

Continuity of Operations Planning for Health Departments

COOP Planning Instrument



Prepared by the UCLA Center
for Public Health and Disasters

Viewable online at <http://www.cphd.ucla.edu>



Introduction

Health departments play a critical role in maintaining the health and well-being of their communities; therefore, planning for Continuity of Operations (COOP) is an essential part of their emergency preparedness. During a disaster, some activities and functions of a health department can be suspended for certain periods of time, while others cannot be disrupted for too long without significant impact to the community; these are the health department's Uninterruptible Routine Functions (URFs). URFs are defined as the everyday essential functions of the health department that, if interrupted, could cause an increase in morbidity and mortality in the community. Some functions cannot be interrupted for more than 72 hours without an additional significant impact on the community. Other functions may be interrupted for longer periods of time, but still will need to resume before too much time passes. To assist health departments with their COOP planning, the UCLA Center for Public Health and Disasters developed the *COOP Planning Instrument*. This instrument was designed to help health departments identify their URFs, the staff and equipment/resources needed to keep these functions operational, and alternate facility locations conducive to maintaining continuity of operations during a disaster. These URFs are different from emergency response functions; emergency response functions are the activities a health department conducts to address issues directly related to a disaster, whereas URFs are the everyday public health functions or routine tasks of the agency that cannot cease even during periods of disaster response.

The *COOP Planning Instrument* can be used in conjunction with the UCLA CPHD's *Writing a COOP Plan: A Guide for Health Departments*, or as a stand alone instrument to help streamline the COOP planning process.

Instructions

Step 1: Develop Planning Team

The first step in COOP planning is to develop a COOP planning team. The planning team is responsible for all COOP planning activities and should be in charge of disseminating the *COOP Planning Instrument* and compiling the results.

Step 2: Submit COOP Planning Letter

In order for COOP planning to be successful, participation of staff from all health department programs/divisions is necessary. Further, support from the leadership of the health department is critical for "buy-in" to the COOP planning process. It would be helpful for the COOP planning team to send out a letter to the staff, prior to disseminating the *COOP Planning Instrument*, explaining the planning process and outlining the type of information needed. This letter should also include information on the importance of COOP planning. As a part of the planning process the COOP planning team should also meet with each program/division lead to explain the COOP process

Step 3: Disseminate COOP Planning Instrument

The *COOP Planning Instrument* should be completed by each program/division in the health department. It is helpful to include a hazard model (if available) or a scenario with assumptions at the beginning of the instrument to allow the responders to provide answers as applied to a disaster situation. This initial scenario should be specific to the location of the health department. Different disasters will lead to varied levels of impact and the absenteeism and damage to a health department would not likely be the same in an earthquake and a pandemic scenario. As the instrument is adapted to meet each health department’s needs, it is important to make sure to keep this process simple and basic.

Step 4: Prioritize and Finalize URFs, Staffing, Equipment, and Alternative Site Lists

Once the instrument has been collected from all programs/divisions, the planning team should compile the results and have a meeting to discuss and create a prioritized URF list for the entire agency. The first grouping of URFs should be for the first 72 hours after an event. This process should be repeated for the identified URFs for the first two weeks and the first 30 days after a disaster. Worksheets to compile a finalized list can be accessed from UCLA CPHD’s *COOP Toolkit* (www.cphd.ucla.edu). The finalized lists should be incorporated into the health department’s COOP Plan.

Planning Instrument

The planning instrument is a questionnaire that addresses four separate questions for each program or division within the health department. These questions are as follows:

Question 1: Uninterruptable Routine Function Identification

The first question asks each program or division to identify their URFs, while also providing rationale for these designations. Each program/division should break the URFs into functions that cannot be interrupted for more than 72 hours, two weeks, or 30 days following a disaster. Programs/divisions should make sure to only report URFs and not emergency response functions.

For example:

<i>Uninterruptible Routine Function</i>	<i>Cannot be disrupted for >72 hrs</i>	<i>Cannot be disrupted for >2 weeks</i>	<i>Cannot be disrupted for >30 days</i>	<i>If you stated that the uninterruptible routine function cannot be disrupted for longer than 72 hours please explain</i>
<i>Analyze samples for microbiological contamination of drinking water, beach water, food and dairy products</i>	X			<i>Maintaining clean drinking water is essential for preventing morbidity and mortality by ensuring no contamination.</i>
<i>Promote food safety through the routine inspection of food establishments and the investigation of complaints</i>		X		

Question 2: Identification of Staff

The second question focuses on the type and the minimum number of staff necessary to complete the identified URFs. If the URF listed requires staffing by individuals with certain licensure or qualifications, it is important to specify these requirements in the instrument. The specific number and type of staff needed to implement URFs will not only allow the health department to identify staff that must be available for continuity of operations but also those who will be available for emergency response functions. When programs/divisions within the health department identify their staffing needs for URFs, it is important that they keep in mind that staffing needs should be thought of in terms of the minimum amount of staffing needed for successful URF continuance, not the number of staff usually assigned to this task.

<i>Function</i>	<i>Type of staff/qualifications</i>	<i>Number</i>
<i>Provide medical services</i>	<i>Phlebotomist</i>	<i>2</i>
	<i>Nurse</i>	<i>4</i>
	<i>Educator</i>	<i>1</i>
<i>Analyze samples for microbiological contamination of drinking water, beach water, food and dairy products</i>	<i>Laboratory technologist</i>	<i>2</i>

Question 3: Identification of Equipment and Supplies

The third question asks about the equipment and supplies necessary to complete each URF. In addition to identifying equipment and supplies, contingency plans should be in place in case access to the supplies or equipment is diminished as a result of the emergency event. Additionally, if certain equipment uses power or other resources that may not be available in an emergency, back up plans also need to be identified.

For example:

<i>Function</i>	<i>Equipment/Supplies</i>	<i>Quantity</i>
<i>Provide medical services - Phlebotomist</i>	<i>Evacuate collection tubes, needles of various gauge sizes, syringes, tourniquets, alcohol wipes, povidone-iodine wipes/swabs, gauze sponges, adhesive bandages, needle disposal unit, gloves, and syringes.</i>	
<i>Analyze samples for microbiological contamination drinking water, beach water, food and dairy products</i>	<i>Mechanical blender, high-speed blender jar (resistant to autoclaving), balance with weights, sterile beakers, sterile graduate pipets, phosphate-buffered dilution water, and sterile equipment (knives, forks, spatulas, tablespoons, scissors and tongue depressors) for sample handling.</i>	

Question 4: Identification of Alternate Sites

Question four asks each program or division to designate alternate locations conducive for operation of URFs in case their normal location is damaged or inaccessible. This information should be compiled for the entire health department. Without an agency-wide alternate location plan, many programs/divisions may end up in the same location. Designated locations will also need to have the capacity to accommodate the supplies and equipment that the program/divisions identified for successful completion of the URFs.

For example:

<i>Division or Branch</i>	<i>Current Location</i>	<i>Alternate location 1</i>	<i>Alternate location 2</i>
<i>Family Health Services Division</i>	<i>Dept. of Public Health 1001 Pearl Avenue. Honolulu, HI 96813</i>	<i>State Environmental Laboratory 13001 Waimano Road Pearl City, HI 96782</i>	<i>Hawaii General Hospital 1637 Castenada Kaneohe, HI 96744</i>

Questions 2, 3, and 4 will also need to be answered for those URFs that need to be resumed within two weeks and by 30 days.



COOP Planning Instrument Worksheets

Blank worksheets can also be accessed online and printed from UCLA’s COOP Toolkit: www.cphd.ucla.edu.

Question 1: Uninterruptable Routine Function Identification

Please list your division or branch’s uninterruptible routine functions (URFs) and mark the length of time that they can be disrupted in case of an emergency. URFs are those functions that if not provided may increase morbidity and mortality within your community, or those services that are legally mandated. Please be specific regarding the actual duties that must be performed. When listing your URFs please think about how long these URFs can be interrupted.

<i>Uninterruptible Routine Function</i>	<i>Cannot be disrupted for >72 hours</i>	<i>Cannot be disrupted for >2 weeks</i>	<i>Cannot be disrupted for >30 days</i>	<i>If you stated that the uninterruptible routine function cannot be disrupted for longer than 72 hours please explain</i>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

Question 2: Identification of Staff

For those functions (URFs) that cannot be disrupted for more than 72 hours, please list the type and minimum number of staff necessary to keep those URFs in operation. Please keep in mind that in an emergency, absenteeism may be considerable and/or staff may be required to fulfill other duties within the health department, so your staffing lists should be the minimum number of staff required to fulfill the URF. After listing the staffing needed for URFs in the first 72 hours, please list the staffing needed for URFs for 2 weeks and 30 days following a disaster.

FOR 72 HOURS:

<i>Function</i>	<i>Type of staff/qualifications</i>	<i>Number</i>

FOR TWO WEEKS:

<i>Function</i>	<i>Type of staff/qualifications</i>	<i>Number</i>

FOR 30 DAYS:

<i>Function</i>	<i>Type of staff/qualifications</i>	<i>Number</i>

Question 3: Identification of Equipment and Supplies

For those URFs that cannot be disrupted for more than 72 hours, please list all equipment and supplies that are critical to keeping them operational. Please do the same for URFs that cannot be disrupted for more than two weeks and for more than 30 days following a disaster.

FOR 72 HOURS:

<i>Function</i>	<i>Equipment / Supplies</i>	<i>Quantity</i>

FOR TWO WEEKS:

<i>Function</i>	<i>Equipment / Supplies</i>	<i>Quantity</i>

FOR 30 DAYS:

<i>Function</i>	<i>Equipment / Supplies</i>	<i>Quantity</i>

Question 4: Identification of Alternate Sites

In the event of a hazard or event that renders your current location unusable, please provide two approved alternate locations where the identified URFs can be provided. Please list alternative locations for 72 hours after a disaster, and then if different, please list alternate locations for two weeks and 30 days following a disaster.

FOR 72 HOURS:

Division or Branch	Current Location	Alternate location 1	Alternate location 2

FOR TWO WEEKS:

Division or Branch	Current Location	Alternate location 1	Alternate location 2

FOR 30 DAYS:

Division or Branch	Current Location	Alternate location 1	Alternate location 2