

**PORTAGE COUNTY HEALTH DEPARTMENTS
CONTINUITY OF OPERATIONS PLAN**

Primary Agencies:	Portage County Combined General Health District Portage County Emergency Management Agency
Support Agencies:	Kent City Health Department Ravenna City Health Department All participating Portage County Agencies
Supporting Plans:	Portage County Emergency Operations Plan
Ohio Revised Code:	§5502.22(A) – Establishment of Emergency Management Agency §5502.24(B) – Designation of Temporary Seats of Local Government §5502.26(A) – Establishment of Countywide EMA §5502.28(C) – Adoption of NIMS in Ohio §5502.39 – EMA Service and Reimbursement Fund

I. INTRODUCTION

Recent events worldwide have prompted all levels of government to take a closer look at Continuity of Operations Planning (COOP) and the positive impact it can have on their organizations. Such events include the tragedy of September 11, 2001, the bombing of the Murrah Federal Building in Oklahoma City, the largest power outage in 30 years that struck states from Ohio to Connecticut and into Canada for several days in August of 2003, and one of the costliest natural disasters recorded in the state of Ohio’s history that occurred on January 5, 2005, as significant ice accumulated over nine (9) counties, including Portage. The storm resulting in the loss of electrical service to 80 percent of the customers in those counties for up to 10 days and damaged thousands of homes and businesses.

Continuity of Operations (COOP) is an effort to ensure the stability of essential functions during a wide range of potential emergencies and events. The changing nature of the disasters and emergencies that threaten governmental operations is obvious. Before the mid-1990s, governments and the public were primarily concerned with the impacts of natural and accidental technological disasters. Since that time, our nation has been forced to acknowledge and plan for the devastating consequences of international acts of destruction which encompass the need for COOP capabilities and plans, as COOP planning is now viewed as a “good business practice.”

The mission of every government agency in Portage County is to provide reliable service to its populace. The obligation of the Portage County Local Health Departments is also to provide seamless services, especially those involving public safety and health, in spite of such an event.

A. PURPOSE

The purpose of this Continuity of Operations Plan (COOP) is to describe how the Portage County Local Health Departments will operate in the event that an emergency threatens or incapacitates operations. This COOP Plan provides a program for continuing operations following a disaster event whether natural, technological or man-made, and facilitates the performance of those departments' essential functions during an emergency that may disrupt normal operations. The primary goal of this plan is to restore essential functions at alternate sites within 12 hours of activation and having the ability to perform those functions for up to 30 days in accordance with applicable federal and state guidance.

B. SCOPE AND APPLICABILITY

- Ensures the performance of the Portage County Local Health Departments essential functions and operations during a disaster event whether natural, technological or man-made.
- Addresses the three (3) phases of COOP: Activation and Relocation, Alternate Facility Operations, and Reconstitution.
- Provides assistances for reducing loss of life and minimizing damages and losses in Portage County.
- Establishes guidelines to execute, as required, successful succession of command with accompanying authorities in the event a disruption renders agency leadership unable, unavailable, or incapable of assuming and performing their authorities and responsibilities of office.
- Ensures that the Portage County Local Health Departments have alternate facilities from which to continue to perform their essential functions during a disaster event.
- Identifies a method for protecting essential facilities, equipment, vital records, and other assets.

- Describes guidelines that allow for a timely and orderly recovery from an emergency and reconstitution of normal operations that allows resumption of essential functions for both internal and external tasks.
- Describes integrated testing, training, and exercise programs that ensures and validates COOP readiness.
- Outlines plan maintenance procedures to be followed to ensure COOP effectiveness.
- This COOP Plan is applicable to all departments, divisions, units, personnel, facilities, systems, and vital records operated or maintained by the Portage County Local Health Departments.
- This document applies to a full range of circumstances, from a short-term localized event to a long-enduring regional emergency that may impact multiple operating facilities and applies to natural disaster events as well as technological and man-made threats.

C. OBJECTIVES

1. The objectives of this plan are as follows:
 - Maintain command and direction and control during emergencies.
 - Reduce disruptions and ensure continuous performance of essential operations.
 - Protect essential facilities, equipment, records, and other assets.
 - Assess and minimize damages and losses.
 - Provide organizational and operational stability.
 - Facilitate decision-making during an emergency.
 - Identify relocation sites and ensure operational and managerial requirements are met before an emergency occurs.
 - Achieve an orderly recovery from emergency operations.
 - Provide for the line of succession to critical management and governmental positions.
 - Provide resources and capabilities to develop plans for restoring or reconstituting regular activities, depending upon the scope, severity, and nature of the incident.

D. AUTHORITIES

1. Local

- a. Portage County Resolution for Emergency Management.
 - b. Portage County Resolution authorizing NIMS Implementation.
2. State
- a. ORC Title LV, Chapter 5502, Section 22(A) – Establishment of Emergency Management Agency.
 - b. ORC Title LV, Chapter 5502, Section 24(B) – Designation of Temporary Seats of Local Government.
 - c. ORC Title LV, Chapter 5502, Section 26(A) – Establishment of Countywide EMA.
 - d. ORC Title LV, Chapter 5502, Section 28(C) – Adoption of NIMS in Ohio.
 - e. ORC Title LV, Chapter 5502, Section 39 – EMA Service and Reimbursement Fund.
 - f. ORC Section 161.03 – Order of Succession To The Governorship.
 - g. ORC Section 161.04 – Designation of Interim Successors.
 - h. Ohio Executive Order 2004-14T, Office of the Governor of Ohio, NIMS Implementation, July 30, 2004.
3. Federal
- a. Presidential Decision Directive 67, Enduring Constitutional Government and Continuity of Government Operations, October 21, 1998.
 - b. The Homeland Security Act of 2002 (Public Law 107-296), November 25, 2002.
 - c. Executive Order 13286, Establishing Office of Homeland Security, February 28, 2003.
 - d. Executive Order 12656, Assignment of Emergency Preparedness Responsibilities November 18, 1988, as amended.
 - e. Executive Order 12472, Assignment of National Security and Emergency Preparedness Telecommunications Functions, April 3, 1984.
 - f. Homeland Security Presidential Directive (HSPD)-1: Organization and Operation of the Homeland Security Council.
 - g. HSPD-5: Management of Domestic Incidents.
 - h. HSPD-7: Critical Infrastructure Identification, Prioritization, and Protection.
 - i. HSPD-8: National Preparedness.
 - j. HSPD-20: National Continuity Policy.
 - k. National Response Plan, December, 2004.

- l. Emergency Management and Assistance, 44 CFR 2.1.
- m. Federal Communications Commission (FCC) Rules and Regulations.

E. REFERENCES

1. Federal Preparedness Circular 65, Federal Executive Branch Continuity of Operations, July 26, 1999.
2. Federal Preparedness Circular 66, Test, Training and Exercise Program for Continuity of Operations, April 30, 2001.
3. Federal Preparedness Circular 67, Acquisition of Alternate Facilities for Continuity of Operations, April 30, 2001.
4. 41 Code of Federal Regulations 101.20.103-4, Occupant Emergency Program, revised July 1, 2000.
5. 36 Code of Federal Regulations, Part 1236, Management of Vital Records, revised July 1, 2000.
6. Homeland Security Presidential Directive 3, Homeland Security Advisory System, March 11, 2002.
7. Federal Emergency Management Agency (FEMA) Continuity of Operations (COOP) Plan Template Instructions, 2004.
8. Ohio Emergency Management Agency (OEMA) Continuity of Operations Plan Guidance for Local Governments, 2006.
9. Virginia Department of Emergency Management Continuity of Operations Planning Manual, September, 2006.

F. HAZARD VULNERABILITY ANALYSIS

1. The following classifications were utilized to develop the Hazard Vulnerability Analysis: Frequency, Vulnerability, Exposure and Risk to Portage County. (Portage County Hazard Analysis Attachment 1)

II. PLANNING ASSUMPTIONS AND CONSIDERATIONS

A. ASSUMPTIONS

1. Many of the hazards that exist in, or around, Portage County have the potential to cause disasters of such magnitude as to make continuity of operations planning desirable or essential.
2. The Portage County Local Health Departments will be operational no later than 12 hours following COOP activation.
3. The Portage County Local Health Departments will sustain operation of essential functions for 30 days following a disaster event.
4. The Portage County Local Health Departments will be capable of implementing this plan with and without warning.
5. Alternate operating facilities, located in areas where power, telecommunications, and internet grids are distinct from those of the primary facilities have been obtained.
6. Personnel and other resources from Portage County and other organizations outside of the county will be made available if required to continue essential operations.
7. Appropriate resources will be available for COOP planning and development and for supporting essential operations during a disaster event.
8. A method to ensure a regular risk analysis of the current alternate operating facilities has been established.
9. A method to ensure that regularly scheduled testing, training and exercising of personnel, equipment, systems, processes, and procedures used to support the Portage County Local Health Departments during a COOP event have been identified.

III. CONCEPT OF OPERATIONS

A. GENERAL

1. It is the responsibility of the Portage County Local Health Departments to provide for the continuity of essential operations following an emergency.
2. Activation of the Health Departments COOP plan may involve the deliberate and pre-planned movement of selected key personnel and technical personnel to an alternate operating facility, the implementation of temporary work procedures, and the delegation of emergency authorities to successors of senior management and technical personnel who are unavailable during the emergency to perform specific activities necessary to ensure essential functions.

3. In the event of activation or partial activation of the COOP plan, designated teams will be established by the Portage County Local Health Departments to manage and perform essential functions. This includes staff identified as the COOP Planning Team and other identified key positions to provide management and technical functions necessary to establish essential functions within 12 hours after the emergency event. In addition, supporting personnel will be identified to perform critical activities necessary to sustain essential functions for a period of up to 30 days.
4. Portage County Local Health Departments employees and volunteers designated as the Emergency Relocation Group (ERG), which will be identified at the time of activation, will utilize all available vehicles at the primary facility including personal and company vehicles to relocate personnel, equipment and vital records to the identified alternate facilities.
5. At the request of the County Emergency Management Agency, local law enforcement will provide security at the primary or alternate facilities.

B. PHASES OF COOP ACTIVATION

1. COOP implementation is broken into three (3) phases: Activation and Relocation, Alternate Operating Facility Operations, and Reconstitution.
 - a. The Portage County Local Health Departments will conduct the Activation and Relocation Phase within the first 12 hours of COOP activation. This phase involves plan activation and the transferring essential functions, personnel, records, and equipment to alternate operating facilities.
 - b. The Portage County Local Health Departments will conduct the Alternate Operating Facility Phase following the initial 12 hours of a disaster and will continue for 30 days or longer depending on the time needed to begin reconstitution. This phase involves providing immediate notification to all affected persons as to the location of alternate facilities, as well as the facilities current operational and communications status and the anticipated duration of relocation.
 - c. The Portage County Local Health Departments will conduct the Reconstitution Phase once the all-clear is given from local officials, the emergency situation no

longer presents a potential risk to the population, and power is restored. This phase involves termination of operations at alternate facilities, providing that primary facilities were not severely damaged or destroyed, informing all organizational personnel that the necessity to COOP no longer exists, and providing instructions for resumption of normal operations.

2. The following table provides a brief description of the Portage County Local Health Departments approach to each phase of COOPs activation.

Phase	Time Frame	Activity
Phase I – Activation & Relocation	0-12 Hours	<ul style="list-style-type: none"> • Notify alternate facility manager of impending activation and relocation requirements. • Notify Emergency Management Agency. • Activate plans to transfer to alternate facility. • Instruct <u>Advance Team</u> to ready alternate facility. • Notify agency employees and contractors regarding activation of COOP plan and their status. • Assemble documents/equipment required for essential functions at alternate facility. • Order needed equipment/supplies. • Transport documents and designated communications and equipment. • Secure original facility. • Continue essential functions at regular facility, if available, until alternate facility is ready. • Advise alternate facility on status. • Activate <u>Emergency Relocation Group (ERG)</u> operations and support teams as necessary.
Phase II – Alternate Facility/Work Site Operations	12 Hours to Termination of Emergency	<ul style="list-style-type: none"> • Provide guidance to <u>Non-Emergency Relocation Group</u> personnel and information to the public. • Identify replacements for missing personnel (delegation of authority and orders of succession). • Commence full execution of operations supporting essential functions at the alternate facility. • Information Technology capabilities at the alternate site should include setting up/changing passwords, accessing network files, Internet and e-mail.
Phase III – Reconstitution	Termination of Emergency	<ul style="list-style-type: none"> • Inform all personnel that the threat no longer exists. • Supervise return to normal operating facility. • Conduct a review of COOP plan execution and effectiveness.

C. ESSENTIAL FUNCTIONS

Essential functions are those functions that enable the Health Departments to provide vital services and sustain the industrial and economic base of Portage County.

A listing of the Portage County Local Health Departments prioritized essential functions are attached to this plan.

1. Identifying Essential Functions.

- a. Members of the senior managers of the Portage County Local Health Departments determined the criteria for selecting essential functions.
- b. The agencies of Portage County have identified as essential functions only those most critical activities which ensure the safety and security of system users, employees, contractors, emergency responders and the general public; support the restoration of internal operations, and facilitate emergency response operations.
- c. During activation of this COOP plan, all other activities will be suspended, to enable the agency to concentrate on providing essential county functions and building the internal capabilities necessary to increase and eventually restore operations.
- d. Following the identification of the Portage County Local Health Departments essential functions, senior managers examined the processes and services that support those essential functions, as essential functions and their supporting processes and services are intricately connected.

2. Prioritizing Essential Functions.

- a. The prioritization of the identified essential functions involved the determination of the following:
 - i. Time criticality of each essential function.
 - ii. Sequence for recovery of essential functions and their critical processes.

D. DELEGATIONS OF AUTHORITY (Devolution)

1. The Portage County Local Health Departments have specified who is authorized to make decisions or act on behalf of the department or agency heads and other key

individuals and to ensure rapid response to an emergency situation that requires COOP activation.

2. The process utilized by the Portage County Local Health Departments for the delegation of authority involves the following:
 - a. The identification of which authorities can and should be delegated.
 - b. A description of the circumstances under which the delegation would be exercised, including when it would become effective and terminated.
 - c. The identification of limitation of the delegation.
 - d. Documentation of whom the authority should be delegated.
 - e. A method to ensure officials are trained to perform their emergency duties.

E. ORDERS OF SUCCESSION

A listing of the Portage County Local Health Departments orders of successions is attached to this plan.

1. The Portage County Local Health Departments have taken action to pre-determine lines of succession make provisions for the preservation of vital records and specify procedures to deploy essential personnel, equipment, and supplies to maximize their use and survival.
2. Each staff member shall be responsible for notifying his/her replacement in the line of succession.

F. ALTERNATE OPERATING FACILITY

A listing of Alternate Operating Facility for the Portage County Local Health Departments is attached to this plan.

1. When it becomes necessary to relocate to an alternate site, the ranking senior manager of each affected agency will proceed immediately to that location and assume management of its establishment. The second ranking manager will remain at the primary site until it is abandoned.
2. Once the alternate site is established, staffed and ready for operations, members of the Emergency Relocation Group will be transferred. As outlined in the National Incident Management System (NIMS), the transferring process must include a briefing that captures all essential information for continuing safe and effective

operations. Members of the Non-Emergency Relocation Group will remain at the primary facility as long as possible or will be sent home.

3. Because the need to relocate may occur without warning, the Portage County Local Health Departments should make every effort to pre-position, maintain, or provide for the minimum essential equipment for continued operations of essential functions at alternate operating facilities for a minimum of 14 days.
4. In preparing the list of alternate facilities, the Portage County Local Health Departments identified the capabilities of each alternate facility to support essential functions.
5. There are three (3) types of alternate operating facilities and all have different capacity levels. The following table describes the different types of alternate operating facilities. Assistance with locations that are not identified in this plan will be supplemented by the County Emergency Management Agency.

HOT SITE	A Hot Site is an alternate facility that already has in place the computer, telecommunications, and environmental infrastructure necessary to recover the organization’s essential functions.
WARM SITE	A Warm Site is a site equipped with some hardware and communications interfaces, as well as electrical and environmental conditioning that are capable of providing backup after additional software or customization is performed and/or additional equipment is temporarily obtained.
COLD SITE	A Cold Site is a facility that has in place the environmental infrastructure necessary to recover essential functions or information systems, but does not have preinstalled computer hardware, telecommunications equipment, etc. Arrangements for computer and telecommunications support must be made at the time of the move to the cold site.

6. The following factors were taken into consideration by the Portage County Local Health Departments when selecting their alternate work sites:
 - a. *Location* – Select a site that provides a risk-free environment, if possible, and is geographically dispersed from the primary work location. This will reduce the chance that the site will be affected by the same event that required COOP activation. An alternate facility should be located in an area that has a different water source and power grid as the original building. Road access must also be determined when choosing an alternate location.

- b. *Construction* – The alternate facility should be constructed so that it is relatively safe from the high-risk hazards in the area.
- c. *Space* – The alternate facility must have enough space to house the personnel, equipment, and systems required to support all of the organization’s essential functions.
- d. *Billeting and Site Transportation* – Billeting and site transportation should be available at or near the alternate facility. Sites that are accessible by public transportation and that provide billeting or are near hotels offer important advantages.
- e. *Communications* – The site will need to support the agency’s COOP information technology and communication requirements. The agency will need to acquire any capabilities not already in place. In many cases, redundant communications facilities should be considered to reduce the impact of communication line failures. If this type of configuration is needed, it is advisable to request route diversity to the facility from the communication carrier. This will reduce the impact of problems caused by remote network elements, such as the telephone company’s central office switching gear. Pre-provisioning and testing of interoperable communications capabilities is advisable.
- f. *Security* – Security measures, such as controlled access, should be an inherent part of the alternate facility.
- g. *Life Support Measures* – Access to life support measures, food, water and other necessities, should be available onsite or nearby.
- h. *Site Preparation Requirements* – The amount of time, effort and cost required to make the facility suitable for the agency’s needs is critical.
- i. *Maintenance* – Consider the degree of maintenance required to keep the facility ready for COOP operations. Lower-maintenances facilities offer a distinct advantage in case of no-warning COOP activation.

G. INTEROPERABLE COMMUNICATIONS

Interoperable communications are communications that provide the capability to perform essential functions, in conjunction with other agencies and organizations, until normal operations can resume.

A listing of the Portage County Local Health Departments Interoperable Communications is attached to this plan.

1. Interoperable communications means that response personnel must be able to communicate externally with the general public and with other county agencies, and internally with the agency's leadership and coworkers even if the primary means of communications fails.
2. Upon COOP activation, communications and coordination must be established between the Emergency Management Agency, Senior Managers, Emergency Relocation Group, Non-Emergency Relocation Group, as well as between all primary and secondary facilities.
3. The primary means of communications currently utilized by the Portage County Local Health Departments include; telephones, faxes, Internet, e-mail, cellular phones, pagers and the MARCs 800 MHz radio system.
4. Portable two-way radios will be utilized as a backup communication system to facilitate communications between the primary and alternate facilities.
5. The Portage County Local Health Departments Public Information Officer (PIO) will supply emergency information for the public to the Portage County Emergency Operations Center/Joint Information Center to be distributed to the public through the use of local media outlets.
6. In any emergency/disaster situation resulting in COOP activation, the County PIO, working with the Emergency Operations Center (EOC) staff of the Portage County Emergency Management System will have primary responsibility for informing the public through the utilization of all media communication systems of COOP activation. The County PIO will also provide for rumor control.

H. VITAL RECORDS AND DATABASES

Vital records are those records that regardless of media, if damaged or destroyed would disrupt organization operations and information flow, cause considerable inconvenience and require replacement or recreation at a substantial expense.

A listing of the Portage County Local Health Departments vital records is attached to this plan.

1. Senior managers from each participating county agency will develop a vital records program to ensure the protection and recovery of vital records during disaster events.

2. The vital records program will involve the off site storage of vital records, such as emergency operating records, legal records, and financial records.

I. HUMAN CAPITAL

1. During COOP activation the Portage County Local Health Departments will need to perform with a reduced staff. Effective human capital management is critical in ensuring the flexibility required of key personnel during these times of crisis. Agencies need to ensure that all key personnel are adequately trained and cross-trained to enable the performance of all essential functions.
2. Effective Human Capital Management involves the following:
 - a. Placing the right people in the right jobs to perform the agency's essential functions most effectively.
 - b. Ensuring that all employees have a clear understanding of what they are to do in an emergency.
 - c. Describing specific protocols for identifying and assisting special-needs employees.

J. RECONSTITUTION (TERMINATION & RETURN TO NORMAL OPERATIONS)

A listing of the Portage County Local Health Departments restoration resources are attached to this plan.

1. The Portage County Local Health Departments will begin reconstitution activities once the emergency or disruption ceases and is unlikely to resume. The reconstitution activities will include the transferring of information and resources from the alternate to the primary facility with minimum disruption to essential business functions.
2. Once the all-clear is given from local emergency response officials, preferably within 24 hours, members of the Reconstitution Teams will return to the primary facility to ensure that mission critical systems are operational and that the facility is ready for normal operations to resume.
3. The original or primary facilities will need to be inspected prior to allowing anyone to re-enter the facility.
4. The Portage County Resource Manual can be utilized to obtain resources that are critical to COOP effectiveness.

5. An After Action Report (AAR) to determine the effectiveness of the COOP plan and procedures should be completed in conjunction with senior management immediately after reconstitution and an Corrective Action Plan (CAP) should be developed to track the required plan and program modifications.

IV. ORGANIZATION & ASSIGNMENT OF RESPONSIBILITIES

A. ORGANIZATION

1. COOP planning is a team effort. Responsibility belongs not to a single division, but to personnel at every level of the organization.
2. An effective COOP planning team requires a good mix of organization professionals. It must consist of members from various divisions of the organization, including those not directly related to the mission.
3. During COOP activation, operations will be conducted in accordance with the Incident Command System (ICS) as outlined in the National Incident Management System (NIMS). The departments COOP Point-of-Contact will serve as the Incident Commander (IC) for activation of the COOP.

B. ROLES & RESPONSIBILITIES

PHASE 1 – ACTIVATION & RELOCATION (activation – 12 hours)

1. Senior Management of the Portage County Local Health Departments
 - a. Ensure that county agencies are capable of carrying out the activation and relocation function of COOPs, including planning.
 - b. Developing procedures to ensure the implementation of COOPs.
 - c. Assist in the identification and organization of a COOP planning team.
 - d. Assist in the identification of essential functions, vital records, systems, and equipment.
 - e. Assist in the selection of an alternate facility for the key county personnel.
 - f. Identify and assign key personnel to the Emergency Relocation Group (ERG).
 - g. Identify and assign delegation of authority of key positions.
 - h. Developing performance measures, and facilitating training for their respective agencies.

- i. Coordinate financial forecasting and reporting for COOP related funding.
 - j. Activate plans to transfer to alternate facility.
2. COOP Coordinator/Point-of-Contact
- a. Serve as the Incident Commander during COOP activation.
 - b. Serve as the manager for COOP activation and relocation activities.
 - c. Responsible for developing, coordinating, and managing of all activities required for the agency to perform its essential functions during an emergency or other situation that would disrupt normal operations.
 - d. Act as a liaison between the COOP Planning Team and the County and/or State.
 - e. Assist in the identification and organization of an Emergency Relocation Group (ERG).
 - f. Notify agency employees and contractors regarding activation of COOP Plan and their status.
 - g. Notify alternate facility manager of impending activation and relocation requirements.
 - h. Notify affected local, regional, and state agencies of COOP activation.
 - i. Order needed equipment and supplies.
 - j. Notify agency employees including the Non-Emergency Relocation Group and Emergency Relocation Group (ERG) regarding activation of COOP plan and their status.
 - k. Determine the existence of interoperable communications.
 - l. Conduct periodic COOP exercises and cross-train employees.
 - m. Institute a multiyear process to ensure the plan continues to be updated as necessary.
 - n. Establish an emergency information system for employees to get information about agency operations, pay and benefits and other items of interest.
3. Department/Division COOP planning team (Senior Management)
- a. Serve as members of the Planning Section of the ICS organizations.
 - b. Identify and resolve issues related to COOP Plan development.
 - c. Create checklists for use during COOP activation.
 - d. Develop Building Evacuation Plans.
 - e. Ensure agency personnel are familiar with COOP Procedures.

- f. Attend all COOP planning meetings.
 - g. Assist in the identification of alternate facilities.
4. Non-Emergency Relocation Group
 - a. Secure original facility.
 - b. Continue essential functions at primary facility, if available, until alternate facility is ready.
 - c. Advise alternate facility on status.
 - d. Provide input on the execution of essential functions.
 - e. Assist in identifying and backing-up vital records.
 - f. Ensure that family is prepared for emergency.
 - g. Be prepared to deploy and support the ERG if required.
 5. Emergency Relocation Group
 - a. Become familiar with their agency's section of COOP Plan.
 - b. Participate in COOP tests, training, exercises, and after action report sessions.
 - c. Assemble documents and equipment required for essential functions at alternate facility.
 - d. Report to and transport documents, equipment, and designated communications to the alternate facility upon COOP activation.

PHASE 2 – ALTERNATE FACILITY OPERATIONS (12 hours – 14 days)

1. Department/Division COOP planning team (Senior Management)
 - a. Identify replacements for missing personnel (delegation of authority and orders of succession).
 - b. Assign responsibilities to key staff at the alternate facility.
 - c. Provide for the augmentation of staff if it is determined that initial staffing is inadequate.
 - d. Develop a process to account for and track all employees.
2. Department /Division COOP Point-of-Contact
 - a. Provide guidance to Emergency Relocation Group (ERG) personnel.
 - b. Commence full execution of operations supporting essential functions at the alternate facility.

- c. Activate plans, procedures and schedules to transfer activities, personnel, records and equipment to the alternate facility.
3. Emergency Relocation Group
- a. Transfer activities, personnel, records and equipment to the alternate facility.
 - b. Staff and render alternate facility operational.
 - c. Execute essential functions from the alternate facility.
 - d. Establish communications to all critical county agencies/organization.

PHASE 3 – RECONSTITUTION

- 1. Department/Division COOP planning team (Senior Management)
 - a. Supervise the return of personnel and equipment to the normal operating facility.
 - b. Conduct a review of COOP Plan execution and effectiveness.
 - c. Develop and/or design COOP exercises to test the plan
- 2. Department/Division COOP Point-of-Contact
 - a. Inform all personnel that the threat no longer exists.
- 3. Senior Management
 - a. Coordinate and oversee the reconstitution process.
 - b. Create a reconstitution team.
 - c. Coordinate with reconstitution team to develop a reconstitution plan.
 - d. Identify the necessary objectives for the return to normal operations at the primary or new facility.
 - e. Coordinate with appropriate organizations to obtain office space for reconstitution if the primary facility is not habitable.
 - f. Develop a time-phased plan, listing functions and projects in order of priority for resuming normal operations.
 - g. Ensure facility is structurally safe and it meets local occupancy requirements.

V. DIRECTION & CONTROL

A. PLAN ACTIVATION

1. In the event of a disaster or emergency, the Portage County Local Health Departments will rapidly organize to assess impacts on agency operations, and determine needed actions.
2. The decision matrix below focuses on the way in which emergency events may impact the capabilities of the Portage County Local Health Departments to provide their essential functions. To remain flexible to the variety of situations that could trigger activation, or partial activation, of the COOP plan, this matrix provides guidance. The recommended impacts and decisions may be modified based on the actual events.

Level of Emergency	Portage County COOP Plan Activation Decision Matrix
5	<p>Impact: Disruption of up to 12 hours, with little effect on service or impact to essential functions or critical systems.</p> <p>Decision: No COOP activation required.</p>
4	<p>Impact: Disruption of 12 to 72 hours, with minor impact on essential functions.</p> <p>Decision: Limited COOP activation, depending on agency's requirements.</p>
3	<p>Impact: Disruption to one (1) or two (2) essential functions or to a vital system for no more than three (3) days.</p> <p>Decision: May require partial COOP activation to move certain personnel to an alternate facility or location in the primary facility for less than a week.</p>
2	<p>Impact: Disruption to one (1) or two (2) essential functions or to the entire agency with potential of lasting for more than three (3) days but less than two (2) weeks.</p> <p>Decision: May require partial COOP plan activation. For example, orders of succession for some key personnel may be required; in addition, movement of some personnel to an alternate work site or location in the primary facility for more than a week may be necessary. Personnel not supporting essential functions may be instructed not to report to work, or be re-assigned to other activities.</p>
1	<p>Impact: Disruption of the entire agency with a potential for lasting at least two (2) weeks.</p> <p>Decision: COOP plan activation. May require activation of orders of succession for some key personnel. May require movement of many, if not all, essential personnel to an alternate work site for more than two (2) weeks. Personnel not supporting essential functions may be instructed not to report to work, or be re-</p>

	assigned to other activities.
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3. A sudden emergency, such as a fire or hazardous materials incident, may require the evacuation of an agency building with little or no advanced notice, but for only a short duration. Alternatively, an emergency so severe that an agency facility is rendered unusable and most likely will remain unusable for a period long enough to significantly impact normal operations, may require COOP plan activation.
4. Conditions under which this COOP plan might be activated include the actual or potential denial of access of the primary facilities from which Portage County agencies normally conduct business or employee absenteeism of up to 40 percent (40%) due to an epidemic or pandemic.
5. This plan may be activated in situations such as:
 - a. **Known threats and emergencies (with warning):** There are some threats to operations that may afford advance warning that will permit the orderly alert, notification, evacuation, and if necessary, the relocation of employees. Situations that might provide such warning include floods, a transportation accident resulting in a threat of a release of hazardous materials or a threat of a terrorist incident.
 - b. **Unanticipated threats and emergencies (no warning) during Non-duty Hours:** Incidents may not be preceded by warning, e.g., earthquakes, arson, HAZMAT, or terrorist incidents, and may occur while the majority of on-site staff is not at work. In these circumstances where operations from the primary facilities may be impossible, the majority of employees will still be able to respond to instructions, including the requirement to relocate following proper notification.
 - c. **Unanticipated threats and emergencies (no warning) during Duty Hours:** Incidents may also occur with no warning during normal office hours. In these circumstances, execution of the COOP, if indicated by the circumstances of the event, would begin by execution of the notification of key personnel, possible evacuations and situation assessments.

B. DECISION PROCESS

1. If a situation arises that adversely impacts or threatens one of the Portage County Local Health Department's ability to perform its essential functions, and the

situation is expected to remain as such for a period of 12 hours or more, the senior manager or his/her designee of the affected agency will coordinate with the Emergency Management Agency to determine whether or not to activate this plan.

2. During situations that require an immediate need to activate COOP, the decision to do so will be made solely by the senior manager of the affected agency who will immediately communicate this decision to the Emergency Management Agency and the appropriate health leaders.
3. If a situation occurs that would cause the inability for a facility to occupy personnel or the public, the call for building closure will be made by the County Commissioners (Portage County Health Department) or authority for the Kent City Health Department or Ravenna City Health Department facilities. The occupants will be notified and a decision of what leave of service will be employed.

C. ALERT, NOTIFICATION, AND IMPLEMENTATION PROCESS

1. The Department/Division COOP Point-of-Contact will notify the Manager, who will then notify members of their Advance Teams, COOP planning teams (Senior Managers), Emergency Relocation Groups and Non-Emergency Relocation Groups of the decision to activate this plan.
2. The Portage County Local Health Departments will utilize Appendix 2 (Personnel Contact List) of this plan to make emergency notifications of plan activation at times when advanced warning of a triggering event is provided, when persons cannot access or use their facilities, or when an emergency/disaster occurs during non-working hours. The senior manager of each affected agency will notify managers at the alternate facilities that the COOP plan has been activated and relocation is required. Advance Teams will be deployed to alternate facilities to make them ready for use. During the time between COOP plan activation and when the alternate facilities are ready to support essential operations, Non-Emergency Relocation Groups will continue limited operations at primary facilities.
3. Once Advance Teams inform COOP planning team (senior managers) that alternate facilities are ready to support essential operations, Emergency Relocation Groups will report to alternate facilities.
4. Transportation to alternate facilities will be by company and personal vehicle.

5. Employees reporting to alternate facilities will take their “Go Kits,” containing both work and personal items, and any critical records and databases for which they are responsible and prepare to become fully operational within 12 hours.
6. Members of Non-Emergency Relocation Groups will be instructed by COOP planning team (senior managers) where to report, their responsibilities if different from their normal work and what their function during COOP activation will be.
7. Upon arrival at alternate facilities, ERG personnel will be required to go through a security checkpoint, where they will be required to show an employee badge. Temporary staff hired to fill staffing needs during the COOP emergency may be issued temporary badges by senior managers or their designee.
8. Upon entering the alternate facility, essential employees reporting for duty will sign in on a sign-in sheet so that shift staffing can be tracked.
9. The Portage County Local Health Departments should have a system in place to alert employees that there is an emergency that requires them to leave the building. Alert systems can include fire alarms and building PA systems.
10. Key vendors and customers will also be notified of the intent to activate and deactivate this plan. Notification will be made using usual methods such as land line telephone, cellular telephone, fax and e-mail.

VI. ADMINISTRATION & LOGISTICS

- A. The Portage County Local Health Departments have determined to what level emergency operations can be sustained internally, and have developed procedures to augment capacity beyond that level through the acquisition of services, personnel, resources, and equipment necessary to perform mission essential functions through mutual aid agreements with surrounding Health Departments.
- B. Mutual aid for the support of alternate facilities is addressed in agreements, letters and memorandums of understanding between the Portage County Local Health Departments and the owners of alternate facilities when needed.

- C. Pay status, leave, travel status, and related personnel support issues will be addressed in accordance with existing procedures of the Portage County Local Health Departments.

VII. PLAN DEVELOPMENT, TRAINING & EXERCISES

The effectiveness of this plan will depend on how well personnel know it. To ensure that the Portage County Local Health Departments develop the capability to continue operations all agencies and personnel will be trained and exercised as outlined below.

- A. The Department/Division COOP Point-of-Contact is responsible for ensuring that necessary additions and revisions to this plan are prepared, coordinated, published, and distributed.

- B. Each agency that participates in this plan will review its portion of the plan at least once a year, usually at the termination of an exercise designed to test the plan. Representatives from those agencies will submit their changes to the COOP Point-of-Contact.

- C. Testing
 - 1. As required by FPC-65(Federal Preparedness Circular) the Portage County Local Health Departments COOP test program will include:
 - a. Quarterly testing of alert, notification and activation procedures.
 - b. Quarterly testing of communications capabilities.
 - c. Semiannual testing (to the extent possible) of plans for the recovery of vital classified and unclassified records and critical information systems, services and data
 - d. Annual testing (to the extent possible) of primary and backup infrastructure systems and services at alternate operating facilities.

- D. Training
 - 1. Orientation training will be conducted for all new COOP team members.
 - 2. FPC-65 requires annual training on the following:
 - a. COOP awareness briefings for the entire workforce.

- b. Team training for COOP personnel.
 - c. Team training for agency personnel assigned to activate support and sustain COOP operations.
3. All COOP team members will be encouraged to complete the following independent study courses on continuity of operations available on-line from FEMA.
- a. IS-546 Continuity of Operations Awareness Class
<http://www.training.fema.gov/emiweb/IS/is546.asp>
 - b. IS-547 Introduction to Continuity of Operations
<http://www.training.fema.gov/emiweb/IS/is547.asp>
- E. Exercises will be conducted in accordance with Federal Emergency Management Agency (FEMA) regulations and/or Public Health Emergency Preparedness exercise requirements and the Portage County Public Health training and exercise plan. Exercises will be held as necessary to keep the plan and participating agencies in a state of readiness. Such exercises may be “table top,” “functional,” or “full-scale.” Training needs will be identified as a result of developing an After Action Report (AAR).
- F. Any, and all, sections of this plan can be updated at any time. Many changes are required because of changing information and situations. (See Appendix 5 - Multiyear Strategy and Program Management Plan).

VIII. LIST OF APPENDICES

- Appendix 1 – COOP Point-of-Contact
- Appendix 2 – Personnel Contact List
- Appendix 3 – Checklist for COOP Implementation
- Appendix 4 – Checklist for Identifying and Protecting Vital Records
- Appendix 5 – Multiyear Strategy and Program Management Plan
- Appendix 6 – Definition of Terms and Acronyms

IX. AUTHENTICATION

This Continuity of Operations (COOP) Plan was prepared by the the Portage County Health Departments in cooperation with Portage County Emergency Management and a contractor to develop, implement and maintain a viable COOP capability. This COOP plan complies with applicable internal agency policy, local and state regulations, and supports recommendations provided in the Federal Emergency Management Agency’s (FEMAs) Federal Preparedness Circular-65 (FPC-65). This COOP plan will be distributed internally amongst the Portage County Health Departments and with external agencies that may be affected by its implementation.

SIGNATURE

Date

Portage County Health Commissioner

Date

Portage County OHS/EMA Director