

APPENDIX 5 CONTINUITY OF OPERATIONS PLAN (COOP)

I. AGENCIES

Primary Agency <ul style="list-style-type: none">• Johnson County Health Department (JCHD)	Supporting Agencies <ul style="list-style-type: none">• Johnson County Emergency Management & Homeland Security (JCEMHS)• Johnson County Facilities (JCF)• Johnson County Information Technology Services (JCITS)• Johnson County Office of Financial Management (JCOFM)
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II. INTRODUCTION

Johnson County Health Department (JCHD) and its community partners must be prepared to respond to a wide range of situations that threaten the health and well being of their constituents. In many cases these situations will result in resource reductions (e.g. uninhabitable facilities, diminished personnel, etc) within responding agencies to a level where normal operations will not be possible. If resources are reduced to a level where normal operations must cease, JCHD must ensure that essential agency operations are continued. The following Continuity of Operations Plan (COOP) sets response concepts for JCHD in order to continue essential functions in the event that JCHD's facilities or personnel are affected by a natural disaster, disease outbreak, or other emergency or event.

III. PURPOSE

The purpose of this appendix is to establish guidance to ensure that essential functions for JCHD are identified before and event or emergency with a concept for their continuation. The COOP enables JCHD to operate from alternate location(s), should primary facilities become uninhabitable and ensures that JCHD can:

- Maintain a high level of readiness
- Implement the COOP both with and without warning
- Become operational no later than 12 hours after activation
- Maintain sustained operations for up to 30 days
- Take maximum advantage of existing agency infrastructure

IV. SCOPE

The provisions of this appendix apply to all personnel employed with JCHD. This appendix is a tool to ensure continuity of operations for all health department essential services. This appendix is applicable to all manmade or natural emergencies and threats that require a departmental response as well as preplanned events.

This document is for use by JCHD, during situations that require the relocation or re-establishment of essential functions. The scope of the COOP does not apply to temporary disruptions of service during short-term building evacuations or other situations where services are anticipated to be restored within a short period of time.

JCHD will maintain and update this appendix and may provide community partners with a copy. A copy of this appendix shall be maintained at JCHD.

Support from private entities, state agencies and local governments as described in this appendix will be coordinated with the responsible entities when applicable.

V. PLANNING ASSUMPTIONS & CONSIDERATIONS

General

- Emergencies and events, may affect JCHDs ability to provide essential departmental services and to provide support to other agencies.
- Personnel and other resources from JCHD will be made available to continue essential departmental services.
- Key staff will be available to perform the necessary procedures described in this Appendix.
- Johnson County ITS will be available to provide technical support for any COOP activation, including Alternate/Secondary facility setup, data recovery and IT setup.
- Communications equipment and lines are available to establish backup communications at alternate and/or secondary facilities.
- Emergencies and threats will be prioritized based upon their perceived impact on operations.
- Johnson County Office of Financial Management will be available to provide materials acquisitions and financial support including payroll, equipment and supply requests for any COOP activation.

Minor and Major Incidents

Incidents can be categorized as minor or major, yielding varying potential impacts. (*Attachments, Attachment I – Disaster Incident Impact Considerations*):

- Minor Incident (outside the scope of this document):
 - Potential for little or no physical infrastructure damage.
 - Potential loss of critical services such as electricity, HVAC, or communications.

- Temporary disruption of some critical systems, potential for little or no impact on building occupants water or electricity.
- Limited evacuation and/or partial facility shutdown.
- Major Incident (within the scope of this document):
 - Potential for significant physical infrastructure damage.
 - Potential for extended length of time event.
 - Potential for significant loss of personnel due to injury/illness.
 - Potential long-term loss or disruption of critical services.
 - Significant or complete loss of facility usage.
 - Potential for high building occupant and visitor injuries/casualties/illness.

VI. CONCEPT OF OPERATIONS/COOP EXECUTION

I. Activation

The following are situations that may cause the Health Administrator/designee to activate the JCHD COOP:

- JCHD closed to normal business because of a credible threat to the department and vicinity.
- An area of Johnson County has experienced:
 - a. A biological incident
 - b. Widespread utility failure
 - c. A natural disaster
 - d. A hazardous materials incident
 - e. A civil disturbance
 - f. A terrorist and/or military attack or threat
 - g. Other significant mass casualty / mass fatality incidents
- Multiple health department locations may require COOP activation at each site concurrently.
- Day to day operations are interrupted and JCHD must be closed for a substantial period of time.
- If the health department must close, an alternate facility will be activated at the discretion of the JCHD Health Administrator/designee (*Attachment A – Primary and Secondary DOC Facilities*).

The JCHD will activate the COOP Management Team comprised of:

- a. Health Director
- b. Administrative Services Division Director
- c. Disease Containment Division Director
- d. Family Health Services Division Director
- e. Health Education Division Director
- f. Public Health Information Technology Services Division Director
- g. Public Health Emergency Program Coordinator
- h. Emergency Planner
- i. Johnson County Facilities Representative

Other selected staff members may supplement the COOP Management Team as determined by the COOP Management Team. The COOP Management Team will ensure the continuance of essential functions by JCHD within 12 hours of activation and will be able to maintain operations for a minimum of 30 day as outlined in this document.

All staff necessary to perform the essential functions of JCHD will be contacted and advised accordingly including new supervisor and where to report (as needed).

In most cases, JCHD will receive a warning of at least a few hours prior to an incident. Under these circumstances, the process of activation would enable the partial, limited, or full activation of JCHD's COOP with a complete alert, notification of all personnel, and activation of the COOP Management Team, as is determined by the event may necessitate.

The Health Director/Designee will draft informational memoranda for dissemination to JCHD employees regarding the duration of alternate operations, pertinent information on payroll, time and attendance, duty assignments, travel authorizations, and reimbursement charges as needed. These memoranda will be distributed to relocated and non-essential personnel through normal communication methods and other available sources.

II. Essential Services

JCHD has prioritized essential services of JCHD so these services can be maintained during an emergency. JCHD has prioritized essential services using the following definitions:

A. *Level 1 - Function cannot be delayed*

a. Disease Containment

- i. Disease Investigation - Disease containment is a primary function of JCHD. As is feasible, under any and all circumstances possible, disease investigation shall not cease. The numbers of staff needed to complete reports and investigations and perform surveillance will be based on the current situation and decisions by incident command. Surge capacity can be instituted as needed. If COOP activation is necessary but no current outbreak exists non-essential personnel in relation to disease investigation may not be needed.
- ii. Dispensing/Vaccination for Disease Containment - Local cache and SNS Dispensing are primary functions of JCHD in the event of a public health emergency. If dispensing and vaccination are needed functions of JCHD, all staff is considered essential and will be assigned needed positions. If no SNS

Dispensing/Vaccination operations are ongoing disregard as level 1 function. Refer to Biological Incident Annex (BIA) or Appendix 1 – Prophylaxis Dispensing and Vaccination for specific guidelines and plans for dispensing.

b. Public Information

This is a PIO function whether it is an internal health department PIO under ICS or an integrated function within County operations. Please refer to the Communications Appendix 3, Biological Incident Annex (BIA) and the County Communication Plan.

c. Fiscal and Supply Management/Strategic National Stockpile (SNS)

The Finance and Administration section of JCHD ICS will assure proper tracking of all emergency related costs including staff/volunteer time, supplies, equipment, and expenses. JCOFM follows purchasing guidelines 110.180 during normal daily operations and will continue during activation of the COOP.

d. Active Tuberculosis (TB) Control (Active cases and those on Direct Observed Therapy [DOT])

Control of active TB is an essential function of public health and disease containment. Those who are identified as active cases on direct observed therapy will continue to receive services. New active case investigation will be initiated.

e. Response Operations (Mass Dispensing & Strategic National Stockpile (SNS)

SNS request and management is a responsibility of JCHD. As the coordinating agency for all SNS supplies to the county, the delivery of this function must be maintained as needed during operations (*Appendix 2 – Strategic National Stockpile (SNS) Request and Management*).

B. *Level 2 - Function can be delayed, but should resume as soon as possible*

a. STD Evaluation/Control/Treatment

In order to establish this as a level 2 function, lab support is a primary concern. This area can be demoted to level 3 as appropriate based on support available.

b. Adult/Child Care Complaints

Adult/Child Care complaints will be addressed as support is available and can be demoted to level 3 if necessary.

c. Women Infant and Children (WIC) Vouchers (current clients)

The state may provide guidance regarding WIC Vouchers during a COOP situation (including authorizing alternate delivery method or laxed policies).

d. Latent TB Infection

Under this level, all other TB Control activities will be implemented.

C. *Level 3 - Function can be delayed until normal business operations resume*

a. Family Planning

i. Pre-natal

ii. Birth Control

b. New WIC Applicants

c. Routine Immunizations

d. Nurse Outreach (Highest Risk Clients)

e. Health Education

f. All other services not previously mentioned

III. Essential Personnel

Essential personnel are those that have been designated as command and general staff within JCHD and those supporting public health operations. If activation of the COOP is during a non public health emergency (i.e. routine disease investigation, non-dispensing/vaccination situation), essential personnel will be those supporting level 1 operations, all other staff may be sent home and only called in as necessary at the discretion of the COOP Management Team.

If complex disease investigations and/or mass prophylaxis dispensing/vaccination operations are occurring, all public health staff are considered essential. (*Appendix 1 – Dispensing and Vaccination*).

Essential personnel will report to designated locations based on internal call trees and assume their predetermined Incident Command and Response roles found in (*Attachment – Emergency Response Contact List*)

Since alternate facility space and support capabilities may be limited, the Health Director/Designee may deem as “essential” only those staff that possesses the skills and experience needed for the execution of essential services.

A. *Line of Succession*

Line of Succession is critical in the event that leadership is unavailable, debilitated, or incapable of performing their legally authorized duties, roles, and responsibilities.

Line of succession are not only a COOP function, these are used to support day to day operations, but will be critical in an emergency.

IV. Operations

During COOP activation, JCHD's operating hours will be determined based on the necessitating incident/event to be determined by the COOP Management Team. As additional services come on line, these hours may be adjusted. Departmental Operations Center (DOC) operational hours will be determined at the time of the event and will depend on the necessary/available response capability.

The ability to execute JCHD COOP following an incident that occurs with little or no warning will depend on the severity of the incident's impact on the physical facilities, and whether JCHD personnel are present in the affected facility or in the surrounding area. The accountability of JCHD personnel throughout all phases of emergencies, including COOP activation, is imperative. The Johnson County Emergency Plan provides for such accountability.

A. Alternate Facilities

The COOP Management Team will determine the alternate facility for use if it is necessary to relocate the JCHD. The alternate facility will be somewhere other than the normal facility, that can be used to carry out essential functions in a COOP situation. The alternate facility chosen will be based on the risk assessment, perceived threat level, and/or execution timeframe. The primary facilities occupied by JCHD and their designated alternate locations will be identified and available in case of need. (*Attachments, Attachment A - Primary and Secondary DOC Facilities*)

B. Billing/Medical Records

Depending on the effecting event, medical records and their management will vary. Paper backups exist for most electronic files, but no current backup exists for electronic medical records. This includes those for family planning/prenatal and MEDS|POD. Hand written patient registration documents exist for mass prophylaxis utilizing MEDS|POD. If MEDS|POD system is unavailable mass prophylaxis dispensing will be conducted entirely by paper as outlined in Appendix 1 – Dispensing and Vaccination. Prenatal currently does not have a backup system.

V. Communications

Johnson County Information Technology Services is the primary support agency for JCHD in all telecommunications and information systems support. Any need for technical assistance, physical technology setup, and telecommunications will be provided by Johnson County ITS at any relocation facility. The system support will be coordinated between ITS and Technical Services Director.

VI. Alert & Notification

A. Alert Procedures

The emergency call-down roster for the JCHD is located in (*Attachments, Attachment C - JCHD Call Down Roster*).

All staff should remain in place at office or home until specific guidance is received from their direct supervisor. Internal staff will be notified via internal call-down list as needed.

JCHD will notify KDHE of the situation and that the COOP is being activated.

VII. ROLES & RESPONSIBILITIES

A. Johnson County Health Department will:

- Initiate internal COOP Management Team
- Activate the public health emergency response and begin the notification process
- Prioritize public health services.
- Respond as needed.

B. Johnson County Emergency Management & Homeland Security Will:

- Manage EOC Operations
- Coordinate resources

C. Johnson County Facilities Will:

- Coordinate equipment relocation
- Provide moving trucks
- Coordinate loading, transporting, and unloading equipment and supplies
- Manage internal warning actions within county facilities

D. Johnson County ITS Will:

- Provide technical support for staff
- Provide data recovery
- Provide technical support and setup at primary and secondary facilities
- Maintain primary and alternate communication systems until normal operations can be resumed

E. Johnson County Office of Financial Management Will:

- Coordinate fiscal monitoring, grant coordination, budgeting, auditing, billing, and payroll
- Track staff/volunteer time
- Monitor and control disaster related expenses during the recovery process

VIII. ADMINISTRATION AND SUPPORT

Refer to *BIA Section VI Administration and Support*

IX. AUTHORITIES

Refer to *BIA Section VII Authorities*

X. ACRONYM/TERM DEFINITION LIST

Glossary of Acronyms

CDC	Center for Disease Control and Prevention
DOC	Departmental Operations Center
EMS	Emergency Medical Services
ICS	Incident Command System
JIC	Joint Information Center
JOC	Joint Operations Center
KDHE	Kansas Department of Health and Environment
LEOC	Local Emergency Operations Center
NAPH	Name, Address, Phone, Health History Form
NIMS	National Incident Management System
PHIX	Public Health Information Exchange
PIO	Public Information Officer
POD	Point of Dispensing
PPE	Personal Protective Equipment
SEOC	State Emergency Operations Center
SNS	Strategic National Stockpile
SOG	Standard Operating Guide
WebEOC	Web based Emergency Operations Center