BUSINESS CONTINUITY PLANNING ("BCP") Revised TEMPLATES (October 2016)

Instruction Sheet

1. The following are templates designed to assist you in the structured development of your business continuity plan. These templates are a standardized framework through which all business continuity plans at Johns Hopkins are developed and written.

2. The BCP is divided into eleven parts:

   a. Parts 1-4 are introductory and cover such things as your scope, purpose, and emergency call tree.
   b. Parts 5-9 are the five disaster scenarios your plan will contend with. They are titled "Scenario 1" through "Scenario 5". For example Scenario 2 is "Network Connectivity Lost", while Scenario 3 is "Evacuation / Unusable Space".
   c. Part 10 describes testing and maintenance procedures for your BCP.
   d. Part 11 is the appendix where you can add any lists, tables, documents, or 3rd party papers you don't want cluttering your BCP. There is no template for Part 11. Include an appendix only if you find it necessary.

3. The templates are designed in a "question and answer" format. This should facilitate more rapid and standardized process.

4. When completing the templates follow these general guidelines:

   a. For Parts 1-4, and Part 10, instructions on what to write are shown in *italics*. Follow these instructions, and then delete the italics. Some parts and sections have standardized text blocks into which you need only insert your department name or some small piece of information. Such sections should be obvious, but if you have any questions, do not hesitate to call your BCP Point Of Contact (POC).

   b. For Parts 5-9 (which are the 5 scenarios) do not delete the italics instructions as they serve to explain what information is required in each section. This way, anyone picking up the BCP knows exactly what information is contained in each section by reading the italics.

   c. As you work through the template, collect all your questions, and then call your POC once you have identified all questions associated with a particular template.

Getting Started & Basic Steps to Plan Development

Getting Started: Start this process by creating a BCP Workgroup or Team.

1. Identify an internal "workgroup" of plan developers and writers.

2. Choose representatives who completely understand department operations. Examples of team members are assistant administrators, disaster coordinators, managers, facilities managers, and IT specialists.

3. Identify a "plan sponsor" or delegate this responsibility to your departmental disaster coordinator who will oversee the project from start to completion and can serve as the department's lead person for BCP and disaster plan development.

Steps to advanced planning: The following are some very general guidelines on how to think through the development of your BCP. Tackle the BCP one scenario at a time.

1. Bring together your workgroup, develop the plan one scenario at a time. Start by capturing the department's internal work process. Examine how your department conducts operations and how your department responds and recovers from problems impacting your normal operations. If most of the workgroup members have had experience in addressing outages, work stoppages, etc., you may want to review all of the scenarios at one time since the only response area that may vary in response is the subject matter expert(s) who are responsible for assessing and solving the problem or incident at hand.

2. Analyze where and how the scenario would impact department operations.

3. Brainstorm on how the problem will be dealt with. Then refine a general strategy or approach to overcome the crisis (a.k.a. response) and resume operations (a.k.a. recovery)

4. Write out the general strategy and add detail to make it a plan.

5. Into the templates insert the crucial actions or tasks by job title or discipline associated with successful execution of the plan.

   a. Be sure to consider what resources and logistics will be required to accomplish these tasks or actions.

   b. Prepare these resources now, or have a plan to acquire them if a crisis occurs. For example if you plan on using paper forms as a backup to computers, have enough pre-printed copies stored and available to sustain operations while more are being printed/xeroxed.

   c. Consider the logistics of everything you do. For example, if you plan on moving from one campus to another consider transportation issues, seating arrangements and workstation availability at the alternate location, and the availability of infrastructure (e.g., phones, phone lines, LAN connections, outlets, computers, software, etc.

   d. Coordinate, Coordinate, Coordinate!! Your plan has an impact on not just customers/patients but also on other departments. Communicate and coordinate with others to ensure your plan does not prevent another department from accomplishing its mission.

e. Ensure the plan is not reliant on the availability of one or two key leaders or key individuals. You have to make plans if they are not available during the crisis.

6. Assign responsibility and a timeframe for each task in the plan to support rapid resumption of department operations. In a crisis there should be no ambiguity about who in your department is responsible for executing or supervising critical tasks.

7. Consider, and then add any key decisions that must be made in such a crisis. Who should make the decision? Based on what criteria? Facilitate rapid and effective decision making during a crisis by foreseeing the types of decisions that will have to be made in each scenario.

8. Consider that normal department leadership may not be available for plan execution and the plan should be concise enough so that any mix of department staff can implement it. However, develop a plan to get more help (especially during off shifts).

9. Finish all the ancillary details of each scenario's template.

10. Develop methodology for testing (Part 10).

11. Develop methodology for maintaining the BCP (Part 10).

BCP Parts 1-4 Template

Insert Organizational Logo

JHHS System Support Services

Supply Chain

Business Continuity Plan

Last Revised*: (December 22, 2016)*

Supply Chain System Support Services
3910 Keswick Road
443-997-5638

Johns Hopkins Health System

System Support Services

Business Continuity Plan

OUTLINE

Purpose and Scope of Plan ..... Part 1

- **1.01 Statement of Purpose: Concept of Operations**
- **1.02 Scope of Plan**

Plan Activation and Notification ..... Part 2

- **2.01 Assessing Magnitude of Emergency Situation**
- **2.02 Chain of Command**
- **2.03 Plan Communications**
- **2.04 Hotline Activation**
- **2.05 Hotline Instructions**

Emergency Call Tree ..... Part 3

- **3.01 Activation Procedure**
- **3.02 Testing**
- **3.03 Call Tree**
- **3.04 Organizational Chart**

Scenarios – Assumptions and Guidelines ..... Part 4

Scenario 1: Key Data Application Unavailable ..... Part 5

Scenario 2: Network Connectivity Lost ..... Part 6

Scenario 3: Building and/or System Interrupted or Space Not Available ..... Part 7

Scenario 4: Key Vendor/s Unavailable ..... Part 8

Scenario 5: Staff Not Available ..... Part 9

Plan Maintenance & Testing ..... Part 10

- **10.01 Maintenance of Plan**
- **10.02 Plan Testing**

Appendix ..... Part 11

Part 1: Purpose and Scope of Plan

1.01- Statement of Purpose

This document describes the actions to be taken in case of an emergency within the Supply Chain System Support Services department for the Johns Hopkins Health System. It specifically outlines the activities to be undertaken within the department for a variety of emergency scenarios that could occur which would impede the performance of our business operations.

The intent of the plan is to provide management and staff with guidance on how the department would respond to the various emergency situations and to outline the activities that must occur in order to ensure the continuance of operations.

The purpose of this document is to:

- Plan for ongoing operations in the event of an emergency which would impact business operations for a period of time 24 hours
- To detail the contingency preparations for the department to minimize disruption to normal workflow.
- To outline areas of vulnerability in the business operation
- To work in concert with other key components of the organization which would include:
    - Johns Hopkins Medicine Corporate Information Systems
    - Hospital Management Team
    - Corporate Communications

1.02- Scope of Plan

A. The scope of this plan is to provide directions to the Supply Chain departments within the Johns Hopkins Medicine when the business continuity plan is activated. The specific areas covered include:

- Johns Hopkins Material Distribution – Sibley Supply Chain – All Children's Supply Chain – Suburban Supply Chain – Howard Supply Chain – Corporate Purchasing Department – EPIC – Bayview Supply Chain – Johns Hopkins Supply Chain – Accounts Payable – Enterprise Business Solution Supply Chain division

Part 2: Plan Activation

2.01- Assessing Magnitude of Emergency Situation

The Director of Supply Chain System Support will assess the level of the situation and the effects it will have on daily system operations. The Director of Supply Chain System Support will work with the Various Supply Chain Directors at each affiliated location to determine the effect of the situation for each of their specific locations. The Supply Chain System Support Director will work with the affiliated locations to determine the best solution and assist them in the solution. Each affiliate location will manage their own BCP plan for their specific location and report to System Support Director if any issues or questions.

The Director of Supply Chain System Support will use both email notification and the Director Emergency call list to notify the various locations with in Supply Chain.

2.02- Chain of Command

The VP of Supply Chain and the Directors' of Supply Chain with in each affiliated location

VP of Supply Chain
Director of System Support Services
Director of Supply Chain, Director of Purchasing
The chain of command will depend on the Threat and the location

Command Center for System Support and Purchasing will be located at 3910 Keswick Road – North Building – 4th Floor N4100)

2.03- Plan Communications

Internal communications will occur via *Examples* are:

- Hot Line
- Call Tree
- Use of e-mail via Groupwise web-site or web based communication system
- Off-site or on-site departmental management team and staff meetings (and meeting intervals)
- Department Internet or Intranet site

2.04- Hotline Activation

- *443-997-1066*
  - Message to staff internal and external – Please note The Supply Chain has active the BCP plan describing the situation and who to notify of an issue and how to make the notification

- Director of Purchasing or the Director of System Support will create the message and maintain the message
-

2.05- Hotline Instructions

Message will be placed on the Main Purchasing line 443-997-1066

Part 3: Emergency Call Tree

3.01- Activation Procedure *(The following are the requirements associated with call roster or call tree activation. They are designed to establish a standardized procedure across Johns Hopkins Medicine)*

A. The Director of Supply Chain System Support will activate the Emergency Call Tree. The Director is not available the MMIS Data Manger will start the call tree process

B. Director must contact each Associate or Assistant Director. If one Director is not reached, the Director must then proceed to call that Associate Directors' direct reports.

(1) Direct Contact

(2) Indirect Contact
- Text Message to Cell Phone
- Answering machine
- Left message with (identify who message was left with)

(3) Unable to reach: If a key staff member cannot be reached, this must be reported to the Director after the phone tree has been executed.

D. Each Director will complete the Emergency call tree test document provided below (whether the activation call is a test or an actual activation).

3.02- Testing of the Procedure

The emergency call tree will be updated quarterly and tested on a Bi- Annual basis. Documentation of the call tree test will be completed by Director of System Support Services

Supply Chain System Support Services

Emergency Call Tree Test

Summary Sheet

Results Review

Test Date:

Director: **Charlene Knoerlein**

			Number	*Percent of total*
1.	Success Rate:	# Direct Contacts		
		# Indirect Contacts		
		# No Contact		

2.

Description of Operational Issues	Corrective Action Recommended

Example Test of Call Tree

Emergency Call Tree Test Results
Date: 4/17/12
Time: 6:55 PM - 8:00 PM

Summary:

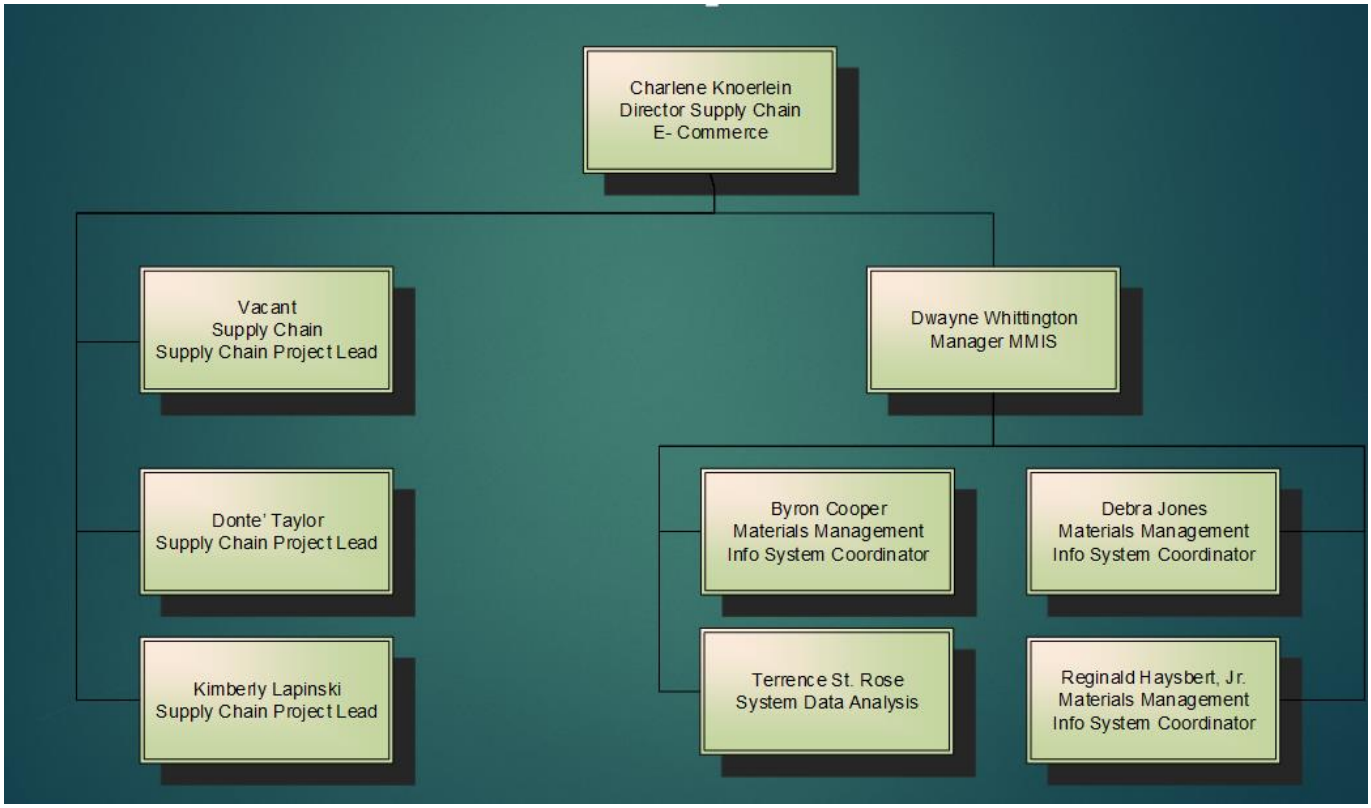
Direct Contacts	141	50.9%
Indirect Contacts	112	40.4%
No Contact	24	8.7%
	277	100%

Notes:
Indirect contacts included leaving a message on answering machine, leaving a message with a spouse/significant other or child.

3.03- Calling Tree: Attached to Plan

Name	Title	Address	Office #	Home#	Beeper #	Cell Phone
Dwayne Whittington	MMIS Manager	Suite N4118-Keswick	443-997-5646	443-676-0085	N/A	443-760-7418
Terrence St. Rose	MMIS Systems Analyst	Suite N4118-Keswick	443-997-5643	N/A	N/A	443-468-8759
Reggie Haysbert	MMIS Coordinator	Suite N4118-Keswick	443-997-5637	410-530-9169	N/A	410-530-9169
Debbie Jones	MMIS Coordinator	Suite N4118-Keswick	443-997-5645		N/A	410-274-4616
Byron Cooper	MMIS Coordinator	Suite N4118-Keswick	443-997-5641	410-245-6610	N/A	410-227-3838
Ronda Schreiner	Supply Chain Project Lead	Suite N4118-Keswick	443-997-5635		N/A	410-804-3411
Kim Lapinski	MMIS Supply Chain Project Lead	Suite N4118-Keswick	443-997-5622	410-282-1514	N/A	443-310-0291
Donte Taylor	MMIS Project Lead	Suite N4115F-Keswick	443-997-5627	410-209-0137	N/A	410-209-0137

3.04- Command and Control System 'Org' Chart:



Part 4. Scenarios – Assumptions and Guidelines *(Insert appropriate information where required)*

- **Scenario 1:** The SAP computer application, which is key to this department's operations, is unavailable. The specific applications used by this department are off-line and therefore not available. Further definition of the systems that may be impacted and the established actions to bring them back into operations are described in Section 5.

- **Scenario 2:** This scenario assumes that the JHHS network is down. Applications that run on the machine are available, but those that require connectivity in the department or elsewhere are not. Nearly every enterprise or business application requires connectivity, including email, instant messaging, Sharepoint, Voice Over IP. Further definition of the systems that may be impacted and the established actions to bring them back into operations are described in Section 6.

- **Scenario 3:** Long-term utility interruptions and building or physical location is unavailable. Response to this scenario will be based on the severity of the situation.

A. The floor/area of the building in which this department is located becomes unavailable for staff. Staff may not enter this area of the building to gather belongings, access or copy files, computers, equipment or anything maintained in the office. It is further assumed that this space cannot be used for a period of at least seventy-two (72) hours.

B. The entire building is not available for staff. If department is housed in multiple buildings or multiple campuses the scenario addresses unavailability at each. Only one location is assumed unavailable at one time. As stated above staff may not enter the building for any reason. Also assumed is that the building cannot be occupied for a period of at least seventy-two (72) hours. Actions that must occur, and relocation plans are described in **Section 7**.

C. Various critical infrastructure utilities/systems become unavailable or space has been contaminated and/or unusable to the department that is significant enough to adversely impact normal operations.

- **Scenario 4:** Major business partner(s) are unavailable: This scenario assumes that Owens and Minor – Medline – McKesson Drug – Cardinal - Baxter Health Care are unavailable. Scenario 4

describes the actions that would be taken to resume service by *(the vendor)* to overcome the interruption in service. (If appropriate, plan details alternate or substitute vendors)

- **Scenario 5:** People/staff are unavailable. This scenario assumes that either a significant portion or all of the department's staff is unable or unwilling to come to work for a period of 72 hrs or more. This scenario details minimum staffing requirements for the department, distribution of work if some staff is available, and longer-term solutions to acquire new or replacement staff/people when appropriate. Actions that must occur are detailed in Section 9.

Notes:

- Levels of activation should be identified to implement established procedures
- Minimum action levels should include: Administrative Alert, Partial Mobilization and Full Scale Activation
- Develop a 1-page matrix of activation levels, triggers, and activation procedures to allow command center staff to expedite implementation of appropriate procedures
- Develop procedures with appropriate departments to resolve the disaster incident
  - Define each relationship and lead individuals
  - Define activation and notification plans
  - Define alternative or back plans
  - Put prerequisites in place by designated individuals
  - Consider other assumptions and attempt to validate
  - Create a recovery process to efficiently return to original state

BCP Scenario 1 Template

Part 5: **SCENARIO 1: Key Data Application Unavailable (SAP)**

OUTLINE:

5.01 Detect and assess level of disaster condition
5.02 Notify persons responsible for response and/or recovery
5.03 Implement Business Continuity Plan Response and Recovery Procedures
5.04 Establish the designated alternate location
5.05 Disseminate information and seek assistance when required
5.06 Provide direction, coordination, resources and support services to aid recovery

Scenario Explanation: This scenario assumes your department's key data application/s (or computer program/s) become unavailable for some reason. A "key" application is one whose loss causes your department's business process to stop or slow to the point of preventing effective patient or customer care. Scenario 1 describes the actions that your department takes to overcome the interruption, and to resume business using an alternate data application or a manual back up process.

5.01 Detect and assess level of disaster condition or event
Problem Identification & Declaration of disaster Director of Supply Chain System Support

5.02 Notify persons responsible for response and/or recovery
Disaster Notification*:*
Director of the Supply Chain System Support will notify the following Staff of event:
Director of Purchasing: 443-997-5624
Director of Hopkins Materials: 410-955-4390
Director of Bayview Materials: 410-550-0243
Director of Material Distribution: 410-550-3003
Director of Sibley materials: 202-537-4167
Director of Suburban materials: 301-896-3458
Manger of ACH materials: 727-767-4382

5.03 Initiate Business Continuity Plan Response and Recovery Procedures
Business Continuity Plan:
The SAP System will be down – So we will not be able to update any master data records – Including vendor master and item master
These updates can include new entries and changes
All request will be logged and managed thru the SharePoint site or notice will be sent that no request are to be sent until systems are back on line
Once systems are back to fully operational The Supply China System Support staff will work as a team to get all Master records current in the SAP system within 3 to 5 business days

5.03.1 Application #1 SAP

A. Strategy Summary
The System Support staff are fully dependent on the SAP system – With the loss of the SAP system staff will be allocated to the Purchasing department to assist in their downtime processes – The System support staff will also field end user questions during this time

B. Key Decisions
The key decisions for the SAP system will be determined by the length of time we are without the SAP system, The System Support department will work closely with the Purchasing department to determine decisions on what path will be taking during the downtime

C. Decisive Actions & Tasks (*List the tasks you consider most decisive to the successful execution of your business continuity plan*)

Task #	Responsible Party	Task	Timeframe
1.1	*MMIS Data Manager*	*Item adds and Changes*	*Notice will be issued as to the state of SAP – within 1 day of the start of the disaster*
2.1	Director Supply Chain System Support	Vendor adds and changes	*Notice will be issued as to the state of SAP – within 1 day of the start of the disaster*
3.1	Director Supply Chain System Support	Inability to process orders thru the SAP system	Within 2 hours of SAP downtime – work with Department of Purchasing
4.1	Director Supply Chain System Support	Inability to process item master changes to EPIC and Cerner systems	Contact EPIC and Cerner of the state of SAP
5.1			
6.1			
7.1			

D. Backlog recovery: (if applicable)
The System Support team will all take on additional work with recovery – Depend in the amount of data that needs to be entered into the SAP system – Overtime may be required - the Goal would be to have all data updated in the SAP system within 5 business days

BCP Scenario 2 Template

Part 6: **SCENARIO 2: Network Connectivity Lost**

OUTLINE:

6.01 Detect and assess level of disaster condition
6.02 Notify persons responsible for response and/or recovery
6.03 Implement Business Continuity Plan response and recovery procedures
6.04 Establish the designated alternate location
6.05 Disseminate information and seek assistance when indicated
6.06 Provide direction, coordination, resources and support services to aid recovery

Scenario Explanation: This scenario assumes the main computer network used by your department becomes unavailable. External communication via this network is not possible. Any data applications housed on an external server become unavailable. Any data applications housed on department computers or local servers at the department are likely to be unavailable. Scenario 2 describes the actions that your department takes to overcome the interruption, and resume services.

6.01 Detect and assess level of disaster condition
Problem Identification & Declaration of disaster The Director of Supply Chain System Support has the authority to put the BCP in place and active – If not available the MMIS Data Manger then will make this decision

6.02 Notify persons responsible for response and/or recovery
Disaster Notification*:*
EPIC – Xinna Sheng - xsheng2@jhmi.edu – 4102349157
Cerner – Michele Diesen - mdiesen1@jhmi.edu – 7277674827
Suburban Hospital - Jean Chornock
Howard County General – Max Mendez
Sibley Memorial – Jimmy Howell
All Children's Hospital – Beth Walker
Bayview Medical Center – Joe Johnson
JHHS MDC – Mike Mohn

6.03 Initiate Business Continuity Plan Response and Recovery Procedures
Business Continuity Plan:
MMIS Data Manger will be placed in charge of collecting all Master data adds or changes during the down time – and assign to staff once system is back up
Director of System Support will work with the Purchasing manager to assist the Purchasing department will the entry of Purchasing orders – Purchasing Manger has developed Manual PO forms and Spread sheet for Mass load of Purchase orders once system is back up

Strategy Summary
For the Department of System Support - We need to track all data request so we have a true understanding of the data elements need to be entered once system is available
Ate department will be used to assist the Purchasing Department to place orders and work with departments on shopping carts etc…

B. Key Decisions

1- **GHX Submitting of Purchase orders to vendors – By 4 hours of network outage , the Director of Supply Chain system support must decide whether to inform vendors that we cannot transmitted Purchase orders thru the GHX system and will have to either fax the orders or call in over the phone**
2- **SAP Fax Server – Submitting of Purchase orders to Vendors - By 4 hours of network outage , the Director of Supply Chain system support must decide whether to inform vendors that we cannot transmitted Purchase orders thru the SAP Fax Server and will be calling in the orders over the phone**
3- **Entering of Master data into SAP – including item master and vendor master records – By 24 hours of network outage the Manager of MMIS Data – will reach out to key users informing them the network is down and we are not able to make any changes or updated to current master data and cannot enter any new master data records**
4- **Interface for Master data records updates to EPIC and Cerner system – By 24 hours of network outage the Manager of MMIS Data – will reach out to EPIC and Cerner to inform them of the inability of Data additions or updates will be including in the daily interface**

C. Decisive Actions & Tasks (*List the tasks you consider most decisive to the successful execution of your business continuity plan*)

Task #	Responsible Party	Task	Timeframe
1.1	*Director of System Support*	*GHX system down and unable to process PO's*	*4 hr into the disaster the decision will be made on calling in orders*
2.1	Director of System Support	GHX PO's will be called into vendor – contact EBS to notify them of decision so Files can be removed so when system back up PO's are not resent	
3.1	Director of System Support	Fax Machine – phone lines down – PO cannot be sent to vendor	*4 hr into the disaster the decision will be made on calling in orders*
4.1	Director of System Support	Faxed Po's -contract EBS to notify them of decision so Files can be removed so when system back up PO's are not resent	
5.1	MMIS Data Manger	Items / Vendors cannot be entered in SAP system down – Need to notify end users and track request	At the start of the disaster
6.1	MMIS Data Manager	Notify EPIC and Cerner that data will not be updated thru the interface	At the end of 1st Business Day
7.1			

D. Backlog recovery: (if applicable)
When system are back in running condition – All staff members of the System Support team will work to get all data into the SAP system – this may involve overtime depending on the workload

6.04 Establish the designated Alternate Location (if applicable)
Alternate Location Activation:

If the staff can move to an alternate location – they will either work from Home or report to the EBS location at Mt Washington

6.05 Disseminate Information and Seek Assistance When Indicated
Notification to end users will take place either via – Email or Phone

6.06 Provide direction, coordination, resources and support services to aid recovery
Does your department have any role in the network recovery?
Yes all staff – MMIS Data Coordinators – MMIS Project Leads – MMIS Data Analysis - MMIS Data Manger

BCP Scenario 3 Template

Part 7: **SCENARIO 3: Building System Interrupted or Unavailable**

OUTLINE:

7.01 Detect and assess level of disaster condition
7.02 Notify persons responsible for response and/or recovery
7.03 Implement Business Continuity Plan Response and Recovery Procedures
- 7.03.1 Area/Floor Unavailable
- 7.03.2 Building Unavailable

7.04 Establish the designated alternate location: RELOCATION PLAN
- 7.04.1 Move Patients, Staff and/or Equipment
- 7.04.2 Establishment of Operations at Alternate Location
- 7.04.3 Return to Original Location

7.05 Disseminate information and seek assistance when indicated
7.06 Provide direction, coordination, resources and support services to aid recovery

Appendix: Utility Interruption or Unusable Space Matrix

1. Interruption to Air Conditioning System
2. Interruption to Heating System
3. Interruption to Medical Gas Supply
4. Interruption to Water Supply
5. Interruption to Electrical System
6. Interruption to Telephone System (plus ASCOM phones if applicable)
7. Unit, Floor and/or Building Contaminated and/or Unusable
8. Pneumatic Tube Outage or Delay

Scenario Explanation: This scenario encompasses several types of interruptions. First a specific **unit and/or floor** within the department become unusable. Secondly, the entire building is unusable causing the department to relocate to another location.

7.01 Detect and assess level of disaster condition
Problem Identification & Declaration of disaster *(A floor or building unavailable would automatically trigger this plan. Who in the department has the authority to activate the BCP in the event of a utility outage or unusable space scenario?)*

- Add delegated authority concept for bomb threat, identified explosive device, smoke, fire and high wind events to BCP.

Delegated Authority for On-Site Managers/Supervisors To Evacuate Unit

- Delegated authority to move occupants to a safer location within the unit or to evacuate outside of unit is given to the on-site in charge person of that unit if there is imminent or immediate danger to the occupants of that unit.
- Occupants can be defined as patients, visitors or staff
- Immediate danger is defined as the validation or strong suspicion that there is existence of a fire, smoke, bomb/explosive device within their area or their unit is not usable or safe after a high wind incident or in a hostage type event.
- The on-site Security Manager or Supervisor will inform the on-site charge person if there is or a strong suspicion that there may be an explosive device or a hostage type event in or near that unit. The confirmation for the other scenarios (e.g., fire, smoke, unit unusable) is based on the unit's manager or supervisor assessment and discretion.

7.02 Notify persons responsible for response and/or recovery

- **Disaster Notification***: (List who is immediately notified of the situation/disaster. Include entities/people within Johns Hopkins and any vendors or external agencies that would be notified if your department relocated. Also add who and when does department call for help or assistance (i.e., from Disaster Team or senior leadership, mutual aid). Include contact information such as phone numbers, e-mail address, pager numbers)*

7.03 Implement Business Continuity Plan Response and Recovery procedures

7.03.1 Unit and/or Floor Unavailable

Department's area of operations is unavailable [*Assume the floor/area of the building in which this department is located becomes unavailable for staff. If the department is located on multiple floors assume only one floor unavailable at one time. Assume that the unit and/or floor cannot be used for a period of at least seventy-two (72) hours]*.

Where/what is the Alternate Location: *(Identify the alternate location/s in the same building that staff, patients, and operations relocate to. Usually, this is another unit of floor occupied by the same department. If the entire department is located on one floor this scenario is the same as Section 7.03.2 Building Unavailable. In this case simply state "see Section 7.03.2")*

Current Floor Used by Dept.	Alternate Floor or location we would move to	Notes

7.03.2 Building Unavailable

Department's area of operations is unavailable: *(Assume the entire building is not available for staff. If department is housed in multiple buildings or multiple campuses the scenario addresses unavailability at each. Only one location is assumed unavailable at one time. Assume that the building cannot be occupied for a period of at least seventy-two (72) hours.)*

Where/what is the Alternate Location: *(Identify the alternate location/s that staff/operations relocate to. Specify campus, building location, and room number/s)*

7.04 Relocation Plan

The relocation plan details steps involved in moving the department to an alternate location in order to maintain continuity of business or patient care functions**.** It consists of three sections:
7.04.1 Systematic move of patients, staff, equipment, supplies and drugs
7.04.2 Systematic establishment of operations at alternate location
7.04.3 Systematic return to original location and re-establishment of operations there

7.04.1 Systematic move of staff and equipment

A. Who goes? *(Identify critical staff that must relocate first. If entire staff is not relocating, what happens to those that do not – work from home, PTO, furlough, etc?)*

B. What goes? *(Identify the most critical equipment that must be taken to new site first. This applies to situations where access to the original building is possible.)*

C. Required infrastructure and major equipment at alternate location: *(Identify what major equipment and infrastructure are needed and in what quantity e.g. 6 workstations, 4 with network connectivity; 6 dedicated phones/phone lines, 10 portable cardiac monitors, monitoring equipment, O2 availability for at least 10 beds, etc.)*

7.04.2 Systematic establishment of operations at alternate location
Establish operations *(Plan to establish business operations/patient care at new location. If sharing a space with another department/entity, cover decisions or tasks which differentiate the use of staff, space, equipment and/or supplies.*

A. Key Decisions
List the decisions that are most critical to the successful establishment of department operations at the alternate site. An example of such a decision in this scenario is: Appropriate level of utilities and infrastructure to support patient care services.

Decision: "Do we use customer service personnel to process backlogged orders?"

Background: "If re-establishing operations at the alternate building takes more than 2 days, two customer service employees will shift to the orders processing section to assist in entering/processing backlogged orders." Another example might be a decision to place more than one patient into the same room.

B. Decisive Actions & Tasks (*List the tasks you consider most decisive to the successful execution of your relocation plan*)

Task #	Responsible Party	Task	Timeframe
1.1	*Who accomplishes the task (by position, not by name)*	*What is the specific task*	*When is the task done in relation to the start of the disaster (e.g. immediately, within 2 hours, in the first 48 hrs, etc)*
2.1			
3.1			
4.1			
5.1			
6.1			
7.1			

7.04.3 Systematic return to original location and re-establishment of normal operations
Recovery Process *(Briefly detail steps to seamlessly transfer operations from the alternate site back to the original site of operations once identified outage and/or agent has been restored or eliminated respectively. Consider that there may be a point in time where staff is split and operations may take place from both sites.*

Decisive Actions & Tasks (*List the top 3-5 tasks you consider most decisive to the successful return to the department's original location*)

Task #	Responsible Party	Task	Timeframe
1.1	*Who accomplishes the task (by position, not by name)*	*What is the specific task*	*When is the task done in relation to the start of the disaster (e.g. immediately, within 2 hours, in the first 48 hrs, etc)*
2.1			
3.1			
4.1			
5.1			

7.05 Disseminate Information and Seek Assistance When Indicated
Notification of interdepartmental liaisons, vendors, patients, family members or clients*: (Summary of how other departments, vendors, patients or customers of the department are notified of changes in location i.e. how do you let others know your department has moved?)*

7.07 Provide direction, coordination, resources and support services to aid recovery
Does your department have any role in the building's recovery? (*If yes, specify who in your department performs this function).*

Appendix:
Utility Interruption or Space Unavailable Matrix

1. Interruption to Utilities
   - Air Conditioning / Air Cooling / Chilled Water Outage
   - Heating System / Natural Gas Availability
   - Medical Gases and Vacuum (including Oxygen & Nitrous Oxide)
   - Water Supply / Water Pressure
   - Phone System (plus ASCOM phones if applicable)
   - Electrical Power
   - Pneumatic Tube Outage or Major Delay
   - Total Utility Outage

2. Unit, Floor or Building Unavailable or Unusable*
   - Bomb Threat or Explosions
   - Chemical Spills
   - Fire Emergencies or Smoke
   - Gas (Natural) Outage
   - High Winds
   - Infectious Disease Outbreaks
   - Radioactive Spills or Exposure
   - Structural Failure / Earthquake
   - Unidentified Substance or Package
   - Workplace Violence (Active Shooter, Assailant w Weapon, Hostage, etc)

Notes: The following pages reflect the access, activation and immediate actions to be implemented primarily for inpatient clinical units. The access and activation information may also be applicable to all other non-inpatient areas but immediate actions will not and therefore need to be identified.

Interruption	Relocating Patients/Staff	Key Tasks	Critical Resources Needed	Who Provides Resources
Air Conditioning / Air Cooling *(Air Cooling system not functioning building wide for 72 hrs or longer)*	Mt Washington or if Keswick South Building is OK can report to 4th floor We also have the option for work from home	Master Data entry Review of purchase orders going out electronically		System Support Department – Own Staff not additional needed
Heating System *(Heating system for building not functioning for 72 hrs or longer)*	Mt Washington or if Keswick South Building is OK can report to 4th floor We also have the option for work from home	Master Data entry Review of purchase orders going out electronically		System Support Department – Own Staff not additional needed
Medical Gas/vacuum *(Assume O_2 & N_2O problem is campus wide. Lab Air and Lab Vacuum are building specific interruptions. Med Air and Med Vacuum are floor specific)*	N/A	Implement most appropriate action based on situational assessment and building codes		
Water Supply / Water Pressure *(Running water supply for multiple campus buildings not functioning)*	Mt Washington or if Keswick South Building is OK can report to 4th floor We also have the option for work from home	Master Data entry Review of purchase orders going out electronically		System Support Department – Own Staff not additional needed
Phone System *(Phone system for entire building affected)*	Mt Washington or if Keswick South Building is OK can report to 4th floor We also have the option for work from home	Master Data entry Review of purchase orders going out electronically		System Support Department – Own Staff not additional needed
ASCOM Phone System (if applicable)	N/A	Implement most appropriate action based on situational assessment and building codes		
Electrical Power *(Electricity out building wide. Hospital backup generators are functioning)*	Mt Washington or if Keswick South Building is OK can report to 4th floor We also have the option for work from home	Master Data entry Review of purchase orders going out electronically		System Support Department – Own Staff not additional needed
Pneumatic Tube Outage or Major Delay	N/A			

Interruption	Relocating Patients/Staff	Key Tasks	Critical Resources Needed	Who Provides Resources
Total Utility Outage	Mt Washington or if Keswick South Building is OK can report to 4th floor We also have the option for work from home	Master Data entry Review of purchase orders going out electronically Send out alert notification and updates to management team, faculty, staff, etc. Confirm messages received by unit or employees in the event that servers were not operational. If outage occurs, send out alert notification via other communication devices If outage occurs, send out alert notification via other communication devices Assess impact to dept. space, staff and stuff Implement response and/or recovery procedures as instructed or as needed		System Support Department – Own Staff not additional needed

Incident	Relocating Staff	Key Tasks	Critical Resources Needed	Who Provides Resources
Bomb Threat or Explosion *(Unit, floor and/or Building unavailable for 72 hrs or longer)*	Evacuate when instructed to do so by unit leader, security or BCPD	Call Security at 5-5585 Unit Mgt. Assist Security in Search Evacuation Procedures		
Chemical Spill *(Unit, floor and/or Building unavailable for 72 hrs or longer)*	Evacuate if instructed to do so	Call Health, Safety & Environment or Management Company Evacuation Procedures	Spill containment and decontamination Alternate care site procedures	
Fire Emergencies and/or Smoke *(Unit, floor and/or Building unavailable for 72 hrs or longer)*	Evacuate if classified as business occupancy. If not, shelter in place.	Follow safety procedure instructions Evacuation Procedures	Fire extinguishers Alternate care site procedures	
Infectious Disease Outbreak *(Unit, floor and/or Building unavailable for 72 hrs or longer)*	Comply with respiratory etiquette and appropriate standard precautions	Attend Command Center Briefings or Call JHH & JHU SoM Command Center 410-955-3333	Need supplies to comply with respiratory etiquette to minimize spread	JHH / SOM Command Center
Radiation Spills or Exposure *(Unit, floor and/or Building unavailable for 72 hrs or longer)*	Evacuate if instructed to do so	Call Health, Safety & Environment or Management Company Follow safety procedure instructions Evacuation Procedures	Spill containment and decontamination Alternate care site procedures	
Structural Failure and/or Earthquake *(Unit, floor and/or Building unavailable for 72 hrs or longer)*	Earthquake: Shelter in place. Use drop, cover and hold techniques when appropriate	Inform Facilities if there is any significant structural damage	Alternate care site procedures	
Workplace Violence *(Unit, floor and/or Building unavailable if ordered to evacuate by police)*	Use run, hide or fight response dependent on situation	Call Security 5-5585 or Police at 911		

BCP Scenario 4 Template

Part 8: **SCENARIO 4: Key Vendor/s Unavailable**

OUTLINE:

8.01 Detect and assess level of disaster condition
8.02 Notify persons responsible for response and/or recovery
8.03 Implement Business Continuity Plan Response and Recovery
8.03.1 Vendor #1 *(GHX)*
8.03.2 Vendor #2 *(Fax Server Vendor)*
8.04 Establish the designated alternate location
8.05 Disseminate information and seek assistance when indicated
8.06 Provide direction, coordination, resources and support services to aid recovery

Scenario Explanation: This scenario assumes your department's key vendor, regulatory liaison, business partner/affiliate, or supplier (generically referred to as 'vendor') is unavailable. A "key" vendor is one whose loss causes your department's business process to stop or slow to the point of preventing effective patient or customer care, contracted service or regulatory requirement. Scenario 4 describes the actions that would be taken to overcome the interruption in service, and either resume service by the vendor/contractor or seek the services of an alternate vendor. Key vendors may be identified using the procedure described at the end of this template.

8.01 Detect and assess level of disaster condition
Problem Identification & Declaration of disaster
The Director of Supply Chain System Support will activate the BCP

8.02 Notify persons responsible for response and/or recovery
Disaster Notification:
The Purchasing Manger will be notified in the event the vendors noted GHX and Fax server were no available – The Supply Chain Manager at All Children's will be notified

8.03 Initiate Business Continuity Plan Response and Recovery Procedures
Business Continuity Plan:
Work with EBS to coordinate the PO's we are unable to get from SAP to the vendor
Work with EBS to remove the Purchase orders effected from the system so when system is back up orders will not re-send
Assign orders to system to phone into the vendors
MMIS Data Manger will be the holder of all documents during this time frame

8.03.1 Vendor #1 *GHX*

GHX	
Key Function or relationship	*GHX – Third party vendor that handled the electronic transfer of purchase orders from the SAP system*
Vendor's Address	1315 W. Century Drive Suite 100 , Louisville CO 80027
Contact Information	pspiro@ghx.com
Contact Name	Paul Spiro
Does vendor/partner have a recovery or continuity plan?	
Is this plan attached in the	*(Specify "Yes" or "No" and location in appendix)*

appendix of this BCP?	

A. Strategy Summary

We will have the ability to track purchase orders sent to this vendor and – manually print the orders from the SAP system – and either fax the orders or phone in the orders

B. Potential Alternatives to the Unavailable Vendor

No Alternate Vendor

Potential Alternate Vendor (Insert Vendor Name) *Insert alternate/backup vendor or supplier name and all known contact info.*	
Key Function	*(Describe what this vendor does)*
Address	
Contact Information	*(Include both phone and email)*
Internet Web Site	
Capability to Respond	*(Estimate vendor's ability to respond to your department's needs. e.g. Has these types of services, but not these…Has needed supplies but is slow to respond, etc…)*
Other critical Vendor Info	

If more than one potential alternate / back-up sources or vendors are known, include additional text boxes below as necessary.

8.03.2 Vendor #2 *SAP Fax Server*

Insert Vendor Name	
Key Function or relationship	*Fax Server*
Vendor's Address	
Contact Information	
Contact Name	
Does vendor/partner have a recovery or continuity plan?	
Is this plan attached in the appendix of this BCP?	*(Specify "Yes" or "No" and location in appendix)*

A. Strategy Summary

If Fax server is down – staff will track the orders not being sent – and obtain PO copies fro the SAP system – Print the Po's and manually fax or phone in the order

B. Potential Alternatives to the Unavailable Vendor

(Identify alternative sources even if your primary vendor has a plan to keep you supplied/serviced in the event on one of their areas/warehouses becoming unavailable.)

Potential Alternate Vendor (Insert Vendor Name) *Insert alternate/backup vendor or supplier name and all known contact info.*	
Key Function	*(Describe what this vendor does)*
Address	
Contact Information	*(Include both phone and email)*
Internet Web Site	
Capability to Respond	*(Estimate vendor's ability to respond to your department's needs. e.g. Has these types of services, but not these…Has needed supplies but is slow to respond, etc…)*
Other critical Vendor Info	

If more than one potential alternate / back-up sources or vendors are known, include additional text boxes below as necessary.

8.03.3 Vendor #3 *(Insert vendor name here)*

Insert Vendor Name	
Key Function or relationship	*(Describe what this vendor/partner/supplier currently does to support your business process)*
Vendor's Address	
Contact Information	
Contact Name	
Does vendor/partner have a recovery or continuity plan?	
Is this plan attached in the appendix of this BCP?	*(Specify "Yes" or "No" and location in appendix)*

A. Strategy Summary

(*How do you plan to continue department operations if this vendor becomes unavailable? In one or two short paragraphs describe the concept of your plan to overcome the loss of this specific vendor. Site critical vulnerabilities tied to this vendor. These are any key aspects of your department's functions that would be significantly and adversely impacted by the loss of this vendor.)*

B. Potential Alternatives to the Unavailable Vendor

(Identify alternative sources even if your primary vendor has a plan to keep you supplied/serviced in the event on one of their areas/warehouses becoming unavailable.)

Potential Alternate Vendor (Insert Vendor Name) *Insert alternate/backup vendor or supplier name and all known contact info.*	
Key Function	*(Describe what this vendor does)*
Address	
Contact Information	*(Include both phone and email)*
Internet Web Site	
Capability to Respond	*(Estimate vendor's ability to respond to your department's needs. e.g. Has these types of services, but not these…Has needed supplies but is slow to respond, etc…)*
Other critical Vendor Info	

If more than one potential alternate / back-up sources or vendors are known, include additional text boxes below as necessary.

8.04 Establish The Designated Alternate Location (not applicable in this scenario)

8.05 Disseminate Information and Seek Assistance When Indicated
Notification will be given to the Purchasing Manager

8.06 Provide direction, coordination, resources and support services to aid recovery (not applicable

BCP Scenario 5 Template

Part 9: **SCENARIO 5: Personnel / Staff Unavailable**

OUTLINE:

9.01 Detect and assess level of disaster condition
9.02 Notify persons responsible for response and/or recovery
9.03 Initiate Business Continuity Plan Response and Recovery Procedures
9.04 Establish the designated alternate location
9.05 Disseminate information and seek assistance when indicated
9.06 Provide direction, coordination, resources and support services to aid recovery

Scenario Explanation: This scenario assumes that a very large portion (at least 50%) of the department's staff or workforce is unable or unwilling to come to work for a period of 72 hrs or more. This scenario details the distribution of work for available staff; minimum staffing requirements for the department; and the department's ability to shift available personnel to assist others. Since it is not possible to know in advance specifically who will be absent, this scenario seeks to capture the **decision making criteria** for how personnel and workload are distributed rather than the specifics of "which position does what duty". This allows anyone placed in a leadership role to sustain the department's operations.

9.01 Detect and assess level of disaster condition
Problem Identification & Declaration of disaster: *(add, change, delete from the following as necessary)*

In the event of a major staffing shortage, in which it is presumed department leadership may be affected, the senior most staff member on duty has the authority to activate the BCP. Although the BCP can be activated at any point in a staffing crisis, a disaster condition for this department would not be declared unless the staffing level fell below 60 % of normal operating levels (for any given shift if department operates in shifts).

9.02 Notify persons responsible for response and/or recovery
Disaster Notification*:*
The Director of System Support will notify the Director of Purchasing and the supply chain Directors at each hospital

9.03 Initiate Business Continuity Plan Response and Recovery Procedures
Business Continuity Plan:
Staff that have reported to work will divide work to ensure al Patient care related data is kept current – Item master Records – Pricing issues – Vendor master – EPIC Data
Staff on site will be asked to put in additional work hours

A. Distribution of Work Plan
All System Support Staff are cross trained on all functions of the department – Work will be divided evenly among staff

B. Critical Task Completion
In order of priority, identify the top two or three critical functions essential to the department's overall mission. These tasks are the ones that must be sustained in a staffing shortage.

Staff Requirements for Critical Functioning

Critical Function (In order of priority) *Identify and address only the functions that are critical to department operations or patient care*	**Minimum staff needed to perform the minimal requirements of this function**			**Licensure or Certification Required?** *(ID the type/s required for this title or position)*	*(Insert any additional information pertinent to reallocation management)*	**Notes**
	Title / Position	**Skills or specialty required**	**Minimum required for critical operations**			
Maintaining Master Data for EPIC and other patient related systems		SAP Data Entry Knowledge	2 Staff	NA		

Total
Minimum staff requirements

(Insert the total number of each staff position from the table above to generate a comprehensive staffing requirement to sustain critical functions)

Title / Position	**Skills or specialty required**	**Licensure or Certification Required**	**Total required for critical operations**

9.04 Activate The Designated Alternate Location (not applicable in this scenario)

9.05 Disseminate Information and Seek Assistance When Requested
Notification of patients or clients*: Key end users will be notified of the staff shortage and instructed that Service level agreement will be modified*

9.06 Provide direction, coordination, resources and support services to aid recovery
N/A – will handle thru staff in department to recovery from any backlog

BCP Part 10 Template

Part 10: Plan Maintenance and Testing

10.01 Plan Maintenance

(a) Plan Maintenance & Updating

1. It is the responsibility of *the Director of Supply Chain System Support* to assure plan maintenance and to review the plan on a 3-year basis with the department leadership and with the key contacts in IT@JH (JHMCIS), Facilities, the hospital incident command team, external vendors, and others as appropriate.

2. The emergency call tree or staff notification procedures will be updated quarterly and then distributed to department leadership/management staff. This task is the responsibility of Purchasing Administrative Coordinator

3. This BCP will be electronically updated at the conclusion of every scenario test so as to capture lessons learned and changes which lead to more effective response and recovery plan. This task is the responsibility of Purchasing Administrative Coordinator. These updates do not necessitate re-printing the plan unless the changes are significant or if directed by department leadership.

4. Print a new plan after the policy cycle review/revision and maintained in the following locations:

- External Drive – Hopkins Site *Way Point*
- *Key Supply Chain Leaders*

5. Electronic copies of the BCP will be maintained in the following locations:

- External Drive - P Drive
- *Way Point Website, department web site, key leaders' home computers, key leaders' laptop computers, alternate servers, etc)*

(b) Staff Awareness

1. The following are methods / systems by which new staff are informed of and familiarized with the BCP:

- Staff orientation – Staff Meetings

2. It is the responsibility of Director Supply Chain System Support to ensure all new staff members in the department are knowledgeable about the BCP, and are familiar with its storage locations (electronic and hard-copy).

10.02 Plan Testing

(a) Testing of your plan is required annually and documented by the department as specified for each identified scenario. It is recommended that these tests (e.g., functional, dept wide, etc.) should include more than 1 scenario since it will take up to 5 years to test all scenarios if you do not combine them.

(b) Annually, BCP testing will be evaluated by the hospital/affiliate crisis management / disaster response team in one of the following formats.

1. The team will observe the conduct and results of the announced or unannounced test and provide on-the-spot feedback (*using debriefing process*) as well as follow-up written feedback.

   Documentation of Test Findings and Observations during Tests or Drills

   - Record Actions and Observations by Time on the established template (e.g. After Action Report Template)
   - Summarize Debriefing Findings and Issues
   - Review Summary, Develop Recommendations and
   - Incorporate Changes into Departmental Plan and
   - Training Courses

2. The team will review a written synopsis of, and lessons-learned from, the department test/drill (provided by the department). The team will then provide written or oral feedback on the test / drill.

3. Any other method coordinated between the department and the disaster team.

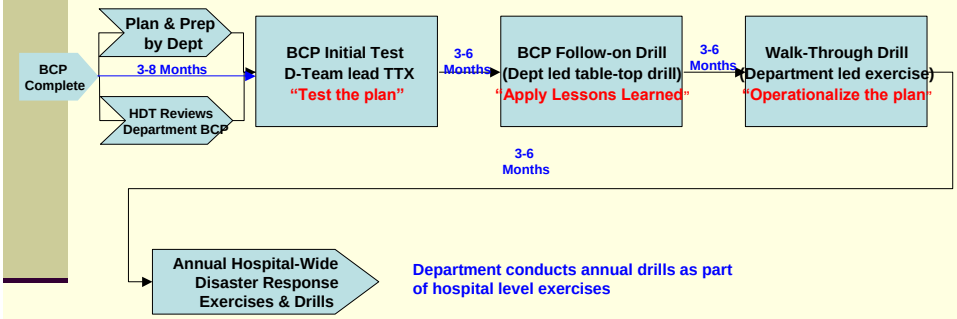
(c) Conduct of testing is done in accordance with the departmental leadership's intent, the goals and objectives of the department's leadership, and with consideration of the time/resource constraints faced by the department. Time/resource constraints will not prevent the department from testing or "drilling" the BCP.

(d) Whenever possible this department will seek to conduct BCP tests/drills in conjunction with other department's tests/drills so as to maximize cross-functional/interdepartmental coordination and identify commonalities and interdependencies. Determining how to best plan your test requirement with other required tests (e.g., hospital exercises imposed from Joint Commission, State and organization) is recommended to minimize parallel planning and disruption to normal business.

Assessment of Departmental BCP

BCP Testing

January 2006



Disaster Coordinator Presentation 2-3 March 2006

13