

North Carolina Division of Emergency Management

Continuity Plan



Change 3

January 2010

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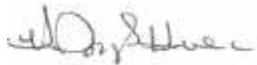
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY PLAN

PLAN SUMMARY

This plan establishes procedures for Continuity for North Carolina Emergency Management and the State Emergency Response Team (when activated). It describes essential functions—those that must continue in every circumstance, and cannot be put off even for periods of 14 to 30 days. The concept of operations for this plan involves mainly relocation from the primary emergency operations center to an alternate or Continuity facility. The key to efficient relocation is the Emergency Relocation Group which will sustain operations until all appropriate NCEM/SERT personnel can relocate. Leadership issues addressed include orders of succession and lower management Continuity, along with delegations of authority, devolution, and reconstitution. The alternate/Continuity facility is described and space within it assigned. Requirements for training, tests, and exercises are addressed. A multi-year strategy is included as are requirements for Continuity Plan maintenance. With Change 1, an annex has been added to address Continuity problems during a pandemic influenza event. Changes 2 and 3 add changes to SERT numbers and terminology.

APPROVAL

Approved for Implementation:



H. Douglas Hoell, Jr.
Director
29 January 2010

TABLE OF CONTENTS

Introduction	1
Essential Functions	1
Authorities and References	2
Concept of Operations	2
Logistics	9
Test, Training, and Exercises	10
Multi-Year Strategy and Program Management	11
Continuity Plan Maintenance	11
Annex A. Authorities and References	A-1
Annex B. SERT Position Requirements	B-1
Annex C. Alternate/Continuity Facility Information	C-1
Annex D. Maps and Evacuation Routes	D-1
Annex E. Definitions and Acronyms	E-1
Annex F. EM Continuity and Pandemic Influenza	F-1

NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT (NCEM)
CONTINUITY PLAN

1. INTRODUCTION. Continuity is an essential element in the responsible and reliable delivery of emergency services to the public. The current environment—natural disasters, technological disasters, and terrorist attacks—points up a clear need to develop comprehensive plans that ensure essential services continue in spite of facility loss, leadership incapacity, and other foreseeable difficulties. After the terrorist attacks of 11 September 2001 on New York City and Washington DC, the Governor directed the Division of Emergency Management to design a continuity program and coordinate its implementation. In partial fulfillment of this direction, the NCEM Continuity Plan is intended as a blueprint for continuing NCEM and State Emergency Response Team (SERT) operations and as an example that other state agencies might use in preparing their own plans. The US Department of Homeland Security (DHS) and the Federal Emergency Management Agency (FEMA) have offered direction and guidance for state and local Continuity plans. This plan follows that guidance, and it incorporates efforts already initiated and completed in compliance with NCGS §147-33.89, Business Continuity Planning.
 - a. Purpose. The purpose of this plan is to document necessary actions and responsibilities for continuing operations whenever North Carolina Emergency Management leadership becomes incapacitated or whenever facilities in the basement of the Administration Building at 116 West Jones Street (Raleigh) become unusable. This plan is intended to assure continuance of NCEM's essential function(s) in the face of all hazards—natural and manmade.
 - b. Applicability and Scope. This plan is written for application during times of normal work schedules or during State Emergency Response Team (SERT) activation. It applies to Emergency Management operations in Raleigh. Warehouse operations (in Stanly County and in the city of Rocky Mount) and Branch Offices (Conover, Butner, and Kinston) will make separate continuity arrangements as necessary.
2. ESSENTIAL FUNCTIONS. Essential functions are those organizational functions and activities which must be continued under any and all circumstances. Further defined, essential functions are those that cannot be put on hold for periods extending from two weeks to thirty days. Business impact analysis reveals the North Carolina Division of Emergency Management has two essential functions—to maintain the NCEM 24-hour Operations Center (24OC) and to accommodate the activated State Emergency Response Team (SERT). Accordingly, this plan focuses on maintaining a robust capability to host and administer the SERT. Notwithstanding, it is important, though arguably not essential, that some capability for day-to-day operations be maintained outside of SERT activation. That eventuality is addressed as well.

3. AUTHORITIES AND REFERENCES. Authorities and references are listed and described at ANNEX A to this plan.
4. CONCEPT OF OPERATIONS. The aim of every action and responsibility set down in this plan is to ensure seamless execution of duties associated with identified essential functions assigned to the Division of Emergency Management during normal day-to-day activities and during periods of SERT activation. Actions and responsibilities are pointed toward two eventualities—the main SERT/Emergency Management facility (hereafter EOC MAIN) being rendered unusable and/or one or more of SERT/Emergency Management leadership being incapacitated.
 - a. Should the primary NCEOC facility be lost at a time when SERT activation is required, NCEM would have to establish an alternate/Continuity site from which to accommodate and administer the SERT. This could be done with any of the following capability sets—listed in order of preference.
 - (1) Complete Mobility. Complete mobility would allow no-notice alternate site selection and afford maximum flexibility necessary to continue operations in virtually any circumstance. All SERT communications, supplies, equipment, and back-up power would be part of a mobility package that could be delivered and put into operation at any structure with suitable space within 12 hours. NCEM does not currently have this capability.
 - (2) Disaster Recovery Operations Center at Tillery Place in Raleigh. This is the established EOC ALT. It has sufficient space and facilities to accommodate the SERT. It has limitations (difficult access during periods of flood and proximity to railroad freight operations, as well as proximity to the primary NCEOC), but addition of backup power and off-site redundancy for computer systems will make it an adequate alternate facility.
 - (3) Whenever the main SERT/Emergency Management facility becomes unusable, the established alternate/Continuity facility becomes similarly unusable or unsuitable, and when another suitable facility has not been identified, it will be necessary to request procurement and assignment of a suitable facility from the State Property Office (NC Department of Administration).
 - b. Outside SERT activation, there remains a requirement to maintain the 24OC. Procedures and instructions for this are addressed in paragraph 4d(2)(b)4.

- c. For NCEM, there are no other identified essential functions. Nonetheless, prudence dictates a capability to continue day-to-day work to the extent possible.
 - (1) To that end, the Director of Emergency Management will designate a cadre for day-to-day Continuity. This Continuity Cadre will occupy available space in the DROC, the NCEOC, or elsewhere as necessary and appropriate. As resources permit, Continuity Cadre members will be provided capability to work from home. For the Continuity Cadre, capability to work from home should include State-supplied cell phone service and high-speed internet access, as well as remote access to NCEM computer resources. NCEM members not identified as part of the Continuity Cadre will be listed as on-call or tasked to work from home with necessary and appropriate support until work space is again available.
 - (2) Since there is space (outside of SERT activation) at the DROC to accommodate all those currently occupying the EOC facility for day-to-day work, the Director may decide to relocate everyone whenever EOC MAIN becomes unusable. Should this occur, section chiefs are responsible to coordinate, arrange for, and assign adequate work space/equipment for their people.
- d. PHASE I: ACTIVATION AND RELOCATION. This section describes activation procedures and procedures for relocation from the EOC MAIN to EOC ALT. It also provides guidance for those not tasked for relocation.
 - (1) Decision Process. The Director of Emergency Management (SERT Leader) will determine when to activate and implement the Continuity Plan. Authority for activation may be delegated to the NCEM Duty Officer. Activation may occur with or without warning. The Director (or the NCEM Duty Officer with delegated authority) will activate the Continuity Plan whenever he/she determines EOC MAIN has become or will become unviable to accommodate the SERT or the NCEM 24OC within 24 hours.
 - (2) Alert, Notification, and Implementation Process.
 - (a) The NCEM 24OC will alert the Director (or Duty Officer) whenever there arise circumstances that might require continuity activation.
 - (b) Each NCEM Section Chief will prepare and maintain an alert recall roster to include each member's name, address, and available phone numbers (home, cell, pager). Additionally, each Section Chief will prepare and maintain an alert recall roster of SERT

partners assigned to his/her section. Section Chiefs will provide the NCEM 24OC current copies of their alert rosters for NCEM and SERT. When directed to activate the CONTINUITY Plan, the 24OC will notify section chiefs of Continuity Plan activation and provide them such instructions as the Director may order. Section chiefs will notify their people of Continuity Plan activation and provide them instructions as required. 24OC will orchestrate evacuation of the EOC area in the basement of the Administration Building. When evacuation is complete, 24OC will execute a seamless (time permitting) transition to EOC ALT.

1 Transition Specific Organization. An Emergency Relocation Group (ERG) is established to assure seamless transition from the primary facility to the alternate facility. The ERG is intended to move first to EOC ALT, initiate operations in tandem (circumstances permitting) with those at EOC MAIN, and continue operations without interruption as the remainder of Emergency Management/SERT moves to the alternate facility. To accomplish this, the ERG must build and maintain a prepackaged Continuity Kit of equipment and supplies necessary to assure a quick, orderly transition. The 24OC Branch Manager is responsible for establishment and maintenance of this kit. Additionally, the 24OC Branch Manager will keep a roster of ERG members and will be responsible for notifying and organizing the ERG when the CONTINUITY Plan is implemented. NCEM Section Chiefs will assign ERG members as necessary and appropriate. ERG membership will include:

- a Current Duty Officer (ERG Lead)
- b The 24OC Branch Manager
- c Two 24OC Emergency Management Officers
- d GTM Technology Support Specialist (EM IT Manager)
- e Communications Technician/Manager
- f Operations Section Representative
- g Logistics Section Representative (Logistics Support)
- h Information & Planning Section Representative

- i Mitigation Section Representative
 - j GTM Section Representative
 - k Others as identified by ERG Lead
 - 2 When transition is complete, 24OC members remaining at EOC MAIN will deploy to join the ERG at EOC ALT.
 - 3 Whenever the Continuity Plan must be implemented with no warning, 24OC Emergency Management Officer(s) on duty will assure evacuation of the primary facility and deploy with the Continuity Kit to EOC ALT as quickly as possible—minimizing down time. When relocation is complete, Emergency Management Officers will notify the ERG and other members of NCEM/SERT as appropriate.
 - 4 When the Continuity Plan is implemented outside SERT activation, the 24OC will carry out relocation as described above by itself—that is, without involving the ERG.
 - 5 The 24OC Branch Manager will prepare and maintain procedures for relocation during SERT activation (ERG included) and when SERT is not activated.
- (3) Leadership. It is important to allow for situations when established leaders may be incapacitated or otherwise unavailable to carry out assigned duties during SERT activation. Examples of these circumstances include temporary duty-related absence and illness/injury. When members in leadership positions know of impending absences, they should coordinate with identified replacements to assure currency in their positions. Orders of succession listed below have been approved by the Director of Emergency Management and will be followed as necessary during Continuity Plan activation.

(a) Orders of Succession.

1 DIRECTOR

- a Director
- b Deputy Director (Operations Chief)
- c Plans Chief
- d Logistics Chief

2 OPERATIONS

- a Operations Chief
- b Deputy Operations Chief (EOC Manager)
- c 24OC Branch Manager

3 LOGISTICS

- a Logistics Chief
- b Support Services Manager
- c Logistics Support Manager

4 PLANNING

- a Plans Chief
- b Information Unit Leader
- c Homeland Security Manager

5 RECOVERY (MITIGATION)

- a Recovery Chief
- b Hazard Mitigation Chief
- c Program Implementation Coordinator

6 GEOSPATIAL & TECHNOLOGY MANAGEMENT

- a GTM/Floodplain Mapping Director
- b Technology Support Analyst
- c Community Development Planner

7 FINANCE (SERT Activated)

- a Finance Chief
- b Financial Management Branch Manager
- c Accounts Payable Branch Manager

- (b) Lower Management and Individual Continuity Issues. It is critical that each member know who is in charge during Continuity Plan activation. Succession at first level management (not written in this plan) should, nonetheless, be clearly specified in section and branch documents and procedures. Continuity of operations at the individual level is similarly important. There should be viable backup whenever any member is incapacitated or unavailable. To allow for this, each individual is encouraged to prepare and

maintain a Continuity folder/binder. This folder/binder should contain descriptions of and procedures for primary duties as well as a points-of-contact list and directions to find/use germane documents and Internet web sites. Continuity folders/binders, if prepared, can be in paper or, preferably, electronic form.

- (c) Delegations of Authority. For emergency management and the activated SERT, authority is delegated automatically according to the published Orders of Succession included above. Since there is no requirement to assign duties outside normal areas of responsibility and chain of command, specific delegations of authority are not necessary for this organization.
 - (d) Devolution. Necessary statutory powers for administering NCEM and the SERT having been established in NCGS §166-A, devolution for continuity activation will be as described in paragraph 4d above.
- e. Phase II: ALTERNATE FACILITY OPERATIONS. This section contains initial arrival instructions and describes some procedures for continuation of essential functions. Complete procedures will be found in various NCEM/SERT sections and branches. Essentially, though it may take as much as 12 hours for the ERG to transfer authority and duty to the full SERT, normal SERT activities will continue as they would at EOC MAIN. When this CONTINUITY Plan is implemented outside SERT activation, activities of the 24OC are expected to continue virtually seamlessly as they would at EOC MAIN.

- (1) Mission Critical Systems. Mission Critical Systems are those which are necessary to perform essential functions. These systems (less communications systems) are described here, along with methods of transferring/replicating them at EOC ALT. Continuity Communications systems are described in paragraph 6b, below.

System Name	Current Location	Other Location
Off-Site Redundancy for all IT Files and Programs	Basement Admin Building	EOC ALT
Cable/Satellite Television	Basement Admin Building	To be installed at EOC ALT during initial CONTINUITY activation
Back-up Power	On Hand at EOC MAIN	Available within 6 Hours at EOC ALT
Facsimile Machines	On Hand at EOC MAIN	On Hand at EOC ALT
Office Furniture	On Hand at EOC MAIN	On Hand at EOC ALT
Computers, Printers, Scanners	On Hand at EOC MAIN	On Hand at EOC ALT
Overhead/Desktop Computer/TV projectors	On Hand at EOC MAIN	On Hand at EOC ALT
Office Supplies	On Hand at EOC MAIN	On Hand at EOC ALT

- (2) Vital Files, Records, and Databases. Off site redundancy for all NCEM/SERT Information Technology files and programs is to be provided by the NCEM Geospatial & Technology Management Section. This will allow direct local and Internet access to all files, and it eliminates the need to identify specific files as “vital”. Each NCEM section and branch is responsible to identify such vital paper records as exist and to scan those identified into electronic files.

- f. PHASE III: RECONSTITUTION. In most instances of Continuity Plan implementation, reconstitution will be a reverse execution of those duties and procedures listed in paragraph 4d, above. Should the circumstances that required Continuity Plan implementation result in a need for a new primary facility, the NCEM Logistics Section will coordinate long-term (past 30 days) operation and maintenance of the alternate facility as necessary and develop and implement procedures to relocate to the new facility. Within 30 days of reconstitution the Director of Emergency Management will assign, as he/she determines necessary and appropriate, completion of an After-Action Report to describe the effectiveness of Continuity plans/procedures, list action items for required changes, and assign responsibility for timely adjustment to Continuity plans/procedures.

5. CONTINUITY PLANNING RESPONSIBILITIES. CONTINUITY planning and implementation actions are listed in the table provided below. These actions include, among others, those listed elsewhere in this plan.

Continuity Planning/Implementation Action	Office of Primary Responsibility
Procure alternate facility(ies) from State Property Office, when necessary.	Logistics
Build and maintain Continuity Kit.	24OC
Keep a recall roster of ERG members.	24OC
Designate a Continuity Cadre.	Director
Provide cell phone and high speed internet access to Continuity Cadre.	Geospatial & Technology Management
Determine when to activate and implement the Continuity Plan.	Director
Notify Director when potential Continuity Plan activation circumstances arise.	24OC
Maintain alert recall rosters for NCEM member and SERT Partners.	Each Section Chief
Notify members of Continuity Plan activation and provide appropriate instructions.	Each Section Chief
Orchestrate evacuation of EOC MAIN when Continuity Plan is implemented.	24OC
Maintain procedures for relocation to EOC ALT when Continuity Plan is activated.	24OC/EOC Manager
Approve Orders of Succession in Director's Office and in Section leadership.	Director
Prepare and maintain lower management orders of succession.	Branch Managers
Prepare Continuity folders.	Each individual
Assure off-site redundancy of information technology systems to preserve vital records.	Geospatial & Technology Management
Operate and maintain facility(ies) for EOC ALT during Continuity Plan activation and long-term, if necessary.	Logistics
Require preparation of an after-action report when Continuity Plan implementation and reconstitution is complete.	Director

6. LOGISTICS.

- a. ALTERNATE LOCATION. The location for EOC ALT is the Disaster Recovery Operations Center (DROC) at 1830B Tillery Place in Raleigh. The NCEM Logistics Section will be responsible for overall operation and maintenance of EOC ALT, but specific related duties are assigned to others as prescribed in this paragraph.
 - (1) Assumptions.
 - (a) It will not be possible to move equipment or files from EOC MAIN to EOC ALT.
 - (b) Back-up power will be in place. (NCEM Logistics Section has a contract in place to provide back-up power within 6 hours of continuity plan activation.)
 - (c) Off-site redundancy of information technology files and programs will allow continued access to vital records/databases.
 - (d) Occupation of EOC ALT will be short term (30 days or less). Longer occupation will require modifications. The NCEM Logistics Section will arrange for long-term occupation should it become necessary.
 - (2) NCEM and the SERT will occupy EOC ALT as indicated below and as shown in the floor plan at ANNEX C.
 - (a) The 24OC will occupy the two cubicles next to the rear, main door. These cubicles have been prepared with all of their communications. 24OC, in coordination with GTM-Radio Communications Engineer, will publish a list of SERT phone numbers/extensions within 2 hours of occupying the Alternate EOC.
 - (b) Public Assistance, Hazard Mitigation, and others at the DROC will move their personnel and activities from the areas that will be occupied by SERT/EOC personnel. Displaced members will be assigned to work from home or to augment the SERT/EOC as appropriate.

- (c) The PA classroom will be used as the EOC Situation Room. The Hazard Mitigation classroom will be the Command Room. Senior staff will use their cell phones as primary communications until additional telephone land lines are added.
 - (d) Hazard Mitigation section chief and Public Assistance branch manager offices will be used for VIP office and meeting areas.
 - (e) The Joint Information Center will be established as shown in the old Floodplain Mapping/GTM area in 1830A Tillery Place to isolate the press from the main EOC area. All press briefings will be conducted in the JIC area. NCEM Logistics will, as required, arrange short-term lease with the landlord for use of this space.
 - (f) State Capitol Police will provide security at the main entrance door and at the JIC outside entrance. All other doors will be locked and alarmed. If necessary, checkpoints will be established on the two driveways leading to the DROC.
- b. CONTINUITY COMMUNICATIONS. Communications capabilities normally available at EOC MAIN are also available at EOC ALT. This includes high-speed Internet access, facsimile lines and machines, mobile satellite telephone/radio, nuclear power plant selective signal decision lines, the National Alert and Warning System, VIPER 800MHz trunked radio, and Comlabs EMnet/Emergency Alert System equipment (if required). The DROC Norstar key system will provide all telephone communication, so a new EOC phone directory must be published as soon as possible and distributed through Web EOC. The 24OC Branch will publish the SERT phone list as described in paragraph 6a(2)(a) above. The GTM IS Branch will ensure EOC FAX lines are forwarded to DROC FAX lines as soon as possible upon Continuity Plan activation.

7. TEST, TRAINING, AND EXERCISES.

- a. TRAINING. Training for Continuity Plan execution will be planned, orchestrated, and administered by the NCEM Logistics Section Training/Exercise Branch. Classroom training will be provided to all NCEM and SERT members annually according to a schedule developed by the Logistics Training Branch. Individual on-the-job training will be administered by supervisors as prescribed by the Training/Exercise Branch. Training will be designed to inform each member of his/her responsibilities (and those of others) during a Continuity Plan implementation.

- b. TESTS AND EXERCISES. Testing and exercising of the Continuity Plan will be planned and orchestrated by the NCEM Logistics Training/Exercise Branch. The Continuity Plan will be exercised at least annually. Tabletop, limited, and/or full scale exercises will be scheduled according to this paragraph and the Director's wishes. Tests and exercises will be designed to familiarize members with their roles and responsibilities during a CONTINUITY Plan implementation and to any necessary adjustments to the CONTINUITY Plan.
8. MULTI-YEAR STRATEGY AND PROGRAM MANAGEMENT.
 - a. SHORT TERM (12-18 Months). The NCEM Logistics Section will continue research to identify alternate facilities more suitable than the DROC at 1830B Tillery Place. Upon selection and approval of a better alternate facility, the NCEM Logistics Section will prepare the new alternate site to receive and accommodate NCEM and the SERT.
 - b. LONG TERM (Beyond 18 Months). The NCEM goal for Continuity of Operations is to develop a complete mobility capability. To that end, with assistance from the NCEM Logistics Section, the NCEM Geospatial & Technology Management Section Information Services Branch will develop a requirements list and determine the cost to allow NCEM/SERT deployment to any location with self-contained necessary communications capability and equipment to include satellite television, a portable telephone switchboard system, laptop/notebook computers with thumb drives, high-speed wireless Internet access, satellite telephone, nuclear power plant telephone systems, radio systems, NAWAS and EAS systems, and mobile backup power generators sufficient to support SERT activities.
9. CONTINUITY PLAN MAINTENANCE. This plan will be reviewed at least annually—normally in response to an exercise/test—and revised or rewritten as necessary. Recall rosters, telephone information, and CONTINUITY Plan implementation procedures will be kept current through revision as frequently as necessary.

10. ANNEXES.

- a. Annex A. Authorities and References.
- b. Annex B. SERT Position Requirements.
- c. Annex C. Alternate Facility Information.
- d. Annex D. Maps and Evacuation Routes
- e. Annex E. Definitions and Acronyms.
- f. Annex F. Continuity and Pandemic Influenza.

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ANNEX A
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY PLAN

AUTHORITIES AND REFERENCES

North Carolina Executive Orders and Statutes:

Governor's Executive Order #102, Continuity of Operations and Continuity of Government Planning, 1 June 2006

Governor's Executive Order #118, Continuity of Operations Planning, 4 June 2007

NCGS §147-33.89, Business Continuity Planning, 2004

Federal Preparedness Circulars:

FPC 65, Federal Executive Branch Continuity of Operations (Continuity), dated July 26, 1999.
<http://www.fas.org/irp/offdocs/pdd/fpc-65.htm>

FPC 66, Federal Executive Branch Continuity of Operations (Continuity), dated April 30, 2001.
<http://www.fema.gov/pdf/library/fpc66.pdf>

FPC 67, Federal Executive Branch Continuity of Operations (Continuity), dated April 30, 2001.
<http://www.fema.gov/pdf/library/fpc67.pdf>

Presidential Decision Directives:

Clinton, W. J. (1998, May 22). *Combating Terrorism*. PDD 62.
<http://www.fas.org/irp/offdocs/pdd/pdd-62.htm>

Clinton, W.J. (1998, May 22). *Critical Infrastructure Protection (CIP)*. PDD 63.
<http://www.fas.org/irp/offdocs/pdd/pdd-63.htm>

Clinton, W. J. (1999, Oct. 21). *Enduring Constitutional Government and Continuity of Government Operations*. PDD 67. <http://www.fas.org/irp/offdocs/pdd/pdd-67.htm>

Bush, G. W. (2003, Dec. 17). *Critical Infrastructure Identification, Prioritization, and Protection*. Homeland Security Presidential Directive 7. <http://www.fas.org/irp/offdocs/nspd/hspd-7.html>

Other Resources:

FEMA Independent Study Program: IS-547 Introduction to Continuity of Operations (CONTINUITY),
<http://training.fema.gov/EMIWeb/IS/is547.asp>.

FEMA Independent Study Program: IS-546 Continuity of Operations (CONTINUITY) Awareness Course,
<http://training.fema.gov/EMIWeb/is546.asp>.

NIMS Information: www.fema.gov/nims

North Carolina Continuity of Operations Planning Manual, July 2006
<http://www.ncem.org/ARCHIVES/CONTINUITY%20Planning%20Manual%20ed.pdf>

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ANNEX B
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY PLAN

SERT POSITION REQUIREMENTS

State Emergency Response Team					
Position Requirements During Activation for CONTINUITY Plan Execution					
Section	Branch	Position	Number	Total	
SERT Leader		Director/Sert Leader	1		
		Executive Assistant	1	2	
CCPS		Secretary	1		
		Deputy Secretary	1	2	
Governor's Office		Governor's Office Rep	1	1	
Joint Information Center		Public Information Officer	1		
		Asst PIOs	5	6	
Logistics		Logistics Chief	1		
		Reception	1		
		Logistics Coordinator and Controller	2		
		Logistics Officer	3		
		Logistics Planner	1		
		Purchasing Officer	2		
		Logistics Operations Officer	1		
		Transportation Contractor	1		
		SERT Partners	NCNG (2 ground)	2	
			League of Municipalities	1	
		Security (State Capitol Police)	2		
		Agriculture	1		
		Donations Management	2	20	
Operations		Operations Chief	1		
		EOC Manager	1		
		Communications	Communications Manager	1	
			Mission Assignment Coordinator	2	
			Daily Operations Officer	2	
			Area Liaison Officer	2	
		Emergency Services	Emergency Svcs Manager	3	
		Human Services	Human Svcs Manager	2	
		Air Operations	4 NG Aviation, 1 CAP	5	
		Infrastructure	Infrastructure Coordinator	2	

Annex B
NCEM Continuity Plan
Change 3
January 2010

State Emergency Response Team				
Position Requirements During Activation for CONTINUITY Plan Execution				
Section	Branch	Position	Number	Total
	SERT Partners	SHP (Major & 1st Sgt)	2	
		OEMS (Hospital & SMAT Rep)	2	
		OSFM	1	
		Public Health	1	
		Red Cross	2	
		Salavation Army	1	
		Agriculture	1	
		NC Continuity Extension	1	
		Environmental Health	1	
		Division of Aging	1	
		Division of Social Services	1	
		DOT	1	
		Division of Energy	1	
		Progress Energy	1	
		Duke Power	1	
		Forest Resources	1	40
Plans		Plans Chief	1	
	Situation Unit	Situation Manager	1	
		Situation Officers	9	
		Weather Officer	1	12
Recovery/Mitigation		Mitigation Chief	1	
		Mitigation Deputy	1	
		Administrative	1	
		Grants Managers	5	8
Finance		Finance Chief	1	
		Finance Officer	4	5
GTM		GTM Chief	1	
		GIS Officers	3	
	Information Tech	Systems Administrator	1	
		Dep. Systems Administrator	1	
		Tech Services Officer	1	
		Radio/Telephone Technician	1	8
Grand Total				104

ANNEX C
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY OF OPERATIONS PLAN

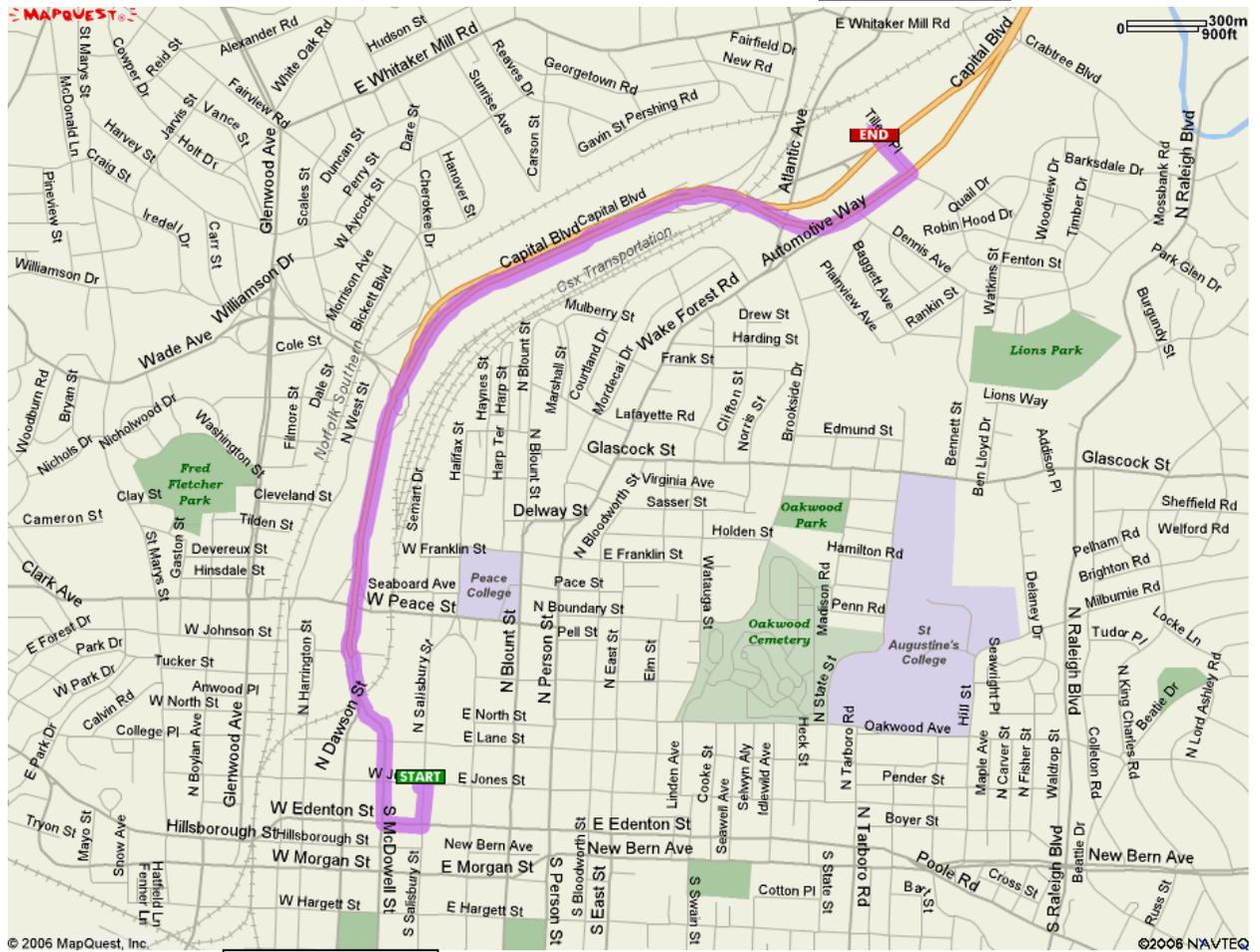
ALTERNATE FACILITY INFORMATION

1. The NCEM Logistics Section maintains a current diagram of the alternate facility floor plan that will be used for SERT-activated continuity situations.
2. A current version of the floor plan diagram will be posted and available to all members whenever this Continuity Plan is executed and the DROC is in use as an alternate facility for SERT activation.
3. An example (not necessarily current) of this floor plan diagram is on page C-2 of this plan.

ANNEX D
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY OF OPERATIONS PLAN

MAPS AND EVACUATION ROUTES

EOC ALT



EOC MAIN

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ANNEX E
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY PLAN

DEFINITIONS AND ACRONYMS

After-Action Report (AAR)—A narrative report that presents issues found during an incident and recommendations on how those issues can be resolved.

Alternate Database/Records Access—The safekeeping of vital resources, facilities, and records, and the ability to access such resources in the event that the CONTINUITY plan is put into effect.

Alternate Facilities/Work Site—A location, other than the normal facility, used to conduct critical functions/and or process data in the event that access to the primary facility is denied or the primary facility is damaged. The alternate site provides the capability to perform minimum essential department or office functions until normal operations can be resumed.

Backup—The practice of copying information, regardless of the media (paper, microfilm, audio or video tape, computer disks, etc.) to provide a duplicate copy.

Business Continuity Plan (BCP)—A plan to provide procedures to resume or restore critical business processes following a disruption. This plan must be coordinated with IT Disaster Recovery Plan to ensure the recovery time objective (RTO) is addressed and is consistent in each document, and that recovery strategies and supporting resources neither negate each other nor duplicate efforts. The program or business owners typically develop this plan as they are most familiar with their business processes. **A BCP should be essentially the same as a CONTINUITY plan.** BCP is a term from private industry, and CONTINUITY is a government term. In North Carolina state government, we use the term CONTINUITY after that used by the Federal Government (specifically DHS).

Business Impact Analysis (BIA)--An evaluation of the strengths and weaknesses of an agency's disaster preparedness and the impact an interruption would have on agency business. This is a management level analysis by which an organization assesses the quantitative (financial) and qualitative (non-financial) impact and loss.

Continuity Cadre—A group selected by the Director of Emergency Management to continue day-to-day operations from home during periods when the primary facility is not viable, but when the SERT is not activated.

Continuity of Government--The effort to ensure continued leadership, authorities, direction and control, and preservation of records, thereby maintaining a viable system of government. Continuity of government is usually a matter of law—constitutional or general statute.

Continuity of Operations (CONTINUITY)--An internal effort within individual components of government to assure that capability exists to continue essential component functions across a wide range of potential emergencies.

CONTINUITY Plan Maintenance--Steps taken to ensure the CONTINUITY plan is reviewed annually and updated whenever major changes occur.

COOP—An acronym for Continuity of Operations—a term now replaced simply by Continuity.

Critical Processes & Services--Activities, which could not be interrupted or unavailable without significantly jeopardizing operations of an organization.

Delegation of Authority--Pre-delegated authorities for making policy determinations and decisions at headquarters, field levels, and other organizational locations, as appropriate.

Devolution (a CONTINUITY term)--The capability to transfer statutory authority and responsibility for essential functions from an agency's primary operating staff and facilities to other employees and facilities. It is also the ability to sustain that operational capability for an extended period.

Disaster Recovery--The methodical restoration and reconstitution of facilities, data, records, systems and equipment after a disruption to operations that has caused damage and/or destruction of these resources.

Emergency--A sudden, usually unexpected event that does or could do harm to people, resources, property, or the environment. Emergencies can range from localized events that affect a single office in a building, to human, natural, or technological events that damage, or threaten to damage, local operations. An emergency could require temporary evacuation of personnel or cause permanent displacement of personnel and equipment from an existing site to a new operating location.

Emergency Operating Records--Records (plans, and directives, orders of succession, and delegation of authority) essential to the continued functioning of an agency during and after an emergency to ensure Continuity of operations.

Essential Functions--Those functions that enable agencies to provide vital services, exercise civil authority, maintain the safety and well being of the citizens, sustain the industrial/economic base in an emergency.

Interoperability--The ability of a system or a product to work with other systems or products without special effort on the part of the user.

Order of Succession—A formula that specifies by position who will automatically fill a position once it is vacated.

Plan—A systematic arrangement of elements or important parts.

Point of Contact—The coordinator of the CONTINUITY program and leader of the CONTINUITY team, who will implement CONTINUITY plan during an emergency.

Primary Facility—The site of normal, day-to-day operations.

Reconstitution—The process by which surviving and/or replacement personnel resume normal operations from the original or replacement primary operation facility.

Relocation Site (Alternate Facility)—The site where all or designated employees will report for work if required to move from the primary facility.

Risk Assessment/Analysis—An evaluation of the probability that certain disruptions will occur and the controls to reduce organizational exposure to such risk.

Vital Records and Systems—Records or documents, regardless of media (paper, microfilm, audio or video tape, computer disks, etc.) which, if damaged or destroyed, would disrupt business operations and information flows and cause considerable inconvenience and require placement or re-creation at considerable expense.

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ANNEX F
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY PLAN

CONTINUITY AND PANDEMIC INFLUENZA

1. INTRODUCTION.

The North Carolina Division of Emergency Management (NCEM) and the State Emergency Response Team (SERT) provide essential functions and services that may be adversely impacted in the event of a natural or man-made disaster. In such events, all government agencies should have plans to continue to operate their core missions. Maintaining essential functions and services is vital to an organization's ability to continue operations. Continuity of operations may be disrupted during a pandemic; therefore, it is important for the North Carolina Division of Emergency Management to ensure it can execute essential missions in the event of a threat to its normal continuity of operations. A pandemic influenza event would present such a threat. This Annex describes actions, plans, and procedures that would be developed and/or implemented should there be a pandemic event.

2. PURPOSE.

This Annex provides guidance for NCEM and SERT components. It serves as the NCEM plan for maintaining essential functions and services during an influenza pandemic. This annex neither replaces nor supersedes the current approved North Carolina Emergency Management Continuity Plan; rather it supplements it, bridging whatever gap exists between the traditional, all-hazards Continuity planning of FPC 65 and the specialized Continuity planning required for a pandemic. It does this by addressing those considerations, challenges, and elements specific to the dynamic nature of a pandemic.

Maintaining essential functions in a pandemic environment may not entail an official "Continuity" declaration. Essential functions may be maintained through contact intervention (social distancing) strategies, and may not require the relocation of NCEM or SERT personnel. It is important to remember, however, that relocation may be necessary due to a separate or concurrent event.

3. CONCEPT OF OPERATIONS.

NCEM and the SERT will use the Pandemic Influenza Federal Response Stages for Pandemic Continuity Plan activation criteria and/or "triggers" for actions. These

stages are described in Appendix 2. Additionally, the Director/SERT Leader may choose to add additional Pandemic Continuity Plan activation criteria and responses to accommodate unique aspects of NCEM and the SERT. In every case, NCEM and SERT actions will be consistent with established Office of State Personnel policy regarding Communicable Disease Emergencies.

4. PANDEMIC PLANNING ASSUMPTIONS.

a. GENERAL ASSUMPTIONS

- (1) Susceptibility to the pandemic influenza virus will be universal.
- (2) Efficient and sustained person-to-person transmission signals an imminent pandemic.
- (3) The clinical disease attack rate will likely be 30 percent or higher in the overall population during the pandemic. Illness rates will be highest among school-aged children (about 40 percent) and decline with age. Among working adults, an average of 20 percent will become ill during a community outbreak. Some persons will become infected but not develop clinically significant symptoms. Asymptomatic or minimally symptomatic individuals can transmit infection and develop immunity to subsequent infection.
- (4) Of those who become ill with influenza, 50 percent will seek outpatient medical care. With the availability of effective antiviral drugs for treatment, this proportion may be higher in the next pandemic.
- (5) The number of hospitalizations and deaths will depend on the virulence of the pandemic virus. Estimates differ about 10-fold between more and less severe scenarios. Two scenarios are presented based on extrapolation of past pandemic experience (See Table 1, below). Planning should include the more severe scenario. Risk groups for severe and fatal infection cannot be predicted with certainty but are likely to include infants, the elderly, pregnant women, and persons with chronic medical conditions.

Table 1: Number of Episodes of Illness, Healthcare Use, and Death Associated with Moderate and Severe Pandemic Influenza Scenarios*		
Characteristic	Moderate (1958/68)	Severe (1918)
Illness	90 million (30%)	90 million (30%)
Outpatient Medical Care	45 million (50%)	45 million (50%)
Hospitalization	865,000	9,900,000
ICU Care	128,750	1,485,000
Mechanical Ventilation	64,875	745,500
Deaths	209,000	1,903,000

*Estimates based on extrapolation from past pandemics in the United States. Note that these estimates do not include the potential impact of interventions not available during the 20th century pandemics.

- (6) Rates of absenteeism will depend on the severity of the pandemic. In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members and fear of infection may reach 40 percent during the peak weeks of a community outbreak, with lower rates of absenteeism during the weeks before and after the peak. Certain public health measures (closing schools, quarantining household contacts of infected individuals, “snow days”) are likely to increase rates of absenteeism.
- (7) The typical incubation period (interval between infection and onset of symptoms) for influenza is approximately two days.
- (8) Persons who become ill may shed virus and can transmit infection for up to one day before the onset of symptoms. Viral shedding and the risk of transmission will be greatest during the first two days of illness. Children usually shed the greatest amount of virus and therefore are likely to post the greatest risk for transmission.
- (9) On average, infected persons will transmit infection to approximately two other people.
- (10) A pandemic outbreak in any given community will last about six to eight weeks for each wave of the pandemic.
- (11) Multiple waves (periods during which community outbreaks occur across the country) of illness could occur with each wave lasting two-three months. Historically, the largest waves have occurred in the fall and winter, but the seasonality of a pandemic cannot be predicted with certainty.

- (12) The stages of the pandemic should occur sequentially, though they may overlap or occur so rapidly as to appear to be occurring simultaneously or being skipped. For example, the pandemic could spread so rapidly that Federal Government Response Stages 3 and 4 may be activated simultaneously or a change from Stage 3 to 5 is ordered.

b. NCEM/SERT ASSUMPTIONS

- (1) NCEM and the SERT (if activated) will be operational during a pandemic influenza outbreak.
- (2) All SERT agencies have executable continuity plans and capabilities.
- (3) Alternate facilities may be activated for use during a pandemic. NCEM and/or the SERT may make its alternate facilities, along with other locations, available to be used as a precaution to separate staff, that is, to implement social distancing protocols. A pandemic influenza event will not necessarily require the use of alternate facilities.
- (4) NCEM Essential functions, operations, and support requirements will continue to be people-dependent. These activities require human interactions to be carried out. Many of these interactions may not require face-to-face contact, or they may be conducted with precautionary measures.
- (5) Travel restrictions, such as limitations on mass transit, implemented at Federal, State, and/or local levels will affect the ability of staff to get to work.

5. ELEMENTS OF A VIABLE CONTINUITY CAPABILITY

- a. PLANS AND PROCEDURES. NCEM/SERT pandemic influenza continuity planning and response actions will be appropriately linked to the Federal Government Response Phases (see Appendix 1). A change from one Federal Government Response Phase to another automatically activates certain readiness measures and procedures.
 - (1) Pandemic Coordinators and Pandemic Response Teams. The Director has designated the Deputy Director as the Pandemic Coordinator. The Personnel Manager will serve as the Alternate Pandemic Coordinator. The Deputy Director will establish a Pandemic Response Team (PRT) to anticipate the impacts of a pandemic on NCEM/SERT and to assist with developing strategies to manage the effects of a pandemic outbreak.

Each NCEM section will designate a Pandemic Coordinator to serve on the division Pandemic Response Team. The Pandemic Coordinator should work closely with the Component's Continuity Program Manager. The Continuity Program Manager will serve as a member of the PRT.

- (2) **Sustaining Operations.** Sustaining operations will be performed until normal business activity can be reconstituted; this may take longer than 30 days. The principal focus in making this determination will be the minimization of the effects of a pandemic on staff and operations. NCEM will implement, as necessary, procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and telework to sustain operations.
 - (3) **Risk Communications.** To keep everyone advised of pandemic status, NCEM will develop a Risk Communications Plan for communicating with members and SERT partners. A change from one Federal Government Response Stage to another should trigger certain readiness measures. When conditions change from one Federal Response Stage to another, or as directed by the Director/SERT Leader, members receive messages from NCEM leadership. In a pandemic influenza environment, NCEM pandemic continuity planning and response actions will be appropriately linked to the Federal Government Response Stages (see Appendix 1 for a mapping of WHO Global Pandemic Phases to Federal Government Response Stages).
 - (4) **NCEM Response Phases.** The Secretary of Homeland Security, in coordination with Department of Health and Human Services, the White House Homeland Security Council, and other Federal partners as required, will set the Federal Government Response Stages as a pandemic evolves. NCEM will use these response stages, but may also use internal customized phases to achieve enhanced response capability. If customized response phases are used, the Director will establish and implement actions corresponding with each phase.
- b. **ESSENTIAL FUNCTIONS.** According to the Implementation Plan for the National Strategy for Pandemic Influenza, during a pandemic or any other emergency, essential functions must be continued to facilitate emergency management and overall national recovery. Given the expected duration and potential multiple waves of a pandemic, NCEM must review essential functions and services to take into account the need to perform essential functions beyond the traditional 30-day continuity requirement. During a pandemic situation, when the SERT is not activated, NCEM section chiefs will

prioritize activities and complete tasks accordingly as staffing allows. Sections chiefs will emphasize and implement, as required, procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and teleworking.

- (1) The Director and section chiefs will identify positions, skills, and personnel needed to continue functions and services. Components will also identify back-up personnel, in different geographic locations, by position, and ensure that all personnel needed to perform those functions also receive continuity and specific pandemic influenza training.
 - (2) Alternative Work Arrangements. The Director and sections will assess which functions and services can be conducted through the use of alternative work arrangements (e.g., home, staggered work hours, flex time, etc.).
 - (3). Contract and Support Services and Contractual Staff. The Director and section chiefs will initiate pre-solicited, signed and standing agreements with contractors and other third parties to ensure fulfillment of mission requirements.
 - (4) Impact Analysis on Operations. When/if a pandemic situation is deemed likely by State medical authorities, the Director will conduct an impact analysis of an influenza outbreak on all operations, using multiple scenarios, including:
 - (a) Workforce reductions (up to 40 percent absenteeism for 1 month, 2 months, 3 months).
 - (b) Limited access to facilities.
 - (c) Impact of telework and social distancing policies.
- c. DELEGATIONS OF AUTHORITY. At the height of a pandemic wave, absenteeism may reach a peak of 40 percent. As such, delegations of authority, where required, are critical. Delegations of Authority can be found on page 7 of the NCEM/SERT Continuity Plan
- (1) Delegations of Authority, where necessary, should be designated at least three deep per responsibility to take into account the expected rate of absenteeism and to assure continuity of operations over an extended time period, i.e., 30-60-90 days.

- (2) NCEM will plan for geographical dispersion as necessary, taking into account the regional nature of an outbreak.
- d. **ORDERS OF SUCCESSION.** NCEM Orders of Succession will be as listed in the NCEM/SERT basic continuity plan.
 - e. **ALTERNATE OPERATING FACILITY(IES).** The traditional use of alternate operating facilities to maintain essential functions and services may not be a viable option during a pandemic. Rather, safe work practices, which include contact interventions and transmission interventions, reduce the likelihood of contacts with other people that could lead to disease transmission. Strategies for maintaining essential functions and services will largely rely on social distancing and dispersion of the workforce including telework, preventative health practices, and other efforts to reduce the chance of infection. NCEM may choose to make its alternate facility(ies), along with other locations, available to be used as a means of implementing social distancing. A separate incident concurrent to a pandemic outbreak could necessitate the use of an alternate operating facility for NCEM and/or the SERT.
 - f. **CONTINUITY COMMUNICATIONS.** According to the National Strategy Implementation Guidance, workplace risk can be minimized through implementation of systems and technologies that facilitate communication without person-to-person contact.
 - (1) **Telework Analysis and Development of Capability.** NCEM will analyze its current telework capability and identify personnel performing who need to telework, and the IT requirements, tools, and resources necessary to support telework during a pandemic. The use of laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), flash drives, and other systems that enable employees performing mission essential functions and services to communicate and maintain connectivity with internal organizations, external partners, critical customers, and other key stakeholders will be considered when performing analysis.
 - (2) **Telework Plan.** As required, NCEM will develop a telework plan, which identifies personnel who need to telework, a description of their responsibilities while teleworking, the infrastructure needed to support this work and how technological assistance will be provided to teleworkers.

- (3) Telework Test, Training and Exercises. When a telework plan is developed, NCEM will evaluate such plans, procedures, and capabilities through reviews, testing, post-incident reports, lessons learned, performance evaluations, and exercises. Procedures will be established to ensure corrective action is taken to correct deficiencies identified in the evaluation process.
 - (4) The Director will provide NCEM members relevant information including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.
- g. VITAL RECORDS AND DATABASES. Vital records and databases will be identified and maintained as directed in the NCEM/SERT basic Continuity Plan.
- h. HUMAN CAPITAL. Human Capital Management will be conducted according to Communicable Disease Emergency policy listed in the North Carolina State Personnel Manual.
- i. TEST, TRAINING AND EXERCISES. Pandemic flu situations will be included in annual continuity training, tests, and exercises with emphasis on sustainable social distancing techniques, telework, and impacts of reduced staff.
- j. DEVOLUTION. Devolution will be as described in the NCEM/SERT basic Continuity Plan.
- k. RECONSTITUTION. Reconstitution embodies the ability of an organization to recover from a catastrophic event and consolidate the necessary resources that allow it to return to a fully functional entity. The objective during the recovery and reconstitution phase during a pandemic is to expedite the return of normal services. In all cases, reconstitution will be consistent with established Office of State Personnel policy regarding Communicable Disease Emergencies. NCEM will replace employees as necessary according to policy and procedures set by the Department of Crime Control and Public Safety and by the Office of State Personnel.

6. Appenidices
 - a. Appendix 1. Federal Government Response Stages and World Health Organization (WHO) Phases
 - b. Appendix 2. Pandemic Influenza CONTINUITY Elements Checklists for Federal Government Response Stages (Offered for Reference/Information Only)

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APPENDIX 1 TO ANNEX F
 NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
 CONTINUITY PLAN

FEDERAL GOVERNMENT RESPONSE STAGES AND WORLD HEALTH
 ORGANIZATION (WHO) PHASES CHART

Federal Government Response Stages						
Stage 0	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5	Stage 6
New Domestic Animal Outbreak in At-Risk Country	Suspected Human Outbreak Overseas	Confirmed Human Outbreak Overseas	Widespread Human Outbreaks in Multiple Locations Overseas	First Human Case in North America	Spread throughout United States	Recovery and Preparation for Subsequent Waves
WHO Phase 1 or 2: Inter-Pandemic Period	WHO Phase 3: Pandemic Alert Period	WHO Phase 4 or 5: Pandemic Alert Period	WHO Phase 6: Pandemic Period			

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APPENDIX 1 TO ANNEX F
NORTH CAROLINA DIVISION OF EMERGENCY MANAGEMENT
CONTINUITY PLAN

PANDEMIC INFLUENZA CONTINUITY ELEMENTS CHECKLISTS FOR FEDERAL
GOVERNMENT RESPONSE STAGES

These checklists are offered for information/reference only. North Carolina Emergency Management and the State Emergency Response Team may not use them verbatim in a pandemic event, but they will be useful guidance in building our own detailed checklists. In every case, NCEM and SERT actions will be consistent with established Office of State Personnel policy regarding Communicable Disease Emergencies.

Federal Response Stage 0: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	0
WHO Pandemic Phase	1-3

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review plans and procedures for pandemic influenza.
2) Essential Functions		
		Assuming that the animal outbreak will lead to a human outbreak, ensure essential functions and services have been identified
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up
3) Delegations of Authority		
		Review and update Delegations of Authority.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation.
		Ensure readiness of staff telework and/or devolution arrangements to include communications equipment.

6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.
		Update website(s) with latest pandemic information.
7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Implement workforce guidelines (contact and transmission interventions) to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to contagious disease for those employees in high-risk occupations that come in contact with potentially diseased animals. Review workforce guidelines for other employees.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce.
		Review and update pay and leave policies as necessary.
		Review and update hiring policies as necessary.
		Test telework capability for people, processes, and technology.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		In anticipation of a mutation from an animal to a human outbreak, review and continuously update safety and health policies on, including but not limited to: <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by animal or human disease; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Restriction of travel to geographic areas affected by animal or human disease; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and

		<p>training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies);</p> <ul style="list-style-type: none"> • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises		
		Test, train, and exercise capability to maintain essential functions and services.
10) Devolution of Control		
		Review plan against current condition.
11) Reconstitution		
		Review plan against current condition.

Federal Response Stage 1: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	1
WHO Pandemic Phase	3

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review plans and procedures for pandemic influenza.
2) Essential Functions		
		Review and communicate essential functions and services that will continue and non-essential functions that will be suspended temporarily.
		In anticipation of a migration of the outbreak to U.S. citizens, ensure essential functions and employees have been identified.
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority		
		Review and update Delegations of Authority.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment
6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and changes in working conditions.
		Realign and re-issue communications resources as appropriate.
		Update website with latest pandemic information.

7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Review and incorporate OPM's Human Capital Planning guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.
		Implement workforce guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.
		Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.
		Implement infection control measures.
		Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer, which in turn consolidates and reports the Department's information to OPM.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce.
		Develop an employee-labor relations plan for and conduct post-implementation bargaining that may be necessary as the result of management actions.
		Administer and execute pay and leave policies as necessary.
		Administer and execute hiring policies as necessary.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		Review and continuously update safety and health policies on, including but not limited to:

	<ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) appropriate selection/use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Test, train, and exercise capability to maintain essential functions and services, incorporating Lessons Learned from previous Response Stages and implementing corrective actions.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 2: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	2
WHO Pandemic Phase	4-5

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review plans and procedures for pandemic influenza. NCEM/SERT may begin implementing parts of the PI Plan.
2) Essential Functions		
		Review and communicate essential functions and services that will continue and non-essential functions that will be suspended temporarily.
		In anticipation of a migration of the outbreak to US citizens, ensure essential functions and employees have been identified.
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority		
		Review and update Delegations of Authority.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment
6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational.

		Realign and re-issue communications resources as appropriate.
		Update website with latest pandemic information.
7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Review and incorporate OPM's Human Capital Planning guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.
		Implement workforce guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.
		Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.
		Implement infection control measures.
		Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce including contract workers.
		Administer and execute pay and leave policies as necessary.
		Administer and execute hiring policies as necessary.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		Review and continuously update safety and health policies on, including but not limited to: <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of

	<p>becoming ill while at their normal work site;</p> <ul style="list-style-type: none"> • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Test, train, and exercise Headquarters capability to maintain essential functions and services, incorporating Lessons Learned from previous Response Phases and implementing corrective actions.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 3: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	3
WHO Pandemic Phase	6

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review plans and procedures for pandemic influenza.
2) Essential Functions		
		Review and communicate essential functions and services that will continue and non-essential functions that will be suspended temporarily.
		In anticipation of a migration of the outbreak to U.S. citizens, ensure essential functions and employees have been identified.
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority		
		Review and update Delegations of Authority.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and changes in working conditions.

		Realign and re-issue communications resources as appropriate.
		Update website with latest pandemic information.
7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Review and incorporate OPM's Human Capital Planning guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.
		Implement workforce guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.
		Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.
		Implement infection control measures.
		Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce.
		Administer and execute pay and leave policies as necessary.
		Administer and execute hiring policies as necessary.
		Test, and as necessary, implement telework capability.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		Review and continuously update safety and health policies on, including but not limited to:

	<ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Test, train, and exercise Headquarters capability to maintain essential functions and services, incorporating Lessons Learned from previous Response Phases and implementing corrective actions.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 4: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	4
WHO Pandemic Phase	6

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review plans and procedures for pandemic flu.
2) Essential Functions		
		Review and communicate essential functions and services that will continue and non-essential functions that will be suspended temporarily.
		Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up personnel
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority		
		Review and update Delegations of Authority.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment
6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational.
		Realign and re-issue communications resources.
		Update website with latest pandemic information.

7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Review and incorporate OPM's Human Capital Planning Guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.
		Implement workforce guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.
		Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.
		Implement infection control measures.
		Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce.
		Implement the previously developed employee-labor relations plan.
		Administer and execute pay and leave policies as necessary.
		Administer and execute hiring policies as necessary.
		Test, and as necessary, implement telework capability.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		Review and continuously update safety and health policies on, including but not limited to: <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic;

		<ul style="list-style-type: none"> • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises		
		Note suggestions for improvements to TT&E plans for future modification.
10) Devolution of Control		
		Implement full or partial devolution of control and direction as necessary.
11) Reconstitution		
		Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.

Federal Response Stage 5: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	5
WHO Pandemic Phase	6

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review and fully implement plans and procedures for pandemic influenza.
2) Essential Functions		
		Review and communicate essential functions and services that will continue and non-essential functions that will be suspended temporarily
		Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up personnel
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up
3) Delegations of Authority		
		Review and update Delegations of Authority.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.

		Realign and reissue communications resources as appropriate.
		Update website with latest pandemic information.
7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Review and incorporate OPM's Human Capital Planning Guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.
		Implement workforce guidelines to prevent or minimize workplace exposure to contagious disease.
		Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary.
		Implement infection control measures.
		Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce.
		Administer and execute pay and leave policies as necessary.
		Administer and execute hiring policies as necessary.
		Test, and as necessary, implement telework capability.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		Review and continuously update safety and health policies on, including but not limited to: <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected

	<p>by the pandemic;</p> <ul style="list-style-type: none"> • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Note suggestions for improvements to TT&E plans for future modification.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 6: Pandemic Influenza CONTINUITY Checklist

Federal Response Stage	6
WHO Pandemic Phase	6

Continuity Element	√	Actions To Be Taken
1) Plans and Procedures		
		Review plans and procedures for pandemic influenza for lessons learned and update in preparation for next wave.
2) Essential Functions		
		Review and communicate essential functions and services that will continue and non-essential functions that will be suspended temporarily
		Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up personnel
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up
3) Delegations of Authority		
		Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession		
		Review and update Order of Succession.
5) Alternate Operating Facility(ies)		
		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Continuity Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, etc.)

		to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours. Realign and reissue communications resources as appropriate.
		Update website with latest pandemic information.
7) Vital Records and Databases		
		Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital		
		Review and incorporate OPM's Human Capital Planning Guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.
		Implement workforce guidelines to prevent or minimize workplace exposure to contagious disease.
		Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary.
		Implement infection control measures.
		Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information.
		Discuss the effect of pandemic related human capital issues with its procurement and contract workforce.
		Administer and execute pay and leave policies as necessary.
		Administer and execute hiring policies as necessary.
		Test, and as necessary, implement telework capability.
		Review and update technology support (i.e., help desk) sufficient to meet telework needs.
		Review and continuously update safety and health policies on, including but not limited to:

	<ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	Review and update TT&E plan incorporating Lesson Learned from previous Response Phases and implementation of corrective actions.
10) Devolution of Control	
	Implement full or partial devolution of control and direction as necessary.
11) Reconstitution	
	Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.

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