New York State
Continuity of Operations Planning

2018 NYS Continuity of Operations
Resource Package

NEW YORK STATE | Emergency Management

Prepared by the New York State
Office of Emergency Management - Planning Section

October 2018

NEW YORK STATE
CONTINUITY OF OPERATIONS PLANNING

Facility Assessment Form

PREPARED BY THE NEW YORK STATE
OFFICE OF EMERGENCY MANAGEMENT - PLANNING SECTION

October 2018

Facility Information

Agency

Municipality

Information Technology Services

Are you on the NYS Enterprise?					☐ Yes	☐ No
Location of T-1/Data Transmission Lines?				☐ Buried	☐ Pole to Building	
Are the agency IT services provided by a vendor?					☐ Yes	☐ No
Please indicate if your IT hardware is on-site:				☐ On-Site	☐ Off-Site	
Are the server rooms secure and/or protected?					☐ Yes	☐ No
Where are backups sent?			☐ CNSE	☐ Utica Data Hub/Other		
Are system updates performed regularly?					☐ Yes	☐ No
How is information stored?	☐ Hard Drives		☐ Cloud Service	☐ External Server		
What is backed up?		☐ Email	☐ Documents & Data		☐ Full Disk	
How frequent are backups performed?		☐ Hourly	☐ Daily	☐ Weekly		☐ Monthly
System security:		☐ Anti-Virus	☐ Intrusion Detection		☐ Firewall	

Energy Resources

Primary

Source of primary energy:	☐ Local utility (Fuel/Electricity)	☐ Private substation	☐ On-site generation (solar/wind)
Location of primary transmission lines:		☐ Buried	☐ Pole to Building
Location of primary fuel inlets:		☐ Buried	☐ On-site storage

Back-Up System(s)

Is there a generator(s) on site?			☐ Yes	☐ No
Are the generators automatic?			☐ Yes	☐ No
What fuel does the generator use?	☐ Natural Gas	☐ Diesel	☐ Propane	

Facility Security

Is the facility a secure facility, with limited access?			☐ Yes	☐ No
Type of limited access system:	☐ Controlled Access by Security Personnel	☐ RFID/Key Card Access	☐ Physical Key	
Security Cameras:			☐ Yes	☐ No
Electronically Controlled Locking System:			☐ Yes	☐ No
Security personnel?	☐ Yes ☐ No	**Armed?**	☐ Yes	☐ No
Alarm System? ☐ Yes ☐ No	**Automatic notification of E-911?**		☐ Yes	☐ No

Facility Emergency Systems Information

Is the agency the only tenants in the building?					☐ Yes	☐ No
Identify tenants in building:		☐ Local/County	☐ State	☐ Federal		☐ Private
Are there:	☐ Fire Alarms		☐ Sprinklers	☐ Visible Alarms		☐ Multiple exits
Source of water for sprinklers:		☐ Lake/Pond	☐ Building water storage			☐ Municipal
Are there any backup sources for the sprinklers?					☐ Yes	☐ No
Are there any redundant fire suppression system pumps?					☐ Yes	☐ No
Communication Systems:	☐ PA System	☐ Two-way Radio	☐ Auto-Broadcast over Phone		☐ Email Alerts	
Is the building equipped with Emergency Lighting?					☐ Yes	☐ No
Is there an Occupant Emergency Plan in place?					☐ Yes	☐ No
Frequency of Emergency System Tests:	☐ Once a year	☐ Every 6 months	☐ Every 3 months		☐ Monthly	

Water and Air Resources

Water			
Primary water source?		☐ On-site well	☐ Municipal
Water-treatment		☐ On-Site	☐ Off-Site
Air and Ventilation			
Where is the air-intake for the building?	☐ Ground-level	☐ Ground-level, secured	☐ Rooftop
Are there exhaust louvers for the building?	☐ Ground-level	☐ Ground-level, secured	☐ Rooftop
What types of air filtration is present for the facility?			

Other Information

NEW YORK STATE
CONTINUITY OF OPERATIONS PLANNING

RISK & BUSINESS IMPACT ANALYSIS
Hazard Definitions

NEW YORK STATE | Emergency Management

PREPARED BY THE NEW YORK STATE
OFFICE OF EMERGENCY MANAGEMENT – PLANNING SECTION

October 2018

Risk Analysis:
Hazard List & Definitions

(All Hazards/Risks should considered under a credible, worst-case scenario; use history as an indicator)

Active Shooter: An individual actively engaged in killing or attempting to kill people in a confined and populated area.[1]

Biological Agent Release: Biological agents include bacteria, viruses, fungi, other microorganisms, and their associated toxins. They have the ability to adversely affect human health in a variety of ways, ranging from relatively mild allergic reactions to serious medical conditions, even death. Release of any of these items could be accidental or with the intent to cause harm.[2]

Cyber Incident: Any malicious act or suspicious event that: Compromises, or was an attempt to compromise, the Electronic Security Perimeter or Physical Security Perimeter of a Critical Cyber Asset, or, Disrupts, or was an attempt to disrupt, the operation of a Critical Cyber Asset.[3]

Earthquakes: Term used to describe both sudden slip on a fault, and the resulting ground shaking and radiated seismic energy caused by the slip, or by volcanic or magmatic activity, or other sudden stress changes in the Earth.[4]

Fire - External: The phenomenon of combustion manifested in light, flame, and heat. An external fire refers to a fire which begins outside of the building which houses the agency, such as a wildfire, or a near-by structure fire, and affects the building which houses the agency.[5]

Fire - Internal: The phenomenon of combustion manifested in light, flame, and heat. An internal fire refers to a fire which begins inside the building which houses the agency. The cause of the fire can be a number of things, as long as the cause is believed to be within the building.[5]

Flooding - External: A general and temporary condition of partial or complete inundation of two or more acres of normally dry land area or of two or more properties (at least one of which is the policyholder's property) from:

- Overflow of inland or tidal waters; or
- Unusual and rapid accumulation or runoff of surface waters from any source; or
- Mudflow; or
- Collapse or subsidence of land along the shore of a lake or similar body of water as a result of erosion or undermining caused by waves or currents of water exceeding anticipated cyclical levels that result in a flood as defined above.[6]

Flooding - Internal: Caused by the events such as broken water pipes, backed up sewer lines, clogged drains, sump pump failures, plumbing fixture failures, open water valves, and other circumstances, within the confines of the structure, causing an accumulation of water throughout.[7]

HazMat Release - External: A hazardous material is any substance or agent (biological, chemical, radiological, and/or physical), which is capable of posing an unreasonable risk to humans, the environment, and property. An external release of said materials occurs externally to the facility, and can be through a number of means, including transportation accident, such as vehicle or rail; an intentional act, where a material has been intentionally released; or any other number of potential scenarios where a material has been released outside of the facility.[8]

1. https://www.dhs.gov/xlibrary/assets/active_shooter_booklet.pdf
2. https://www.osha.gov/SLTC/biologicalagents/index.html
3. https://openei.org/wiki/Definition:Cyber_Security_Incident
4. https://earthquake.usgs.gov/learn/glossary/?term=earthquake
5. https://www.merriam-webster.com/dictionary/fire0
6. https://www.fema.gov/national-flood-insurance-program/definitions#F
7. http://www.capitolcenter.info/pdf/Internal%20Flooding%20Procedures.pdf
8. http://emergency.tufts.edu/guide/hazardous-spill/

Risk Analysis:
Hazard List & Definitions

(All Hazards/Risks should considered under a credible, worst-case scenario; use history as an indicator)

HazMat Release - Internal: A hazardous material is any substance or agent (biological, chemical, radiological, and/or physical), which is capable of posing an unreasonable risk to humans, the environment, and property. An internal release of said materials occurs within the confines of the facility. This can occur through accidental release and exposure, or through means of malice by an individual.[8]

Hurricanes / Tropical Storm (Tropical Cyclone): A warm-core non-frontal synoptic-scale cyclone, originating over tropical or subtropical waters, with organized deep convection and a closed surface wind circulation about a well-define center.
- A tropical storm is a cyclone in which the maximum sustained surface (SST) wind speed is 38 mph or less.
- A hurricane is a cyclone which has formed in the Northern Hemisphere east of the International Dateline to the Greenwich Meridian and has a maximum SST wind speed of 74 mph or greater. Hazards from a tropical cyclone depend on the location of the facility being evaluated, and can include coastal flooding/storm surge, flooding from precipitation, and wind damage.[9]

HVAC Failure: HVAC, or Heating, Ventilation, and Air Conditioning, systems are used to provide heating and cooling, as well as adequate air circulation and ventilation to a facility. They also are used to filter particulates from the air to encourage cleaner air for within a location. A failure of one can be either from a mechanical/wear-related issue, such as a belt breaking, a short, or some other related issue; or, it could be as a result of malicious intent, affecting a facility through its HVAC system.[10]

IT/Communications Failure: Communication systems are the various processes, both formal and informal, by which information is passed within a facility, or between the entity and external/internal partners.[11] IT, or Information Technology, is a system of interconnected devices (equipment) used in the automatic acquisition, storage, manipulation, management, movement, control, display, switching, interchange, transmission, or reception of data or information.[12] A failure of either of these systems constitutes a lack of data transmission, loss of the ability to relay messages between individuals, and total system loss, if the failure is significant enough. A failure of IT/Communications systems can be caused through internal means, such as a glitch or equipment malfunction; or, it can be caused by external means, such as power supply issues or cyber incident.

Landslides: The movement of a mass of rock, debris, or earth down a slope. These are a type of "mass-wasting," or any down-slope movement of soil and rock from the direct influence of gravity.[13]

Pandemic or Disease Outbreak: A disease outbreak is an event where a disease occurs in greater numbers than expected in a community or region during a season. An outbreak can occur in a local region, or extend out to numerous countries; and it can last from days to years. A pandemic is an outbreak at a global level. The rate of transmission and effect on individuals varies with each individual and the disease which is being transmitted.[14]

9. https://www.nhc.noaa.gov/aboutgloss.shtml#t
10. http://www.businessdictionary.com/definition/HVAC.html
11. https://www.inc.com/encyclopedia/communication-systems.html
12. https://definedterm.com/information_technology_system
13. https://www.usgs.gov/faqs/what-a-landslide-and-what-causes-one?qt-news_science_products=7#qt-news_science_products
14. https://www.webmd.com/cold-and-flu/what-are-epidemics-pandemics-outbreaks#1

Risk Analysis:
Hazard List & Definitions

(All Hazards/Risks should considered under a credible, worst-case scenario; use history as an indicator)

Power Outage—External: A power outage is a short or long-term state of electric power loss in a given area or section of a power grid. It could affect a single house, building, or an entire city, depending on the extent of the damage or cause of the outage. An external outage refers solely to any outage where the source of the outage occurs outside of the building which houses the agency, such as a transformer failing.[15]

Power Outage—Internal: A power outage is a short or long-term state of electric power loss in a given area or section of a power grid. It could affect a single house, building, or an entire city, depending on the extent of the damage or cause of the outage. An internal outage refers solely to the building which houses the agency losing power due to some internal failure, such as a breaker tripping.[15]

Radiological Fixed Site Release: A fixed nuclear facility is a stationary nuclear installation that uses or produces radioactive materials in its normal operations, and can include power plants and other fixed facilities. A release of materials could be a leak in the containment unit, resulting in groundwater and surrounding area contamination, or it could be as severe as a large-scale release, with potential plume and air contamination.[16]

Severe Weather: Severe weather can include numerous hazardous conditions, such as thunderstorms, tornadoes, hail, and more.[17] For the purposes of this program, severe weather will include any and all hazards related to meteorological events, except those that are separately defined, such as "Severe Winter Storm," "Flooding—External," and "Hurricanes/Tropical Storms."

Severe Winter Storm: A prolonged event involving snow or ice. The characteristics of severe winter storms are determined by the amount and extent of snow or ice, air temperature, wind, and event duration.[18]

Structural Collapse: When internal load bearing structural elements fail, a building will collapse into itself and exterior walls are pulled into the falling structure. This could be caused by construction activity, earthquake, or fire, and may result in a dense debris field with a small footprint. If a structural collapse is caused by an explosion or natural forces (such as weather), then the collapse may occur in an outward direction, resulting in a less dense debris field with a larger footprint.[19]

15. https://www.techopedia.com/definition/13085/power-outage
16. FEMA P-1028. *Radiological Emergency Preparedness Program Manual.* January 2016.
17. https://www.ready.gov/severe-weather
18. https://planningforhazards.com/file/675/download?token=aECbrv2t
19. https://www.osha.gov/SLTC/emergencypreparedness/guides/structural.html

Risk Analysis:
Hazard List & Definitions

(All Hazards/Risks should considered under a credible, worst-case scenario; use history as an indicator)

Terrorism: The unlawful use of force and violence against persons or property to intimidate or coerce a government, the civilian population, or any segment thereof, in furtherance of political or social objectives.[20]

- **International Terrorism:** Perpetrated by individuals and/or groups inspired by or associated with designated foreign terrorist organizations or nations (state-sponsored).[21]

- **Domestic Terrorism:** Perpetrated by individuals and/or groups inspired by or associated with primarily U.S.-based movements that espouse extremist ideologies of a political, religious, social, racial, or environmental nature.[21]

Water, Sewer, or Natural Gas Failure: A utilities failure is any infrastructure failure that results in the loss of a key utility, for the purpose of this tool that is limited to Water, Sewer, and/or Natural Gas, as other utilities are highlighted as standalone hazards. This loss of utility could be a secondary hazard caused another event, either natural, technological, or human caused; or, it could be a standalone event. These three utilities also pose their own consequences and secondary (or tertiary) hazards, such as loss of potable drinking water, hazardous materials release, and/or explosion/fire.[22]

20. https://www.law.cornell.edu/cfr/text/28/0.85
21. https://www.fbi.gov/investigate/terrorism
22. http://www.ucapd.org/index.php/utility-failure/

Hazard/Risk Assessment: Hazard List

TABLE A

For your agency facility, check hazard/risks faced in the past or possible future

☐ Active Shooter	☐ Biological Agent Release
☐ Cyber Incident	☐ Earthquakes
☐ Fire - External	☐ Fire - Internal
☐ Flooding - External	☐ Flooding - Internal
☐ HazMat Release - External	☐ HazMat Release - Internal
☐ Hurricanes / Tropical Storms	☐ HVAC Failure
☐ IT/Communications Failure	☐ Landslides
☐ Pandemic or Disease Outbreak	☐ Power Outage - External
☐ Power Outage - Internal	☐ Radiological Fixed Site Release
☐ Severe Weather	☐ Severe Winter Storm
☐ Structural Collapse	☐ Terrorism
☐ Water, Sewer, Natural Gas Failure	☐ (Other) _____
☐ (Other) _____	☐ (Other) _____
☐ (Other) _____	☐ (Other) _____

Hazard/Risk Assessment Worksheet

HAZARD/RISK ———↑

AGENCY ———↑

1. Could hazard occur and cause an impact?

☐ No
☐ Yes

2. Has hazard occurred and caused an impact?

☐ No
☐ Yes

3. Could hazard pose a consequence to employees?

☐ Highly Likely
☐ Some Potential
☐ No

4. *Could hazard pose a consequence to the facility or assets?*

☐ Highly Likely
☐ Some Potential
☐ No

5. *Has hazard mitigation been performed for this hazard?*

☐ Yes
☐ No

_____

Name of individual completing questionnaire

_____

Title

_____

Date

Scoring Guide	
Hazard Analysis Score	**Qualitative Ranking**
31 - 40	
21 - 30	
10 - 20	
0 - 9	

Essential Functions day-to-day operations		Down Time of Functions		Resources used to perform this function
		Recovery Time Object (RTO) (operations)	Recovery Point Objective (RPO) (data)	i.e. P Network drive, special software, etc.
Ex. 1	Example: Payroll	3 weeks	30 days	LATS, Server Access, other payroll software
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Lines of Succession Planning

Section Name:			
Mission Essential Staff Position	Primary Backup	Secondary Backup	Tertiary Backup

NEW YORK STATE
CONTINUITY OF OPERATIONS PLANNING

Business Process Analysis

PREPARED BY THE NEW YORK STATE
OFFICE OF EMERGENCY MANAGEMENT - PLANNING SECTION

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Mission Essential Functions – Business Process Analysis

Please name the individual mission essential functions below, and include the corresponding Division/Section within the agency that is responsible for the MEF. Then proceed to the BPA Sheet.

MEF #	Division/Section	Mission Essential Functions & Statement
MEF #1		
MEF #2		
MEF #3		
MEF #4		
MEF #5		
MEF #6		
MEF #7		
MEF #8		
MEF #9		
MEF #10		

Mission Essential Functions – Business Process Analysis

Please name the individual mission essential functions below, and include the corresponding Division/Section within the agency that is responsible for the MEF. Then proceed to the BPA Sheet.

MEF #	Division/Section	Mission Essential Functions & Statement
MEF #11		
MEF #12		
MEF #13		
MEF #14		
MEF #15		
MEF #16		
MEF #17		
MEF #18		
MEF #19		
MEF #20		

Business Process Analysis – Instructions and Topic Details

Instructions

After completing the MEF List, please proceed to the BPA Sheet and answer the following topics as they correspond to all the MEFs. Details about the particular topics are below:

Line

Process – Narrative or Diagram	**Personnel Needed**	**Mission Essential Systems, Files, Records & Data**

Description

Name MEF: Place MEF Name Here
Narrative: Highlight the necessary steps to perform the MEF. This can be done through either a narrative format, or a diagram/flowchart can be utilized. If the space provided is not adequate, attach additional documents as needed, and identify within the cell which document applies to each MEF.
Ex: Within the Cell: Appendix A1; On the Document: MEF #1

- Can the task be performed by mid-level or lower-level staff, or does it require leadership/decision-makers/policy makers?
  - Is there any formal, and/or statutory, authority required to complete the MEF?

Identify the necessary equipment/files/records/data to perform the MEF:
- Can the MEF be performed virtually, or does it require on-site computer(s)?
- Does the MEF require specialized software?
- Does the MEF require constant external communication? (i.e. Internet connection, Email, etc.)

Line

Critical Resources & Logistics   **Dependencies & Interdependencies (Contracts, Vendors, & Supplies)**

Description

- What resources/supplies/hardware is required to perform the MEF?
- Is there a need, or a plan in place, to mobilize any/all resources?

- What organizations do you rely on to complete the MEF?
  - What needs do they fulfill for the MEF
  - Can those needs be met outside of normal business?
- What organizations rely on the MEF?
  - Of those organizations, which ones are of the highest priority, with reference to the need of the MEF?
- What contracts and/or supplies are needed to complete the MEF?

Line

Vital Records   **Other (Signatures, Approvals, Time Constraints, Processing Instructions)**

Description

- What documents/records are needed to perform the MEF?
- If needed, can they be accessed and/or utilized remotely?

Utilize this section to add any additional comments, needs, or other information, which was not covered by the other sections.

Business Process Analysis

MEF #1

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

MEF #2

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

Business Process Analysis

MEF #3

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

MEF #4

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

Business Process Analysis

MEF #5

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

MEF #6

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

Business Process Analysis

MEF #7

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

MEF #8

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

Business Process Analysis

MEF #9

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

MEF #10

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

Business Process Analysis

MEF #11

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

MEF #12

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

Business Process Analysis

MEF #13

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

MEF #14

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

Business Process Analysis

MEF #15

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

MEF #16

Process – Narrative or Diagram | **Personnel Needed** | **Mission Essential Systems, Files, Records & Data**

Name MEF:

Narrative:

Critical Resources & Logistics | **Dependencies & Interdependencies**

Vital Records | **Other**

Business Process Analysis

MEF #17

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

MEF #18

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

Business Process Analysis

MEF #19

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

MEF #20

Process – Narrative or Diagram

Name MEF:

Narrative:

Personnel Needed

Mission Essential Systems, Files, Records & Data

Critical Resources & Logistics

Dependencies & Interdependencies

Vital Records

Other

NEW YORK STATE
CONTINUITY OF OPERATIONS PLANNING

Alternate Facility Evaluation Form

PREPARED BY THE NEW YORK STATE
OFFICE OF EMERGENCY MANAGEMENT - PLANNING SECTION

October 2018

Alternate Facility Evaluation Form

Introduction and Instructions:

Purpose: To provide a checklist for identifying and assessing an alternate facility for day-to-day operations for the agency. The data collected about the facility will be used to determine a facility's suitability as an alternate location from an all hazards approach.

Facility Information

Facility Name: _____

Street Address: _____

City: _____ Zip Code: _____

Facility Owner/Operator: _____

Facility Contact- Business Hours

Primary-Name: _____

Work Phone: _____ Email: _____

Cell Phone: _____ Additional Contact: _____

Alternate-Name: _____

Work Phone: _____ Email: _____

Cell Phone: _____ Additional Contact: _____

Emergency Contact 24/7

Primary-Name: _____

Work Phone: _____ Email: _____

Cell Phone: _____ Additional Contact: _____

Alternate-Name: _____

Work Phone: _____ Email: _____

Cell Phone: _____ Additional Contact: _____

Location Specifications

Is the Facility subject to the same risks as the primary facility: Yes ☐ No ☐

> Is the facility owned by the agency or is the facility contracted through OGS:
>
> Owned by Agency ☐   Contracted through OGS ☐   Private Contract ☐
>
> Other ☐ _____

Is the space occupied and/or identified as an Alternate Facility for another entity: Yes ☐ No ☐ Both ☐

Square footage available in primary work area (approx. 40ft^2 per person): _____

Layout of primary work area (office, warehouse, etc.): _____

Number and characteristics of supplemental rooms or work area; please note if rooms could accommodate sleep/respite: *Indicate below*

Room/Area #1	**Room/Area #2**	**Room/Area #3**	**Room/Area #4**
How many people can it accommodate: _____	How many people can it accommodate: _____	How many people can it accommodate: _____	How many people can it accommodate: _____
Total sq. ft.: _____	Total sq. ft.: _____	Total sq. ft.: _____	Total sq. ft.: _____
Office Equipment (i.e. cubicles) ☐	Office Equipment (i.e. cubicles) ☐	Office Equipment (i.e. cubicles) ☐	Office Equipment (i.e. cubicles) ☐

Is the Facility compliant with current Americans with Disabilities Act (ADA) Guidelines?

− Elevators	− Ramps	Yes ☐ No ☐
− Automatic Doors	− Accessible Restrooms	
− Etc.		

Exterior/Perimeter/Lighting

Does any exterior or perimeter light have an independent auxiliary power source as required by the jurisdiction having authority, or based on a state or local law enforcement security assessment? Yes ☐ No ☐

Does the interior/exterior have sufficient lighting to maintain a safe work place as required by the jurisdiction having authority? Yes ☐ No ☐

> Is parking available? *Indicate number of spaces below* Yes ☐ No ☐
>
> Number of spaces (free): _____   Number of spaces (paid): _____

Utilities

Is there adequate power with backup to operate essential functions? (i.e. AC, heat, elevator)	Yes ☐	No ☐
Are back-up generators located on the physical site?	Yes ☐	No ☐
Are an adequate number of qualified individuals available to operate and monitor the backup generator(s) per OSHA and the jurisdiction having authority requirements?	Yes ☐	No ☐

Does facility have operational HVAC system?	Yes ☐	No ☐

HVAC Fuel Source: Oil ☐   Propane ☐   Natural Gas ☐   Other ☐   Please describe below:

_____

Amenities

Restrooms: *Indicate specific numbers below*	Yes ☐	No ☐

Male: _____   Female: _____   Unisex: _____   Accessible: _____

Showers: *Indicate specific numbers below*	Yes ☐	No ☐

Male: _____   Female: _____   Unisex: _____   Accessible: _____

Are break areas available?	Yes ☐	No ☐
Does facility have a kitchen/vending?	Yes ☐	No ☐

Is the facility accessible by mass transit? *Indicate specific resources below with distance from facility*	Yes ☐	No ☐

Bus: Yes ☐   No ☐   Distance: _____

Subway: Yes ☐   No ☐   Distance: _____

Other: Yes ☐   No ☐   Distance: _____

Does the facility have contracts with janitorial services?	Yes ☐	No ☐
Are there Hotels/Motels within one mile?	Yes ☐	No ☐
Is there restaurant/grocery/ATM available 24/7 within 2 miles?	Yes ☐	No ☐

Communications

Phones Yes ☐ No ☐	Phones Yes ☐ No ☐	Phones Yes ☐ No ☐	Phones Yes ☐ No ☐
If Yes How Many Ports: _____	If Yes How Many Ports: _____	If Yes How Many Ports: _____	If Yes How Many Ports: _____
Internet Yes ☐ No ☐	Internet Yes ☐ No ☐	Internet Yes ☐ No ☐	Internet Yes ☐ No ☐
# of Data Ports: _____	# of Data Ports: _____	# of Data Ports: _____	# of Data Ports: _____
Public Wi-Fi ☐	Public Wi-Fi ☐	Public Wi-Fi ☐	Public Wi-Fi ☐
ITS Enterprise Network ☐	ITS Enterprise Network ☐	ITS Enterprise Network ☐	ITS Enterprise Network ☐
Standard Office Equipment ☐	Standard Office Equipment ☐	Standard Office Equipment ☐	Standard Office Equipment ☐
ADA Compliant ☐	ADA Compliant ☐	ADA Compliant ☐	ADA Compliant ☐

Are additional tables/chairs available for use? *Indicate amounts below*   Yes ☐   No ☐

Tables: _____   Chairs: _____

Is there a telephone system in the facility? *Indicate provider and contact information below and whether or not a VOIP phone can be connected*   Yes ☐   No ☐

Provider: _____

Is there a radio system in the facility? *Indicate systems information below*   Yes ☐   No ☐

Is there a public-address system in the facility?   Yes ☐   No ☐

Is Internet available for Agency use in the facility? *Indicate specifics below*   Yes ☐   No ☐

Are fax machine/copier/scanner resources available? *Indicate specifics below*   Yes ☐   No ☐

Fax machine ☐   Copier ☐   Scanner ☐   Other ☐ _____

Security/Safety

Is there 24/7 security? *Indicate Specifics below* Yes ☐   No ☐

Key-card access control ☐   Alarm system ☐

Physical security presence ☐   Other ☐ Please describe: _____

Is the facility available 24/7? Yes ☐   No ☐

How is the facility accessed *Indicate below* (key, key-card, locked gate, etc.)?

Key ☐   Key Card ☐   Other ☐ Please describe: _____

Key code ☐   Guard gate ☐   _____

Primary POC For Granting Access:
Who is responsible for facility access control? *Indicate below*

Name: _____

Phone Number: _____

E-mail: _____

Outside provider ☐   Internal   No formal access   Other ☐
Please describe: Security ☐   control ☐   Please Describe:

_____   _____

Does a security barrier limit or control vehicle or pedestrian access to the facility? Yes ☐   No ☐

Is there a fire and safety plan per the jurisdiction having authority? Yes ☐   No ☐

Does the facility have a fire suppression system if required by the jurisdiction having authority? *Indicate below* Yes ☐   No ☐

Sprinkler system ☐   Fire Extinguishers ☐   Other ☐ Please describe:

Does the facility have first aid equipment if required by the jurisdiction having authority? *Indicate below* Yes ☐   No ☐

First Aid Kit ☐   Automated External Defibrillator   Other ☐ Please describe:
                         (AED) ☐

Proximity to nearest Medical Facility/Hospital. *Indicate distance and location below*

Location: _____   Distance: _____

Photos: (Include location and description)

Photo 1: Would you like to add a photo of the Facility? Yes ☐   No ☐
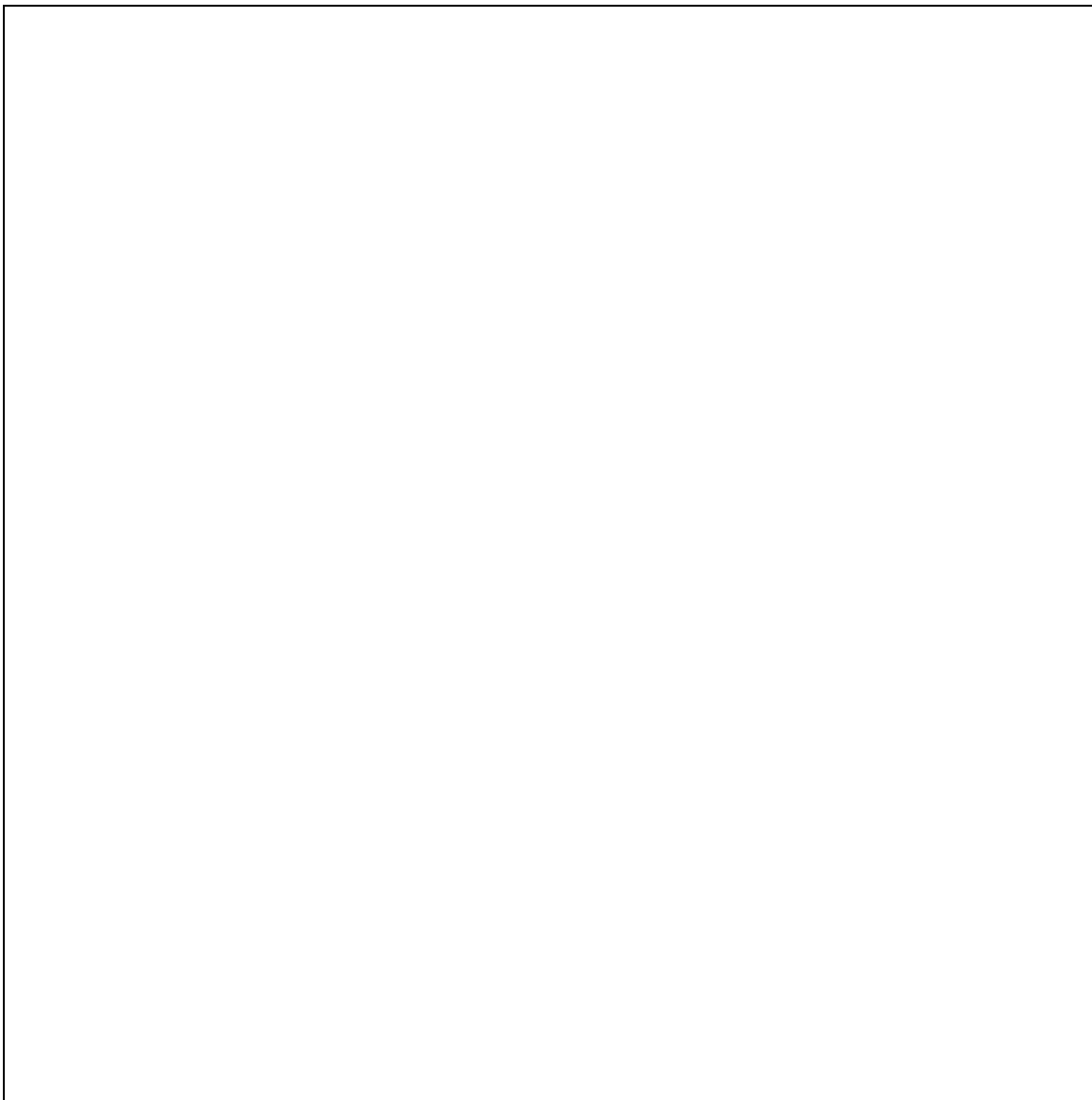
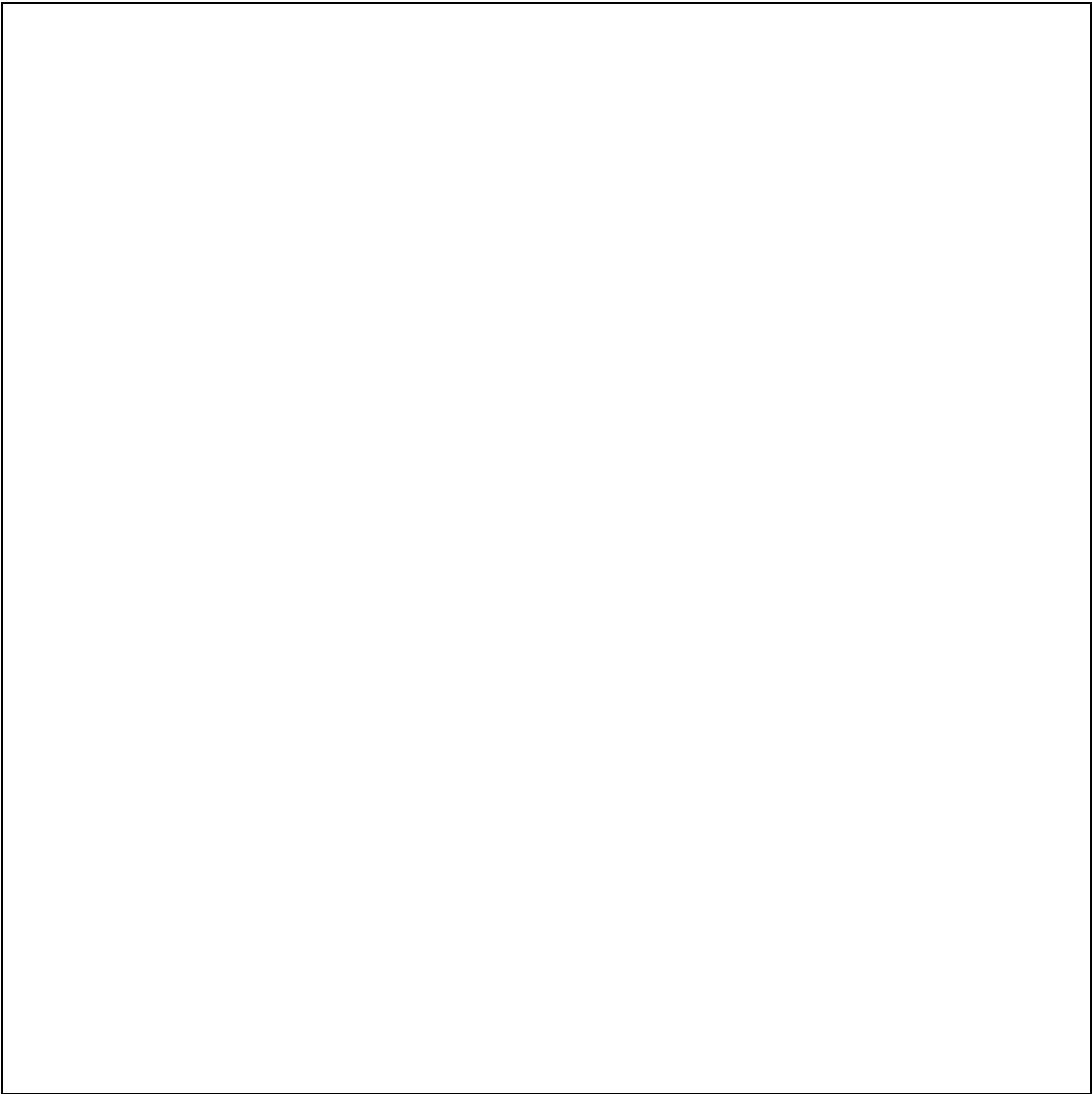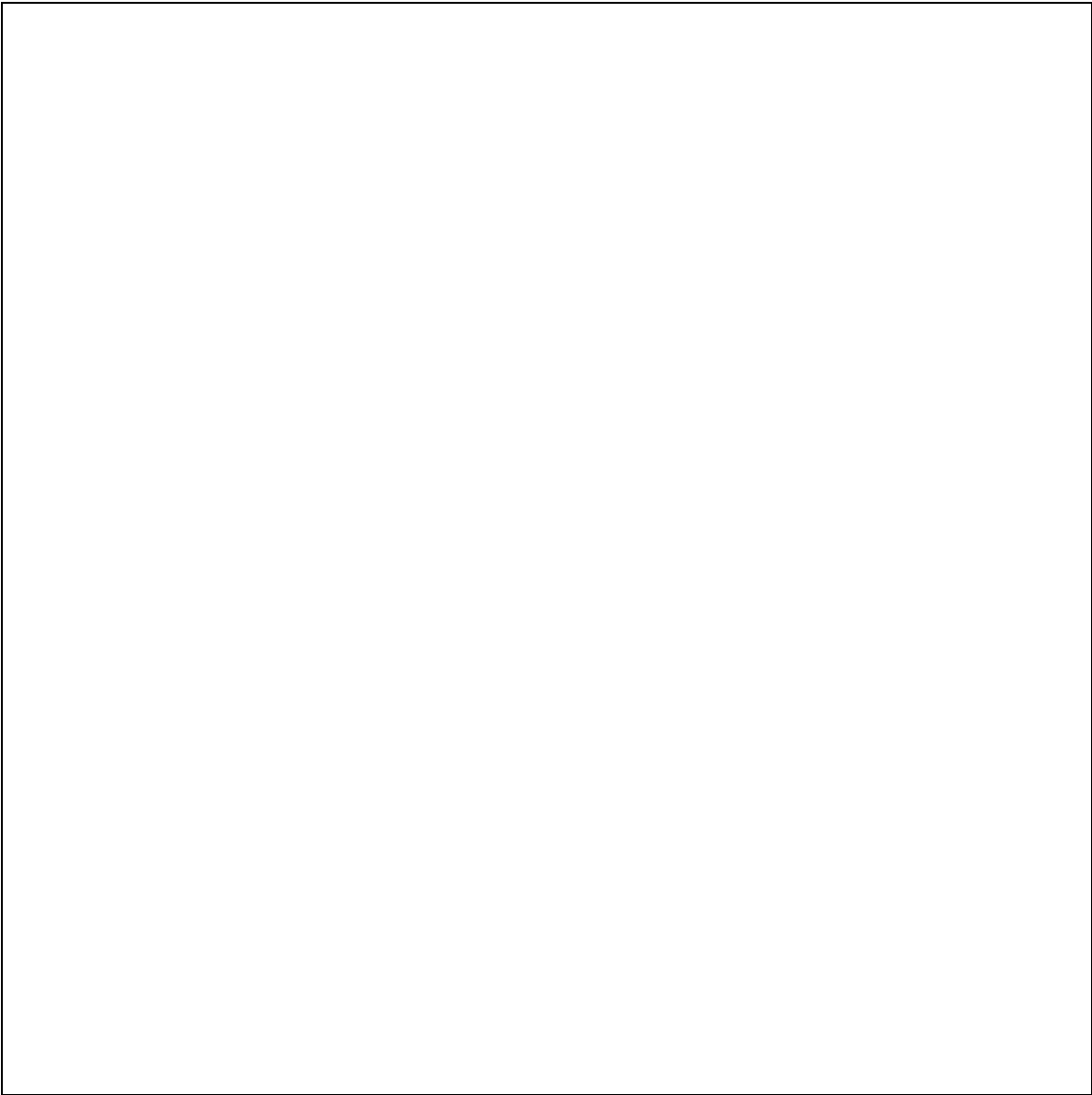**Photo 2:** Would you like to add another photo of the Facility? Yes ☐ No ☐

Photo 3: Would you like to add another photo of the Facility? Yes ☐   No ☐

Signature Page

Participants conducting review of potential _____ Alternate Facility.

The signatories below concur with the _____ Alternate Facility review and the information gathered in this checklist. Additional participants can be added to an additional page.

Signature: _____   Date: _____

Name: _____   Title: _____

Agency: _____

Signature: _____   Date: _____

Name: _____   Title: _____

Agency: _____

Signature: _____   Date: _____

Name: _____   Title: _____

Agency: _____

Signature: _____   Date: _____

Name: _____   Title: _____

Agency: _____

Proposed follow-up date: _____
(This is the proposed follow-up date to correct any gaps or deficiencies found during the initial review.).

Continuity of Operations Plan (COOP) Evaluation Checklist

The checklist is intended to be a resource to ensure that Continuity of Operations Plans (COOPs) meet acceptable planning standards and help organizations identify where they may want to focus their emergency preparedness efforts. The standards noted below may be found in NFPA 1600/EMAP, FEMA/HSPD-20 guidance, or are generally accepted planning standards and practices.

Agency/Organization Name: _____   Plan Date: _____

Review Date: _____   Reviewer: _____

Element Reference Key	(1) NFPA 1600/EMAP (2) FEMA/HSPD-20 guidance (3) Generally accepted planning standards and practices	
Basic Plan Components	**Element is addressed/ not addressed in the COOP** List section and page numbers, where applicable	**Reviewer's Notes** If No is checked, then write an explanation and/or course of action for rectifying the planning gap
Professionalism/Craftmanship (3) content; organization; style; mechanics; fluency	☐ Yes ☐ No	
Executive Summary (3)	☐ Yes ☐ No	
Inside of Front Cover signatory or approval page; effective date of plan	☐ Yes ☐ No	
Promulgation (1,2,3) signed/approved by agency leadership	☐ Yes ☐ No	
Plan Revision History and Distribution List (3) distribution table; plan revision table; dates of revision	☐ Yes ☐ No	
Table of Contents (3) include any annexes or appendices	☐ Yes ☐ No	
Executive Summary/Policy (1,2,3)	☐ Yes ☐ No	

address the agency's policy regarding continuity of operations		
Comprehensive Approach (1,3) include an all-hazards approach and all phases of the emergency management cycle	□ Yes □ No	
Management Responsibilities and Authority (1,2,3) provide definitions of responsibilities of management; outline basic strategies/emergency management responsibilities of each agency/section; delegation of decision-making authority and limitations	□ Yes □ No	
Section I: General Considerations and Planning Guidelines	□ Yes □ No	
Introduction (3) brief overview of what information is included in the COOP; definition of COOP; overview/background of what plan encompasses; general statement of internal/external impact of emergency/disaster on agency; overview of efforts taken to minimize effects on day-to-day operations; supporting documents reference; identification of how plan is communicated within the agency	□ Yes □ No	
Purpose (1,3) state the reason for developing the plan with the goal of identifying and assessing/prioritizing MEFs; identify efforts made to ensure continuous delivery/minimal interruption to agency MEFs; identify and briefly discuss available resources	□ Yes □ No	
Scope (1,3) or Goals and Objectives (1) identifies and explains what COOP does and does not apply to; indicate what the plan is used for; identify relationship with occupant emergency plan (OEP)	□ Yes □ No	
Situation (1,3) clearly describes a continuity environment within the agency; identify and analyze potential scenarios from the risk assessment	□ Yes □ No	
Planning Assumptions (1,3) outline the expectations used for the planning process based on planning, research, and real-life events; what the agency can expect to experience when entering the	□ Yes □ No	

continuity environment, expected impact and operational challenges; identify operational adjustments; identify the need to devolve and/or delegate functions; identify unique needs of the agency and anticipated effects on clients/stakeholders		
Concept of Operations (1,3) outline the anticipated sequence of events before, during, and after the continuity environment; identify the role of the Continuity Manager and the relationship to Crisis Management Team	☐ Yes ☐ No	
Authority (1,2,3) outline of authority to undertake this planning effort	☐ Yes ☐ No	
Plan Maintenance and Distribution (1,3) reviewed and updated annually; identify by position the responsible party; identify and document a schedule of annual updates; identify the process for updating and training to follow plan changes	☐ Yes ☐ No	
Section II: Preparedness	☐ Yes ☐ No	
Overview (3) outline the measures taken to adequately manage risk, increase resilience, and steps taken to ensure continuance of essential functions	☐ Yes ☐ No	
Continuity Plan / Continuity Program Management (1,2,3) provide a brief introduction to the program management; roles and responsibilities of the Continuity Program Manager (CPM,1,2,3), Continuity Planning Team (CPT, 1,2,3), and Crisis Management Team (CMT, 3)	☐ Yes ☐ No	
Risk Assessment (1,2,3) use a recognized methodology to assess, rank, and steps taken to prevent/mitigate internal/external risks	☐ Yes ☐ No	
Mission Essential Functions (MEFs) (1,2,3) identify the logic/process in assessing MEFs in order of priority	☐ Yes ☐ No	
Facility Overview (3) identify the agency's resilience from a facility perspective	☐ Yes ☐ No	

Alternate Facility (1,2,3) organization has taken steps to identify potential work site(s)	□ Yes □ No	
Business Impact Analysis (BIA) (1,3) assess the impact of the loss of mission essential functions on the organization	□ Yes □ No	
Business Process Analysis (BPA) (1,3) identify the supplies, equipment, technology or persons/needed to ensure the continuance of mission essential functions;	□ Yes □ No	
mission essential systems, files, records, data;	□ Yes □ No	
resources and logistics;	□ Yes □ No	
assessment of dependencies and interdependencies;	□ Yes □ No	
identify internal and external contracts which support the agency's identified MEFs (1,2,3)	□ Yes □ No	
Mitigation Measures **Protecting or Safeguarding Critical Applications and Data** prioritize list of applications (3);	□ Yes □ No	
mitigation, protection, and safeguarding of critical applications as a preparedness activity (1,3)	□ Yes □ No	
Protecting or Safeguarding Vital Records prioritize list of vital records and data (1,2,3);	□ Yes □ No	
mitigation, protection, and safeguarding of vital records as a preparedness activity (1,2,3)	□ Yes □ No	
	□ Yes □ No	
Continuity of Communications (1,2,3) identification and assessment of communications	□ Yes □ No	

Mission Essential Staff and Lines of Succession (1,2,3) identification of, roles of, and expectations of mission essential staff;	□ Yes □ No	
line of succession 3 layers for each essential position	□ Yes □ No	
Devolution (2) and Delegation of Authority (2) identify the basic tenets of the devolution plan; identify concept of delegation of authority	□ Yes □ No	
Occupant Emergency Plans (OEPs) (3) document the presence and scope/application of the OEP	□ Yes □ No	
Resource Requirements and Outstanding Logistical Support (1,2,3) identify any resources that may be necessary to ensure the agency can continue to operate at its continuity site	□ Yes □ No	
Tests, Training, and Exercising (1,2) outline the training policy and any exercises or real-world events the agency has experienced	□ Yes □ No	
After Action Reports (AAR) and Corrective Action Programs (CAP) (1,2,3) address the need for and use of AARs and CAPs for the future development and refinement of the COOP process	□ Yes □ No	
Section III: Response	□ Yes □ No	
Alert, Notification, and Plan Activation (1,3) identify the process for recognition of risk/threat, notification of internal and external entities, and actions of the agency to activate response organization and this COOP	□ Yes □ No	
Agency Emergency Response Levels use of agency response levels as warranted	□ Yes □ No	
Critical Recovery Tasks (1,3)	□ Yes □ No	

identify the critical recovery tasks that are specific to the agency in order of priority. These are quick action steps to implement the COOP		
Priority of Restoration of Critical Applications and Vital Records (1) should address the need to prioritize restoring data systems as a response activity	□ Yes □ No	
Emergency Response Organization (3) and the Role of the Crisis Management or Continuity Planning Team (3)	□ Yes □ No	
address how the response will be organized; potential use of the Incident Command System	□ Yes □ No	
define roles and expectations of CMT (if used) and CPT during response activities	□ Yes □ No	
The Role of Leadership (1,2,3) identify the expected role of leadership	□ Yes □ No	
Assignment of Responsibilities (1,2,3) identify the responsibilities within the agency during a continuity environment	□ Yes □ No	
Team Leaders for Alternate Relocation Site (if necessary) (3) Identify leaders of COOP sites if warranted	□ Yes □ No	
Facility Relocation Handout for Alternate Work Site (3) provide helpful guidance to relocated employees as warranted	□ Yes □ No	
Implementing Devolution of Functions and Delegation of Authority	□ Yes □ No	
Devolution (2)	□ Yes □ No	

transition of roles and responsibilities from primary location to alternate locations		
Delegation of Authority (2) delegation of authority including to whom, when, timeline, legal authorization, notifications, reclamation of authority	□ Yes □ No	
Personnel (Human Capital) (2,3) address how the agency should manage its employees and the impact on employees in a continuity environment	□ Yes □ No	
Section IV: Recovery/Demobilization	□ Yes □ No	
Recovery and Reconstitution (1,2) identification of the elements in reconstituting the agency	□ Yes □ No	
Agency Facility and Personnel (1,2) address how day-to-day operations will resume after the termination of a continuity environment in the: short-term	□ Yes □ No	
long-term	□ Yes □ No	
Documentation for Demobilization (1,2) provisions made to ensure information and materials generated in the event are transferred to the primary operating facility	□ Yes □ No	

Comments:

_____
_____
_____
_____