Guidelines

for the

Public Health Laboratory

Continuity of Operations Plan

(COOP)

The Association of Public Health Laboratories (APHL) is a national non-profit organization dedicated to working with members to strengthen governmental laboratories that perform testing of public health significance. By promoting effective programs and public policy, APHL strives to provide member laboratories with the resources and infrastructure needed to protect the health of US residents and to prevent and control disease globally.

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Acknowledgement

The *Guidelines for the Public Health Laboratory Continuity of Operations Plan* (COOP) builds upon the *2007 Association of Public Health Laboratories (APHL) COOP Guidelines*, as well as the Federal Emergency Management Agency (FEMA) *Continuity of Operation Plan Template and Instructions for Federal Departments and Agencies* (February 2011).

In 2007, the Emergency Preparedness and Response Committee, now the Public Health Preparedness and Response (PHPR) Committee, of APHL was charged by the board of directors to develop the *Guidelines for the Public Health Laboratory Continuity of Operations Plan (COOP)* to assist state public health laboratories in developing a COOP to ensure continuation of their essential public health activities during events that may disrupt normal operations.

In 2011, the APHL Emergency Management Subcommittee, under the leadership of the PHPR Committee, was charged with revising and updating the *Guidelines for the Public Health Laboratory Continuity of Operations Plan (COOP).*

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APHL is grateful to the Emergency Management Subcommittee, the Public Health Preparedness and Response Committee, and the Environmental Health Committee, who contributed their time and expertise to provide substantial guidance on the development of these guidelines.

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I. PROMULGATION STATEMENT

The **[Laboratory Name]** plays an essential role in public health and safety. Laboratories performing testing of public health significance generate critical data used to make informed decisions regarding the implementation of preventative measures and development of effective policies that protect the public from unforeseen conditions, hazards and threats. Data provided by public health laboratories include those related to screening newborn infants, detecting infectious outbreaks, responding to terrorism threats and other emergencies, and monitoring significant public health trends. While laboratories in the private sector may also provide analytical services in some of these areas, the core activities of public health laboratories are uniquely focused on population health rather than individual health. This focus requires public health laboratories to have special analytical expertise, instrumentation, methods and response capability not available in the private sector. Consequently, it is imperative that the **[Laboratory Name]** be able to continue their core population-based activities when events occur that disrupt their normal operation. To ensure continuation of these essential activities, the **[Laboratory Name]** must have in place an effective COOP.

The laboratory COOP is a comprehensive, pre-event plan that describes the procedures, policies and arrangements necessary for the laboratory to respond quickly and effectively to a wide variety of possible disruptions or threats. It describes what is in place, what the laboratory does to respond, and what is required to maintain the COOP.

II. RECORD OF CHANGES

[These instructions should be removed when your document is finalized]. *When changes are made to the continuity plan outside the official cycle of plan review, planners should track and record the changes using a record of changes table. The record of changes should contain, at minimum, a change number, the date of the change, the name of the person who made the change and a description of the change.*

Change Number	Date of Change	Individual Making Change	Section	Description of Change
1.				
2.				
3.				
4.				
5.				

III. RECORD OF DISTRIBUTION AND REVIEW

[These instructions should be removed when your document is finalized]. *The record of distribution and review indicates the date of review, and the name and the title of the person reviewing the plan. The record of distribution can be used to verify that tasked individuals have acknowledged their receipt, review and/or acceptance of the plan.*

Date of Review	Date of Acceptance	Name	Title

IV. PURPOSE, SCOPE, SITUATIONS, AND ASSUMPTIONS

A. PURPOSE

The purpose of a well designed COOP is to minimize interruption of the **[Laboratory Name]** operation if some internal or external disruptive event were to occur. Having an effective COOP in place ensures that the **[Laboratory Name]** core activities can be resumed within an acceptable period of time following such an incident. It allows the **[Laboratory Name]** to shift efficiently from its normal structure and organization to a structure and organization that facilitates rapid recovery and continuation of services. The ability to make this shift without delay is critical for the **[Laboratory Name]** to continue as a viable and stable governmental entity during a crisis.

B. SCOPE

The **[Laboratory Name]** COOP has two main features. First, it provides a comprehensive, pre-identified list of all core testing and support activities that must be continued if the laboratory experiences a partial or complete operational disruption. Second, it provides a pre-arranged plan of action to ensure that all these core activities are continued without delay. The COOP applies to all of the operations, infrastructure, and resources necessary to continue the laboratory activities deemed essential to fulfill the **[Laboratory Name]** responsibilities. If the laboratory facility or any portions of it are involved in a crisis or emergency, or declared unusable for its normal operation, the COOP is activated immediately. COOP activation can be caused by natural or manmade disasters, such as hurricanes and tornados, or disease preventing operations, such as pandemic influenza.

The nature of the work done in the **[Laboratory Name]** requires that the COOP be developed as a special part of the business continuity plan of the **[Your Agency or State Department of Health].** While the **[Your Agency or State Department of Health]** has an overall Continuity of Operations Plan, the **[Laboratory Name]** operation has unique features that require distinctive consideration. Unlike operation of the rest of the **[Your Agency or State Department of Health]**, the **[Laboratory Name]** requires extensive instrumentation, dedicated space, and special air handling. Consequently, the **[Laboratory Name]** operations cannot be quickly moved to another location, and accommodation of its core activities is a complex matter.

The scope of the **[Laboratory Name]** COOP includes all time-sensitive core activities of the laboratory, including technology and required support. Time-sensitivity refers to activities that must be recovered within a pre-determined, relatively short period of time; for example, 24 hours or less. The COOP has been developed to address "worst case scenarios," with the capability to scale down to accommodate lesser disruptions. Specific plans of action have been developed, and groups of personnel have been identified and trained to implement these pre-defined actions to ensure timely recovery.

C. SITUATION OVERVIEW

The probability that the **[Laboratory Name]** will experience an event disruptive to its operation is related to its vulnerability. Because the COOP is designed to respond to any significant disruption, it is important to assess the **[Laboratory Name]** vulnerability to determine what can happen, what is the likelihood of it happening, and what measures can be taken beforehand to mitigate the possibility. To identify vulnerabilities and address them through effective mitigation before they become a disruptive event will reduce the need for costly activation and implementation of the **[Laboratory Name]** COOP.

Possible internal measures for mitigation of some vulnerabilities include building security systems, backup power supplies, fire suppression systems, and redundant data systems, to name a few. Examples of external mitigation measures include effective public safety services, protective building construction, and the absence of hazardous environmental conditions, among others.

A thorough analysis of site vulnerability provides a comprehensive list of potential threats that may disrupt normal **[Laboratory Name]** operations, both within a laboratory facility itself and within the community where the laboratory is located. Such threats fall into several general categories: extreme weather conditions, major equipment failure, protracted personnel matters, extensive building damage, compromised building utilities, failed communication systems, civil disturbance, or acts of terrorism. Table 1 lists potential vulnerabilities, the measures in place for mitigation, and the level of risk that the vulnerability may lead to a disruption of the **[Laboratory Name]** operation.

Table 1. Potential Vulnerabilities and Mitigation for **[Laboratory Name].**

Site Vulnerability Analysis		
Threat	**Mitigation**	**Risk**
Campus/Civil Disturbance	Law Enforcement	Low
Earthquake	Relocation of Work	Medium
Electrical Power Failure	Backup Power Generator	Medium
Epidemic (Absences Due to Illness or Quarantine)	Relocation of Work	Medium
Extreme Thunderstorm Weather	Relocation of Work	Medium
Fire – External	Relocation of Work	Medium
Fire – Internal	Fire Suppression System	Medium
Flooding – External	Relocation of Work	Low
Flooding – Internal	Relocation of Work	Low
Hazardous Materials Incident	Relocation of Work	Medium
Hurricane	Relocation of Work	Medium
Personnel Strike	Relocation of Work	Low
Telecommunications Disruption	Cell Phones/Internet	Low
Terrorism	Relocation of Work	Low
Tornado	Relocation of Work	Medium
Water Supply Interruption	Relocation of Work	Medium
Other		

Among possible threats, the vulnerability assessment should take into account the potential impact of criminal activity on the **[Laboratory Name]** operations. Considering the laboratory's location, the analysis should include an evaluation of the potential risk posed by civil demonstrations, acts of terrorism or other kinds of criminal behavior. In determining the level of this risk, it is important to review the effectiveness of any crime mitigation methods currently being used at the laboratory facility, such as surveillance cameras, security guards, access control, locking systems, screening/detection equipment, and digital tracking systems.

When assessing vulnerability, it is also important to consider threats from secondary sources. These would include non-laboratory facilities located nearby or physically connected to the **[Laboratory Name]** facility. Such facilities might have vulnerabilities that could impact the laboratory without the laboratory having any direct control over their mitigation. An example might be parking decks adjacent to or connected to the laboratory allowing entry of potential unwanted threats.

A Hazard Risk Assessment Instrument developed by the UCLA Center for Public Health and Disasters may be found here: http://www.cphd.ucla.edu/npdfs/HRAI_Workbook.pdf

D. PLANNING ASSUMPTIONS

This COOP is based on the following assumptions:

- An emergency condition may require the relocation of one or more of the **[Laboratory Name]** Emergency Relocation Group (ERG) members to another laboratory;
- The **[Laboratory Name]** will support ERG members and the continuation of the **[Laboratory Name]** essential functions by available communications and information systems within 12 hours or less from the time the COOP is activated, for potentially up to a 30-day period or until normal operations can be resumed;
- In the event that ERG deployment is not feasible due to the loss of personnel, the **[Laboratory Name]** will devolve to **[devolution Office/Region]**; and
- **[Insert additional assumptions here if needed].**

E. OBJECTIVES

The objectives of the COOP are to:

- Provide for leadership, authority and succession, and describe Incident Command;
- Establish policies and procedures to assure continuous performance of critical "core" laboratory testing and support activities;
- Define the requirements, and then identify and pre-arrange for assistance from alternate laboratories, if needed;
- Assure safety of all **[Laboratory Name]** employees and visitors;
- Provide communication and direction to stakeholders;
- Minimize the loss of assets, resources, critical records, and data;
- Reduce or mitigate disruptions to the **[Laboratory Name]** operation;
- Build infrastructure to support a timely recovery;
- Manage effectively the immediate response to the emergency;

- Provide prospective information and education for **[Laboratory Name]** employees and stakeholders regarding roles and responsibilities during an emergency; and

- Maintain, exercise, revise, and audit the COOP at least annually.

F. SECURITY AND PRIVACY STATEMENT

This document is classified as "For Official Use Only." Portions of this plan contain information that raises personal privacy or other concerns, and those portions may be exempt from mandatory disclosure under the Freedom of Information Act (see 5 United States Code §552, 41 Code of Federal Regulations Part 105-60). It is to be controlled, stored, handled, transmitted, distributed and disposed of in accordance with the **[Your Agency or State Department of Health]** policies, and it is not to be released to the public or other personnel who do not have a valid "need to know" without prior approval of **[Your Agency or State Department of Health]** and the **[Laboratory Name]**.

Some of the information in this plan, if made public, could endanger the lives and privacy of the **[Laboratory Name]** employees. In addition, the disclosure of information in this plan could compromise the security of essential equipment, services and systems of the **[Laboratory Name],** or otherwise impair its ability to carry out essential functions. Distribution of this COOP in whole or in part is limited to those personnel who need to know the information in order to successfully implement the plan.

The **[Laboratory Name]** will distribute copies of the COOP on a need-to know basis. The **[Laboratory Name]** COOP will be made available to ERG members and all personnel through a shared drive or through an intranet site. In addition, copies of the plan will be distributed to other organizations or agencies as necessary to promote information sharing and facilitate a coordinated interagency continuity effort. Further distribution of the plan, in hardcopy or electronic form, is not allowed without approval from **[Laboratory Name]**. The **[Laboratory Name]** will distribute updated versions of the COOP annually as critical changes occur.

V. CONCEPT OF OPERATIONS

A. PHASE I: READINESS AND PREPAREDNESS

The **[Laboratory Name]** participates in the full spectrum of readiness and preparedness activities to ensure its personnel can continue essential functions in an all-hazard risk environment. The **[Laboratory Name]** readiness activities are divided into three key areas:

- Notifications
- Staff readiness and preparedness
- Incident Command

I. Notifications

Implementation of the COOP occurs if one or more of the **[Laboratory Name]** critical core activities are or will be compromised by some disruptive event. Such implementation requires immediate activation of the COOP "notification team" or "administrative team" to contact all key individuals and groups to provide them with essential information and guidance. Among those that need to be contacted by the notification team are the following:

- **[Executive Head], [Laboratory Name]**
- Associate **[Executive Head]**
- Laboratory Directors
- Supervisors/Managers
- All laboratory staff
- All impacted submitters of samples and specimens
- All alternative laboratories that may required to assume core functions

In addition to the individuals and groups that have been listed here, there may be others both within and outside the **[Laboratory Name]** that need to be notified. Examples may include the **[Laboratory Name]** Agency or State Health Department leadership, Emergency Operations Center, Department of Emergency Management, Crisis Management Team, CDC, APHL, and nearby partner laboratories. Initial notification of the entire laboratory staff is important to give instructions about reporting to work: whether they should report to the laboratory or to some other pre-determined alternative site, and where they can expect to get reliable additional information and updates on a

regular basis as the incident and the **[Laboratory Name]**' response to the incident evolve.

To ensure rapid, efficient notification, the **[Laboratory Name]** COOP includes a Functional Annex with the procedures to be followed. Additionally, the **[Laboratory Name]** Emergency Contact numbers "recall rosters" are updated on a regular basis; some do this as frequently as monthly. The list contains each staff member's name, address, email, home telephone, cell telephone, pager number, as well as other pertinent information. This list is accessible, both electronically through a shared drive and through an intranet SharePoint. In addition, whenever possible, the messages to be conveyed during the notification process are pre-determined to avoid delay during an incident. Different individuals on the notification team are trained to notify specific individuals or groups using pre-established call-down lists or pre-arranged vehicles for mass communication. Training and exercising of the team for this notification process is done at least annually.

II. Staff Readiness and Preparedness

The **[Laboratory Name]** personnel must also prepare for a continuity event. The **[Laboratory Name]** personnel should plan in advance what to do in an emergency and should develop a Family Support Plan to increase personal and family preparedness. The **[Laboratory Name]** recommends that staff develop their Family Support Plan by using the templates available at http://www.ready.gov. This site includes a "Get Ready Now" pamphlet, which explains the importance of planning and provides a template that staff and family can use to develop their specific plan.

Social distancing is a public health action that limits exposure to highly communicable diseases by restricting person-to-person contact. A social distancing policy suspends school classes and other public gatherings, and places limits on business to help prevent the person-to-person spread of influenza or other disease impacting public health. If a severe communicable disease outbreak were to occur, a social distancing policy may be instituted for a period of time to be determined by local public health authorities.

Social distancing is designed to limit the spread of a disease by reducing the opportunities for close contact between people. It can be accomplished by administrative and engineering controls.

Examples include:

- Reducing face-to-face exposure by using conference calls and video conferencing;
- Avoiding unnecessary travel;
- Canceling meetings, workshops, training sessions and scheduled events;
- Requiring employees to work from home to reduce exposure in the workplace;

- Establishing flexible working hours to avoid mass transportation, at least during peak hours;
- Installing protective barriers between work stations or increasing space between workers;
- Reinforcing hand washing and requiring the use of protective equipment such as hand sanitizers and masks (provided by the agency);
- Scheduling employees in shifts;
- Controlling access to buildings; and
- Requiring asymptomatic individuals traveling to affected countries/areas not to return to work until one incubation period has passed after returning home.

The **[Laboratory Name]** continuity personnel have the responsibility to create and maintain Drive-Away kits. Continuity personnel are responsible for carrying the kits to the alternate laboratory or pre-storing the kits at the alternate laboratory.

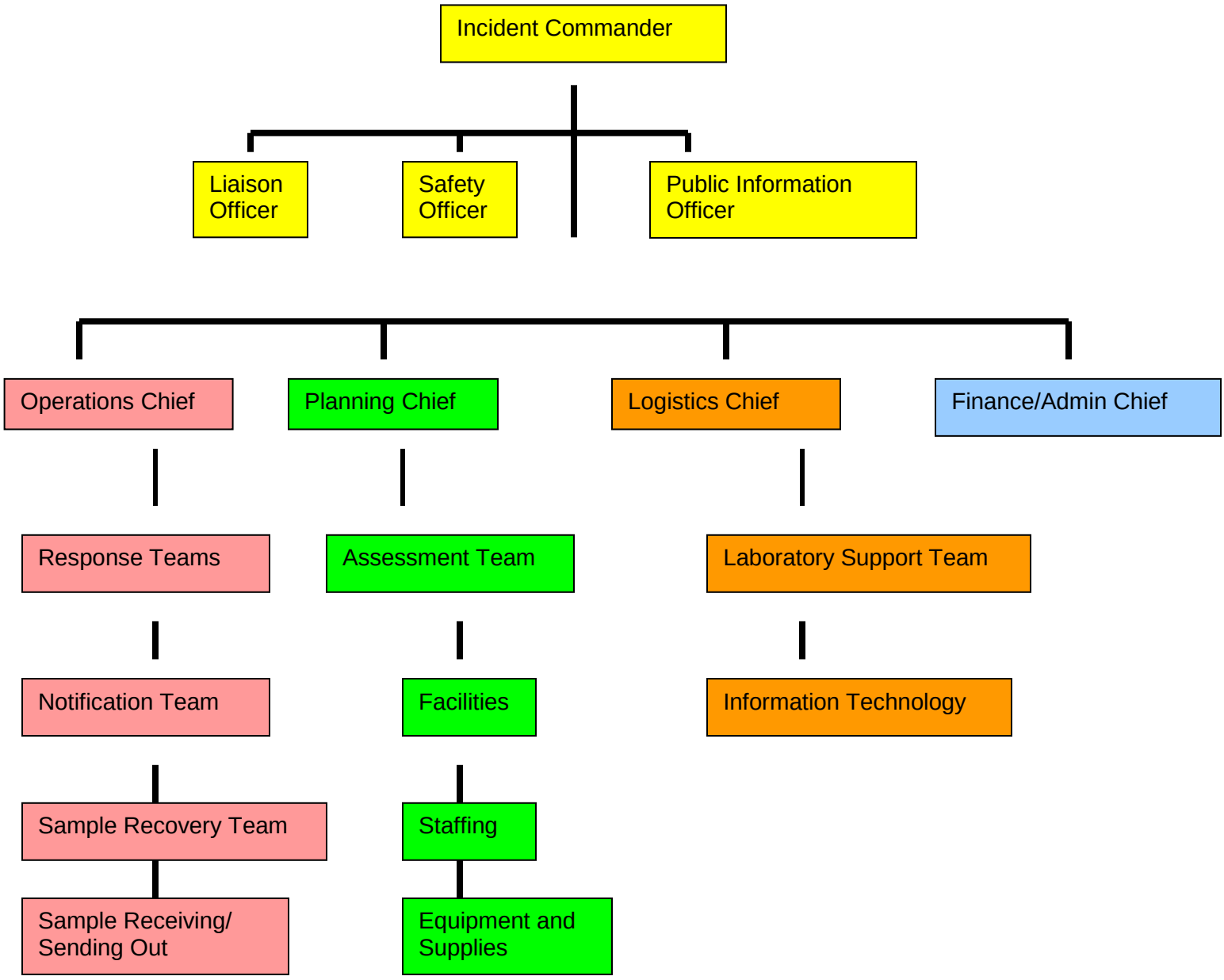
In addition, the **[Laboratory Name]** conducts annual continuity readiness and preparedness activities including Drills and Exercises as described in the Functional Annex Testing Training & Exercise (TTE) Capabilities.

III. Incident Command

If an incident causing disruption of the **[Laboratory Name]** operations is such that it requires activation of the state, county or local emergency operations centers, with implementation of the Incident Command System (ICS), the various **[Laboratory Name]** COOP response teams should function within that ICS. This is essential to coordinate the overall public health response with the responses of other state, county or local agencies. As part of the National Incident Management System (NIMS), the ICS was developed to assist different agencies, jurisdictions and disciplines when necessary, working together to respond effectively to all-hazard emergencies. The benefit of using an ICS is the availability of standardized language, and the use of common command and management structures. Since most, if not all, state agencies already have an ICS in place, it should be utilized for responses to incidents that require activation of the **[Laboratory Name]** COOP.

The various incident response teams recommended for the **[Laboratory Name]** COOP must be integrated into the National Incident Management System (NIMS)-compliant ICS of the **[Laboratory Name]** jurisdiction. The following chart shows where the COOP response teams would be located in the ICS structure. It is not meant to represent all of the additional functions necessary for NIMS compliance.

Sample ICS Chart for the Laboratory



For each of the various incident response teams established for the **[Laboratory Name]** COOP, a coordinator should be identified in the planning process. As shown in the chart, each response team, through this coordinator, should report to a specific chief within the ICS structure, i.e., operations, planning, logistics or finance. These various positions may be filled by laboratory personnel or by [**Your Agency or Health Department**] staff, i.e., Public Information Officer, Liaison Officer or Plant Manager, especially if these positions are not performed by laboratory staff normally. During the planning process for the COOP, the **[Laboratory Name]** has identified COOP activation manager and a general command staff, as shown in Table 2, with appropriate Job Action Sheets to describe respective roles and responsibilities. A template for a Job Action Sheet is available in the Functional Annex. These various COOP implementation positions are filled at least three to four deep (if possible) to accommodate unforeseen absences and the possible need for activation on a 24/7 schedule. All of the **[Laboratory Name]** staff with responsibilities within this ICS structure have received extensive training with periodic exercising. When an incident occurs that may disrupt the **[Laboratory Name]** operation, this ICS should be activated as soon as possible. Additionally, the ICS has been set up to be expanded or contracted, depending on the scope of the incident and its impact on the **[Laboratory Name]** operation, as determined by the COOP assessment team.

Table 2. ICS Personnel

ICS Personnel		
Position	**Name**	**Department**
Incident Commander		
Liaison Officer		
Safety Officer		
Public Information Officer		
Operations Chief		
Response Team		
Notification Team		
Sample Recovery Team		
Sample Receiving/Send Out		
Planning Chief		
Assessment Team		
Facilities		
Staffing		
Equipment and Supplies		
Logistics Chief		
Laboratory Support Team		
Information Technology		
Finance/Admin Chief		

B. PHASE II: ACTIVATION AND RELOCATION

Assessment of the incident and its impact on the **[Laboratory Name]** operation will lead to a decision about activation of the COOP. The authority and executive should be named, as should the process by which they would "activate" the COOP. If all of the predetermined core activities of the **[Laboratory Name]** are found to still be intact, activation of the COOP may be unnecessary. If only some of the core activities are affected, the plan may be activated only partially to accommodate the compromised activities. If the one or more of the **[Laboratory Name]** operations is lost, the complete plan will be activated in response to a "worst case scenario." The level of activation dictates who needs to be involved, who needs to be notified, what needs to be done, and where the required activities will take place.

If assessment of the **[Laboratory Name]** operational capability results in a decision to activate the COOP, predetermined incident response teams should be activated. These teams are essential to coordinate the various preplanned actions required when the COOP is implemented. The teams carry out their respective activities either within the laboratory facility itself or at one of the other predetermined, appropriately equipped, alternate laboratory sites, depending on the needs dictated by the event. The teams should function as part of the **[Laboratory Name]** overall Incident Command System (ICS), as described above in the Incident Command section of these guidelines. For each team, a specific Job Action Sheet has been developed to describe their role and responsibility. Members of each team should be preassigned and trained, and their activities should be thoroughly exercised, at least on an annual basis. Which teams to activate, and the number of members to engage in each, should be scalable to fit the magnitude of the laboratory disruption. These teams should report to the organizational chiefs pre-established within the agency's ICS, as describe in the Incident Command section of these guidelines.

The structural and operational needs of each specific laboratory will determine what incident response teams to establish for the COOP. Examples of response teams are shown in Table 3.

Table 3. Incident Response Teams

Incident Response Teams	
Team	**Responsibilities**
Response	Directs resources to appropriate locations in consultation with the Operations Chief
Notification	Notify laboratory staff and other key individuals and groups with information and guidance
Sample Recovery	Determine status of samples stored in the laboratory facility, what testing is in progress and what actions to take
Sample Receiving/Send Out	Determine what actions are required regarding samples to be received and samples to be sent out to alternative laboratories
Assessment	Assess laboratory mission essential functions capability and make decisions regarding COOP activation
Facilities	Assess laboratory facility operational capability and make decisions regarding COOP activation
Staffing	Assess laboratory staffing capability and make decisions regarding COOP activation
Equipment and Supplies	Assess laboratory equipment and supplies capability and make decisions regarding COOP activation
Laboratory Support	Assure appropriate levels of clerical, purchasing, and materials preparation support for core laboratory functions
Information Technology	Assure availability of the Laboratory Information System to manage all necessary laboratory data, including accessioning and reporting

C. PHASE III: CONTINUITY OPERATIONS

The Phase III section identifies initial arrival procedures as well as operational procedures for the continuation of essential functions.

Upon activation of the COOP, the affected laboratory will continue to operate at its primary operating facility until ordered to cease operations by the **[Executive Head], [Laboratory Name]**, Associate **[Executive Head],** or Laboratory Director using direct communication. At that time, the necessary essential functions will transfer to the designated alternate laboratory. Please note that for an alternate laboratory for drinking water and environmental sample testing, the EPA's *Regional Laboratory Response Plan* (RLRP) should be consulted. The **[Laboratory Name]** must ensure that the continuity plan can become operational within the minimal acceptable period before Mission Essential Functions (MEF) disruption, but in all cases within 12 hours of plan activation.

Prior to relocating to the alternate laboratory facility, **[Office]** will conduct appropriate security, safety and health assessments to determine building suitability. In addition, **[Office]** will verify that all systems, communications, and other required capabilities are available and operational, and that the **[Laboratory Name]** is fully capable of accomplishing all essential functions and operations at the alternate laboratory facility.

The advance team will arrive at the designated alternate laboratory first to prepare the site for the arrival of the continuity personnel. Upon arrival at the alternate laboratory facility, the advance team will:

- Ensure infrastructure systems, such as power and HVAC are functional
- Prepare check-in duty stations for ERG arrival
- Field telephone inquiries from ERG and non-ERG staff
- **[Additional tasks here]**

As continuity personnel arrive at the designated alternate laboratory, **[Office]** will in-process the staff to ensure accountability. In-processing procedures will consist of the following steps: **[insert steps to in-process continuity personnel here, including how to obtain the roster of continuity personnel and how the organization will reach individuals who have not in-processed for accountability, etc.]**. In addition, the office will identify all organization leadership available at the alternate laboratory facility. Upon arrival at the alternate laboratory facility, the affected laboratory continuity personnel will:

- Report immediately to **[Position]** for check-in and in-processing;
- Receive all applicable instructions and equipment ;
- Report to their respective workspace as identified in the activation process;

- Retrieve pre-positioned information and activate specialized systems or equipment ;
- Monitor the status of affected laboratory personnel and resources;
- Continue the **[Laboratory Name]** mission essential functions;
- Prepare and disseminate instructions and reports as required;
- Comply with any additional continuity reporting requirements with the **[Your Agency or State Department of Health]**;
- Notify family members, next of kin and emergency contacts of preferred contact methods and information; and
- **[Additional tasks here].**

A significant requirement of continuity personnel, the continuity notification team or administrative team, is to account for all of the affected laboratory personnel. The **[Laboratory Name]** will use the following processes to account for all personnel:

- **[Insert processes here, such as using call down telephone trees, a 1-800 number, an alert and notification system, a website, etc. Include how will the organization and what office/title is responsible for communicating with personnel who are unaccounted for]**

During continuity operations, the **[Laboratory Name]** may need to acquire necessary personnel, equipment and supplies on an emergency basis to sustain operations for up to 30 days or until normal operations can be resumed. **[Office/Authority]** maintains the authority for emergency acquisition. Instructions for these actions are found in the Functional Annex **[insert instructions below or insert location of instructions if found in another document]**.

D. PHASE IV: RECONSTITUTION OPERATIONS

The Reconstitution Operations identify and outline a plan to return to normal operations once leadership determines that the conditions for resuming normal business operations can be initiated.

Within **[time period]** of an emergency relocation, the following individuals will initiate and coordinate operations to salvage, restore and recover the **[Laboratory Name]** affected laboratory facility after receiving approval from the appropriate local, state and federal law enforcement, and emergency services:

- **[Insert Title or Titles]** will serve as the Reconstitution Manager for all phases of the reconstitution process
- Each of the **[Laboratory Name]** facilities will designate a reconstitution point-of-contact to work with the Reconstitution Team and to update office personnel on

developments regarding reconstitution and provide names of reconstitution point-of-contact to **[Office/Title]** within **[number]** hours of the COOP activation

During continuity operations, **[Office/Title]** must access the status of the facilities affected by the event by **[methods here]**. Upon obtaining the status of the facility, the **[Laboratory Name]** will determine how much time is needed to repair the affected laboratory facility. This determination is made in conjunction with **[Offices and Organizations]**. Should the **[Laboratory Name]** decide to repair the affected facility, **[Office/Title]** has the responsibility of supervising the repair process and must notify **[Office/Title]** of the status of repairs, including estimates of when the repairs will be completed.

Reconstitution procedures will commence when the **[Executive Head], [Laboratory Name]**, Associate **[Executive Head],** Laboratory Directory, or other authorized person ascertains that the emergency situation has ended and is unlikely to reoccur. These reconstitution plans are viable regardless of the level of disruption that originally prompted implementation of the COOP. Once the appropriate **[Laboratory Name]** authority has made this determination in coordination with other Federal and/or other applicable authorities, one or a combination of the following options may be implemented, depending on the situation:

- Continue to operate from the alternate laboratory facility
- Reconstitute the affected laboratory operating facility and begin an orderly return to the affected laboratory facility
- Begin to establish a reconstituted affected laboratory within an alternate laboratory in the **[Laboratory Name]** system
- **[Additional organization options here]**

Upon a decision by the **[Executive Head], [Laboratory Name]**, Associate **[Executive Head],** Laboratory Director or other authorized person that the **[Laboratory Name]** affected laboratory facility can be reoccupied or that the affected laboratory will re-establish itself in a different laboratory facility within the **[Laboratory Name]**:

- The **[Laboratory Name]** Continuity Coordinator or other authorized individual must notify the **[Your Agency or State Department of Health]**, when available, as well as other applicable operations centers with information regarding continuity activation and relocation status, the **[Laboratory Name]** alternate location, operational and communication status, and anticipated duration of relocation. The **[Laboratory Name]** shall submit a Continuity Status Reporting Form only if it contains more information than what has been reported to the **[Your Agency or State Department of Health]** or **[contact information for appropriate status reporting procedures]** using the form and procedures provided by FEMA's National Continuity Programs Directorate or other specified continuity point-of-contact;
- **[Office]** will develop space allocation and facility requirements;

- **[Office]** will notify all personnel that the emergency or threat of emergency has passed and actions required of personnel in the reconstitution process using **[method of communication]**;
- **[Office]** will coordinate with the General Services Administration (GSA) and/or other applicable facility management group to obtain office space for reconstitution, if the primary operating facility is uninhabitable;
- **[Office]** will develop procedures, as necessary, for restructuring staff; and
- **[Any additional activities associated with planning for reconstitution].**

Upon verification that the required capabilities are available and operational and that the **[Laboratory Name]** is fully capable of accomplishing all essential functions and operations at the alternate laboratory facility, **[Office]** will begin supervising a return of personnel, equipment, and documents to the affected laboratory facility or a move to an alternate laboratory within the **[Laboratory Name]**. The phase-down and return of personnel, functions and equipment will follow the priority-based plan and schedule outlined below; the **[Laboratory Name]** will begin development of specialized return plans based on the incident and facility within **[number]** hours of plan activation.

- **[Insert priority-based phase-down and return plan], or see Functional Annex #**
- The **[Laboratory Name]** will continue to operate at the alternate laboratory facility until ordered to cease operations by **[Authority]** using **[method of notification here]**. At that time, essential functions will transfer to the affected laboratory facility. The **[Laboratory Name]** has developed plans to instruct personnel on how to resume normal operations as outlined below; the **[Laboratory Name]** will begin development of specialized resumption plans based on the incident and laboratory facility within **[number]** hours of plan activation.
- **[Insert normal operations resumption plan], or see Functional Annex #**

[Office] will identify any records affected by the incident by **[insert identification processes or contacts here]**. In addition, **[Office]** will effectively transition or recover vital records and databases, as well as other records that had not been designated as vital records, using the plan outlined below; the **[Laboratory Name]** will begin development of specialized vital records transition and recovery plans based on the incident and facility within **[insert number]** hours of plan activation.

- **[Insert vital records transition and recovery plan]**, **or see Functional Annex #**

When the continuity personnel, equipment and documents are in place at the alternate laboratory or restored affected laboratory facility, the remaining **[Laboratory Name]**

staff at the alternate laboratory facility or devolution site will transfer essential functions, cease operations, and deploy to the alternate laboratory or restored affected laboratory facility. **[Title or Titles]** shall oversee the orderly transition from the alternate laboratory facility of all the **[Laboratory Name]** functions, personnel, equipment and records to the restored affected laboratory facility. **[Office]** is responsible for developing a process for receiving and processing employee claims during the continuity event, including processing human capital claims (workman's compensation for injuries, overtime pay, etc.), and replacing lost or broken equipment.

The **[Laboratory Name]** will conduct an After Action Report (AAR) once it is back in the affected laboratory facility or established in the alternate laboratory facility. **[Office]** has the responsibility for initiating and completing the AAR. All affected personnel within the **[Laboratory Name]** will have the opportunity to provide input to the AAR. This AAR will study the effectiveness of the continuity plans and procedures, identify areas for improvement, document these in the **[Laboratory Name]** Corrective Action Program (CAP), and then develop a remedial action plan as soon as possible after the reconstitution. **[Office]** has the responsibility for documenting areas for improvement in the CAP and developing a remedial action plan. In addition, the AAR will identify which, if any, records were affected by the incident and will work with **[Office]** to ensure an effective transition or recovery of vital records and databases, and other records that had not been designated as vital records. AAR and CAP documentation are maintained by **[Office]** and are found at **[Location]**.

E. DEVOLUTION OF CONTROL AND DIRECTION

Devolution planning supports overall continuity planning and addresses the full spectrum of threats and all-hazards emergency events that may render an organization's leadership or staff unavailable to support, or incapable of supporting, the execution of the organization's essential functions from either its primary location or its continuity locations.

The **[Laboratory Name]** is prepared to transfer all of its essential functions and responsibilities to personnel at a different location should emergency events render leadership or staff unavailable to support the execution of the **[Laboratory Name]** essential functions. If deployment of continuity personnel is not feasible due to the unavailability of personnel, temporary leadership of the **[Laboratory Name]** will devolve to **[Office Name and Location]**.

The **[Executive Head]**, **[Laboratory Name]**, Associate **[Executive Head]**, or **[Laboratory Director]** maintain responsibility for ensuring the currency of the **[Laboratory Name]** devolution plan. The **[Laboratory Name]** devolution plan:

- Includes the elements of a viable continuity capability: program plans and procedures; budgeting and acquisitions; essential functions; orders of succession and delegations of authority specific to the devolution site; interoperable

communications; vital records management; staff' Test, Training, and Exercise (TT&E); and reconstitution. The **[Laboratory Name]** devolution plan is located **[insert location and Devolution plan , or insert the applicable plan appendix for devolution]**;

- Identifies prioritized essential functions, defines tasks that support those essential functions and determines the necessary resources to facilitate those functions. The list of prioritized essential functions for devolution is found at **[Location]**;

- Includes a roster that identifies fully equipped and trained personnel who will be stationed at the designated devolution site and who will have the authority to perform essential functions and activities when the devolution option of the continuity plan is activated. The devolution personnel roster is found at **[Location]**;

- Identifies what would likely activate or "trigger" the devolution option and specifies how and when direction and control of the **[Laboratory Name]** operations will be transferred to and from the devolution site. Devolution activation protocols or "triggers' are found at **[Location]**

- Determines and lists or references the necessary resources (i.e., equipment and materials) to facilitate the immediate and seamless transfer of and performance of essential functions at the devolution site. The list of necessary resources for devolution is found at **[Location]**;

- Establishes and maintains reliable processes and procedures for acquiring the resources necessary to continue essential functions and to sustain those operations for extended periods. The **[Office]** is responsible for acquiring resources during a devolution situation. Acquisition processes and procedures are found at **[Location]**;

- Establishes and maintains a capability to restore or reconstitute the **[Laboratory Name]** authorities to their pre-event status upon termination of devolution; and

- The **[Laboratory Name]** conducts and documents annual training of devolution staff and a biennial exercise to ensure devolution capabilities are prepared and capable of performing essential functions. This documentation includes the dates of all TT&E events and names of participating staff. The **[Laboratory Name]** devolution TT&E documentation is maintained by **[Office]** and is found at **[Location]**. Further, the **[Laboratory Name]** CAP supports the devolution program. The **[Laboratory Name]** CAP is maintained by **[Office]** and CAP documentation is found at **[Location]**.

For additional information on devolution, the FEMA template found at: http://www.fema.gov/government/coop/

VI. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

Key staff positions within the **[Laboratory Name]**, including individual continuity members, those identified in the order of succession and delegation of authority, the **[Laboratory Name]** Continuity Coordinator, continuity managers, and others possess additional continuity responsibilities. The responsibilities of these key continuity personnel are delineated in Table 4.

Table 4. Assignment of Responsibilities

Assignment of Responsibilities	
Position	**Responsibilities**
Laboratory Director	• Provide strategic leadership and overarching policy direction for the continuity program • Implement the COOP when necessary or when directed by higher authority • Update and promulgate orders of succession and delegations of authority • Ensure adequate funding is available for emergency operations • Ensure all organization components participate in continuity exercises • Update continuity of operations plan annually
Communications Specialist, Standards and Planning Division	• Update telephone rosters monthly • Conduct alert and notification tests
Records Specialist, Standards and Planning Division	• Review status of vital files, records and databases
Training Specialist, Standards and Planning Division	• Develop and lead Continuity of Operations training • Plan Continuity of Operations exercises
Continuity Personnel	• Be prepared to deploy and support organization essential functions in the event of a COOP implementation • Provide current contact information to their manager • Be familiar with continuity planning and know individual roles and responsibilities in the event of COOP activation • Participate in continuity training and exercises as directed • Have a telework agreement for this position, if applicable

VII. DIRECTION, CONTROL AND COORDINATION

During an activation of the COOP, the **[Executive Head], [Laboratory Name]** maintains responsibility for direction and control of the **[Laboratory Name]**. Should the Chief, **[Laboratory Name]** become unavailable or incapacitated, the organization will follow the directions laid out in the **[Laboratory Name]** Orders of Succession, and Delegation of Authority should be listed with a copy found electronically both through a shared drive and through an intranet SharePoint **[Location]**.

The contents and procedures laid forth in this Continuity Plan are consistent with the direction found in the **[Your Agency or State Department of Health]**. As a result, this plan and its concepts are integrated horizontally with other **[Your Agency or State Department of Health]** agencies. Further, the plan is reviewed and vetted by **[internal organizations, such as regional components, subcomponents or organization headquarters]** to ensure vertical integration within the **[Laboratory Name]**.

VIII. DISASTER INTELLIGENCE

During a continuity event, the **[Laboratory Name]** will require the collection and dissemination of critical information. While specific incidents may cause additional or specialized reporting requirements, examples of the information that the **[Laboratory Name]** must collect and report regardless of incident type during a continuity event are given in Table 5.

Table 5. Disaster Intelligence

Disaster Intelligence					
Information Element	**Specific Requirement**	**Responsible Element**	**Deliverables**	**When Needed**	**Distribution**
Personnel Accountability	• Account for all ERG and non-ERG employees • Account for all contract personnel	Planning Chief	Report briefing	Status update hourly following plan activation	**[ICS]**
Operational Status	• Percent of ERG personnel arrived at site • Ability to conduct each essential function • Status of communica-tions and IT systems	Operations Chief	Situation briefings Situation reports	NLT than six hours after plan activation, then hourly	**[ICS]**
Hazard Information	• Threat details specific to the continuity facility	Safety Officer	Situation briefings Situation reports	Two times per day at shift change	**[ICS]**

IX. COMMUNICATIONS AND DATA EXCHANGE

The **[Laboratory Name]** has identified available and redundant critical communication systems that are located at the operating laboratory facilities. Further, the **[Laboratory Name]** maintains fully capable continuity communications that could support laboratory needs during all hazards, to include pandemic and other related emergencies, and give full consideration to supporting social distancing operations, including telework and other virtual offices. Fully capable continuity communications include identification of the infrastructure that will support data collection, messaging and storage.

The **[Laboratory Name]** has detailed requirements associated with electronic data exchange and may include centralized information technology services or shared services. Data standards supporting interoperability should be identified and agreed upon if alternate location support will be provided by another laboratory.

In addition, the **[Your Agency or State Department of Health]** maintains communications equipment for use by employees with disabilities and hearing impairment.

All the **[Laboratory Name]** necessary and required communications and IT capabilities must be operational as soon as possible following continuity activation, and, in all cases, within 12 hours of continuity activation.

Additional detailed information on the **[Laboratory Name]** communications systems and requirements is found in the Functional Annex *Continuity Communications*.

X. BUDGETING AND ACQUISITION OF RESOURCES

The **[Laboratory Name]** budgets for and acquires those capabilities that are essential to continuity. A copy of the continuity budget is found at **[Location, Office]**. Within this budget, the **[Laboratory Name]** budgets for continuity capabilities in accordance with *National Security Presidential Directive (NSPD)-51/Homeland Security Presidential Directive (HSPD)-20* and *National Communications System Directive 3-10* or other applicable directives, and provides for the acquisition of those resources necessary for continuity operations on an emergency basis for up to 30 days or until normal operations can be resumed.

As part of the budget process, the **[Laboratory Name]** uses a risk management methodology to identify, prioritize and justify the allocation of budgetary resources. The risk management methodology used is **[methodology]** and a copy of the risk management documents can be found at **[Location, Office]**.

The **[Laboratory Name]** integrates the continuity budget with its multiyear strategy and program management plan, and links the budget directly to objectives and metrics set

forth in that plan. A copy of the multiyear strategy and program management plan is found at **[Location]**.

For those contracts vital to the support of organization essential functions, the **[Laboratory Name]** has ensured contractor statements of work include the provision to provide staffing, services and necessary resources during emergency conditions. A list of vital contracts is found at **[Location]** and maintained by **[Office]**. During an emergency situation, **[Office]** is responsible for oversight and handling of emergency work by contractors.

XI. PLAN DEVELOPMENT AND MAINTENANCE

Annual Updates and Review

The **[Laboratory Name]** COOP should be viewed as a living, changing document. To be most effective, it must contain up-to-date information. It, therefore, will be updated on a regular basis, at least annually. Contact information should be updated immediately, whenever there is any change. When changes are made in the COOP, it is imperative that all the distributed copies reflect all of the same changes with appropriate dates and signatures.

The **[Laboratory Name]** COOP should be reviewed during the annual exercise and in conjunction with each AAR. As a result of a well-designed review process, all significant issues and problems that are identified should be subjected to a rigorous remedial action process to make all the necessary revisions.

The **[Laboratory Name], [Office]** is responsible for maintaining the **[Laboratory Name]** COOP.

This plan, the **[Laboratory Name]** essential functions and supporting activities will be reviewed by **[Laboratory Name]** COOP Members and updated annually from the date of publication as part of the annual maintenance of continuity plans and procedures. **[Designated COOP Member Name]** is responsible for the annual plan review and update. In addition, the plan will be updated or amended when there are significant organizational or procedural changes, or other events that impact continuity processes or procedures. Comments or suggestions for improving this plan may be provided to **[Designated COOP Member Name]** at any time.

Functional Annexes

Continuity of Operations Plan

(COOP)

XII. STATEMENT

The Functional Annexes add specific information and direction to the **[Laboratory Name]** Continuity of Operations Plan (COOP). These annexes clearly describe the policies, processes, roles and responsibilities that the **[Laboratory Name]** will carry out before, during and after any emergency. While the **[Laboratory Name]** COOP provides overarching information relevant to the continuity plan as a whole, these annexes focus on specific responsibilities, tasks and operational actions that pertain to the elements of a viable continuity plan and program according to *Federal Continuity Directives 1 and 2*. These annexes also establish preparedness targets (e.g., training, exercises, equipment checks and maintenance) that facilitate achieving function-related goals and objectives during emergencies and disasters.

XIII. IDENTIFICATION OF ESSENTIAL FUNCTIONS

A fundamental part of the COOP is identification of the **[Laboratory Name]**'s core essential activities. These are the public health-related activities that must be continued if the laboratory's operation is disrupted by some unusual incident. Once identified, these essential activities must be prioritized according to their public health importance and time sensitivity. Time sensitivity refers to how long an activity can be delayed without negatively impacting public health. The process of identifying and prioritizing these core activities is important for the following reasons. First, if normal laboratory operations are disrupted by an incident and continuation of some or all of its usual activities becomes impossible, it is essential to know in advance which activities can be suspended and which must be continued, perhaps at an alternate laboratory. Second, in considering which core activities to continue, it is critical to know which ones have the highest priority based on time sensitivity. Third, if an alternate laboratory is required to ensure continuation, the requirements for all the activities to be transferred must be clearly defined in terms of tests, methods, volumes, and resources. This requirement-based information is fundamental to the process of pre-identifying potential alternate laboratory facilities within the **[Laboratory Name]**. Identification of the core activities and selection of these alternative laboratories are directly related in the COOP.

Categorization of laboratory activities. To identify the core activities, it is initially helpful to group all of the **[Laboratory Name]**'s analytical and support functions into overarching categories. Depending on the particular laboratory's operation, these broad categories may include the following, among others:

- Biological or Chemical Threat/Terrorism
- Infectious Disease
- Environmental Health
- Newborn Screening

- Food Safety
- Laboratory Support

Subdivision of categories. The next step in identifying core laboratory activities is to create subdivisions within the overarching categories. These subdivisions are used to group the **[Laboratory Name]**'s activities into those that are essential, and therefore must be continued, and those that are nonessential, which may be suspended. The nature of these subdivisions, or whether they are even necessary, depends upon the particular overarching category. For example, if all of the laboratory activities in the newborn screening category are considered essential, then subdividing this overarching category into smaller units to reveal essential and nonessential activities is unnecessary. The same may be true for an overarching category like environmental health. If all the routine testing of environmental samples is essential but readily outsourced to laboratories with comparable analytical capabilities and capacities in the private sector, then subdivision of this broad category may be helpful only to determine which alternate laboratory to use for particular kinds of analytical methods. In contrast, within a broad overarching category such as infectious disease, there may be both essential and nonessential activities that need to be identified. For example, while activities related to the subtyping of microbial isolates for early detection of infectious disease outbreaks may be essential to public health, some of the routine reference testing done in the public health laboratory may be nonessential. By effectively subdividing an overarching category like infectious disease, the process of differentiating between essential and nonessential activities becomes more manageable.

Prioritization of essential activities. Once the **[Laboratory Name]**'s essential activities have been identified, they must be prioritized. Depending on the nature of the incident causing a disruption of the affected laboratory's operation, it is possible that only some of the essential activities can be continued. It is therefore critical to know which have the highest priority. This prioritization should be based on time sensitivity and the public health impact if the activity is NOT continued during the disruptive event. Each essential laboratory activity should be rated as follows:

- Priority 1 – Highest priority
  If the task, service or function is mission priority critical—life, health or safety issue if not restored within one hour (recovery/restoration objective: one hour or less, normally performed on a 24/7 basis)

- Priority 2 – Medium priority
  1. If the task, service or function is mission priority urgent —will cause definite, irreparable harm if not restored in less than 24 hours (recovery/restoration objective:1 hour to 24 hours—normally performed on a 24/7 basis)

- Priority 3 – Medium priority

If the task, service or function is a business unit priority — will cause definite irreparable harm if not restored in less than one week(recovery/restoration objective: one to seven days —a function that is routinely monitored on a daily basis)

- Priority 4 –Lower priority
  If the task, service or function is important — significant, but not time critical—normal day-to-day functions that would NOT cause irreparable harm if not restored within the first 30 days (recovery/restoration objective: from 1 week plus)

- Priority 5 – Lowest priority
  If the task, service or function is not yet ranked, but could be ranked higher based upon the type of COOP event, time of year or other variables

Procedure to identify and prioritize core activities. The overarching category of infectious disease can be examined as a model to identify and prioritize the core activities of the **[Laboratory Name]**. While other approaches or variations of this approach can be used, the outcome should be the same. The **[Laboratory Name]**'s essential core activities should become clearly identified and appropriately prioritized to guide COOP action.

For the infectious disease category, various subdivisions are possible. These may include the kind of microbial agent, the kind of analytical tests or the nature of the laboratory program, i.e., enteric diseases, sexually transmitted diseases or invasive diseases. Other subdivisions may also be used. As a guide, one approach for subdividing the infectious disease category would be as follows:

- First, subdivide the overarching category into the kinds of microbial agent;
- Second, divide each kind of agent into specific pathogenic conditions;
- Third, divide each condition into specific tests or general methods;
- Fourth, evaluate the activities listed to identify essential and nonessential; and

  Fifth, prioritize each essential activity

Description of required tasks and resources. For each essential laboratory activity identified and prioritized in the COOP, the specific tasks required to conduct the activity and the resources needed to do so must be clearly described. This description should include specific testing protocols, laboratory support, numbers of samples or specimens, and accessioning/reporting requirements. Such information is critical in determining whether or not the laboratory's core public health activities can be continued within the facility that is being threatened or impacted. This information about specific requirements is also of critical value if an essential activity has to be transferred to an alternate laboratory site. This information defines what requirements have to be met for an alternate site to be considered during the process of COOP activation.

A guide to subdividing the infectious disease category using this scheme is described in Table 6.

Table 6. Identification of Mission Essential Functions Example

Identification of Essential and Nonessential Laboratory Activities				
Overarching Category	**Kind of Agent**	**Pathogenic Condition**	**Specific Test or Method**	**Essential (E) or Nonessential (NE)**
Infectious Disease	Bacterial	Tuberculosis	Drug sensitivity testing	E
			Diagnosis	E
			Gen-Probe	E
			Biochemicals	NE
			HPLC	NE
			Confirmation	E
		Enteric Diseases	Diagnosis	NE
			Outbreak Detection	E
		Sexually Transmitted Disease	HIV diagnosis	NE
			HIV molecular subtyping	E
			Syphilis confirmation	E
	Viral	Influenza	Routine diagnosis	NE
			Subtype surveillance	E
			H5N1 identification	E
		Encephalitis	West Nile	NE
			Herpes	NE
		Rabies	All activities	E
	Fungus		All activities	NE
	Parasitology		All activities	NE
	Environmental Samples	Drinking water and regulatory/ non regulatory Special project	All activities	E NE
	Weapons of Mass Destruction		LRN Assays	E

[LABORATORY NAME] MISSION ESSENTIAL FUNCTIONS

The data required to compose a comprehensive list of all the **[Laboratory Name]**'s activities may be acquired from the laboratory's Analytical Services Directory or Compendium of Services.

The **[Laboratory Name]** Mission Essential Functions should be listed with a copy found electronically both through a shared drive and through an intranet SharePoint at **[Location]**.

XIV. IDENTIFICATION OF CONTINUITY PERSONNEL

In order to continue its primary Mission Essential Functions, the **[Laboratory Name]** has determined the staff positions necessary to relocate under COOP activation. A copy of the current roster should be found electronically both through a shared drive and through an intranet SharePoint at **[Location]. [Office]** is responsible for maintaining roster currency and ensuring personnel are matched against needed positions.

Each continuity member is selected by **[Office]** based upon:

- The predetermined essential functions that must be performed, regardless of the operational status of the **[Laboratory Name]**'s primary operating facility;
- The member's knowledge and expertise in performing these essential functions; and
- The member's ability to rapidly deploy to the alternate laboratory in an emergency situation .

The **[Laboratory Name]** should maintain an Alert and Notification document as well as the monthly updated **[Laboratory Name]** Emergency Contacts list for each laboratory, and copies a copy should be found electronically both through a shared drive and through an intranet SharePoint at **[Location].**

The **[Laboratory Name]** should maintain specific Job Action Sheets, customized as needed based on the type and number of staff at the laboratory performing essential continuity functions. A copy should be found electronically both through a shared drive and through an intranet SharePoint at **[Location].** A template Job Action Sheet is described below:

Components of Job Action Sheet

- Position Title (the name of the mission essential functional role)
- Reports To (the supervisor that has direct authority over the staff)
- Mission (the purpose of the role and a brief guiding principle for staff to keep in mind)

- Immediate Tasks (tasks that must be completed first upon assuming the role or coming on duty)
- Intermediate Tasks (tasks to be completed after the immediate tasks are addressed)
- Extended Tasks (tasks to be completed later or on an ongoing basis during the work shift)
- Space for Initials, Comments and Notes Pertaining to Completion of Tasks

XV. VITAL RECORDS MANAGEMENT

"Vital records" refers to information systems and applications, electronic and hardcopy documents, references, and records, to include classified or sensitive data, needed to support primary Mission Essential Functions during a continuity event. The **[Laboratory Name]** has incorporated its vital records program into the overall COOP program, plans and procedures.

The **[Laboratory Name]**'s vital records program incorporates into the overall COOP with a clear authority to include:

- Policies
- Authorities
- Procedures
- The written designation of the **[Laboratory Name]**'s vital records manager

The **[Laboratory Name]**'s official vital records program:

- Identifies and protects those records that specify how an organization will operate in an emergency or disaster
- Identifies those records necessary to the organization's continuing operations
- Identifies those records needed to protect the legal and financial rights of the government and citizens

As soon as possible after activation of the COOP, but in all cases within 12 hours of activation, continuity personnel at the alternate laboratory for the **[Laboratory Name]** must have access to the appropriate media for accessing vital records, including:

- A local area network
- Electronic versions of vital records
- Supporting information systems and data
- Internal and external email and email archives

- Hard copies of vital records
- **[Insert any other media here]**

Identifying Vital Records

The **[Laboratory Name]** has identified the vital records to its operations, and has assigned responsibility for those records to **[insert personnel or office here]**, which includes a combination of continuity personnel, personnel in the chief information officer's department, and records management personnel.

The **[Laboratory Name]** maintains a complete inventory of vital records, along with the locations of and instructions on accessing those records, with a copy found both electronically through a shared drive and through an intranet SharePoint at**[Location].** This inventory will be maintained at a backup/off-site location located at **[Location(s) here]** by **[Office]** to ensure continuity if the primary site is damaged, destroyed or unavailable.

[Insert office] developed and maintains a vital records plan packet or collection located at **[Location/Office]**. The packet or collection includes:

- A hard copy or electronic list of the **[Laboratory Name]** key organization personnel and continuity personnel with up-to-date telephone numbers;
- A vital records inventory with the precise locations of vital records prepared by **[Office]**;
- Updates to the vital records;
- Necessary keys or access codes;
- Listing of the access requirements and sources of equipment necessary to access the records;
- The **[Laboratory Name]** alternate laboratory facility locations;
- Lists of records recovery experts and vendors provided by **[Office]** and located at **[Location]**;
- A copy of the **[Laboratory Name]** COOP; and
- **[Any other documents included in the packet]**.

For the above items, **[Office]** is responsible for providing access requirements and lists of sources of equipment necessary to access the records (this may include hardware and software, microfilm readers, Internet access and/or dedicated telephone lines). These requirements and lists are found at **[Location/Office]**.

This packet will be annually reviewed by **[Office]** with the date and names of the personnel conducting the review documented in writing to ensure that the information is current. A copy will be securely maintained at the **[Laboratory Name]** continuity

facilities and electronically both through a shared drive and through an intranet SharePoint at **[any other locations]**, so it is easily accessible to appropriate personnel when needed.

Protecting Vital Records

The protection of vital records is essential to ensuring the records are available during a continuity event, thus enabling agencies to conduct primary Mission Essential Functions. The **[Laboratory Name]** has conducted a vital records and database risk assessment to:

- Identify the risks involved if vital records are retained in their current locations and media, and the difficulty of reconstituting those records if they are destroyed
- Identify off-site storage locations and requirements
- Determine if alternative storage media is available
- Determine requirements to duplicate records and provide alternate storage locations to provide readily available vital records under all conditions

The vital records and database risk assessment was performed by **[Office]** and is located at **[Location]**.

Appropriate protections for vital records will be provided by **[Office]** and will include dispersing those records to other agency locations or storing those records offsite. Other protections include **[additional protections here, including multiple redundant media for storage]**.

When determining and selecting protection methods, the **[Laboratory Name]** takes into account the special protections needed by different kinds of storage media. Microforms, paper photographs, and computer disks, tapes and drives, all require different methods of protection. Some of these media may also require equipment to facilitate access.

Training and Maintenance

The **[Laboratory Name]** vital records program includes a training program conducted by **[Office]** for all staff, to include periodic briefings to managers about the vital records program and its relationship to their vital records and business needs. The **[Laboratory Name]** staff training focuses on identifying, inventorying, protecting, storing, accessing and updating the vital records. Training records for vital records are maintained by **[Office]** and are found at **[Location]**.

The **[Laboratory Name]** vital records program includes an annual review of the program to address new security issues, identify problem areas, update information, and incorporate any additional vital records generated by new agency programs or functions or by organizational changes to existing programs or functions. The review is conducted by **[Office]**. The review provides an opportunity to familiarize staff with all aspects of the vital records program. It is appropriate to conduct a review of the vital records program in

conjunction with the **[Laboratory Name]** continuity exercises. Documents confirming review of the vital records program are maintained by **[Office/Title]** and are found at **[Location]**. At a minimum, the **[Laboratory Name]** vital records are annually reviewed, rotated or cycled so that the latest versions will be available.

The **[Laboratory Name]** conducts annual testing, documented in the **[Laboratory Name]** testing records, of the capabilities for protecting classified and unclassified vital records, and for providing access to them from the alternate facility. Testing records for vital records are maintained by **[Office]** and are found at **[Location]**.

XVI. CONTINUITY FACILITIES

The COOP must include a pre-arranged plan to ensure continuation of the **[Laboratory Name]**'s highest priority, core public health activities. This requires identifying and engaging one of the alternative laboratories where these functions could be carried out if the **[Laboratory Name]** laboratory is unavailable following a major disruptive event. While the laboratory activities considered nonessential can be suspended in this situation, all of the essential activities must be accommodated. This accommodation involves either outsourcing these essential activities to some other qualified laboratory, or relocating the **[Laboratory Name]** staff and the essential activities to another alternate laboratory facility. Where to outsource such essential activities, depends on the kind of activity and its associated requirements (Note: for outsourcing of drinking water and regulatory environmental samples, EPA's *Water Laboratory Alliance Response Plan [WLARP]* should be consulted). If the essential activities involve routine diagnostic testing of specimens for microbial agents or analysis of environmental samples for hazardous chemicals, they may be outsourced to laboratories that already carry out these activities outside of the **[Laboratory Name]**. In comparison, if the essential activities are those done only in the **[Laboratory Name]**, such as subtyping microbial isolates to detect outbreaks or responding to emergencies as part of the nation's Laboratory Response Network (LRN), then outsourcing has to be directed to one of the LRN laboratory facilities. Regarding the relocation of both the **[Laboratory Name]** staff and essential activities to an alternate laboratory facility, this would require the availability of adequate space, in terms of dimension and safety, as well as the availability of usable equipment.

The **[Laboratory Name] [does/does not]** maintain Memorandum of Agreement (MOA)/Memorandum of Understanding (MOU) and reviews the MOA/MOU annually, as applicable.

[These instructions should be removed when your document is finalized] *If MOA/MOUs are necessary, include the following in your plan:*
An MOA/MOU is necessary because the **[Laboratory Name]** is **[list reasons, e.g. co-located with another agency]**. A copy of the MOA/MOU is found **[Location]** and maintained by **[Office]**.

To identify which alternative laboratory facility for relocating, many questions need to be considered. Examples include the following:

- What core functions need to be transferred to the alternate laboratory?
    - What specific methods are used, i.e., AOAC, EPA, Standard Methods?
- What are the test volumes that will need to be accommodated?
- Is the alternative laboratory's capacity for the function sufficient?
- What resources are needed to conduct the core functions transferred?
- Will the alternative laboratory receive specimens/samples directly?
- Will the alternative laboratory retain or return the tested specimens?
- What test methods will the alternative laboratory be using?
- How will the test results be reported; electronically/telephone/paper?
- What will be the expected turn-around times for acquiring laboratory results?
- How will the specimens/samples be transported to the laboratory?
- Does the alternative laboratory have the required certifications?
- Does the alternative laboratory have the necessary security?
- Is the alternative laboratory LRN and Select Agent approved?
- Can chain-of-custody of samples/specimens be maintained?
- Are there liability issues to address?
- Are there any risks to using a particular alternative laboratory?
- What are the advantages/disadvantages of using a particular laboratory?
- What financial arrangements will be necessary?
- Is the availability of the alternative laboratory limited by length of time?

The COOP identifies the alternative laboratories that are both geographically close and distant. While the proximity of alternative laboratories is logistically advantageous, an event causing disruption of the public health laboratory may be community-wide or even regional in scope. Consequently, pre-planning has included the identification and engagement of alternative laboratories distant from the affected laboratory's location. A list of such alternate laboratory facilities for the **[Laboratory Name]** may be found at **[Location]**.

[These instructions should be removed when your document is finalized] *For each identified* ***[Laboratory Name]*** *alternative facility, a robust annex should be developed to include all the information needed to assist the COOP notification team in making emergency contact and beginning the process of transferring essential core* ***[Laboratory Name]*** *activities. This annex should include frequently updated names, telephone*

numbers and email addresses of all the key persons to be contacted at each alternative laboratory. In addition, the annex should include detailed information regarding each alternative laboratory's analytical capability and capacity, as well as information regarding all pre-arrangements established for the process of outsourcing or relocation.

Continuity Facility Information

The **[Laboratory Name]** has designated continuity facilities as part of its COOP and has prepared ERG personnel for the possibility of unannounced relocation to these sites to continue essential functions. The **[Laboratory Name]** reevaluates its continuity facilities at least annually and whenever the continuity plans are reviewed and updated.

The **[Laboratory Name]** continuity facilities provide the following in sufficient quantities to sustain operations for up to 30 days or until normal business activities can be resumed:

- Sufficient space and equipment, including computer equipment and software. The continuity facility is able to accommodate **[number]** personnel. Facilities floor plans, equipment inventory and **[other applicable documents]** are found at **[Location]**; Capability to perform primary Mission Essential Functions within 12 hours of plan activation or an event, respectively, for up to 30 days, or until normal operations can be resumed; Reliable logistical support, services and infrastructure systems. Details on these infrastructure systems are available at **[Location]** from **[Office/Personnel Name]**;
- Consideration for health, safety, security and emotional well-being of personnel. Considerations available at the alternate site include **[considerations, such as physical security, fitness activities, access to the Employee Assistance Program and presence of security]**;
- Interoperable communications for effective interaction. Additional information on continuity communications is found at **[Location]** ;
- Capabilities to access and use vital records. Additional information on accessing vital records is found at **[Location]** in this plan;
- Systems and configurations that are used in daily activities. IT support at the continuity facility is **[access to IT support]**. Details on the systems and configurations are available at **[Location]** from **[Office/Personnel Name]**;and
- Emergency/backup power capability. Details on the power capability are available at **[Location]** from **[Office/Personnel Name]**;

  Repeat this information for each continuity facility used by your organization.

Continuity Facility Logistics

The **[Laboratory Name]** continuity facilities maintain pre-positioned or detailed site preparation and activation plans in order to achieve full operational capability within 12 hours of notification. These site preparation and activation plans are **[detail below or insert document name and location]**.

The **[Laboratory Name]** maintains a transportation support plan that describes procedures for warning and no-warning events.

- During a no-warning event, advance team and ERG personnel are transported to the continuity facility via **[means of transportation, rally points, means of notification, backup transportation methods and any other necessary information]**.
- During a with-warning event, advance team and ERG personnel are transported to the continuity facility via **[means of transportation, rally points, means of notification, backup transportation methods and any other necessary information]**.

The **[Laboratory Name]** has addressed the need for housing to support continuity personnel at or near the continuity facility sites by **[i housing options, such as on-site housing, a list of nearby hotels and MOA/MOUs with nearby lodging]**.

Continuity Facility Orientation

The **[Laboratory Name]** regularly familiarizes its ERG members with its continuity facilities. The **[Laboratory Name]** accomplishes this orientation through **[means of orientation, such as deployment exercises, orientation sessions at the site and briefings]**. This familiarization training is reflected in organization training records located at **[Location]**.

Further, the **[Laboratory Name]** annually trains and prepares its personnel for the possibility of an unannounced relocation to all continuity facilities. This training is reflected in organization training records located at**[Location]**.

The **[Laboratory Name]** Activation Plans can be found electronically both through a shared drive and through an intranet SharePoint at **[Location]**.

XVII. CONTINUITY COMMUNICATIONS

The ability of the **[Laboratory Name]** to execute its essential functions at its alternate facilities depends on the identification, availability and redundancy of critical communications and information technology (IT) systems to support connectivity among key leadership personnel, internal organization elements, other organizations, critical customers and the public during crisis and disaster conditions.

The **[Laboratory Name]** has identified available and redundant critical communication systems that are located at the alternate facility. Further, the **[Laboratory Name]** maintains fully capable continuity communications that could support organization needs during all hazards, to include pandemic and other related emergencies, and give full consideration to supporting social distancing operations including telework and other virtual offices. These systems provide the ability to communicate within and outside the **[Laboratory Name],** and are found electronically both through a shared drive and through an intranet SharePoint **[Location].**

Table 7 shows an example of tracking modes of communication systems that support an organization's essential functions. All of the **[Laboratory Name]** necessary and required communications and IT capabilities must be operational as soon as possible following continuity activation, and, in all cases, within 12 hours of continuity activation. The **[Laboratory Name]** has planned accordingly for essential functions that require uninterrupted communications and IT support, as detailed in Table 7.

Table 7. Communication Systems

Communication Systems					
Communication System	**Support to Essential Function**	**Current Provider**	**Specification**	**Alternate Provider**	**Special Notes**
Non-secure Phones					
Secure Phones					
Fax Lines					
Cellular Phones					
Satellite					
Pagers					
Email					
Internet Access					
Data Lines					
Two-way Radios					
GETS Cards					
Data and Results Messaging					

The **[Laboratory Name]** possesses communications capabilities to support the organization's senior leadership while they are in transit to alternate facilities. These capabilities are maintained by **[Office/Title]**, and documentation regarding these communications capabilities is found **[Location, or list capabilities below]**.

The **[Laboratory Name]** satisfies the requirement to provide assured and priority access to communications resources, including **[resources, such as Government Emergency Telephone Service (GETS), Wireless Priority Service and Telecommunications**

Service Priority]. The **[Laboratory Name]** point-of-contact for these services is **[Office/Title]**.

XVIII. LEADERSHIP AND STAFF

The *National Continuity Policy Implementation Plan* lists leadership and staff as two of the four key pillars that enable organizations to perform their essential functions. This section outlines the plans, procedures and policies to safeguard and protect these critical components, including orders of succession, delegations of authority and human capital.

A. ORDERS OF SUCCESSION

This section identifies current orders of succession to the organization head and key positions, such as administrators, directors and key managers, within the organization. Revisions should be distributed to agency personnel as changes occur.

Pre-identifying orders of succession is critical to ensuring effective leadership during an emergency. In the event an incumbent is incapable or unavailable to fulfill essential duties, successors have been identified to ensure there is no lapse in essential decision making authority. The **[Laboratory Name]** has identified successors for the positions of **[insert leadership positions requiring orders of succession, including the organization head and other key positions]**. The **[Laboratory Name]** Orders of Succession and Delegation of Authority can be found electronically both through a shared drive and through an intranet SharePoint at **[Location]. [Office/Title]** is responsible for ensuring orders of succession are up-to-date. When changes occur, **[Office/Title]** distributes the changes to **[insert offices/groups]** by **[insert method of distribution]**.

The **[Laboratory Name]**'s orders of succession are:

- At least three positions deep, where possible, ensuring sufficient depth to ensure the **[Laboratory Name]**'s ability to manage and direct its essential functions and operations;
- Inclusive of devolution counterparts, where applicable;
- Geographically dispersed, where feasible;
- Described by positions or titles, rather than by names of individuals holding those offices;
- Reviewed by the organization's general counsel as changes occur; and
- Included as a vital record, with copies accessible and/or available at both the primary and continuity facilities at **[Locations]**

In addition, each order of succession identifies the rules and procedures designated officials must follow when facing issues of succession to office during continuity events and references applicable laws and agency directives.

- **[List any temporal, geographical, and/or organizational limitations to the authorities in the orders of succession here]**

In the event of a change in leadership status, the **[Laboratory Name]** must notify the successors, as well as internal and external stakeholders. In the event the **[Laboratory Name]** leadership becomes unreachable or incapable of performing their authorized legal duties, roles and responsibilities, **[Office/Title]** will initiate a notification of the next successor in line. **[Insert additional methods and procedures of notification]**. **[Office/Title]** will use the following procedures to notify internal and external stakeholders of the change in leadership: **[methods and procedures of notification]**.

The **[Laboratory Name]** training records document the conduct of annual successor training for all personnel who assume the authority and responsibility of the organization's leadership to include briefing successors to the position of **[Organization Head]** on their responsibilities and duties as a successor. Methods of successor training include **[training methods here]**. This training is reflected in the **[Laboratory Name]** training records located at **[Location]**.

B. DELEGATIONS OF AUTHORITY

This section identifies, by position, the legal authority for individuals to make key policy decisions during a continuity situation. The **[Laboratory Name]** delegation of authority outlines explicitly in a statement the authority of an official so designated to exercise agency direction.

Generally, the **[Laboratory Name]** predetermined delegations of authority will take effect when normal channels of direction are disrupted and terminate when these channels have resumed. Predetermined delegations of authority may be particularly important in a devolution scenario.

The **[Laboratory Name]** Orders of Succession and Delegation of Authority can be found electronically both through a shared drive and through an intranet SharePoint at **[Location].**

The **[Laboratory Name]** has identified the following delegations of authority:

- Orderly succession of officials to the position of **[Organization Head]** in the case of the **[Organization Head]**'s absence, a vacancy at that office, or the inability of the **[Organization Head]** to act during an emergency or national security emergency.
- **[Insert additional delegations of authority]**

The **[Laboratory Name]**'s delegations of authorities are also found at the continuity facility and at **[Location]**, and:
Are included as vital records;

- Are written in accordance with applicable laws ensuring that the organization's Mission Essential Functions are performed;

- Outline explicitly in a statement the authority of an official to redelegate functions and activities, as appropriate;

- Delineate the limits of and any exceptions to the authority and accountability for officials;

- Define the circumstances, to include a devolution situation if applicable, under which delegations of authorities would take effect and would be terminated;

The **[Laboratory Name]** has informed those officials who might be expected to assume authorities during a continuity situation. Documentation that this has occurred is found **[Location]** and at the continuity facility. Further, the **[Laboratory Name]** has trained those officials who might be expected to assume authorities during a continuity situation at least annually for all pre-delegated authorities for making policy determinations and all levels using **[training methods]**. This training is reflected in agency training records located at **[Location]**.

C. HUMAN CAPITAL

This section focuses on the organization continuity personnel and all other special categories of employees who have not been designated as continuity personnel. This section concentrates on three areas: Continuity Personnel, All Staff and Human Capital Considerations.

Continuity Personnel

People are critical to the operations of any organization. Choosing the right people for an organization's staff is vitally important, and this is especially true in a crisis situation. Leaders are needed to set priorities and keep focus. During a continuity event, emergency employees and other special categories of employees will be activated by the **[Laboratory Name]** to perform assigned response duties. One of these categories is continuity personnel, commonly referred to as Emergency Relocation Group (ERG) members.

In respect to these continuity personnel, the **[Laboratory Name]** has:

- Identified and designated those positions and personnel they judge to be critical to organization operations in any given emergency situation as continuity personnel. A roster of these positions is maintained by **[Office]** and is found both electronically through a shared drive and through an intranet SharePoint **[Location]**;

- Identified and documented its continuity personnel. These personnel possess the skill sets necessary to perform essential functions and supporting tasks. A roster of these personnel is maintained by **[Office]** and is found electronically both through a shared drive and through an intranet SharePoint at **[Location]**;
- Officially informed all continuity personnel of their roles or designations by providing documentation in the form of **[type of documentation]** to ensure that continuity personnel know and accept their roles and responsibilities. Copies of this documentation are maintained by **[Office]** and are found both electronically through a shared drive and through an intranet SharePoint at **[Location]**;
- Ensured continuity personnel participate in their organization's continuity TT&E program, as reflected in training records. Training records are maintained by **[Office]** and are found both electronically through a shared drive and through an intranet SharePoint at**[Location]**; and
- Provided guidance to continuity personnel on individual preparedness measures they should take to ensure response to a continuity event using **[insert methods of providing guidance here]**. Copies of this guidance are maintained by **[Office]** and are found electronically both through a shared drive and through an intranet SharePoint at **[Location]**.

All Staff

It is important that the **[Laboratory Name]** keep all staff, especially individuals not identified as continuity personnel, informed and accounted for during a continuity event. The **[Laboratory Name]** has established procedures for contacting and accounting for employees in the event of an emergency, including operating status.

- The **[Laboratory Name]** employees are expected to remain in contact with **[Office, such as supervisors]** during any closure or relocation situation. **[Insert procedures to communicate how, and the extent to which, employees are expected to remain in contact with the agency during any closure or relocation situation]**

- The **[Laboratory Name]** ensures staff is aware of and familiar with human capital guidance in order to continue essential functions during an emergency. The **[Laboratory Name]** uses the following methods to increase awareness: **[methods, such as utilizing an intranet website or employee orientation briefing]**.

Accounting for all personnel during a continuity event is of utmost importance. In order to account for all staff, the **[Laboratory Name]** will **[insert accountability process here, such as call trees, an automated system, a 1-800 number, etc.]**. Accountability information is reported to **[Office]** at **[number]** hour increments. **[Office]** has the responsibility of attempting contact with those individuals who are unaccounted for.

An event that requires the activation of the **[Laboratory Name]** COOP may personally affect the **[Laboratory Name]** staff. Therefore, the **[insert office]** has the responsibility to create provisions and procedures to assist all staff, especially those who are disaster victims, with special human capital concerns following a catastrophic disaster. These provisions and procedures are found at **[Location]** and are available electronically both through a shared drive and through an intranet SharePoint

Human Capital Considerations

The **[Laboratory Name]** continuity program, plans and procedures incorporate existing agency-specific guidance and direction for human capital management, including guidance on pay, leave, work scheduling, benefits, telework, hiring, authorities and flexibilities. The **[insert office]** has the responsibility for the **[Laboratory Name]** human capital issues. A copy of these policies and guidance is found both electronically through a shared drive and through an intranet SharePoint **[Location]**.

The **[Laboratory Name]** Continuity Coordinator and Continuity Manager work closely with the **[insert appropriate human capital office/title here]** to resolve human capital issues related to a continuity event. **[Office]** serves as the **[Laboratory Name]** human capital liaison to work with the Continuity Coordinator or Continuity Manager when developing or updating the organization's emergency plans.

The **[Laboratory Name]** has developed organization-specific guidance and direction for continuity personnel on human capital issues. This guidance is integrated with human capital procedures for its facility, geographic region, and the Office of Personnel Management (OPM) or similar organization. This guidance is maintained by **[Office]** and is found electronically both through a shared drive and through an intranet SharePoint located on **[Location]**. The **[Laboratory Name]** has issued continuity guidance for human capital on the following issues:

- Additional Staffing: **[guidance or location of guidance]**
- Work Schedules and Leave: **[guidance or location of guidance]**
- Employee Assistance Program: **[guidance or location of guidance]**
- Special Needs Employees: **[guidance or location of guidance]**
- Telework: **[guidance or location of guidance]**
- Benefits: **[guidance or location of guidance]**
- Premium and Annual Pay Limitations: **[guidance or location of guidance]**
- **[Additional topics here]**

Further, **[Office/Title]** communicates human capital guidance for emergencies (pay, leave, staffing, work scheduling, benefits, telework, hiring authorities and other human resources flexibilities) to managers in an effort to help continue essential functions during

an emergency. The process for communicating this information is as follows: **[communication methods and processes]**.

XIX. TEST, TRAINING AND EXERCISE PROGRAM

Testing, Training and Exercising (TT&E) of the public health laboratory COOP is an essential part of its development. It is critically important to familiarize staff with the roles and responsibilities they have been assigned in activating and implementing the COOP. This will enable them to act quickly and efficiently during any unexpected disruption of normal laboratory operations. To ensure that laboratory personnel are familiar with and prepared for implementation of the laboratory COOP, as an integral part of the agency COOP, an appropriate laboratory education and training component should be incorporated into the existing agency-wide COOP training program. Employees of the laboratory, as well as those in other parts of the agency, should receive training about agency COOP implementation as part of their new employee orientation, and then, at a minimum, annually, or as needed if significant changes are made in policies or procedures.

Exercise plans for the laboratory COOP should include drills that focus on specific aspects of the plan, such as assessment, activation and notification. Real events serve as real exercises. When real events or exercises are over, complete After Action Reports should be developed and analyzed to identify procedural gaps and problems that need to be addressed to improve the COOP. Because the laboratory and agency COOP should be integrated, exercising of both should also be integrated.

The **[Laboratory Name]** Testing, Training and Exercise Capabilities are listed in Table 8.

Table 8. Testing, Training and Exercise Capabilities

Testing, Training and Exercise Capabilities	
Continuity TT&E Requirements	**Monthly, Quarterly, Annually, As Required**
Test and validate equipment to ensure internal and external interoperability and viability of communications systems	
Test alert, notification and activation procedures for all continuity personnel	
Test primary and backup infrastructure systems and services at continuity facilities	
Test capabilities to perform Mission Essential Functions (MEFs)	
Test plans for recovering vital records, critical information systems, services and data	
Test and exercise of required physical security capabilities at continuity facilities	
Test internal and external interdependencies with respect to performance of MEFs	
Train continuity personnel on roles and responsibilities	
Conduct continuity awareness briefings or orientation for the entire workforce	
Train organization's leadership MEFs	
Train personnel on all reconstitution plans and procedures	
Allow opportunity for continuity personnel to demonstrate familiarity with continuity plans and procedures and demonstrate organization's capability to continue essential functions	
Conduct exercise that incorporates the deliberate and preplanned movement of continuity personnel to continuity facilities	
Conduct assessment of organization's continuity TT&E programs and continuity plans and programs	
Report findings of all annual assessments as directed to FEMA	
Conduct successor training for all organization personnel who assume the authority and responsibility of the organization's leadership if that leadership is	

incapacitated or becomes otherwise unavailable during a continuity situation	
Train on the identification, protection, and ready availability of electronic and hardcopy documents, references, records, information systems and data management software and equipment needed to support essential functions during a continuity situation for all staff involved in the vital records program	
Test capabilities for protecting classified and unclassified vital records and for providing access to them from the continuity facility	
Train on an organization's devolution option for continuity, addressing how the organization will identify and conduct its essential functions during an increased threat situation or in the aftermath of a catastrophic emergency	
Conduct personnel briefings on continuity plans that involve using or relocating to continuity facilities, existing facilities or virtual offices	
Allow opportunity to demonstrate intra- and interagency continuity communications capability	
Allow opportunity to demonstrate that backup data and records required for supporting essential functions at continuity facilities are sufficient, complete and current	
Allow opportunity for continuity personnel to demonstrate their familiarity with the reconstitution procedures to transition from a continuity environment to normal activities	
Allow opportunity for continuity personnel to demonstrate their familiarity with agency devolution procedures	

XX. HAZARD-SPECIFIC APPENDICES

The contents of hazard-specific appendices focus on the special planning needs generated by a particular hazard. These appendices contain unique response details that apply to a single hazard. A key hazard-specific appendix is continuity operations during a pandemic influenza. Organizations should determine other specific hazards to address, if needed, based upon the results of the organization risk analysis.

Equipment Specifications

The COOP should prepare for the possibility that the public health laboratory facility may be unavailable for any work-related use during the incident. If that occurs, there needs to be an assessment of the space requirements to potentially house necessary equipment for continuity operations at an alternate location. An example of an equipment specification inventory is shown in Table 9.

Table 9. Equipment Specification Inventory

Equipment Specification Inventory			
Equipment Description	**Quantity**	**Power Supply Required**	**Footprint**
Supplies for Accessioning (Sample Receiving)			
Supplies for Sample Processing (Testing)			
Supplies for Sample Analysis			
Supplies for Results Reporting			

Pre-Positioned Supplies and Workstations

The COOP should prepare for the possibility that the public health laboratory facility may be unavailable for any work-related use during an incident. If that occurs, there needs to be a predetermined, off-site location from which the response teams can assess the situation, make notifications and conduct other business related to the laboratory's displacement.

Such a predetermined workstation should have on hand all the necessary basic office supplies and equipment to conduct the work that may be required. In addition, since it may be necessary to send laboratory samples and specimens out to alternative laboratories from this location, the workstation should include an inventory of all the materials needed for their proper packaging and shipping. An example of supplies is

shown in Table 10. Please note that shipment of supplies may involve coolers, freeze packs, sample manifest documents, pre-printed barcode sets, gloves, etc.

Table 10. Workstation Inventory

Workstation Inventory			
Description	**Quantity**	**Type**	**Time Needed**
SUPPLIES FOR LABORATORY RECOVERY TEAM MEMBERS			
Computer			
Printer			
8-1/2" x 11" paper			
Fax machine			
Photocopier			
SUPPLIES FOR CLINICAL ACCESSIONING (SAMPLE RECEIVING)			
Computer			
Internet			
Barcode reader			
UN 3373 boxes			

In developing the COOP, the number, type and location of the workstations needed should be determined. An inventory of equipment and supplies for each location and workstation should be readily accessible at any time. An example of an inventory sheet is shown in Table 10 (Workstation Inventory). Once the inventory is complete, the indicated supplies and equipment should be pre-positioned, when feasible. If this cannot be done, a plan should be in place to rapidly deploy whatever items are necessary. The Standard Office Equipment list should be found both electronically through a shared drive and through an intranet SharePoint **[Location].**

If the public health laboratory has another site location within its jurisdiction, which can be used as an alternative laboratory, it will be necessary to pre-deploy all the required equipment, supplies and reagents to that location as well.

Preparation and Storage of "Go-Kits"

In the event of an emergency that requires the implementation of the COOP, access to the public health laboratory building may be impossible. Important data located on the laboratory's servers may not be available for hours or days. Therefore, it is essential that any critical data needed for activation of the COOP be stored at an off-site location for ready access. To store these data, a "go-kit" should be prepared and kept in an easily accessible location. This kit should contain all of the necessary documents to activate and implement the COOP. In addition to a hard copy of the COOP, it should contain an electronic copy on a jump drive. In addition to the plan, the kit should contain the necessary contact information for all of the staff, clients, couriers, alternate laboratories, vendors and emergency management personnel, among others. It should also have key contact information for APHL and CDC, as well as any relevant standard operating procedures needed to carry out COOP activities.

Incident Assessment

As soon as possible following an event that either does or has the potential to significantly disrupt all or part of the public health laboratory's normal operation, the situation must be assessed and a decision made whether or not to activate the COOP. Timeliness is critical in this process to prevent any compromise of the laboratory's essential activities. The timeliness of this assessment and decision process is particularly critical if the disruption is, or will be, caused by a local threat or disaster that requires the public health laboratory to provide a robust emergency response.

To assess the incident's impact on laboratory operations, a specific "incident assessment team" should be preidentified in the COOP. This team should include senior personnel that represent the laboratory operation, personnel safety, and facilities management. It should be made up of persons with the knowledge to make an appropriate assessment and the authority to make necessary decisions. Because the laboratory itself may not be available as a place for this team to meet, a pre-determined, alternate meeting site should be identified as part of the planning. The charge of this team should be to assess the nature of the disruption and estimate the expected time that normal laboratory operations will be disrupted. This assessment should include input from members of the laboratory's managers regarding the areas of the operation for which they are responsible.

To facilitate assessment of the laboratory's operational capability following an incident, it is helpful to have a preformed list of items to consider. Such a list can be used to guide and document the assessment process. Because the assessment team may have to conduct their work at an alternate site, it is essential that the list of items be readily available to them at that alternate location. As a guide, a partial list of assessment questions to consider is shown in Table 11.

Table 11. Laboratory Assessment Report

Laboratory Assessment Report Date _____ Time _____ Nature of Incident _____		
Assessment	**Response**	**Comment**
What laboratory functions have been affected?		
Have the local fire and/or police departments been contacted (if appropriate)?	Yes No Unknown	
Has the agency declared an emergency?	Yes No Unknown	
Has the alternate location been activated?	Yes No Unknown	
Has the emergency management department been notified for the activation of the emergency operation center?	Yes No Unknown	
Has the agency real estate management been notified?	Yes No Unknown	
Other		

Arrangements for Assistance

An effective COOP requires that clearly defined, well-documented arrangements be made with each alternative laboratory agreeing to assist if the public health laboratory becomes threatened or disrupted. Such arrangements may include different types of formal agreements. The agreement used will depend on the nature and duration of the assistance requested and the legal and policy issues that must be considered by the institutions involved. While such formal agreements are difficult to construct because they have to accommodate the statutory and policy requirements of differing jurisdictions and institutions, they are nevertheless essential to ensure the timeliness of assistance in the face of an unexpected emergency. The following are examples of assistance agreements:

- **Memoranda of Understanding (MOU)**

This may be used for short term assistance for defined services. No funds may be involved in this type of assistance;

- **Memoranda of Agreement (MOA)**

This may be used for long term assistance for defined services and set funding.

- **Contracts**

These often involve routine assistance for long term timeframes. Funding is established;

- **Purchase Orders (PO)**

These documents constitute a legal offer to buy products or services with agreed-upon prices. POs are issued by a buyer to a seller and constitute a once-off contract once accepted by the seller; and

- **Emergency Management Assistance Compact (EMAC)**

This is an interstate mutual aid agreement for use during emergencies and disasters that provides a mechanism for sharing personnel, resources, equipment and assets.

XXI. GLOSSARY

The following are definitions of key terms used in the COOP and Functional Annexes.

Activation – Once a continuity of operations plan has been implemented, whether in whole or in part, it is considered "activated."
Agencies – Federal departments and agencies means those executive departments enumerated in 5 U.S.C. 101, together with the Department of Homeland Security (DHS), independent establishments as defined by 5 U.S.C. 104(1), government corporations as defined by 5 U.S.C. 103(1), and the United States Postal Service. The departments, agencies, and independent organizations are referred to in this document as "organizations."
Agency head – The highest-ranking official of the primary occupant agency, or a successor or designee who has been selected by that official.
All-hazards – The spectrum of all types of hazards, including accidents, technological events, natural disasters, terrorist attacks, warfare, and chemical, biological (including pandemic influenza), radiological, nuclear or explosive events.
Alternate facilities – Locations, other than the primary facility, used to carry out essential functions, particularly in a continuity event. "Alternate facilities" refers to not only other locations, but also nontraditional options such as working at home ("teleworking"), telecommuting and mobile-office concepts.
Business impact analysis (BIA) – A method of identifying the effects of failing to perform a function or requirement.
Business process analysis (BPA) – A method of examining, identifying and mapping the functional processes, workflows, activities, personnel expertise, systems, data and facilities inherent in the execution of a function or requirement.
Catastrophic emergency – Any incident, regardless of location, that results in extraordinary levels of mass casualties, damage or disruption severely affecting the U.S. population, infrastructure, environment, economy or government functions.
Category – This term refers to the categories of agencies listed in Annex A to NSPD-51/HSPD-20.
Communications – Voice, video and data capabilities that enable the leadership and staff to conduct the mission essential functions of the organization. Robust communications help ensure that the leadership receives coordinated, integrated policy and operational advice and recommendations, and will provide the ability for governments and the private sector to communicate internally and with other entities (including with other federal agencies, state, local, territorial and tribal governments, and the private sector) as necessary to perform their Mission Essential Functions (MEFs).
Continuity – An uninterrupted ability to provide services and support, while maintaining organizational viability, before, during and after an event.
Continuity capability – The ability of an organization to continue to perform its essential functions, using continuity of operations, continuity of government programs, and continuity requirements that have been integrated into the organization's daily operations with the primary goal of ensuring the preservation of our form of government under the Constitution and the continuing performance of National Essential Functions

(NEFs) under all conditions. Building upon a foundation of continuity planning and continuity program management, the pillars of a continuity capability are leadership, staff, communications and facilities.

Continuity coordinators – Representatives of executive-branch departments and agencies at the assistant secretary (or equivalent) level.

Continuity facilities – Locations, other than the primary facility, used to carry out essential functions, particularly in a continuity situation. "Continuity facilities" refers to not only other locations, but also nontraditional options such as working at home ("teleworking"), telecommuting and mobile-office concepts.

Continuity of Government – A coordinated effort within the federal government's executive branch to ensure that NEFs continue to be performed during a catastrophic emergency.

Continuity of Government Readiness Condition (COGCON) – A system for establishing, measuring, and reporting the readiness of executive branch continuity programs, which is independent of other federal government readiness systems.

Continuity of Operations– An effort within individual agencies to ensure they can continue to perform their Mission Essential Functions (MEFs) and Primary Mission Essential Functions (PMEFs) during a wide range of emergencies, including localized acts of nature, accidents, and technological or attack-related emergencies.

Continuity event – Any event that causes an agency to relocate its operations to an alternate or other continuity site to assure continuance of its essential functions.

Continuity personnel - Those personnel, both senior and core, who provide the leadership advice, recommendations and functional support necessary to continue essential operations

Continuity program management cycle – An ongoing, cyclical model of planning, training, evaluating and implementing corrective actions for continuity capabilities.

Corrective action program (CAP) – An organized method to document and track improvement actions for a program. The CAP System is a web-based tool that enables federal, state and local emergency response and homeland security officials to develop, prioritize, track and analyze corrective actions following exercises or real-world incidents. Users may enter data from a finalized After Action Report/Improvement Plan, track the progress of corrective action implementation, and analyze and report on trends in improvement plans.

Delegation of authority – Identification, by position, of the authorities for making policy determinations and decisions at headquarters, field levels and all other organizational locations. Generally, pre-determined delegations of authority will take effect when normal channels of direction have been disrupted and will lapse when these channels have been reestablished.

Devolution – The capability to transfer statutory authority and responsibility for essential functions from an agency's primary operating staff and facilities to other agency employees and facilities, and to sustain that operational capability for an extended period.

Drive-away kit – A kit prepared by, and for, an individual who expects to deploy to an alternate location during an emergency. The kit contains items needed to minimally satisfy an individual's personal and professional needs during deployment.

Emergency operating records – Records that support the execution of an agency's essential functions.

Emergency relocation group (ERG) – Predesignated staff who move to an alternate facility to continue essential functions in the event that their normal work locations are threatened or have been incapacitated by an incident.
ERG member – A person who has been assigned responsibility to report to an alternate facility, as required to perform agency essential functions or other tasks related to continuity operations.
Essential functions – The critical activities performed by organizations, especially after a disruption of normal activities. There are three categories of essential functions: National Essential Functions (NEFs), Primary Mission Essential Functions (PMEFs), and Mission Essential Functions (MEFs).
Executive departments and agencies – Executive departments enumerated in 5 U.S.C. 101, along with DHS, independent establishments as defined by 5 U.S.C. 104(1), Government corporations as defined by 5 U.S.C. 103(1) and the U.S. Postal Service.
Facilities – Locations where an organization's leadership and staff operate. Leadership and staff may be co-located in one facility or dispersed across many locations and connected by communications systems. Facilities must be able to provide staff with survivable protection, and must enable continued and endurable operations.
Federal Continuity Directive (FCD) – A document developed and promulgated by DHS, in coordination with the Continuity Advisory Group and in consultation with the Continuity Policy Coordination Committee, which directs executive branch departments and agencies to carry out identified continuity planning requirements and assessment criteria.
FEMA Operations Center (FOC) – A continuously operating entity of DHS, which is responsible for monitoring emergency operations and promulgating notification of changes to COGCON status.
Government Functions – Government functions include both the collective functions of the heads of agencies as defined by statute, regulations, presidential direction or other legal authority, and the functions of the legislative and judicial branches.
Homeland Security Advisory System – A series of tools used by DHS that provide the public with guidance on the status of the nation's homeland security. The system combines threat information with vulnerability assessments, and communicates this information to public safety officials and the public. The system includes Homeland Security Threat Advisories, Homeland Security Information Bulletins and the Threat Level System *(Note: The National Terrorism Advisory System (NTAS) replaces the color codes of the Homeland Security Advisory System (HSAS). The new alert system is currently in a 90-day implementation period that began January 27, 2011; until the end of the implementation period, the existing HSAS will remain in effect).*
Homeland Security Exercise and Evaluation Program (HSEEP) – A capabilities-based and performance-based program that furnishes standardized policies, doctrines and terminologies for the design, development, performance and evaluation of homeland security exercises. The National Exercise Program (NEP) uses the HSEEP as a common methodology for exercises. The HSEEP also provides tools and resources to facilitate the management of self-sustaining homeland security exercise programs.
Interoperability – "Interoperability" has two meanings: (1) The ability of systems, personnel or agencies to provide services to and accept services from other systems, personnel or agencies, and to use the services so exchanged so that these organizations

can operate together effectively; (2) A condition that is realized among electronic communications operating systems or grids and/or among individual electronic communications devices, when those systems and/or devices allow the direct, seamless, and satisfactory exchange of information and services between the users of those systems and devices.

Interoperable communications – Communications that provide the capability to perform essential functions, in conjunction with other agencies, under all conditions.

Leadership – The senior decision-makers who have been elected (e.g., the President, state governors) or designated (e.g., cabinet secretaries, chief executive officers) to head a branch of government or other organization.

Memorandum of Agreement/Memorandum of Understanding (MOA/MOU) – Written agreements between departments/agencies that require specific goods or services to be furnished or tasks to be accomplished by one agency in support of the other.

Mission Essential Functions (MEFs) – The limited set of agency-level Government functions that must be continued throughout or resumed rapidly after a disruption of normal activities.

Multiyear strategy and program management plan – A process that ensures the maintenance and continued viability of continuity plans.

National Communications System (NCS) – A system governed by Executive Order 12472 and comprised of the telecommunications assets of 24 Departments and Agencies. DHS serves as the Executive Agent for the NCS, which is responsible for assisting the President, the National Security Council, the Director of OSTP, and the Director of OMB in (1) the exercise of telecommunications functions and their associated responsibilities and (2) the coordination of planning for providing the federal government, under all circumstances (including crises and emergencies, attacks, and recovery and reconstitution from those events), with the requisite national security and emergency preparedness communications resources.

National Continuity Policy – It is the policy of the United States to maintain a comprehensive and effective continuity capability composed of Continuity of Operations and Continuity of Government programs in order to ensure the preservation of our form of government under the Constitution and the continuing performance of National Essential Functions under all conditions.

National Essential Functions (NEFs) – The eight functions the President and the Nation's leadership will focus on to lead and sustain the Nation during a catastrophic emergency; NEFs, therefore, must be supported by COOP and COG capabilities.

National Exercise Program – The NEP is the Nation's overarching exercise program formulated by the National Security Council / Homeland Security Council and executed by the Federal Interagency. All interagency partners have adopted HSEEP as the methodology for all exercises that will be conducted as part of the National Exercise Program.

Normal operations – Generally and collectively, "normal operations" refers to the broad functions undertaken by an organization when it is assigned responsibility for a given functional area; these functions include day-to-day tasks, planning and execution of tasks.

Orders of succession – Provisions for the assumption by individuals of senior agency office leadership positions during an emergency, in the event that any of those officials are unavailable to execute their legal duties.

Plan – A proposed or intended method of getting from one set of circumstances to another. A plan is often used to move from the present situation towards the achievement of one or more objectives or goals.
Primary Mission Essential Functions (PMEFs) – Those department and agency Mission Essential Functions, validated by the NCC, which must be performed in order to support the performance of NEFs before, during and in the aftermath of an emergency. PMEFs need to be continuous or resumed within 12 hours after an event and maintained for up to 30 days, or until normal operations can be resumed.
Primary operating facility – The site of an organization's normal, day-to-day operations; the location where the employee usually goes to work.
Program – A group of related initiatives managed in a coordinated way so as to obtain a level of control and benefits that would not be possible from the individual management of the initiatives. Programs may include elements of related work outside the scope of the discrete initiatives in the program.
Readiness Reporting System (RRS) – Department of Homeland Security program to collect and manage continuity capability data and assessments of executive branch departments and agencies, and monitor their status to perform their Priority Mission Essential Functions (PMEFs) in support of the National Essential Functions (NEFs). The RRS will be used to conduct assessments and track capabilities at all times, under all conditions, to include natural disasters, manmade incidents, terrorism and war.
Reconstitution – The process by which surviving and/or replacement agency personnel resume normal agency operations from the original or replacement primary operating facility.
Recovery – The implementation of prioritized actions required to return an organization's processes and support functions to operational stability following an interruption or disaster.
Rights and interests records – Records that are necessary to protect the legal and financial rights of both the Federal Government and the persons who are affected by its actions.
Risk analysis – The process by which risks are identified and evaluated.
Risk assessment – The identification and assessment of hazards.
Risk management – The process of identifying, controlling and minimizing the impact of events whose consequences are or may be unknown or events that are themselves fraught with uncertainty.
Telework – The ability to work at a location other than the official duty station to perform work or emergency duties. This may include, but is not limited to, using portable computers, personal computers, high-speed telecommunications links and mobile communications devices.
Testing, training, and exercise (TT&E) – Measures to ensure that an agency's continuity plan is capable of supporting the continued execution of the agency's essential functions throughout the duration of a continuity situation.
Virtual offices – An environment where employees are not collocated and rely exclusively on information technologies to interact and conduct their work across distance from multiple geographic locations.
Vital records – Electronic and hard copy documents, references and records that are needed to support essential functions during a continuity situation. The two basic

categories of vital records are (1) emergency operating records and (2) rights and interests records.

Vulnerability analysis – A process that defines, identifies and classifies the susceptibility of a facility, computer, network or communications infrastructure to damage or destruction. In addition, a vulnerability analysis can forecast the effectiveness of proposed countermeasures and can evaluate their actual effectiveness after they are implemented.

XXII. AUTHORITIES AND REFERENCES

The following are the authorities and references for the COOP and Functional Annexes.

AUTHORITIES:

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

2) Executive Order 12148, *Federal Emergency Management*, dated July 20, 1979, as amended.

3) Executive Order 12472, *Assignment of National Security and Emergency Preparedness Telecommunications Functions*, dated April 3, 1984, as amended.

4) Executive Order 12656, *Assignment of Emergency Preparedness Respons*ibilities, dated November 18, 1988, as amended.

5) The Homeland Security Act of 2002 (Public Law 107-296), dated November 25, 2002.

6) Executive Order 13286, *Establishing the Office of Homeland Security*, dated February 28, 2003.

7) Homeland Security Presidential Directive 5, *Management of Domestic Incidents*, dated February 28, 2003.

8) Homeland Security Presidential Directive 7, *Critical Infrastructure Identification*, dated December 17, 2003.

9) Homeland Security Presidential Directive 8, *National Preparedness*, dated December 17, 2003.

10) National Security Presidential Directive 51/Homeland Security Presidential Directive 20, *National Continuity Policy*, dated May 9, 2007.

11) National Communications System Directive 3-10, *Minimum Requirements for Continuity Communications Capabilities*, dated July 25, 2007.

12) National Continuity Policy Implementation Plan, dated August 2007.

13) Federal Continuity Directive 1 (FCD 1), *Federal Executive Branch National Continuity Program and Requirements*, dated February 2008.

14) Federal Continuity Directive 2 (FCD 2), *Federal Executive Branch Mission Essential Function and Primary Mission Essential Function Identification and Submission Process*, dated February 2008.

REFERENCES:

1) Presidential Decision Directive 62, *Protection Against Unconventional Threats to the Homeland and Americans Overseas*, dated May 22, 1998.

2) 36 Code of Federal Regulations, Part 1236, *Management of Vital Records*, revised as of July 1, 2000.

3) 41 Code of Federal Regulations 101.20.103-4, *Occupant Emergency Program*, revised as of July 1, 2000.

4) Homeland Security Presidential Directive 1, *Organization and Operation of the Homeland Security Council*, dated October 29, 2001.

5) Homeland Security Presidential Directive 3, *Homeland Security Advisory System*, dated March 11, 2002.

6) NIST Special Publication 800-34, *Contingency Planning Guide for Information Technology Systems*, dated June 2002.

7) Homeland Security Presidential Directive 5, *Management of Domestic Incidents*, dated February 28, 2003.

8) National Incident Management System (NIMS), dated March 1, 2004.

9) Homeland Security Presidential Directive 12, *Policy for a Common Identification Standard for Federal Employees and Contractors*, dated August 27, 2004.

10) National Strategy for Pandemic Influenza, dated November 1, 2005.

11) National Infrastructure Protection Plan, dated 2006.

12) National Strategy for Pandemic Influenza Implementation Plan, dated May 2006.

13) NIST Special Publication 800-53, *Recommended Security Controls for Federal Information Systems*, dated December 2006.

14) National Exercise Program Implementation Plan, April 2007.

15) NFPA 1600 Standard on Disaster/Emergency Management and Business Continuity Programs, 2007 Edition.

16) FEMA Continuity of Operations Plan Template Instructions.

17) FEMA Continuity of Operations Plan Template.

18) Comprehensive Preparedness Guide 101, *Producing Emergency Plans*, – Interim, FEMA, dated August 2008.

19) EPA Water Laboratory Alliance- Response Plan, November 2010

XXIII. ACRONYMS

This list should include acronyms used throughout the Continuity Plan and within the continuity of operations community. The following are acronyms used in this FCD.

AAR	After Action Report
BIA	Business Impact Analysis
BPA	Business Process Analysis
CAP	Corrective Action Program
COGCON	Continuity of Government Conditions
DHS	Department of Homeland Security
ERG	Emergency Relocation Group
FCD	Federal Continuity Directive
FEMA	Federal Emergency Management Agency
FOC	FEMA Operations Center
GAO	Government Accountability Office
GETS	Government Emergency Telephone Service
HSEEP	Homeland Security Exercise and Evaluation Program
HSPD	Homeland Security Presidential Directive
IT	Information Technology
MEF	Mission Essential Function
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
NCC	National Continuity Coordinator
NEF	National Essential Function
NSPD	National Security Presidential Directive
OPM	Office of Personnel Management
PMEF	Primary Mission Essential Function
RRS	Readiness Reporting System
TT&E	Test, Training and Exercise