety of information technology services, including contingency planning for disaster recovery of processing capabilities should a disaster occur. ITS provides assistance to customers in developing contingency plans.

29. Assistance External to the Department. The GSA service organizations, the Public Building Service (PBS), the Federal Supply Service (FSS), and the IRMS can assist in the coordination of activities and services that are required to implement relocation.

a. PBS is responsible for satisfying a requesting agency's space requirements and any associated special requirements, such as special security alarm systems, vaults, and child care facilities. The Federal Property Management Regulations, Assignment and Utilization of Space, Appendix A, identifies which features are provided as standard and which are above standard. Above standard features are provided on a reimbursable basis. The PBS Realty Specialist serves as the overall GSA POC.

b. FSS is responsible for coordinating the delivery of new furniture, the disposal of old furniture, and contracting for a vendor to accomplish the actual move. Policies and procedures are outlined in the Federal Property Management regulations.

c. IRMS is responsible for assisting agencies in planning and satisfying their telecommunications and data processing needs. These services are reimbursable and

include such things as design requirements, relocation cost estimates, cabling/wiring diagrams, installation services, and testing.

30. The Relocation Factor Guide and Relocation Checklist provide guidelines for pre-emergency planning (Stage 1) and relocation (Stage 2), relocation site operations (Stage 3), and ending relocation site operations (Stage 4).

Relocation Factor Guide

Successful relocation is dependent on total coordination among the affected parties. This Guide can be used in Stage 1 (preemergency planning) as a planning tool, or in Stages 2 to 4 tc support relocation, relocation site operations, and ending relation site operations. Advanced planning and foresight in Stage 1 are the key factors in the success of Stages 2 to 4.

The following topics and guidelines are characterized by subject matter and reflected in the Relocation Checklist.

FUNDING

- Refer to Departmental and current Federal Property Management Regulations (FPMR) policy for guidelines to determine who will fund various aspects of the relocation.
- Develop a matrix for all responsibilities and funding sources. Maintain an accurate audit trail to support postrelocation after-action reporting, claims, and analysis.
- Identify funding for any above standard features, alterations, and/or services that may be required per the Departmental or FMPR and document such costs in writing.
- Identify the impact of increased or decreased costs for rent and reimbursable services during the relocation period.

SCHEDULING

- Emergency relocation will require management of a complex and delicately balanced schedule. Work closely with realty, contracting, facilities, and information technology services personnel to devise milestones, phasing, and a completion timeframe associated with the relocation.
- When a change in the relocation schedule becomes known to the IC,

his or her staff, or any of the representatives involved in the relocation, this change must be immediately made known to all parties involved and the Departmental leadership.

- Keep employees informed of the schedule and progress of the relocation. The IC or designated relocation manager should advise all personnel of the timeframe, phasing, and procedures for securing access to the relocation site, e.g., when a card key or combination lock is used, and other pertinent facility information, including directions and strip maps to the relocation site.

SPACE REQUIREMENTS

- The Department and external agencies (GSA, contractors, etc.) must work jointly to define the space requirements for the relocation space. The Relocation Appendix to the COOP annex describes planning factors for space allocation. Requirements are developed by gathering the facts and details necessary to define the Department's relocation space needs, including special requirements and parking.

INVENTORY

- OPDIV COOPs should have an inventory of all office furniture, fixtures, and equipment required to equip and staff the relocation site, based on the planning factors and team structures outlined in this annex and the Relocation Appendices.

- If there is more than one relocation location, provide inventories for each.

- If the relocation of equipment from the Primary Operating Facility (POF) is possible, tag or bar code equipment for proper delivery to the relocation site. Simple labeling and coding techniques (e .g . , different number/color labels for each floor or section for each organizational element) can assist in speeding establishment of the relocation site.

FLOOR PLAN/LAYOUT

- Provide a floor plan for relocation space, including plans indicating electrical, telecommunications, LANs, and computer placement in coordination with the property manager or realty specialist. In the absence of a previously designated relocation site, establish a division of the RT to work with realty, facilities, information technology services, and other specialists to devise a floor plan/layout.

- Floor plans and layouts should conform to all legal and code requirements.

- ITS, GSA's IRMS, and other telecommunication service providers can assist with telecommunications and services contracts, and layout of telephone and telecommunications equipment.

- The earliest development of floor plans and layouts is critical to implementing relocation.

SURVEYING RECORDS FOR ARCHIVING

- If the relocation of records from the POF is possible, relocation may provide an opportunity to dispose of unnecessary records.
- A National Archives and Records Administration (NARA) representative can assist in arranging for transportation, storage, salvage, and disposition of records.
- NARA, in their oversight capacity, has provided the Federal agencies with a General Records Schedule (GRS) that provides disposition instructions for many commonly occurring records in the Federal agencies. It is HHS policy to use NARA's GRS whenever possible for disposition instructions concerning our HHS records.
- For records that are not covered by NARA's GRS, follow your Operating Division's NARA approved, records schedule.
- HHS IRMS Circular 21, Records Management, provides policies, procedures, and responsibilities for records management within HHS.
- HHS IRMS Circular 22, Electronic Records Management, provides policies, procedures, and responsibilities for electronic records management within HHS

SECURITY

- Security services, such as alarms and guard service, may be required at each location at the time of the relocation. Funding responsibility needs to be checked with Departmental representatives or with the regional Federal Protective Service (FPS) Physical Security Specialist.
- The GSA FPS Physical Security Specialist can arrange for such services in accordance with GSA standard practice. Any elements above standard requirements will be provided on a reimbursable basis.
- Department authorities in selected instances provide for contracting these services. These services must be in compliance with GSA guidelines and fall under the jurisdiction of the FPS.
- Work with Departmental or GSA specialists regarding installation of fixed security services (e.g., card key, closed circuit TV, motion detectors) at the relocation site. Coordination with the regional FPS should be accomplished, as appropriate.
- The appropriate DHHS operating element should identify individuals on the relocation team who must personally accompany classified documents.

- If the relocation of equipment, records, and material from the POF is possible, the appropriate DHHS operating element should arrange for any packing of items from the POF that must be completed by DHHS personnel (confidential files, libraries, evidence, etc.).

FURNITURE

- Furniture can be ordered through Departmental providers or through FSS National Furniture Center. Ordering and delivering of furniture to the relocation site should be synchronized with deployment of personnel to the relocation site.

- Contracts may be required for the assembly/disassembly of systems furniture.

- Temporary storage should be arranged for old furniture from the primary operating facility, or new furniture for the relocation site in the event timeframes of the relocation are not met, or the relocation is phased over time.

ALTERATIONS

- During the course of the relocation and preparation of the relocation site, the IC or the RT leader, along with the realty specialist, building manager, design and construction representative, and/or other affected parties must make periodic inspections to determine if the Departmental requirements are being met. Coordinate with these representatives to do joint inspections.

- Any changes from the floor plan during the course of the relocation may delay the relocation, and could result in additional costs.

- Arrange for an inspection with the necessary specialist at the relocation completion time to ensure the Department's needs have been met.

- Prepare a "punch list" of deficiencies so that it can be determined if the space will be ready for occupancy by the relocation timeframe. All affected Departmental personnel should be advised of the target move date and of the amenities available at the relocation site.

- Physical acceptance of the space should be made when the major Departmental requirements have been met, which would permit the affected DHHS operational element(s) to function and perform its mission.

- Any changes in the schedule must be immediately provided to all parties involved.

SIGNAGE

- Signage should be included in the space requirements.

- A signage package should include information on floor directories, room numbers, and personnel/office designations.

- Signage should be in place prior to the first phase of relocation in order to provide direction to the relocating Departmental personnel and movers. All signage must comply with the Uniform Federal Accessibility Standards and with the Americans with Disabilities Act.

UTILITY SERVICES

- If the relocation site has not been predesignated and surveyed, determine what utility services will be required if they are not included as part of the regular service to the space. Coordinate, as necessary, with the building manager and other specialists regarding work authorizations to obtain those services.

- Consider special use electricity, surge free lines, lighting, and climate control for special equipment (e. g . , laboratory requirements, etc.) that may be needed.

- Plan data communications requirements in addition to telephone requirements.

- If possible before relocation, ensure building data communications cable plans are tested.

ADP AND COMPUTERS

- Coordinate ADP services through Departmental sources, such as ITS, or through the GSA Information Systems Support Program (ISSP).

- The IC or designated RT leader should appoint a systems coordinator to assist in detailing cable plans and other requirements for computer and LAN equipment.

- If the relocation of equipment from the POF is possible, the systems coordinator should contact computer vendors regarding the relocation to determine if any special attention is needed to relocate the equipment in order to avoid negating the service contract or warranties that may be in place.

- DHHS IRMS Circular No. 10, "AISSP," along with the AISSP Handbook, provide guidance for data backup.

- If employees are accessing DHHS systems through remote dialups, ensure employees are advised of changes to dialing scripts prompted by the relocation.

TELECOMMUNICATIONS AND LOCAL AREA NETWORKS

- Careful planning and coordination in accordance with the DHHS IRM Circular No. 10, "AISSP," along with the AISSP Handbook, must be conducted to support relocation of systems.

- Cabling in the relocation facility must be sufficient to support all

necessary voice and data communications requirements. Identification of essential functions and equipment in Stage 1 of COOP planning will ensure requirements accurately reflect requirements.

- The systems coordinator or relocation team leader may request assistance from GSA's IRMS to plan telecommunications relocation through its *Telecommunications* Services Contract (TSC) or Purchase of Telephones and Services contract (POTS).

- Planning in Stage 1 should address the need for sufficient ventilation in the relocation site to support relocated computer and other telecommunications equipment.

- The RT systems coordinator and telecommunications specialists should provide the telecommunications/data communications layout on the approved floor plans for the relocation site as soon as possible to ensure that the telecommunications system is activated and compatible with the electrical and ventilation systems at the relocation site. In addition, the installation of the cabling, if required, must be done in coordination with the installation of workstations/furniture.

- Scheduling, funding, and contracting for the relocation of telecommunications and data equipment and services must be done rapidly, and in coordination with the phased relocation of personnel.

- The systems coordinator, in conjunction with finance personnel, should secure estimates and capture costs of relocation and identify funding responsibilities. Agreements and responsibilities should be documented in writing.
- **The Department will be reimbursed by GSA for the relocation of "like" telecommunications and data service when the relocation is caused by an emergency. Purchase of new equipment and costs in excess of providing "like" services are funded by the relocating agency.**

LOADING DOCKS

- If the relocation of equipment from the POF is possible, loading docks must be cleared and access made available at both locations (the POF and the relocation site) during the physical relocation process. Overtime service may be required.

ELEVATOR SERVICE

- If the relocation site has elevators, advance arrangements will eliminate an elevator "bottleneck" during the relocation. Ensure that arrangements for a dedicated elevator are made. These arrangements should be made in concert with the building manager and the relocation move supporting contractor(s). Overtime service may be required.

- If the relocation site is in a multi-tenant building, consideration should be given to scheduling as much of the relocation outside normal business hours and on

weekends to avoid interference, inconvenience, and "bottlenecks" in relation to other building tenants.

- If the relocation of equipment from the POF is possible, consider if furniture or equipment will fit in the elevator(s). If not, alternate means of reaching the designated floor must be arranged (e.g., crane or outside lift, disassembly/assembly).

TRANSPORTATION DURING RELOCATION SEQUENCE

- Depending on the size of the relocation and the number of locations involved, it may be necessary to provide transportation for employees between locations during the relocation sequence. Contract for these services through Departmental procedures or through the GSA/FSS Fleet Management Center, or the GSA rental car contractor.

EMERGENCY CONTACTS

- The RT leader should have emergency contact lists of Department POCs, team members, GSA POCs, and contractors so that during the relocation anyone who might need to communicate with any person involved in the relocation during the emergency may do so.

TRANSPORTATION AND PARKING

- Employees should be advised of the availability of on-site parking, public transportation, and private parking far enough in advance so that adequate arrangements can be made at the relocation site.

- Available paring for Department personnel at the relocation site should be assigned in accordance with DHHS operating element guidelines or based on the FPMR and coordinated with the GSA Field Office.

OCCUPANT EMERGENCY PLAN

- If the relocation site has no Occupant Emergency Plan (OEP), the relocating elements must develop an OEP. The FPS Physical Security Specialist can assist in OEP development.

MAIL

- Advise correspondents in both the public and private sectors of the change in address for mailings. Newspaper ads, radio announcements, and TV public announcements should be considered, if appropriate.

- Notify the telephone service providers of pertinent changes; revise your internal telephone/ communications directory, as required.

- Change shipping and billing addresses with vendors.

RELOCATION MOVING ARRANGEMENTS

- If the relocation of equipment from the POF is possible, and the DHHS operating element is conducting its own relocation move, advise the relocation site building manager and realty specialist to ensure proper coordination.

- If possible, the RT leader and building manager should participate in an initial walkthrough of the relocation site to become acquainted with existing conditions, furniture, office equipment, telecommunications, and data elements that may be relocated, and pinpoint any problem areas. If sufficient time is available, a coding system should be developed for moving furniture and equipment to the proper locations.

- Check with local authorities to ensure there are no major scheduled events such as parades, demonstrations, or road work, etc., which may impact the relocation.

- Arrange, if necessary, for parking passes for the RT members at the relocation site.

- Arrange for dumpsters at the POF and the relocation site with the assistance of the building manager.

- Assign "spotters" who will assist in the relocation move, and supply them with the color/coded floor plans on all floors at the relocation site during the move. If the relocation of equipment from the POF is possible, spotters may also be needed at the POF.

- Keys to all the areas must be available to the "spotter" assigned to each area to facilitate the relocation.

PACKING INSTRUCTIONS

- If the relocation of equipment from the POF is possible, this must be synchronized with salvage and recovery operations. Salvage and recovery operations must be completed to identify which items (records, equipment, etc.) are to be moved to the relocation site, and which will require special measures to salvage/repair, or require disposal.

- If a moving contractor is employed, the contractor will come in and survey the space, estimate the number of boxes and labels required, establish any special packing instructions, and provide accompanying employees or escorts with the necessary guidelines for packing purposes.

- If the affected area of the POF is accessible to employees, special procedures (escorts) may be required to allow personnel to recover personal items from work locations.

- Special requirements may be required to move live plants, microwave ovens, artwork, or

pictures that are not part of the agency's official inventory.

- If the relocation of equipment or records from the POF is possible, and employees are assisting in the relocation. Prepare packing instructions after consultation with the moving and specialty contractors.

EQUIPMENT UNDER WARRANTY AND LEASED EQUIPMENT

- If the relocation of equipment from the POF is possible, vendors should be contacted for packing instructions and assistance as required by the terms of the contract.

. AFTER RELOCATION

- When the relocation move contractor reports that the last piece of furniture and equipment has been moved into the relocation site, the RT leader, building manager, and other specialists should make a personal inspection to ensure that everything is in place at the relocation site.

- Should loss or damage to goods be caused by the relocation move contractor, a written claim should be filed with the move contractor promptly.

- All keys, building access cards, etc., from the POF should be collected and turned over to the appropriate authority.

MEET WITH STAFFS

- The RT leader should meet with arriving DHHS operating elements to ensure a smooth transition to the relocation site.

- Following the relocation, the RT leader should meet with each relocated DHHS operating element to assess the relocation and any additional requirements they may have.

- The RT leader should remain involved until all of the minor problems have been resolved with the relocation and the relocated employees are assured of one focal POC to which they can direct their needs and concerns.

ENDING RELOCATION SITE OPERATIONS

- Procedures for ending relocation site operations and returning to the POF or another permanent facility are essentially the reverse of this process.

Relocation Checklist

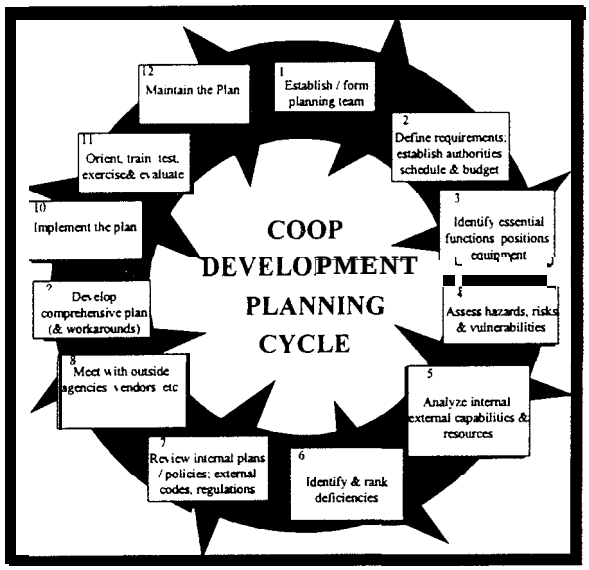
Successful relocation is dependent on total coordination among the affected parties. This checklist can be used in Stage 1 (preemergency planning) as a planning tool, or ir Stages 2 to 4 to support relocation, relocation site operations, and ending relocation site operations. Advanced planning and foresight in Stage 1 are the key factors in the success of Stages 2 to 4.

The following topics and guidelines are characterized by subject matter.

#	Task	Responsible Party
1.	Identify need for space.	
2.	Determine delineated area.	
3.	Contact departmental or GSA real estate specialists and establish POCs.	
4.	Identify if a Departmental or GSA space allocation standard is in place.	
5.	Work with departmental or GSA specialists on a space requirements development package.	
6.	Identify special space needs (e.g., shared use space, cafeteria, snack bar, child care facility, floor load, mail area, conference facilities, vaults, antennas, storage).	
7.	Identify "above standard" requirements and anticipated cost.	
8.	If you need new furniture (systems/conventional), contact Departmental specialists or the GSA FSS National Furniture Center.	
9.	Identify special equipment needs (power, HVAC, data connectors, dedicated lines, surge free lines, Uninterruptible Power Supplies (UPS), etc.)	
10.	Identify impact anticipated by rent or reimbursable services.	
11.	Work with Departmental or GSA specialists to develop and acquire telecommunications services and costs including "like" telecommunications services, if applicable.	
12.	Determine funding responsibilities.	
13.	Develop target schedule.	
14.	Identify and promulgate the RT leader or appropriate representative as primary POC.	
15.	Establish a POC for the relocation site (building manager or realty specialist).	

#	Task	Responsible Party
16.	Prepare or provide inventories of office furniture/equipment that will be relocated.	
17.	Contact vendors for equipment under lease or warranty for any special installation requirements.	
18.	Develop drawings including furniture layouts and floor plans, identifying each employee/office.	
19.	Evaluate security requirements.	
20.	Develop signage.	
21.	As required, develop cabling plan for telecommunications and LAN systems (ITS, GSA IRMS, and contractor(s) can assist).	
22.	Initiate emergency procurement of relocation moving contract, or if preplanned, activate contingency relocation moving contract.	
23.	Develop code system with move contractor for furniture, files, and equipment relocation.	
24.	Code each floor plan for each unit organization to be moved.	
25.	If equipment is being moved from the POF, code each piece of office equipment to be relocated, with personal name, division, etc., to agree with the floor plan.	
26.	Determine disposition of equipment not removed from the POF.	
27.	Survey all records, files, and determine which records can be sent to the records center and which must be forwarded to the relocation site.	
28.	Periodically inspect the relocation site(s) to verify all requirements are being met.	
29.	Meet with the moving contractor periodically to finalize move plans and monitor moving/phases of the relocation (packing, schedule, elevators access, loading docks, and off-street parking) at both locations (POF and relocation site).	
30.	Notify employees of relocation timeline, move requirements, new facilitv information. and locations of relocation site(s).	
31.	Notify customers/vendors of relocation, change of address, telephone directory changes, etc. Use newspapers, radio, and television, as necessary.	
32.	Arrange to have signs for relocation facility and for offices in the relocation facilitv.	
33.	Identify special fees/costs for overtime for employees, mechanics, technicians, security guards, and other in-house or other personnel at both locations.	

#	Task	Responsible Party
34.	Consider need for transportation for employees between POF and relocation site; park and rides and relocation site, etc.	
35.	Arrange for elevator access at the relocation site.	
36.	Arrange for dumpsters at both locations.	
37.	Arrange for use of loading docks at both locations. Be sure to check if there are any conditions that have to be met to permit use.	
38.	Establish a list of emergency contacts in the event a problem occurs during the relocation (RT members, moving contractor, security, etc.).	
39.	Assign "spotters" with floor plans at each location to ensure movers and employees can assist in property to be moved, and to check for completeness and/or loss/damage.	
40.	Inform employees of how to gain access to the relocation facility (card keys, check-in procedures, access cards, etc.).	
41.	Conduct final inspection of the relocation site after the physical move to ensure completion. Develop a "punch list" of deficiencies.	
42.	Meet with relocated operating element representatives to ensure needs are met and to identify additional requirements.	
43.	Keep relocated operating elements informed of progress on ending relocation site operations and transferring operations back to the POF or to a new permanent location.	



APPENDIX 3 TO FUNCTIONAL ANNEX B

COOP SUPPLIES, SERVICES, AND EQUIPMENT

EMERGENCY MANAGEMENT AND ENTERPRISE RESUMPTION PLANNING SYSTEMS (EMERPS) CONTINUITY OF OPERATIONS PLAN (COOP)

1. INTRODUCTION

A. This Appendix provides a recommended list of COOP supplies and basic guidelines for their employment in salvage and restoration operations.

B. Supplies, equipment, and services required to implement salvage, recovery, and relocation operations will vary with the nature and consequences of the incident. The following list of supplies, services, and equipment is provided as a planning guide and execution checklist for emergency coordinators and Incident Management System (IMS) COOP team members. The list may also be employed as a checklist to evaluate contract services support. The damage assessment process will determine what specific supplies, equipment, and services are required. Identification in Stage 1 of sources for supplies, services, and equipment will expedite Stages 2 to 4 of COOP execution.

C. The extent of damage, and in particular, the damage from water and smoke often require specialized handling and treatment. Salvage and recovery of paper records, for

example, may require specialized facilities for freezing, vacuum drying, or air drying, including transportation by refrigerated truck. Refrigeration trucks can serve as emergency freezing units, pending freeze drying. Preparing for critical incidents or emergencies means understanding what materials, equipment, and services are required to counter the effects of the damaging event.

D. Specialized expertise regarding salvage and restoration of vital records is available from a variety of sources, including the National Archives and Records Administration (NARA) (see list of national and regional offices below), or the American Institute for Conservation of Historic and Artistic Works, 1717 K Street, NW, Suite 301, Washington, DC 20006, (202) 452-9545, fax: (202) 452-9328. Specialized expertise regarding salvage and restoration of vital equipment is likewise available from a variety of sources, including operating element technical services personnel, original equipment manufacturers, or vendors/suppliers.

E. Generally, potential water, fire, and smoke damage should receive particular attention, since they are the likely agents that will damage records and equipment. If chemical agents are either stored in the building or contained in its operating systems, the potential damage these might cause should also be addressed during planning. For example, certain chemicals used in fire extinguishers adhere to records. The type of media and equipment will determine the nature of salvage and restoration. Photographic negatives and microfilm that are water damaged require different treatment than water damaged paper records. Remember that certain records or equipment may also carry access restrictions. Only personnel with proper clearance should be allowed to handle them.

F. A list of disaster recovery specialists with their areas of expertise, addresses, telephone numbers, and an individual point of contact (POC) should be prepared and kept available before an emergency or critical incident happens. This list should be checked periodically to ensure that it remains accurate and current. Operating elements should be aware that disaster recovery specialists often concentrate on assisting their clients with very

specific problems. One recovery specialist may focus on the process of recovering water damaged paper records, while another may concentrate on recovery of water damaged magnetic tape. Consequently, operating elements should develop as broad a list of recovery specialists as possible in order to be able to respond to all the potential risks to which all their records and equipment might be subject.

G. For vital records, the Department of Health and Human Services (DHHS) operating elements should consult with Department vital records managers, or NARA's Regional Federal Records Centers (FRCs) and/or Regional Archives to obtain information about records disaster recovery plans.

II. NATIONAL CENTERS

A. Washington National Records Center
Services Division, Office of Records Administration, (301) 713-6677
4205 Suitland Road
Washington, DC 20409-0002
Area served: District of Columbia, Maryland, West Virginia, and Virginia (except U.S. Court records for Maryland, Virginia, and West Virginia).

B. National Personnel Records Center (Civilian Personnel Records)
111 Winnebago Street
St. Louis, MO 631184199
Area served: The entire Federal Government personnel records of separated Federal employees; medical and pay records of all Federal employees; designated medical records of U.S. Army and Air Force military personnel and their dependents; and records of agencies in the St. Louis area (Missouri only), of Scott AFB, IL, and of the Memphis Service Center.

C. Pittsfield Federal Records Center
100 Dan Fox Drive
Pittsfield, MA 01201-8230
Area served: National collection of long-term records.

III. REGIONAL CENTERS

A. Boston Federal Records Center
380 Trapelo Road
Waltham, MA 02154-6399
Area served: Maine, Vermont, New Hampshire, Massachusetts, Connecticut, and Rhode Island.

B. New York Federal Records Center
Military Ocean Terminal, Building 22
Bayonne, NJ 07002-5388
Area served: New York, New Jersey, Puerto Rico, and the Virgin Islands.

C. Philadelphia Federal Records Center
14700 Townsend Road
Philadelphia, PA 19154-1025
Area served: Delaware, Pennsylvania, and U.S. court records for Maryland, Virginia, and West Virginia.

D. Atlanta Federal Records Center
1557 St. Joseph Avenue
East Point, GA 300442593
Area served: North Carolina, South Carolina, Tennessee, Mississippi, Alabama, Georgia, Florida, and Kentucky.

E. Chicago Federal Records Center
7358 South Pulaski Road
Chicago, IL 60629-5898
Area served: Illinois, Wisconsin, Minnesota, and U.S. court records for Indiana, Michigan, and Ohio.

F. Dayton Federal Records Center
3 150 Springboro Road
Dayton, OH 45439-1883
Area served: Indiana, Michigan, and Ohio (except for U.S. court records).

G. Kansas City Federal Records Center
2312 East Bannister Road
Kansas City, MO 64131-3060
Area served: Kansas, Iowa, Nebraska, and Missouri (except greater St. Louis area).

H. Fort Worth Federal Records Center
501 W. Felix Street, Building 1, Dock 1
P.O. Box 6216
Fort Worth, TX 761150216
Area served: Texas, Oklahoma, Arkansas, Louisiana, and New Mexico.

I. Denver Federal Records Center
Building 48, Denver Federal Center
P.O. Box 25307
Denver, CO 80225-0307
Area served: Colorado, Wyoming, Utah, Montana, North Dakota, and South Dakota.

J Los Angeles Federal Records Center
24000 Avila Road
P.O. Box 6719
Lagunal Niguel, CA 92607-67 19
Area served: Arizona, Clark County Nevada, and southern California (counties of San Luis Obispo, Kern, San Bernadino, Santa Barbara, Ventura, Orange, Los Angeles, Riverside, Inyo, Imperial, and San Diego).

K. San Francisco Federal Records Center
1000 Commodore Drive
San Bruno, CA 94066-2350
Area served: Nevada (except Clark County), California (except southern California and American Samoa).

L. Seattle Federal Records Center
6125 Sand Point Way, NE
Seattle, WA 981157999
Area served: Washington, Oregon, Idaho, Alaska, Hawaii, and Pacific Ocean area (except American Samoa).

Iv. NARA REGIONAL ARCHIVES

A. NARA regional archives facilities can also provide information on records preservation and records recovery. They may also provide other sources of information or assistance, such as lists of records recovery specialists, and advice in developing a records recovery plan. Addresses of the regional archives are listed below.

1. National Archives-New England Region
380 Trapelo Road
Waltham, MA 02154-6399

2. National Archives-Pittsfield Region
   100 Dan Fox Drive
   Pittsfield, MA 012018230

3. National Archives-Northeast Region
   201 Varick Street
   New York, NY 10014-4811

4. National Archives-Mid-Atlantic Region
   9th and Market Streets, Room 1350
   Philadelphia, PA 19107-4292

5. National Archives-Southeast Region
   1557 St. Joseph Avenue
   East Point, GA 30344-2593

6. National Archives-Great Lakes Region
   7358 South Pulaski Road
   Chicago, IL 60629-5898

7. National Archives-Central Plains Region
   23 13 East Bannister Road
   Kansas City, MO 64131-3060

8. National Archives-Southwest Region
   501 West Felix Street, Building 1, Dock 1
   P.O. Box 6216
   Fort Worth, TX 76115-0216

9. National Archives-Rocky Mountain Region
Denver Federal Center, Building 48
P.O. Box 25307
Denver, CO 80225-0307

10. National Archives-Pacific Southwest Region
24000 Avila Road, 1st. Floor East
P.O. Box 6719
Laguna Niguel, CA 92607-6719

11. National Archives-Pacific Sierra Region
1000 Commodore Drive
San Bruno, CA 94066-2350

12. National Archives-Pacific Northwest Region
6125 Sand Point Way
Seattle, WA 98115-7999

13. National Archives-Alaska Region
654 West 3rd Avenue, Room 012
Anchorage, AK 99501-2145

B. While salvage and restoration of vital records and equipment often require specialized assistance, some basic guidelines exist that may assist DHHS employees in acting during the immediate aftermath of a critical incident or emergency.

1. **Recovery of Water Damaged Material**

a. If the object is still wet, rinse with clear, clean water or a fine hose spray. Clean off dry silt and debris with soft brushes or dab with damp cloths without grinding debris into objects.

b. Air dry objects indoors if possible. Sunlight and heat may dry certain materials too quickly, causing splits, warpage, and buckling.

c. The best way to inhibit growth of mold and mildew is to reduce humidity. Increase air flow with fans, open windows, air-conditioners, and dehumidifiers.

d. Remove heavy deposits of mold growth from walls, baseboards, floors, and other surfaces with commercially available disinfectants. Avoid the use of disinfectants on historic wallpapers.

e. If objects are broken or begin to fall apart, place all broken pieces, bits of veneer, and detached parts in clearly labeled open containers. Do not attempt to repair objects until completely dry or, in the case of important materials, until you have consulted with a professional conservator.

f. Documents, books, photographs, and works of art on paper may be extremely fragile when wet; use caution when handling. Free the edges of prints and paper objects in mats and frames, if possible. These should be allowed to air dry. Rinse mud off wet photographs with clear water, but do not touch surfaces. Sodden books and papers should also be air dried, or may be kept in a refrigerator or freezer until they can be treated by a professional conservator. There are two primary professional restoration processes: freeze or vacuum drying. Documents, once soaked, cannot be opened without tearing and damaging them. Once freeze dried, they become as they were before getting wet, although they may remain a little wrinkled. Books, documents, and any wet papers are first frozen. This must be

done within 72 hours to prevent mold and damage to the paper. Once frozen, the papers can be stored indefinitely. The papers are then placed in a vacuum chamber that maintains a freezing temperature while an extremely low vacuum is applied for 2 to 3 days, depending on the amount of moisture in the papers. Vacuum drying is another method used that is the same but does not keep the papers frozen during processing. This process does not work as well as freeze drying. The cost to perform this process ranges from $80 to $125, depending on the amount of moisture. Papers are wiped down with a chemical to stop bacteria from forming and to avoid any problems to the people later handling them. In this process most inks are also locked in to avoid running. Any books, x-rays, computer disks, files, microfilm, checks, and papers are all salvageable with this process. The drying time varies with the amount of moisture in the papers. Sorting the documents as they are boxed can make them easier to find after drying. By spending time organizing, the important papers can be dried first, and returned to the operating element, expediting restoration of critical/essential functions.

g. Textiles, leather, and other "organic" materials will also be severely affected by exposure to water and should be allowed to air dry. If you must move wet textiles, use a solid support or stretched canvas to carry them. Do not attempt to unfold extremely delicate fabrics if the fragile layers are stuck together. Wait until they are dry, then consult a conservator.

h. Beware of serious health hazards associated with mud and mold. Wear plastic disposable gloves, protective clothing, goggles, and if possible, use a respirator.

i. Photograph items before you take steps to salvage them, and document your efforts.

j. Remove wet paintings from the frame but not from the stretcher. Air dry, face up, away from direct sunlight.

k. Furniture finishes and painting surfaces may develop a white haze or bloom from contact with water and humidity. These problems do not require immediate attention. Consult a professional conservator for treatment.

l. Rinse metal objects exposed to flood waters, mud, or silt with clear water and dry immediately with a clean, soft cloth. Allow heavy mud deposits on large metal objects (such as sculpture) to dry. Caked mud can be removed later. Consult a professional conservator for further treatment.

2. Damaged Electronic Equipment and Magnetic Media

This equipment includes office computers, word processors, telephone switching equipment, test equipment, audio-video equipment, and other electrical and electronic apparatus. Danger to these items includes fire, heat, smoke, and water damage. The following guidelines are provided as an introductory overview; your information technology services supporting staff should have specific plans in place to deal with damage to supported equipment. They should be an integral part of your plan development process, and of your Emergency Response (ERT) and Relocation Teams (RTs).

3. Warning

If warning is available prior to the incident or emergency, power should be disconnected from all electronic equipment in accordance with system shutdown procedures. This equipment should be protected from water damage. There is voltage potential within the circuitry, which tends to plate contaminants onto printed circuit boards when they are damp. Further, there is the ever-present danger of electrical shorts to the equipment or shocks to the equipment operator.

4 Smoke Damage

a. Primary damage to electronic equipment is caused by smoke that contains corrosive chloride and sulphur combustion byproducts. Smoke exposure during a fire for a relatively short period of time does little immediate damage; however, the particulate residue left after the smoke has dissipated contains the active byproducts that will corrode metal contact surfaces in the presence of moisture and oxygen. The ultimate objective in the restoration is the removal of the contaminant.

b. Since all of the equipment cannot be cleaned simultaneously, it is most important that immediate steps be taken to arrest the corrosion process. Move the exposed equipment into an air-conditioned and humidity controlled environment as soon as possible. Forty- to 50-pecent relative humidity will generally prevent an acceleration of corrosive activity. If moving the equipment is not possible, make sure the equipment area is sealed off from outside elements. Do not wrap the individual pieces of equipment in any material that tends to trap moisture inside the chassis. Spray connectors, backplanes, and printed circuit board surfaces with Freon or Freon-alcohol solvents for preliminary cleanup. Follow up with any corrosion inhibiting aerosol spray to stabilize metal contact surfaces. This will leave a thin but easily removable coating, helping to prevent oxygen and moisture from activating the corrosion process. Once the corrosion process is stabilized, an analysis can be made of the contaminants and appropriate decontamination processes can be applied by a professional restoration organization.

5. Water Damage

It is a popular misconception that electronic equipment exposed to water and moisture is permanently damaged. Water that is sprayed, splashed, or dipped onto electronic equipment can be easily removed. Even equipment that has been totally submerged can be restored; however, in every case of water damage, immediate countermeasures are imperative. It is most important to turn off all electrical power to the equipment, i.e., *do not energize any*

wet equipment. To allow water to run out of equipment. open cabinet doors, remove side panels and covers, and pull out chassis drawers. Set up fans to move room temperature air through the equipment for general drying. Move portable equipment to dry, air-conditioned areas. Use compressed air at no higher than 50 psi to blow out trapped water. Use hand-held dryers on lowest setting to dry connectors, backplane wirewraps, and printed circuit cards. **(Caution:** Keep the dryer well away from components and wires. Overheating of electronic parts can cause permanent damage.) Use cotton tipped swabs for hard-to-reach places. Lightly dab the surfaces to remove residual moisture. Do not use cotton tipped swabs on wirewrap terminals. Water displacement aerosol sprays containing Freon-alcohol mixtures are effective in first step drying of critical components. Follow up with professional restoration as soon as possible.

6. Tapes, Disks, and Other Storage Media

a. The most important asset to be preserved following the loss is the operating element media. Severe damage to disk read/write heads and tape transport mechanisms is probable if an attempt is made to operate with media that is not clean: A "head crash" caused by particulate on the surface of a disk will not only damage the drive, but result in a loss of data. Dirty tapes will stick and break, causing loss of data. Emergency one-time cleaning of contaminated tapes and disks for data recovery is possible. The damaged media is then discarded after data recovery.

b. First step emergency procedures are to place all contaminated magnetic media in an air-conditioned area to remove water and to stabilize media surfaces. Remove media from wet and contaminated containers where possible. Identify all media as to type, application, and location. Wipe exterior surfaces with alcohol or Freon-alcohol solutions to remove contamination. Call a professional restoration company for followup restoration and data recovery from contaminated floppy disks, tapes, hard disks, and all associated drive and read/record equipment.

EQUIPMENT AND SUPPLIES

for the Incident Command Post (ICP) or Emergency Coordination Center (ECC)

Telephones	Battery-Operated Radio
Purchase Order Forms	Tables and Chairs
Computers and Printer With Paper	Employee and Volunteer Registration Forms
Photocopier	Name Badges
Notebooks	Gloves
Paper, Pencils, Pens, Tape, Staplers	Hard Hats

V. THE PACKOUT

Area salvage coordinators will monitor contractor packout or, where operating unit personnel are employed, establish wrapping/boxing teams to assist in packout of salvageable records and equipment.

RECOMMENDED SUPPLIES FOR PACKOUT	
Boxes (Cardboard), Large Tape Dispensers for Sealing Boxes	Crayons (Wax)/Grease Pencils
Dehumidifiers	Extension Cords (Heavy Duty)
Freezer Space (Cold Storage)	First Aid Kits
Freezer Space (Blast)	Felt Tip Markers
Garbage Cans (Large Plastic)	Forklifts
Generators (Portable)	Freezer Paper (Pre-Cut)
Gloves (Heavy Duty Work)	Rubbish Hauling
Hand Trucks, Dollies, or Carts	Scaffolding
Hard Hats	Shovels
Flashlights	Shrink Wrap for Pallets
Milk Crates (Plastic)	Toilets, Portable
Notebooks/Pencils/Pens	Transistor Radio
Pallets	Trucks
Pumps, Portable	Walkie-Talkies
Push Brooms	Water (Drinking)
Ramps	Wet/Dry Vacuums
Large Boxes or Other Containers to Pack Oversize Volumes, Maps, Blueprints, Works of Art, Etc.	Wheelbarrows
Plastic Bags	Respirators, Protective Face Masks, Dust Masks
Manual Pallet Mover	Zippy Cutters or Scissors
Assorted Tools	Paper Towels or Hand Towels (Several Packages at Least)
Polyethylene Sheeting	Mops, Buckets, Brooms
Cutters	Floor Squeegees
Fans and Extension Cords	ABC or Halon Fire Extinguishers
Plastic Bags	Notepads, Clipboards, Pencils, Waterproof Marking Pens, Masking Tape
Still Camera and Film/Digital Camera	Rope
Dry Ice	First Aid Supplies
Hose Bibs	Flashlights With Batteries
Radios (Walkie-Talkies)	Plastic Milk Cartons
Catering Services	Deep Freeze Facilities
Bullhorn(s)	Newsprint
Hard Hats, Protective Clothing, Neoprene Gloves	Large (> 3 x 5") Self-Adhesive Labels
Disposable Gloves (Medium and Large Sizes)	Buckets

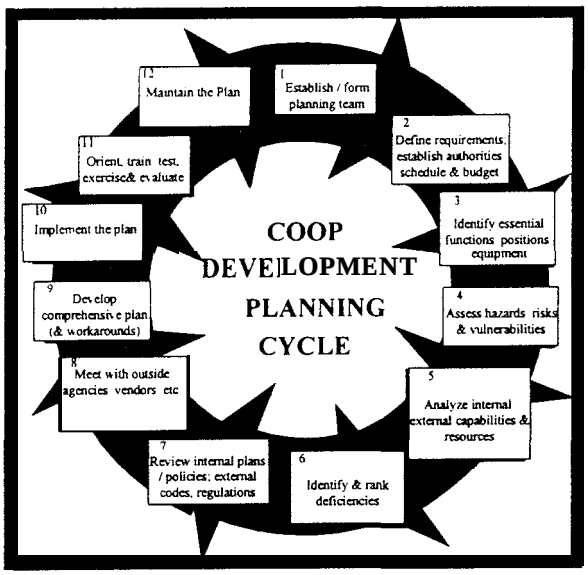
RECOMMENDED SUPPLIES FOR PACKOUT	
Newsprint	Mops
Polyethylene Film (6 Mil Plastic Sheeting)	Brooms and Dustpans
Portable Toilets	Large, Plastic Garbage Cans
Portable Electrical Sump Pumps	Water Hoses With Connectors and Adjustable Spray Nozzles
Mops, Buckets, Brooms	Sponges
Refrigerator Trucks	Soft Cloths and/or Brushes
Sublimation Chambers (Walk-In Facilities That Lower Temperature)	Plastic Garbage Bags
Plastic Milk Crates	Polyethelene Bags
First Aid Kit	Plastic Wash Tubs (C. 18 x 24")
Heavy Duty (Duct) Tape Paper Pads, Pencils, Waterproof Pens	Waxed or Freezer Paper
Clean Weights (Bags of Lead Shot, Wrapped Bricks)	Paper Towels
Screen Racks (C. 24 x 36")	> 3 Mil Polyester Film (C. 18 x 24")
Dry Chemical Sponges	Aluminum Foil
Plastic Aprons	Nylon Monofilament (1/32" Dia)
Tool Kits (Crowbars, Hammers, Pliers, Wrenches, Etc.)	1/2" Plexiglass Plates (Rounded Edges for Safety) 4 x 6", 5 x 7", 8 x 10"
Battery-Operated Radio	6 Mil Plastic (Polyethylene) Sheeting
Light Weight (Corrugated Polypropylene) Rigid Sheets (36" x 48")	

IMS COOP Team Personal Supplies

The following is a list of suggested materials that team members are encouraged to prepare and have on hand in case of emergency.

Advanced preparation of materials is suggested since, in an emergency, preparation time may be limited.

- The EMERPS Annex and Appendices
- Container for Drinking Water
- Coveralls or Pants, Long
- Flashlight, Waterproof
- Gloves, Rubber
- Gloves, Work
- Hard Hat (if have access to one)
- Snacks, Quick Energy
- Socks (plus an extra dry pair)
- Sunglasses
- Hat
- Jacket
- Old Flat, Closed Shoes, Boots, or Rubber Boots
- Pencil
- Pocketknife
- Prescription Medicines, Aspirin
- Shirt, Long Sleeved
- Small Notebook
- Tissues or Towelettes
- Toothbrush/Paste
- Other Personal Needs



APPENDIX 4 TO FUNCTIONAL ANNEX B

COOP CHECKLIST

ENTERPRISE RESUMPTION AND CONTINUITY OF OPERATIONS PLANNING (COOP)

This checklist is provided as both planning and execution tool. It will allow tracking of the many activities that will be performed simultaneously during an emergency.

	ACTION	YES	NO
1.	Coordinate initial response using occupant emergency plan and other emergency measures to protect life and minimize property damage.		
2.	Implement COOP procedures.		
3.	On-scene or first-arriving senior Department of Health and Human Services **(DHHS)** official assesses situation, assumes incident command, if required.		
4.	Establish (and transfer, when required) Incident Management System **(IMS)** Command.		
5.	Establish liaisons (with fire, law enforcement, etc., as required).		
6.	Notify team(s) and start recall process.		
7.	Identify location for, and establish an Incident Command Post **(ICP)** or Emergency Coordination Center **(ECC)** at or near original site, and coordinate the recovery.		
8.	Start Activity Logs; create hourly diary and file for events and costs.		
9.	Notify senior management.		
10.	Assess the damage and stabilize the situation.		
11.	Identify contingencies.		
12.	Photograph the site, if possible.		

	ACTION	YES	NO
13.	Restore electricity or procure emergency power for lighting; restore water; get heating, ventilation, and air-conditioning (HVAC) working; and pump out standing water.		
14.	Document meetings, conversations, and telephone calls.		
15.	Record names and addresses of witnesses to the incident.		
16.	Prepare report that details damage and outlines disposition of equipment.		
17.	Determine the starting point for recovery.		
18.	Determine goals and objectives.		
19.	Build an incident action plan (verbal or written, depending on the scope of the event).		
20.	Make recommendations to senior management; receive senior management decision.		
21.	In the case of internal backup or mutual support agreements, give formal notification for request for support. Provide details as to scope of requested support.		
22.	Give formal notification for request to use relocation site (in case where site is preidentified). Begin identifying a relocation site (in case where no site has been designated).		
23.	Set up a staging/receiving area.		
24.	Procure transportation and other support (material handling equipment, etc.).		
25.	Arrange for emergency funding and procurement.		
26.	Notify appropriate contractors that bids are needed.		
27.	Monitor resource and work status and report progress.		
28.	Monitor worker safety.		
29.	Give senior management scheduled status updates.		
30.	Review Departmental policy, Department budget, and cost limit guidelines with teams.		
31.	Give employees scheduled updates on status.		
32.	Gather loss and cost information, emergency service invoices, photographic inventories, latest inventories, records-payroll, etc.		
33.	Commence establishing the scope of loss.		
34.	Produce comprehensive report on damages.		
35.	Gather Activity Logs from all teams.		
36.	Produce daily status reports.		
37.	Arrange for any additional professional help.		
38.	Procure specialized support such as freezer company facility space, refrigerated trucks, freeze drying facilities, etc.		
39.	Keep status charts of recovery efforts.		
40.	Determine damage and requirements to restore telecommunications		

	ACTION	YES	NO
	network.		
41.	Determine the damage to personal computers (**PC**), office, data entry, and other equipment.		
42.	Assess necessary replacement equipment.		
43.	Obtain necessary replacement equipment from vendors.		
44.	Notify vendor management to review plan for repair of equipment and installation of delivered units.		
45.	Meet with team members and schedule duties for preparing the relocation site for receipt of key personnel, records, and equipment.		
46.	Determine phasing of relocation.		
47.	For relocation site, review and ensure availability of required power, hearing, telephone lines, and air-conditioning; work with maintenance personnel to ensure best service from utility companies.		
48.	Obtain needed records, media, and documentation for use at relocation site.		
49.	Notify employees of reporting instructions and activation time for relocation site.		
50.	Review list of requirements for supplies.		
51.	Arrange for transportation and/or purchase of replacement supplies.		
52.	Notify vendors of status and give address of relocation site.		
53.	As soon as relocation site is operational, begin to clean up and restore original site.		
54.	Transition key personnel and critical functions, equipment, and records to the relocation site(s). Prepare the relocation site(s) for receipt of follow-on personnel.		
55.	Check on requirements for supplies and materials at the original site.		
56.	Schedule testing with maintenance personnel.		
57.	Determine when equipment will be available.		
58.	Arrange for setting up temporary office space.		
59.	For information systems, notify users of status and inform them on details of restart plan and how to handle input.		
60.	Obtain the backup documents and establish revised schedules in conjunction with users and operations.		
61.	Establish transportation to/from relocation facilities; arrange scheduled shuttle.		
62.	Arrange transportation for materials, people, supplies, and equipment.		

	ACTION	YES	NO
63.	Train employees who may be working outside their areas of responsibility.		
64.	Establish internal mail delivery between locations.		
65.	Deliver any needed furniture to the relocation site.		
66.	Deliver any needed office equipment to the relocation site.		
67.	Set up any telephones at the relocation site.		
68.	Provide information system technical assistance and user support to relocated personnel.		
69.	Restore systems in priority sequence; verify continuity.		
70.	Work with vendor technical staff, as needed.		
71.	Work with telephone company to restore full service and place order, as needed, for replacement telecommunications facilities.		
72.	Notify and inform users of disruption in services.		
73.	Restore information systems from backup tapes, recovery documentation, etc.		
74.	Perform tests and verify integrity. Ensure continuity by working with users.		
75.	Process critical applications.		
76.	Establish full processing schedule.		
77.	Where applicable, contact insurance companies and do followup with adjusters.		
78.	Initiate insurance claims.		
79.	Advise teams of the replacement provisions in the existing insurance policy and the allowance for renting and leasing necessary equipment.		
80.	Audit financial files to capture incident-related costs.		
81.	Develop After-Action Report (AAR) following the incident; modify COOP plan, as necessary, based on lessons learned.		

ANNEX C

CONTINUITY OF GOVERNMENT PLAN (COG)

(Classified - To Be Published Separately)

ANNEXD

EMERGENCY MANAGEMENT

I. PURPOSE

The purpose of this annex is to outline the Department of Health and Human Services (DHHS) approach to Disaster Response and Emergency Management situations not covered by the previous annexes of Direction and Control, Continuity of Operations Plan (COOP), or the Continuity of Government (COG) Plan.

II. APPLICABILITY AND SCOPE

This Annex applies to all elements of DHHS.

III. POLICY

Several national-level response plans have been written and approved that outline DHHS responsibilities and methods for a coordinated response to major disasters. It is the intent of this annex to ensure these national plans are the basis of how DHHS will respond to meet its responsibilities during national emergencies. Supporting DHHS plans will be kept simple, understandable, and most importantly, functional and updated.

IV. OBJECTIVES

It is the objective of this effort to ensure that DHHS plans are flexible, adaptable, and meet the needs of all managers within DHHS. DHHS managers will know when and how to correctly respond to major disasters.

V. SITUATION AND ASSUMPTIONS

A. Situation

1. The role of the National Disaster Medical System (NDMS) is a national medical mutual aid network, Federally coordinated, to care for the victims of any incident that exceeds the medical care capability of affected State, Region, or Federal medical care system. At the Federal level, the NDMS is a cooperative effort of Health and Human Services (HHS), the Department of Defense (DoD), the Federal Emergency Management Agency (FEMA), and the Department of Veterans Affairs (VA). During domestic disasters or emergencies, HHS/Public Health Services (PHS) activates and coordinates NDMS operations. In the event of a need for the NDMS during an overseas conventional conflict involving U.S. Forces, DoD would activate the system and coordinate NDMS operations. The NDMS has three major components: (1) Medical Response (personnel and supplies), (2) Patient Evacuation, and (3) Definitive Medical Care (provided through a national network of voluntarily, precommitted (non-Federal) hospital beds). HHS/PHS serves as the administrative lead for overall NDMS development, maintenance, and operations.

2. The NDMS does not replace or supplant any of the PHS component responsibilities as delineated in this plan/annex. Rather it will operate in conjunction with the PHS components in providing for health and medical needs in the incidents that produce mass casualties.

B. Assumptions

1. It is impossible to predict with any certainty the exact nature of any disaster, disruption, or response to which the Department might be directed to provide resources and abilities. Regardless of the specific cause or location of a major disaster or emergency, various Federal-level health, medical, and human services emergency functions may need to be delivered to assist State and local government meet their responsibilities. It is expected that the types of services DHHS may be called upon to deliver, and the manner in which these services will be requested and coordinated, is currently detailed in one of several excellent Federal plans for response.

2. The DHHS supporting Emergency Management Plans will be written in a manner to reflect the current agreements and Federal plans for a coordinated national response to the different types of disasters. For example, DHHS responsibilities and resources for responding to any number of domestic disasters are clearly outlined in Emergency Support Function #8 (ESF #8), under the requirements of the Federal Response Plan (FRP). On the rare occasion HHS might be requested to mount an international disaster response, the U.S. State Department and the Office of Foreign Disaster Assistance (OFDA) would coordinate the effort. Mass immigration emergencies, including the emergency repatriation of U.S. -citizens, will be coordinated under the provisions of the current PHS Mass Immigration Plan.

3. This DHHS Emergency Management Annex outlines the Department Concept of Operations for providing all of these emergency support functions. The plan also describes each function and specifies the primary and support HHS Operations Division (OPDIV) or agency responsible for providing the specific functional support. Overall responsibilities are outlined in the basic plan.

VI. REGIONAL OFFICES

The HHS Regional Directors (RDs) and PHS Regional Health Administrators (RHAs) are important in the coordination and delivery of Federal human services, health and medical emergency/disaster assistance. They are in the position of having an understanding of local conditions and perspectives that will be critical in mounting an effective and timely HHS response to problems located in the regions. RDs and RHAs are also able to deliver these Federal resources and will be expected to write supporting plans to this annex that will provide guidance on the timely and appropriate delivery of HHS Federal aid in their regions. The basis of these plans will be the DHHS requirements outlined in ESF #8 of the FRP, the Federal Radiological Emergency Response Plan (FRERP), and the Chemical/Biological Support (CBS) Plan. Further, all of these supporting plans will have provisions for dealing with national security issues, domestic emergencies, and HHS responsibilities for refugee relocations/mass immigration emergencies.

VII. CONCEPT OF OPERATIONS

A. General

1. Upon notification of a major disaster or emergency that require a DHHS response, the Office of Emergency Preparedness (OEP)/NDMS Office, and Office of the Assistant Secretary for Health (OASH) will inform the Assistant Secretary for Health (ASH) and apprise him or her of the situation and of the need for Departmental and or NDMS response. Following a decision by the ASH that a DHHS or NDMS response is appropriate, OEP/NDMS/OASH will notify the following officials:

a. HHS Emergency Operations Center (EOC) Staff;

b. The Deputy Assistant Secretary for Health;

c. The Deputy Assistant Secretary for Health Operations,

d. The Surgeon General (SG), U.S Public Health Service (USPHS);

e. The Deputy Assistant Secretary for Health (Intergovernmental Affairs);

f. The Deputy Under Secretary for Intergovernmental Affairs, Boards, and Commissions;

g. Appropriate OPDIV, Staff Division (STAFFDIV), PHS Agency Emergency Coordinators;

h. Appropriate HHS RDs and PHS RHAs; and

i. Officials on the NDMS Activation Roster (if NDMS is activated).

2. The Secretary, HHS will be informed by the ASH of his/her decision to activate a DHHS or NDMS response. Regardless of the cause of the disaster of emergency, the Department/NDMS response will generally follow the policies and procedures contained in ESF #8 of the FRP; however, in a Departmental response, the coverage of ESF #8 will be broadened to include disaster and emergency response activities of the HHS OPDIVs and STAFFDIVs, and those of the RDs.

B. Organization

Under most situations, the DHHS chain of command/management system will be used to manage and coordinate Departmental responses to disasters and emergencies (see Annex A: Direction and Control). The HHS EOC and the NDMS Operations Support Center (OSC) are collocated with the offices of OEP/NDMS in the Parklawn Building, Rockville, MD. Each OPDIV and PHS agency within HHS has emergency preparedness responsibilities

which, in general, are an extension of that OPDIV or agency's primary mission. Descriptions of the health and medical, and human services emergency functions, as well as roles and responsibilities, are found in the basic plan of the Emergency Management and Enterprise Resumption Planning System (EMERPS).

APPENDIX A

LIST OF ACRONYMS/ABBREVIATIONS

AADPA	Assistant Associate Director for Public and Intergovernmental Affairs
AAR	After-Action Report
AC	air-conditioning
ACF	Administration for Children and Families
ADD	Administration for Developmental Disabilities
ADP	Automated Data Processing
AE	Aeromedical Evacuation
AEC	Agency Emergency Coordinators
AECC	Aeromedical Evacuation Control Center
AECE	Aeromedical Evacuation Control Element
AECM	Aeromedical Evacuation Crew Members
AELT	Aeromedical Evacuation Liaison Team
AES	Aeromedical Evacuation System
AFDC	Aid to Families With Dependent Children
AIS	Automated Information System
AISSP	Automated Information System Security Program
ALCC	Airlift Control Center
ALE	Annual Loss Expectancy
AMA	American Medical Association
AMC	Air Mobility Command, U.S. Air Force
AMS	Aerial Measuring System
ANA	Administration for Native Americans
ANRC	American National Red Cross
AoA	Administration on Aging
AOC	Army Operations Center, Pentagon
AOS	Administrative Operations Service
AP	Assembly Point
ARC	American Red Cross
ARES	Amateur Radio Emergency Services
ARRL	American Radio Relay League
ASH	Assistant Secretary for Health, Department of Health and Human Services
ASL	Assistant Secretary for Legislation
ASMB	Assistant Secretary for Management and Budget
ASMRO	Armed Services Medical Regulating Office, Department of Defense
ASPA	Assistant Secretary for Public Affairs
ASPE	Assistant Secretary for Planning and Evaluation
ATSDR	Agency for Toxic Substances and Disease Registry
AUTODIN	Automatic Digital Network
AUTOVON	Automatic Voice Network

BC	Base Camp
BCP	Business Continuity Planning
BIA	Bureau of Indian Affairs
BIFC	Boise Interagency Fire Center
BIR	Brief Initial Report
BLM	Bureau of Land Management
BOR	Bureau of Reclamation
BPA	Blanket Purchasing Agreements
BRP	Business Resumption Planning
CAR	Congressional Affairs Representative
CAT	Crisis Action Team
C/B	Chemical/Biological
CBS	Chemical/Biological Support (Plan)
c c c	Commodity Credit Corporation
CCP	Casualty Collection Point
CDC	Centers for Disease Control and Prevention, U.S. Public Health Service
CDRG	Catastrophic Disaster Response Group
CEPPO	Chemical Emergency Preparedness and Prevention Office
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act
CFR	Code of Federal Regulations
CINC	Commander-In-Chief
CLO	Congressional Liaison Officer
CMT	Crisis Management Team
COG	Continuity of Government
COMSEC	Communications Security
CONOPS	Concept of Operations
CONUS	continental United States
CONUSA	continental U.S. Army
COOP	Continuity of Operations Plan/Planning
CR	Congressional Relations
CRAF	Civil Reserve Air Fleet
CRC	Crisis Response Cell
CRM	Crisis Resource Manager
CRO	Congressional Relations Officer
CWA	Clean Water Act
DAE	Disaster Assistance Employee
DASH	Deputy Assistant Secretary for Health, Department of Health and Human Services
DCLO	Deputy Congressional Liaison Officer
DCO	Defense Coordinating Officer
DFO	Disaster Field Office
DFSG	Disaster Financial Services Group

DHHS	Department of Health and Human Services
DLA	Defense Logistics Agency
DMAT	Disaster Medical Assistance Team
DMORT	Disaster Mortuary Team, National Disaster Medical System
DOC	Department of Commerce
DoD	Department of Defense
DOE	Department of Energy
DOEd	Department of Education
DO1	Department of the Interior
DOJ	Department of Justice
DOL	Department of Labor
DOMS	Directorate of Military Support, Department of Defense
DOS	Department of State
DOT	Department of Transportation
DOTRES	Department of the Treasury
DPAO	Deputy Public Affairs Officer
DWI	Disaster Welfare Inquiry
EBS	Emergency Broadcast System
EC	Emergency Coordinator
ECC	Emergency Coordination Center
ECS	Emergency Communications Staff
EOC	Emergency Operations Center
EEI	Essential Elements of Information
EICC	Emergency Information and Coordination Center
EMERPS	Emergency Management and Enterprise Resumption Planning System
EMP	Emergency Management Plan
EMPB	Emergency Mobilization Preparedness Board
EMS	Emergency Medical Services
EO	Executive Order
EOC	Emergency Operations Center
EPA	Environmental Protection Agency
ER	Enterprise Resumption
ERAT	Emergency Response Action Team
ERB	Economic Resources Board
ERC	Emergency Response Coordinator
ERC	Employee Relief Center
ERCG	Emergency Response Coordination Group, Centers for Disease Control and Prevention, and Public Health Service
ERT	Emergency Response Team
ERT-A	Advance Element of the Emergency Response Team
ESF	Emergency Support Function
EST	Emergency Support Team

FAA	Federal Aviation Administration
FAX	Facsimile
FBI	Federal Bureau of Investigation
FCC	Federal Communications Commission
FCC	Federal Coordinating Center
FCO	Federal Coordinating Officer
FDA	Food and Drug Administration
FECC	Federal Emergency Communications Coordinator
FEMA	Federal Emergency Management Agency
FERC	FEMA Emergency Response Capability
FESC	Federal Emergency Support Coordinator
FHWA	Federal Highway Administration
FNS	Food and Nutrition Services
FORSCOM	Forces Command, Department of Defense
FPC	Federal Planning Circular
FPMR	Federal Property Management Regulations
FPS	Federal Protective Service
FRC	Federal Records Center
FRCM	FEMA Regional Communications Manager
FRERP	Federal Radiological Emergency Response Plan
FRP	Federal Response Plan
FSS	Federal Supply Service
FSU	Former Soviet Union
FTS	Federal Telecommunications Systems
GPMRC	Global Patient Movement and Regulating Center
GRS	General Records Schedule
GSA	General Services Administration
GSACR	GSA Communications Representative
HAZMAT	Hazardous Material
HCFA	Health Care Financing Administration
HET-ESF	Headquarters Emergency Transportation - Emergency Support Function
HF	high frequency
HHS	Health and Human Services
HQDA	Headquarters, Department of the Army
HQUSACE	Headquarters, U.S. Army Corps of Engineers
HRSA	Health Resources and Services Administration
HUD	Department of Housing and Urban Development
HVAC	heating, ventilation, and air-conditioning
HWC	Health and Welfare Canada
IAEA	International Atomic Energy Agency
IC	Incident Commander

ICC	Interstate Commerce Commission
ICP	Incident Command Post
ICPAE	Interagency Committee on Public Affairs in Emergencies
ICS	Incident Command System
ID	identification
IEA	International Energy Agency
IMS	Incident Management System
INS	Immigration and Naturalization Service
IRMS	Information Resources Management Service
IRS	Internal Revenue Service
ISSP	Information Systems Support Program
ITS	Information Technology Services
ITU	Information Technology Utilities
IW	Information Warfare
JCS	Office of the Joint Chiefs of Staff
JIC	Joint Information Center
JIS	Joint Information System
JTF	Joint Task Force
JMMO	Joint Medical Mobilization Office
JTRB	Joint Telecommunications Resources Board
KCCO	Kansas City Commodity Office
LAN	local area network
LFA	Lead Federal Agency
LIHEAP	Low Income Home Energy Assistance Program
LOC-TFCS	Letter-of-Credit - Treasury Financial Communications System
M	Marshalling Area
MARS	Military Affiliate Radio System
MASF	Mobile Aeromedical Staging Facility
MC	Mobilization Center
MCR	Military Communications Representative
MMST	Metropolitan Medical Strike Team
MOA	Memorandum of Agreement
MODEM	Modulator Demodulator Unit
MOU	Memorandum of Understanding
MRE	Meals Ready to Eat
MSU	Medical Support Unit
NARA	National Archives and Records Administration
NASA	National Aeronautics and Space Administration
NBC	Nuclear, Biological, and Chemical

NCC	National Coordinating Center
NCDRH	National Center for Devices and Radiological Health
NCP	National Oil and Hazardous Substances Pollution Contingency Plan
NCS	National Communications System

NCS/DISA-OC	National Communications System/Defense Information Systems Agency-Operations Center
NCSP	National Communications Support Plan
NCSRM	National Communications *System* Regional Manager
NDMOC	National Disaster Medical Operations Center
NDMS	National Disaster Medical System
NDMSOSC	National Disaster Medical System Operations Support Center
NECC	National Emergency Coordination Center (FEMA)
NEIS	National Earthquake Information Service
NFDA	National Funeral Directors Association
NGB	National Guard Bureau
NICC	National Interagency Coordination Center
NIFCC	National Interagency Fire Coordination Center, U.S. Forest Service
NIH	National Institute of Health
NIMH	National Institutes of Mental Health
NIOSH	National Institute for Occupational Safety and Health
NMRT	National Medical Response Team
NOAA	National Oceanic and Atmospheric Administration
NP	National Preparedness
NRC	Nuclear Regulatory Commission
NRT	National Response Team
NSEP	National Security Emergency Preparedness
NSF	National Strike Force
NTIA	National Telecommunications and Information Administration
NTSP	National Telecommunications Support Plan
NVOAD	National Voluntary Organizations Active in Disaster
NWS	National Weather Service
OASH	Office of the Assistant Secretary for Health, Department of Health and Human Services
OCHAMPUS	Office of Civilian Health and Medical Program of the Uniformed Services, Department of Defense
OCL	Office of Congressional Liaison
OEP	Occupant Emergency Plan
OEP	Office of Emergency Preparedness, U.S. Public Health Service
OET	Office of Emergency Transportation
OFA	Office of Family Assistance
OFA	Other Federal Agency
OFDA	Office of U.S. Foreign Disaster Assistance
OGC	Office of the General Counsel
OEA	Office of Intergovernmental Affairs
OJCS	Office of the Joint Chiefs of Staff, Department of Defense
OMB	Office of Management and Budget
OPA	Oil Pollution Act

OPDIV	Operations Division
OPM	Office of Personnel Management
ORR	Office of Refuge Resettlement
OS	Office of the Secretary
osc	On-Scene Coordinator
osc	Operations Support Center
OSHA	Occupational Safety and Health Administration
OSTP	Office of Science Technology Policy
PA	Public Affairs
PAO	Public Affairs Officer
PBS	Public Building Service (GSA)
PC	personal computer
PDD	Presidential Decision Directive
PHS	U.S. Public Health Service, Department of Health and Human Services
PI0	Public Information Officer
PL	Public Law
POA	Point of Arrival
POC	point of contact
POD	Point of Departure
POF	Primary Operating Facility
POTS	Purchase of Telephones and Services
PRA	Patient Reporting Activity
PSC	Program Support Center
PSN	Public Switched Network
PSR	Personal Service Radio
RACES	Radio Amateur Civil Emergency Services
RAM	Random Access Memory
RCP	Regional Oil and Hazardous Substances Pollution Contingency Plan
RD	Regional Director
REA	Rural Electrification Administration
REACT	Radio Emergency Associated Communication Team
REC	Regional Emergency Coordinator
RECC	Regional Emergency Communications Coordinator
RECP	Regional Emergency Communications Plan
REP	Regional Evacuation Point
RET	Regional Emergency Transportation
RETCO	Regional Emergency Transportation Coordinator
RHA	Regional Health Administrator (HHS)
RISC	Regional Interagency Steering Committee
RMNCS	Regional Manager National Communications System
ROC	Regional Operations Center
ROST	Regional Operations Support Team

RPO	Recovery Point Objective
RRT	Regional Response Team
RT	Relocation Team
S	Staging Area
SAMHSA	Substance Abuse and Mental Health Services Administration
SAR	Search and Rescue
SARA	Superfund Amendments and Reauthorization Act
SCO	State Coordinating Officer
scs	Soil Conservation Service
SECDEF	Secretary of Defense
SF	Standard Form
SITREP	Situation Report
SOP	Standard Operating Procedure
SSA	Social Security Administration
STAFFDIV	Staff Division
STU-III	Secure Telephone Unit-Third Generation
TAES	Tactical Aeromedical Evacuation System
TCP	Telecommunications Priorities
TOA	Transportation Operating Agencies
TREAS	Department of the Treasury
TSC	Telecommunications Services Contract
TSP	Telecommunications Service Priority
TVA	Tennessee Valley Authority
UCG	Unified Command Group (able)
ucs	Unified Command System
UPS	Uninterruptible Power Supply
U.S.	United States
USACE	U.S. Army Corps of Engineers
USAF	U.S. Air Force
USCG	U.S. Coast Guard
USDA	U.S. Department of Agriculture
USGS	U. S . Geological Survey
USACOM	U.S. Atlantic Command
USN	U.S. Navy
USPACOM	U.S. Pacific Command
USPHS	U.S. Public Health Service
USPS	U.S. Postal Service
USTRANSCOM	U.S. Transportation Command, Department of Defense
US&R	Urban Search and Rescue
VA	Department of Veterans Affairs

VCR	videocassette recorder
VHA	Veterans Health Administration, Department of Veterans Affairs
VIP	Very Important Person

WAN	wide area network
WMD	Weapons of Mass Destruction
www	Worldwide web
ZECP	Zone Emergency Communications Planner

APPENDIX B

TERMS AND DEFINITIONS

1. **Activation:** When all or a portion of the COOP has been put into motion.

2. **Alert:** Notification that a disaster situation has occurred-stand by for possible activation of the COOP.

3. **Alternate Site:** A location, other than the normal facility, used to process data and/or conduct critical functions in the event of a disaster. SIMILAR TERMS: Alternate Processing Facility, Alternate Office Facility, Alternate Communication Facility, Relocation Site.

4. **Application Recovery:** The component of recovery that deals specifically with the restoration of system software and data, after the processing platform has been restored or replaced. SIMILAR TERMS: System Recovery.

5. **Assumptions:** Basic understandings about unknown disaster situations that the COOP is based on.

6. **Back Office Location:** An office or building, used by the organization to conduct support activities, that is not located within an organization's headquarters or main location.

7. **Backup Agreements:** A contract to provide a service that includes the method of performance, fees, duration, services provided, and the extent of security and confidentiality maintained.

8. **Backup Position Listing:** A list of alternative personnel who can fill an emergency response team or relocation team position when the primary person is not available. SIMILAR TERM: Alternate Position Listing or Roster.

9. **Backup Strategies (Recovery Strategies):** Alternative operating method (i.e., platform, location, etc.) for facilities and system operations in the event of a critical incident, emergency, or disaster.

10. **Business Continuity Planning (BCP):** An all encompassing, "umbrella" term covering both COOP and business resumption planning. Also see recovery planning and business resumption planning.

11. **Business Impact Analysis:** The process of analyzing all business functions and the effect that a specific disaster may have upon them.

12. **Business Interruption:** Any event, whether anticipated (i.e , public service strike) or unanticipated (i.e., blackout) that disrupts the normal course of business operations at a corporate location.

13. **Business Interruption Costs:** The costs or lost revenue associated with an interruption in normal business operations.

14. **Business Recovery Coordinator: See** Emergency Coordinator.

15. **Business Recovery Process:** The common critical path that all organizations follow during a recovery effort. There are major nodes along the path that are followed regardless of the organization. The process generally has seven stages: (1) immediate response, (2) environmental restoration, (3) functional restoration, (4) data synchronization, (5) restore business functions, (6) interim site, and (7) return home.

16. **Business Recovery Team:** A group of individuals responsible for maintaining and coordinating the recovery process. SIMILAR TERMS: Emergency Response Team, Relocation Team.

17. **Business Resumption Planning (BRP):** The uninterrupted availability of all the resources necessary to operate your enterprise at a level acceptable to senior management/leadership. The operations piece of business continuity planning. Also see: COOP.

18. **Business Unit Recovery:** The component of recovery that deals specifically with the relocation of key organization personnel in the event of a disaster, and the provision of essential records, equipment supplies, work space, communication facilities, computer processing capability, etc. SIMILAR TERMS: Work Group Recovery.

19. **Checklist Test:** A method used to test a completed COOP. This test is used to determine if the information, such as phone numbers, manuals, equipment, etc., in the plan is accurate and current.

20. **Cold Site:** An alternate facility that is void of any resources or equipment except air-conditioning and raised flooring. Equipment and resources must be installed in such a facility to duplicate the critical business functions of an organization. Cold sites have many variations depending on their communication facilities, uninterruptible power supply (UPS) systems, or mobility (Relocatable-Shell). SIMILAR TERMS: Shell site, Backup site, Recovery site, Alternative site.

21. **Command Post/Command and/or Control Center:** A centrally located facility having adequate phone lines and equipment to begin recovery operations. Typically it is a temporary facility used by the Emergency Response Team (ERT) to begin coordinating the recovery process and used until the relocation sites are functional.

SIMILAR TERMS: Emergency Operations Center (EOC), Emergency Coordination Center (ECC).

22. **Communications Failure:** An unplanned interruption in electronic communication between a terminal and a computer processor, or between processors, as a result of a failure of any of the hardware, software, or telecommunications components comprising the link. (Also refer to Network Outage.)

23. **Communications Recovery:** The component of recovery that deals with the restoration or rerouting of an organization's telecommunication network, or its components, in the event of loss. SIMILAR TERMS: Telecommunication Recovery, Data Communications Recovery.

24. **Computer Recovery Team:** A group of individuals responsible for assessing damage to the original system, processing data in the interim, and setting up the new system. SIMILAR TERM: Systems Coordinator(s).

25. **Consortium Agreement:** An agreement made by a group of organizations to share processing facilities and/or office facilities, if one member of the group suffers a disaster. SIMILAR TERMS: Reciprocal Agreement.

26. **Contingency Plan: See** COOP.

27. **Contingency Planning: See** also COOP.

28. **Continuity of Operations:** Applies to those measures taken by Government agencies to continue to perform or rapidly restore essential functions or operations during and after a severe emergency. The term applies to activities related to the operational integrity of agency operating elements at the national and regional levels. Those measures required to manage the business recovery process in the event of a business interruption, designed to assist in restoring the business process within the stated recovery goals.

29. **COOP Team:** A group of individuals appointed to oversee the development and implementation of a COOP.

30. **COOP:** The advance planning and preparations that are necessary to minimize loss and ensure continuity of the critical functions of an organization in the event of disaster. SIMILAR TERMS: Contingency planning, business resumption planning, corporate contingency planning, business interruption planning, disaster preparedness.

31. **Continuity of Operations:** The capability of an organization to continue to operate, or rapidly resume operations, in an emergency or threat of an emergency. Continuity of operations may include the activation of a crisis management headquarters at the

national, zonal, or regional level, the evacuation of personnel from their normal operating locations, the selection and occupation of a relocation site capable of supporting the continuation of essential activities, and the provision of automated data processing (ADP), logistics, and telecommunications support by temporary use of non-standard or alternative means. These activities could be taking place while the agency/office/element is involved in supporting other agencies/offices/elements in responding to the disaster, or other concurrent disasters.

32. **Continuity of Operations Planning/Plan (COOP):** A COOP is a comprehensive, consistent statement of all the actions taken during and after an unplanned event, along with the documented, tested procedures that, if followed, will ensure the availability of critical resources and facilities maintaining the continuity of operations n a contingency situation.

33. **COOP Program:** All activities required to ensure that an individual department or agency can perform its individual essential functions (those functions as determined by the organizational head) regardless of circumstance or location.

34. **Cooperative Not Sites:** A hot site owned by a group of organizations available to a group member should a disaster strike. Also see Hot-Site.

35. **Crate and Ship:** A strategy for providing alternate processing capability in a disaster, via contractual arrangements with an equipment supplier to ship replacement hardware within a specified time period. SIMILAR TERMS: Guaranteed Replacement, Quick Ship.

36. **Crisis:** A critical event, which, if not handled in an appropriate manner, may dramatically impact an organization's profitability, reputation, or ability to operate.

37. **Crisis Management:** The overall coordination of an organization's response to a crisis, in an effective, timely manner, with the goal of avoiding *or* minimizing damage to the organization's profitability, reputation, or ability to operate.

38. **Crisis Simulation:** The process of testing an organization's ability to respond to a crisis in a coordinated, timely, and effective manner, by simulating the occurrence of a specific crisis.

39. **Critical Functions:** Business activities or information that could not be interrupted or unavailable for several business days without significantly jeopardizing operation of the organization.

40. **Critical Incident:** A crisis with a period of warning/forewarning.

41. **Critical Records:** Records or documents that, if damaged or destroyed, would cause considerable inconvenience and/or require replacement or re-creation at considerable expense.

42. **Damage Assessment:** The process of assessing damage, following a disaster, to computer hardware, vital records, office facilities, etc., and determining what can be salvaged or restored and what must be replaced.

43. **Data Center Recovery:** The component of recovery that deals with the restoration, at an alternate location, of data centers services and computer processing capabilities. SIMILAR TERMS: Mainframe Recovery.

44. **Data Center Relocation:** The relocation of an organization's entire data processing operation.

45. **Dedicated Line:** A pre-established point-to-point communication link between computer terminals and a computer processor, or between distributed processors, that does not require dialup access.

46. **Declaration Fee:** A one-time fee, charged by an Alternate Facility provider, to a customer who declares a disaster. SIMILAR TERMS: Notification Fee. NOTE: Some recovery vendors apply the declaration fee against the first few days of recovery.

47. **Departmental Emergency Response Team:** A group of individuals responsible for performing response procedures specific to their operating element.

48. **Departmental Relocation Team:** A group of individuals responsible for performing relocation procedures specific to their operating element.

49. **Designated Official:** A high ranking official whose normal place of duty (or business) is situated in the subject building, who is responsible for the Emergency Operations/COOP.

50. **Dial Backup:** The use of dialup communication lines as a backup to dedicated lines.

51. **Dialup Line:** A communication link between computer terminals and a computer processor, which is established on demand by dialing a specific telephone number.

52. **Disaster:** Any event that creates an inability on an organizations part to provide critical business functions for some predetermined period of time. SIMILAR TERMS: Business Interruption, Outage, Catastrophe, Emergency.

53. **Disaster Prevention:** Measures employed to prevent, detect, or contain incidents that, if unchecked, could result in disaster.

54. **Disaster Prevention Checklist:** A questionnaire used to assess preventative measures in areas of operations such as overall security, software, data files, data entry reports, microcomputers, and personnel.

55. **Disaster Recovery:** The ability to respond to an interruption in services by implementing a COOP Plan to restore an organization's critical functions.

56. **Disaster Recovery Administrator:** The individual responsible for documenting recovery activities and tracking recovery progress.

57. **Disaster Recovery Period:** The time period between a disaster and a return to normal functions, during which the COOP is employed.

58. **Disaster Recovery Software:** An application program developed to assist an organization in writing a comprehensive COOP.

59. **Recovery Teams (Business Recovery Teams):** A structured group of teams ready to take control of the recovery operations if a disaster should occur.

60. **Distributed Processing:** Use of computers at various locations, typically interconnected via communication links for the purpose of data access and/or transfer.

61. **Downloading:** Connecting to another computer and copying a program or file from that system.

62. **Electronic Vaulting:** Transfer of data to an offsite storage facility via a communication link rather than via portable media. Typically used for batch/journaled updates to critical files to supplement full backups taken periodically.

63. **Emergency:** A sudden, unexpected event requiring immediate action due to potential threat to health and safety, the environment, or property. An urgent occurrence requiring immediate action that might involve bombings, bomb threats, civil disturbances, fires, explosions, floods, electrical power failures, hostage situations, medical emergencies, hurricanes, tornadoes, earthquakes, or other natural disasters or accidental disasters.

64. **Emergency Coordinator:** The Emergency Coordinator may be responsible for overall recovery of an organization or unit(s). SIMILAR TERMS: Business Recovery Coordinator.

65. **Emergency Preparedness:** The discipline that ensures an organization, or community's readiness to respond to an emergency in a coordinated, timely, and effective manner.

66. **Emergency Procedures:** A plan of action to commence immediately to prevent the loss of life and minimize injury and property damage.

67. **Employee Relief Center (ERC):** A predetermined location for employees and their families to obtain food, supplies, financial assistance, etc., in the event of a catastrophic disaster.

68. **Extended Outage:** A lengthy, unplanned interruption in system availability due to computer hardware or software problems, or communication failures.

69. **Extra Expense Coverage:** Insurance coverage for disaster-related expenses that may be incurred until operations are fully recovered after a disaster.

70. **Facilities:** A location containing the equipment, supplies, voice and data communication lines, to conduct transactions required to conduct business under normal conditions. SIMILAR TERMS: Primary Site, Primary Processing Facility, Primary Office Facility.

71. **File Backup:** The practice of dumping (copying) a file stored on disk or tape to another disk or tape. This is done for protection in case the active file gets damaged.

72. **File Recovery:** The restoration of computer files using backup copies.

73. **File Server:** The central repository of shared files and applications in a computer network local area network (LAN).

74. **Forward Recovery:** The process of recovering a database to the point of failure by applying active journal or log data to the current backup files of the database.

75. **Full Recovery Test:** An exercise in which all recovery procedures and strategies are tested (as opposed to a Partial Recovery Test).

76. **Generator:** An independent source of power usually fueled by diesel or natural gas.

77. **Halon:** A gas used to extinguish fires; effective only in closed areas.

78. **High Priority Tasks:** Activities vital to the operation of the organization. Currently being phased out due to environmental concerns. SIMILAR TERMS: Critical Functions

79. **Hot Site:** An alternate facility that has the equipment and resources to recover the business functions affected by the occurrence of a disaster. Hot sites may vary in type of facilities offered (such as data processing, communication, or any other critical business functions needing duplication). Location and size of the hot site will be

proportional to the equipment and resources needed. SIMILAR TERMS: Backup site, Recovery site, Recovery Center, Alternate processing site.

80. **Human Threats:** Possible disruptions in operations resulting from human actions (i.e., disgruntled employee, terrorism, etc.).

81. **Incident Commander (IC):** _____

82. **Incident Management System (IMS):** _____

83. **Interim Organizational Structure:** An alternate organization structure that will be used during recovery from a disaster. This temporary structure will typically streamline chains of command and increase decision making autonomy.

84. **Internal Hot Sites:** A fully equipped alternate processing site owned and operated by the organization.

85. **Interruption:** An outage caused by the failure of one or more communications links with entities outside of the local facility.

86. **LAN (Local Area Network):** Computing equipment, in close proximity to each other, connected to a server that houses software that can be accessed by the users. This method does not utilize a public carrier. See also WAN.

87. **LAN Recovery:** The component of recovery that deals specifically with the replacement of LAN equipment in the event of a disaster, and the restoration of essential data and software SIMILAR TERMS: Client/Server Recovery.

88. **Leased Line:** Usually synonymous with dedicated line.

89. **Line Rerouting:** A service offered by many regional telephone companies allowing the computer center to quickly reroute the network of dedicated lines to a backup site.

90. **Line Voltage Regulators:** Also known as surge protectors. These protectors/regulators distribute electricity evenly.

91. **Loss:** The unrecoverable business resources that are redirected or removed as a result of a disaster. Such losses may be loss of life, revenue, market share, competitive stature, public image, facilities, or operational capability.

92. **Loss Reduction:** The technique of instituting mechanisms to lessen the exposure to a particular risk. Loss reduction is intended to react to an event and limit its effect. Examples of loss reduction include sprinkler systems, insurance policies, and evacuation procedures.

93. **Mainframe Computer:** A high-end computer processor, with related peripheral devices, capable of supporting large volumes of batch processing, high performance on-line transaction processing systems, and extensive data storage and retrieval. SIMILAR TERMS: Host Computer.

94. **Mobile Hot Site:** A large trailer containing backup equipment and peripheral devices delivered to the scene of the disaster. It is then hooked up to existing communication lines.

95. **MODEM (Modulator Demodulator Unit):** Device that converts data from analog to digital and back again.

96. **Natural Threats:** Events caused by nature causing disruptions to an organization.

97. **Network Architecture:** The basic layout of a computer and its attached systems, such as terminals and the paths between them.

98. **Network Outage:** An interruption in system availability as a result of a communication failure affecting a network of computer terminals, processors, or workstations.

99. **Node:** The name used to designate a part of a network. This may be used to describe one of the links in the network, or a type of link in the network (for example, Host Node or Intercept Node).

100. **Nonessential Function/Data:** Business activities or information that could be interrupted or unavailable indefinitely without significantly jeopardizing critical functions of an organization.

101. **Nonessential Records:** Records or documents that, if irretrievably lost or damaged, will not materially impair the organization's ability to conduct business.

102. **Occupant Emergency Coordinator:** An official who assists the Designated Official and has full authority to direct emergency operations in the absence of the Designated Official.

103. **Occupant Emergency (Warden) Organization:** An organization of employees in a specific building designated to carry out the requirements of the OEP.

104. **Occupant Emergency Plan (OEP):** The written methods and procedures to be used for evacuation and protection of personnel during an emergency in or near a particular building.

105. **Occupant Emergency Program:** An organized and systematic set of emergency response activities involving building occupants to minimize injury and loss of life during emergency situations.

106. **Off-Host Processing:** A backup mode of operation in which processing can continue throughout a network despite loss of communication with the mainframe computer.

107. **Off-Line Processing:** A backup mode of operation in which processing can continue manually or in batch mode if the on-line systems are unavailable.

108. **Off-Site Storage Facility:** A secure location, remote from the primary location, at which backup hardware, software, data files, documents, equipment, or supplies are stored.

109. **On-Line Systems:** An interactive computer system supporting users over a network of computer terminals.

110. **Operating Software:** A type of system software supervising and directing all of the other software components, plus the computer hardware.

111. **Organization Chart:** A diagram representative of the hierarchy of an organization's personnel.

112. **Organization-Wide:** A policy or function applicable to the entire organization and not just one single Department.

113. **Outage: See** Systems Outage.

114. **Outsourcing:** The transfer of data processing functions to an independent third party.

115. **Parallel Test:** A test of recovery procedures in which the objective is to parallel an actual business cycle.

116. **Peripheral Equipment:** Devices connected to a computer processor that perform such auxiliary functions as communications, data storage, printing, etc.

117. **Physical Safeguards:** Physical measures taken to prevent a disaster, such as fire suppression systems, alarm systems, power backup and conditioning systems, access control systems, etc.

118. **Platform:** A hardware or software architecture of a particular model or family of computers (i.e., IBM, Tandem, HP, etc.).

119. **Portable Shell:** An environmentally protected and readied structure that can be transported to a disaster site so equipment can be obtained and installed near the original location.

120. **Procedural Safeguards:** Procedural measures taken to prevent a disaster, such as safety inspections, fire drills, security awareness programs, records retention programs, etc.

121. **Reciprocal Agreement:** An agreement between two organizations with compatible computer configurations allowing either organization to utilize the other's excess processing capacity in the event of a disaster.

122. **Record Retention:** Storing historical documentation for a set period of time, usually mandated by State and Federal law or the Internal Revenue Service (IRS).

123. **Recovery Action Plan:** The comprehensive set of documented tasks to be carried out during recovery operations.

124. **Recovery Alternative:** The method selected to recover the critical business functions following a disaster. In data processing, some possible alternatives would be manual processing, use of service bureaus, or a backup site (hot or cold site). A recovery alternative is usually selected following either a Risk Analysis, Business Impact Analysis, or both. SIMILAR TERMS: Backup site, backup alternative.

125. **Recovery Capability:** This defines all of the components necessary to perform recovery. These components can include a plan, an alternate site, change control process, network rerouting, and others.

126. **Relocation Site: See** alternate site.

127. **Recovery Point Objective (RPO):** The point in time to which data must be restored in order to resume processing transactions. RPO is the basis on which a data projection strategy is developed.

128. **Recovery Team:** See Response and Relocation Teams.

129. **Recovery Time:** The period from the disaster declaration to the recovery of the critical functions.

130. **Relocatable Shell:** See Portable Shell.

131. **Relocation Site:** A location, other than the normal facility, used to process data and/or conduct critical functions in the event of a disaster. SIMILAR TERMS: Alternate Processing Facility, Alternate Office Facility, Alternate Communication Facility.

132. **Risk Assessment/Analysis:** The process of identifying and minimizing the exposures to certain threats that an organization may experience. SIMILAR TERMS: Risk assessment, impact assessment, corporate loss analysis, risk identification, exposure analysis, exposure assessment.

133. **Risk Management:** The discipline that ensures that an organization does not assume an unacceptable level of risk.

134. **Salvage and Restoration:** The process of reclaiming or refurbishing computer hardware, vital records, office facilities, etc., following a disaster.

135. **Salvage Procedures:** Specified procedures to be activated if equipment or a facility should suffer any destruction.

136. **Sample Plan:** A generic COOP that can be tailored to fit a particular organization.

137. **Satellite Communication:** Data communications via satellite. For geographically dispersed organizations, may be viable alternative to ground-based communications in the event of a disaster.

138. **Scope:** Predefined areas of operation for which a COOP is developed.

139. **Service Bureau (Center):** A data processing utility that provides processing capability, normally for specialized processing, such as payroll.

140. **Shadow File Processing:** An approach to data backup in which real-time duplicates of critical files are maintained at a remote processing site. SIMILAR TERMS: Remote Mirroring.

141. **Simulation Test:** A test of recovery procedures under conditions approximating a specific disaster scenario. This may involve designated units of the organization actually ceasing normal operations while exercising their procedures.

142. **Skills Inventory:** A listing of employees that lists their skills that apply to COOP/recovery.

143. **Standalone Processing:** Processing, typically on a PC or mid-range computer, which does not require any communication link with a mainframe or other processor.

144. **Structured Walk-Through Test:** Team members walk through the plan to identify and correct weaknesses.

145. **Subscription:** Contract commitment providing an organization with the right to utilize a vendor recovery facility for recovery of their mainframe processing capability.

146. **Systems Downtime:** A planned interruption in system availability for scheduled system maintenance.

147. **System Outage:** An unplanned interruption in system availability as a result of computer hardware or software problems, or operational problems.

148. **Technical Threats:** A disaster causing event that may occur regardless of any human elements.

149. **Temporary Operating Procedures:** Predetermined procedures that streamline operations while maintaining an acceptable level of control and auditability during a disaster situation.

150. **Test Plan:** The COOPs and procedures that are used in a systems test to ensure viability. A test plan is designed to exercise specific action tasks and procedures that would be encountered in a real disaster.

151. **Uninterruptible Power Supply** (UPS): A backup power supply with enough power to allow a safe and orderly shutdown of the central processing unit should there be a disruption or shutdown of electricity.

152. **Uploading:** Connecting to another computer and sending a copy of program or file to that computer. See also Downloading.

153. **Useful Records:** Records that are helpful but not required on a daily basis for continued operations.

154. **User Contingency Procedures:** Manual procedures to be implemented during a computer system outage.

155. **Vital Records:** Records or documents, for legal, regulatory, or operational reasons, that cannot be irretrievably lost or damaged without materially impairing the organization's ability to conduct business.

156. **Voice Recovery:** The restoration of an organization's voice communications system.

157. **WAN (Wide Area Network):** Like a LAN, except that parts of a WAN are geographically dispersed, possibly in different cities or even on different continents. Public carriers like the telephone company are included in most WANs; a very large one might have its own satellite stations or microwave towers.

158. **Warm Site:** An alternate processing site that is only partially equipped (as compared to Hot Site, which is fully equipped).

159. Warden: Employees designated as a member of the Occupant Emergency Organization to assist in the orderly evacuation of the facility.

TAB A-l

(To Be Provided)

TAB A-2

MEMORANDUM TO: Assistant Secretary for Management and Budget

SUBJECT: Delegation of Authority-Emergency Preparedness Functions

Source of Authority: Executive Order (EO) 12656, as amended; National Security Act of 1947, as amended; Defense Production Act of 1950, as amended; and Public Law 93-288, as amended by Public Law 100-707, "Robert T. Stafford Disaster Relief and Emergency Assistance Act. "

Authority Delegated: To (a) develop national plans and programs and take actions necessary to assure that the Office of the Secretary will be able to perform its essential functions and continue as a viable part of the Department during any national emergency, and will be able to respond to major disasters; (b) direct, coordinate, and monitor the performance of the heads of the Staff and Operating Divisions, and the Regional Directors in carrying out the emergency preparedness responsibilities assigned to them; and (c) prepare national emergency plans and develop preparedness programs covering functions and responsibilities that must necessarily be centralized at the Office of the Secretary level in accordance with the Department of Health and Human Services (DHHS) Emergency Management and Enterprise Resumption Planning System (EMERPS).

References: Specific requirements for the performance of these authorities are contained in parts 2, 3, and 8 of EO 12656, and the Federal Response Plan, Public Law 93-288, as amended by Public Law 100-707, The Robert T. Stafford Disaster Relief and Emergency Assistance Act, November 23, 1988.

Effective Date: This delegation is effective immediately.

Effect on Existing Delegations: This delegation supersedes the December 2 1, 198 1, delegation of emergency preparedness functions to the Assistant Secretary for Management and Budget.

Date

MEMORANDUM TO: Heads of the Operating Divisions

SUBJECT: Delegation of Authority-Emergency Preparedness Functions

Source of Authority: Executive Order (EO) 12656, as amended; National Security Act of 1947, as amended; Defense Production Act of 1950, as amended; and Public Law 93-288, as amended by Public Law 100-707, "Robert T. Stafford Disaster Relief and Emergency Assistance Act. "

Authority Delegated: To (a) develop national plans and programs and take actions necessary to assure that your headquarters and regional organizations will be able to perform their essential functions and continue as a viable part of the Department during any national emergency situation, and will be able to respond to major disasters; and (b) prepare national and regional emergency plans and develop preparedness programs covering functions and responsibilities assigned to your organization in accordance with the Department of Health and Human Services (DHHS) Emergency Management and Enterprise Resumption Planning System (EMERPS).

References: Specific requirements for the performance of these authorities are contained in parts 2, 3, and 8 of EO 12656, and the Federal Response Plan, Public Law 93-288, as amended by Public Law 100-707, The Robert T. Stafford Disaster Relief and Emergency Assistance Act, November 23, 1988.

Effective Date: This delegation is effective immediately.

Effect on Existing Delegations: This delegation supersedes the December 21, 1981, delegation of emergency preparedness functions to the Operating Division Heads.

Date

MEMORANDUM TO: Regional Directors

SUBJECT: Delegation of Authority-Emergency Preparedness Functions

Source of Authority: Executive Order (EO) 12656, as amended; National Security Act of 1947, as amended; Defense Production Act of 1950, as amended; and Public Law 93-288, as amended by Public Law 100-707, "Robert T. Stafford Disaster Relief and Emergency Assistance Act. "

Authority Delegated: To (a) develop national plans and programs and take actions necessary to assure that the offices under your line supervision will be able to perform their essential functions, continue as a viable part of the Department during any national emergency situation, and coordinate the Department of Health and Human Services (DHHS) regional response to major disasters; and (b) consolidate and disseminate the regional emergency plans prepared with the assistance of the Operating Divisions in accordance with the DHHS Emergency Management and Enterprise Resumption Planning System (EMERPS).

References: Specific requirements for the performance of these authorities are contained in parts 2, 3, and 8 of EO 12656, and the Federal Response Plan, Public Law 93-288, as amended by Public Law 100-707, The Robert T. Stafford Disaster Relief and Emergency Assistance Act, November 23, 1988.

Effective Date: This delegation is effective immediately.

Effect on Existing Delegations: This delegation supersedes the December 21, 1981, delegation of emergency preparedness functions to the Regional Directors.

Date