



CONTINUITY OF OPERATIONS PLAN (COOP)

ANNEX A:
Pinellas County Health Department Emergency Operations Plan

**Pinellas County Health Department
Public Health Preparedness**

JUNE 2009

WARNING: This document contains information pertaining to the deployment, mobilization, and tactical operations of the health department in response to emergencies and is exempt from public disclosure under the provisions of section 281.301, Florida Statutes.

Signature Page

The Pinellas County Health Department's Emergency Operations Plan provides an all hazards approach to emergency management. This annex addresses the event that an emergency in Pinellas County threatens or incapacitates operations, and the relocation of selected personnel and functions of any health department facility in Pinellas County is required. This plan will be updated at least annually.

Reviewed and adopted this date _____ by:

Gayle Guidash, MPH
Director, Environmental Health & Preparedness

Claude M. Dharamraj, MD, MPH, FAAP
Director, Pinellas County Health Department

TABLE OF CONTENTS

I. Overview.....	4
A. Purpose.....	4
B. Scope.....	4
II. Situation.....	4
A. Planning Considerations and Assumptions.....	4
III. Concept of Operations.....	5
A. Objectives.....	5
B. General Execution Elements.....	5
C. Time-Phased Implementation.....	7
D. Alternate Relocation Point.....	8
E. Essential Staff.....	8
F. Mission Essential Functions.....	9
G. Delineation of Mission Essential Functions.....	10
H. Warning Conditions.....	10
I. Direction and Control.....	11
J. Operational Hours.....	11
K. Alert and Notification.....	12
IV. Pre- Event Planning.....	13
A. Drive-Away Kits.....	13
B. Telecommunications and Information Systems Support.....	14
C. Security and Access Controls.....	14
D. Vital Statistics and Medical Records.....	14
V. Activation.....	15
A. Alert and Notification Procedures.....	15
B. Initial Actions.....	15
C. Deployment and Departure Procedures.....	17
D. Transition to Alternate Operations.....	17
E. Site-Support Responsibilities.....	18
VI. Operations.....	18
A. Execution of Mission Essential Functions.....	18
B. Establishment of Communications.....	18
C. Relocation of Group Responsibilities.....	19
D. Augmentation of Staff.....	19
E. Amplification of Guidance to Essential and Non Essential Personnel.....	19
VII. Reconstitution and Termination.....	19
A. Overview	19
B. Reconstitution and Termination Plans and Schedules.....	20
C. Procedures.....	20
D. After-Action Review and Remedial Action Plan.....	20
E. Testing, Exercise and Evaluation.....	21
VIII. Authorities and References.....	21
A. Authorities and References.....	21
B. Acronyms.....	22
IX. Check lists, Attachments, and Appendices.....	22

I. Overview

A. Purpose

This Continuity of Operations Plan (COOP) establishes policy and guidance to ensure the execution of the mission essential functions for the Pinellas County Health Department (PinCHD) in the event that an emergency in Pinellas County threatens or incapacitates operations, and the relocation of selected personnel and functions of any health department facility in Pinellas County is required. Specifically, this plan is designed to:

1. Ensure that the PinCHD is prepared to respond to emergencies, recover from them, and mitigate against their impacts.
2. Ensure that the PinCHD is prepared to provide critical services in an environment that is threatened, diminished, or incapacitated.

B. Scope

1. This document is applicable to the Pinellas County Health Department.
2. Support from local governments and other state agencies as described herein will be coordinated with the responsible office as applicable.
3. This document applies to situations determined by the Director of the PinCHD that require relocation/re-establishment of essential functions of the county health department. The scope does not apply to temporary disruptions of service during short-term building evacuations or other situations where services are anticipated to be restored in the primary facility within a short term. The Director will determine situations that require implementation of the COOP.

II. Situation

A. Planning Considerations and Assumptions

In accordance with State guidance and emergency management principles, a viable COOP capability:

1. Must be maintained at a high-level of readiness;
2. Must be capable of implementation both with and without warning;
3. Must be operational no later than three hours after activation;
4. Must maintain sustained operations for up to 30 days; and

5. Should take maximum advantage of existing State or Federal and local government infrastructures.

III. Concept of Operations

A. Objectives

The objective of this COOP is to ensure that a viable capability exists to continue essential county health department functions across a wide range of potential emergencies, specifically when the primary facility is either threatened or inaccessible. The objectives of this plan include:

1. Ensure the continuous performance of PinCHD's essential functions/operations during an emergency;
2. Protect essential facilities, equipment, records, and other assets;
3. Reduce or mitigate disruptions to operations;
4. Reduce loss of life, minimize damage and losses;
5. Identify and designate essential and support staff to be relocated;
6. Identify communication pathways during COOP operations
7. Facilitate decision-making for execution of the plan and the subsequent conduct of operations; and
8. Achieve a timely and orderly recovery from the emergency and resumption of full service to all customers.

B. General Execution Elements

1. Emergencies, or potential emergencies, may affect the ability of the PinCHD to perform its mission essential functions from any or all primary county health department facilities in the county. The following are scenarios that could mandate the activation of the Pinellas County Health Department COOP.
 - a) Any primary county health department facility in Pinellas County is closed to normal business activities as a result of an event or credible threats of an event that would prevent access or use of the county health department facility and the surrounding area.
 - b) Any urban area in Pinellas County is closed to normal business activities as a result of a widespread utility failure, natural disaster, significant hazardous material incident, civil disturbance, or terrorist or military attacks.

Under this scenario there could be uncertainty regarding whether additional events such as secondary explosions, or cascading utility failures could occur. If multiple county health department facilities are located in any of the urban areas in the County, activation of COOP contingencies to address such scenarios may be necessary.

2. In an event so severe that normal operations are interrupted, or if such an incident appears imminent and it would be prudent to evacuate any primary county health department facility or urban area as a precaution, the PinCHD Director may choose to activate this COOP. The relevant alternate facility (See *Attachment 1, Facility Directory*) will be activated, if necessary, and at the discretion of the PinCHD Director.
3. The PinCHD Director or designee will gather at the alternate facility. The director will ensure the mission essential functions of the closed primary facility are maintained and capable of being performed using the relevant alternate facility until full operations is re-established at the primary facility.
4. The PinCHD will utilize the team so designated as the “Executive Management Team” (EMT) which is comprised of the following:
 - a) Director
 - b) Assistant Director/Family Health/Nursing Director
 - c) Disease Control Director
 - d) Medical Director/Clinical Quality Assurance
 - e) Clinical Services Director
 - f) Family Health/ Community Health Director
 - g) Family Health/ Dental Director
 - h) Family Health/ WIC Director
 - i) Environmental Health and Preparedness Director
 - j) Administrative Services Director
 - k) Information Technology (IT) Director
 - l) Legal Council
 - m) Women’s Health Officer
 - n) Minority Health Officer
 - o) Planning and Performance Improvement Officer

This team has already been designated as the “Executive Management Team” (EMT) and may be supplemented by other selected staff as determined by the director. The EMT will serve as an initial relocation team for COOP activation or potential activation. The EMT will either relocate temporarily to the relevant alternate facility, if necessary, or operate remotely from a designated assembly site. The EMT will be responsible to continue mission essential functions of the Pinellas County Health Department within six hours and for a period up to seven days pending regaining access to the affected facility or the occupation of the relevant alternate.

5. All staff necessary to perform the mission essential functions of the PinCHD will need to be contacted and advised to report to either the relevant alternate facility, predetermined secure location, or other location as determined by the EMT. Clear instructions as to the actions necessary to be performed by each of the staff should be predetermined by the EMT given the policy guidance provided by the Director. Staff will be contacted using ReadyAlert, call-down trees, and reverse notification system.
6. Incidents could occur with or without warning and during duty or non-duty hours. Whatever the incident or threat, the PinCHD COOP will be executed in response to a full-range of disasters and emergencies, to include natural disasters, terrorist threats and incidents, and technological disruptions and failures.
7. It is expected that, in most cases, the PinCHD will receive a warning of at least a few hours prior to an incident. Under these circumstances, the process of activation would normally enable the partial, limited, or full activation of the PinCHD COOP with a complete and orderly alert, notification of all personnel, and activation of the EMT.
8. Without warning, the process becomes less routine, and potentially more serious and difficult. The ability to execute the PinCHD COOP following an incident that occurs with little or no warning will depend on the severity of the incident's impact on the physical facilities, and whether the PinCHD personnel are present in the affected facility or in the surrounding area.
9. Positive personnel accountability throughout all phases of emergencies, including COOP activation, is of utmost concern, especially if the emergency occurs without warning, during duty hours. Pinellas County Health Department facility Safety and Evacuation Plans, Administrative and Emergency Procedures, and Section/Office COOP Implementation Plans should provide for such accountability.

C. Time-Phased Implementation

The purpose of a time-phased implementation is to maximize the preservation of life and property in the event of any natural or man-made disaster or threat thereof. The extent to which this will be possible will depend on the emergency, the amount of warning received, whether personnel are on duty or off-duty at home or elsewhere, and possibly, the extent of damage to primary county health department facilities and their occupants. The Disaster Magnitude Classification definitions may be used to determine the execution level of the COOP. These levels of disaster are defined as:

1. Minor Disaster – Any disaster that is likely to be within the response capabilities of local government and results in only minimal need for State or Federal assistance.
2. Major Disaster – Any disaster that will likely exceed local capabilities and require a broad range of State and federal assistance. The Federal Emergency Management Agency (FEMA) will be notified and potential federal assistance will be predominantly recovery-oriented.
3. Catastrophic Disaster – Any disaster that will require massive State and Federal assistance, including immediate military involvement. Federal assistance will involve response as well as recovery needs.

D. Alternate Relocation Point

1. The determination of the alternate relocation point (ARP) will be made at the time of activation by the PinCHD Director in consultation with the EMT and will be based on the incident, threat, risk assessments, and execution timeframe. Attachment 1 lists all primary facilities and their designated alternate locations.
2. To ensure the adequacy of assigned space and other resources, all alternate facilities should be reviewed annually. The PinCHD Director will be advised of the results of this review and any updates to the ARP information.

E. Essential Staff

1. Pinellas County Health Department staff that are displaced from their primary work location and relocate under this plan to the selected alternate facility are known collectively as the essential staff. The essential staff must be able to continue the performance of mission essential functions for up to 30 days with resource support (*See Attachment 2, Essential Personnel Directory*). Depending upon the nature of the event requiring activation of the COOP and the facilities that are affected, the roster of essential personnel may be refined and adjusted by the EMT as necessary. This includes considerations for health (including medical, special needs and travel issues) as well as safety and emotional issues for all employees and their families. For planning purposes the following should be considered minimum essential staff:
 - a) Executive Management Team (EMT)
 - b) Clinical personnel (RN, LPN, MD, DDS, etc)
 - c) Clinic direct support staff
 - d) IT staff
 - e) Facilities staff
 - f) Key supervisors responsible for any displaced mission essential function listed under the *Mission Essential Functions* section of this plan.

2. Since alternate facility space and support capabilities may be limited, the essential staff listing may need to be restricted to only those personnel who possess the skills and experience needed for the execution of mission essential functions.
3. Pinellas County Health Department staff that are not designated as essential staff may be directed to move to other facilities or duty stations, or may be advised to remain at or return home pending further instructions. COOP activation will not, in most circumstances, affect the pay and benefits of either essential or non-essential staff members.
4. Pinellas County Health Department staff that are considered “field staff” may work out of their homes until a base of operations has been established.

F. Mission Essential Functions

It is important to establish priorities before an emergency to ensure that the relocated staff can complete the mission essential functions. All staff shall ensure that mission essential functions can continue or resume as rapidly and efficiently as possible during an emergency relocation (at best within 12 hours or less). Any task not deemed mission essential must be deferred until additional personnel and resources become available.

1. Mission essential functions that must be performed given a **One Day** disruption:
 - a) IT functions
 - b) Facility maintenance functions
2. Mission essential functions that must be performed given a disruption of greater than **One Day** but less than **One Week** (From highest priority to lowest):
 - a) All functions listed in item 1, above
 - b) Communicable disease treatment (STD, TB, HIV/AIDS)
 - c) Preventative and Primary Health Services
 - d) Pharmacy Services
 - e) Environmental Health/Engineering
 - f) Epidemiology and Public Health Surveillance
 - g) Immunizations
 - h) Vital Statistics
 - i) Financial Management (including contracting, purchasing)

Note: After one week of emergency operations either normal operation must be reinstated or emergency operations must ensure the functions listed in item 3, below are performed.

3. Mission essential functions that must be performed given a disruption of greater than **One Week** but less than **One Month** (From highest priority to lowest):

- a) All Functions listed in item 1 and item 2, above
- b) HIV/AIDS Surveillance
- c) STD Program
- d) WIC
- e) Health Promotion and Education
- f) Healthy Start
- g) Human Resources
- h) All other functions as determined by the EMT

Note: After one month of emergency operations all CHD functions must be resumed at some level.

G. Delineation of Mission Essential Functions

If the COOP cannot be implemented for any reason, the PinCHD function will revert to the Florida Department of Health (FDOH). The FDOH will then determine which health department or other organization will perform this public health mission for Pinellas County.

1. If the COOP cannot be implemented for any reason, the FDOH will assume the responsibility for the ensuring the continuous performance of the PinCHD mission essential functions.
2. If for any reason the FDOH cannot assume or maintain responsibility for the execution of the PinCHD COOP and continuous performance of mission essential functions, the Emergency Support Function (ESF) 8, health and medical, function at the State Emergency Operations Center (SECOC) will designate a neighboring county health department to assume responsibility for the mission essential functions.
3. ESF-8 at the SEOC may send a forward "Incident Management Team" or IMT to supplement PinCHD operations.

H. Warning Conditions

1. With Warning – It is expected that, in most cases, the PinCHD will receive a warning of at least a few hours prior to an event. This will normally enable the full execution of the COOP with a complete and orderly alert, notification, and deployment of the EMT to an assembly site or a pre-identified ARP.
2. Without Warning – The ability to execute the COOP following an event that occurs with little or no warning will depend on the severity of the emergency

and the number of personnel that survive. If the deployment of the essential staff is not feasible because of the loss of personnel, temporary leadership of the PinCHD will be passed to the FDOH or a neighboring designated county health department as explained in the *Delineation of Mission Essential Functions* section of this plan.

I. Direction and Control

1. Authorized Pinellas County Health Department successors to the Director are as follows:
 - a) Assistant Director
 - b) Disease Control Division Director
 - c) Medical Director/Clinical Quality Assurance

Note: All references to the "Director" may be exchanged with "Successor" as necessary.
2. Lines of succession shall be maintained by all PinCHD organizational elements at the senior management level. Successions should be provided to a minimum depth of three. Delegation shall be determined/ approved by the Director and will be effective immediately upon designation and will last for an indefinite period of time. The Director will determine when delegations are no longer required.
3. The PinCHD Director may order activation of the COOP Plan.
4. The EMT may be requested by the Director to disseminate PinCHD COOP guidance and direction during the activation and relocation phases. Pending the activation of the COOP, the EMT will monitor the situation and assist in the notification process as necessary.
5. When executed, the appropriate County Emergency Operations Center (CEOC) should be notified using the existing emergency communication pathways (*See Attachment 3: Emergency Communication Pathways – COOP*) and requested to provide any previously agreed upon assistance to the PinCHD, if needed.

J. Operational Hours

1. During COOP contingencies, the Director will determine the hours of work for the essential staff.
2. Certain members of the EMT must be prepared to support a 24-hour-per-day, 7-day-per-week operation.

K. Alert and Notification

1. Alert Procedures – If the situation allows for warning, staff may be alerted prior to activation of the COOP. In all situations allowing for an alert the procedures must include notification to the ESF-8 Coordinator for the FDOH in Tallahassee.
 - a) Information and guidance for PinCHD staff will be passed telephonically using the Employee Hotline (727-820-4108) and/or an emergency notification telephone tree/cascade. Depending on the situation, current information may also be available via:
 - (1) Announcements to local radio and TV stations if approved and developed.
 - (2) PinCHD Internet web page
 - (3) Reverse Emergency Notification System
 - (4) Other means if approved and developed
 - b) Staff should listen for specific instructions. All staff should remain at their office or home until specific guidance is received.
2. Notification Procedures – Upon notification to activate the COOP:
 - a) The Director will notify the State Surgeon General and the Regional Domestic Security Task Force (RDSTF) Health & Medical Chair of the current situation and that the COOP is being activated.
 - b) The Director will notify the Environmental Health and Preparedness Director, the Public Information Officer (PIO), and the EMT using Ready Alert, the telephone tree or other available means of communication.
 - (1) The EMT staff then initiates their respective COOP notification cascade in order to contact each person in their chain relaying the information and guidance.
 - (2) The EMT staff will designate an individual to ensure completion of the telephone tree. These individuals will ensure a minimum of three attempts are made to contact everyone on the tree and that if contact attempts are unsuccessful, the staff are left messages or sent a page (if possible).
 - (3) Once initial contact is made (message left/page sent), the individual identified in paragraph (2) above will call the Division

Director and report status of cascade, including personnel not contacted.

(4) The Division Director will, in turn, report status to the PinCHD Director via telephone or other means of available communication.

(5) For personnel not directly contacted, once the message or page is received, they should immediately contact the primary staff member who contacted them.

(6) Notification may be via personal contact, telephone, cell phone, pager, radio and TV broadcasts, or a combination thereof.

(7) When a call or other notification is received by anyone in a calling cascade, the information given by the primary staff should be carefully prepared and or recorded to ensure that it is passed accurately to the next person in the cascade.

(8) The EMT staff will report all unsuccessful contact attempts to Human Resources after relocation has been effected.

IV. Pre-Event Planning

A. Drive-Away Kits

1. PHP in conjunction with the PinCHD IT department, is responsible for providing guidance to staff on the requirement for and the contents of these kits, which may contain such items as software, databases, publications, laptop computers, etc. Each functional area will determine the requirement to develop a kit and the contents of the kit. Checklists may need to be used to help ensure the inclusion of all necessary contents. Currently, all alternative sites are fully functional health departments, and therefore pre-positioning has already been completed.
2. Items to consider including in these kits might include:
 - a) List of staff needed to meet essential services.
 - b) Laptops with all necessary data disks.
 - c) Normal office supplies.
 - d) Other items specific to essential functions.
3. Personnel may plan on taking individual “go-kits” with equipment & supplies that they deem necessary as essential employees.

B. Telecommunications and Information Systems Support

1. Telecommunication capabilities at the alternate facilities are sufficient for the performance of mission essential functions under the COOP. The PinCHD IT Department will provide information systems support at the potential alternate facilities as well as mobile communications support as outlined in *Appendix 1: Continuity of Operations Plan for Information Technology*
2. It is imperative that each functional area ensures that unique or critical information system requirements are considered in planning and, if appropriate, are identified as capabilities to be provided by support organizations at the potential alternate facilities.
3. Each EMT member will develop the following for their areas of supervision:
 - a) Full and current telephone trees (listed by priority method of contact for each employee)
 - b) Alternate available communications (pagers, cell phones, etc.)

C. Security and Access Controls

1. The EMT will ensure that the COOP and the evacuation plans for each PinCHD facility are complementary and coordinated if COOP activation is required.
2. The Facility Manager will ensure all necessary security and access controls are provided at the alternate county health department facility. Also, the Facility Manager will ensure the primary county health department facility is secured during COOP operations and that local law enforcement authorities are notified.

D. Vital Statistics and Medical Records

1. The PinCHD vital statistics function and clinic medical records require special consideration under this plan. EMT members who supervise vital statistics and the clinics will ensure procedures are in place to safeguard and back up these records.
2. EMT is responsible for ensuring a means of recovery of damaged records is available, if needed.
3. EMT will identify all records, systems, and data (paper copy and electronic) critical to mission essential functions. Examples include personnel records, payroll records, contracting and accounting records and so forth.

4. Wherever possible, provision for off-site storage of duplicate records and/or off-site backup of electronic records and databases should be implemented.

V. Activation

In general, the following procedures are to be followed in the execution of the PinCHD COOP. The extent to which this will be possible will depend on the emergency, the amount of warning received, whether personnel are on duty or off-duty, and the extent of damage to the affected county health department facilities and its occupants. This plan is designed to provide a flexible response to multiple events occurring within a broad spectrum of prevailing conditions. The degree to which this plan is implemented depends on the type and magnitude of the events or threats thereof. These actions are listed in checklist format included in this plan.

A. Alert and Notification Procedures

1. The PinCHD notification process as related to COOP activation should, if necessary, allow for a smooth transition of the essential staff to an alternate facility to continue the execution of mission essential functions across a wide range of potential emergencies. Notification may be in the form of:
 - a) A COOP alert to the essential staff that relocation is imminent.
 - b) An announcement of a COOP activation that directs the EMT to report to an assembly site or a designated ARP, and provides instructions regarding movement, reporting, and transportation details to an assembly site or a designated ARP.
 - c) Information on the Employee Hotline (727-820-4108).
2. Upon receipt of a COOP alert from the Director or designee, PHP notifies the EMT via ReadyAlert who, in turn, notify staff using their internal telephone notification cascades. Notification may be via personal contact, telephone, cell phone, pager, radio and TV broadcasts, or a combination thereof.
3. The PinCHD notifies Pinellas County Emergency Management (PCEM) or the County Warning Point using the existing emergency communication pathways (See *Attachment 3: Emergency Communication Pathways – COOP*) that an emergency relocation is anticipated or is in progress.

B. Initial Actions

1. Based on the situation and circumstances of the event, the Director will evaluate the capability and capacity to support the current mission essential functions of the affected county health department facilities and select an appropriate ARP.

2. The Director notifies PHP of the emergency requiring activation of the PinCHD COOP and directs PHP to begin movement of the EMT to an assembly site or to the designated ARP facility immediately.
3. PHP activates the PinCHD COOP and notifies the appropriate ARP Facility Manager.
4. PHP coordinates the immediate deployment of the EMT to an assembly site or the designated ARP.
5. PHP notifies the designated ARP Facility Manager to expect the relocation of the county health department facility.
6. The Facility Manager prepares the ARP for the county health department operations and provides instructions and guidance on operations and the location of the ARP.
7. The EMT deploys to an assembly site or a designated ARP to assume mission essential functions
8. The Facility Manager provides regular updates to the Director regarding ARP activation, and will document actions as necessary.
9. All staff initiates their respective COOP notification cascade. After the cascades are complete, the results, including individuals not contacted are reported to the EMT.
10. The essential staff members report to an assembly site or deploy to the designated ARP to assume PinCHD mission essential functions.
11. All staff that have established drive-away kits ensure that they are complete, with current documents and equipment, and commence movement of the resources.
12. All staff assembles the remaining documents and other assets as required for the performance of mission essential functions and begin preparations for the movement of these resources.
13. All personnel and sections of the affected county health department facility or facilities should implement normal security procedures for areas being vacated.
14. The facility manager at the affected county health department facility should take appropriate measures to ensure security of the affected county health department facilities and equipment or records remaining in the building.
15. Other employees are directed to remain at home pending further guidance.

C. Deployment and Departure Procedures

Allowances for partial pre-deployment of any mission essential functions which are critical to operations will be determined by the Director at the time of COOP activation. This determination will be based on the event or the level of threat. The following actions establish general administrative procedures to allow for travel and transportation to the ARP. Specific instructions will be provided at the time deployment is ordered.

1. The Director – Directs PHP to begin deployment of the EMT and the select staff members to the ARP.
2. EMT – The PinCHD EMT is directed by the Director to either relocate to a designated assembly site or an ARP. Team members should ensure that they have their official drive-away kits and their personal preparedness bags. These teams will most likely use privately owned vehicles for transportation to the designated facility after gathering at a pre-determined assembly site. Specific instructions will be provided at the time of activation.
3. Essential Staff – The essential staff immediately begins movement by taking with them all office drive-away kits, if applicable. These teams will most likely use privately owned vehicles for transportation to the designated facility. Specific instructions will be provided at the time of activation.
4. Non-Essential Personnel – Non-essential personnel present at the affected county health department facility at the time of an emergency notification will be directed to proceed to their homes to await further instructions. At the time of notification, any available information regarding routes that should be used to depart the county health department facility or other appropriate safety precautions will be provided. During non-duty hours, non-essential personnel will remain at their homes pending further guidance.
5. Field Staff – Field Staff may be out at the time of the emergency notification. They will be asked to continue with their day, if appropriate, and await further instructions via communications previously listed.

D. Transition to Alternate Operations

1. Following the activation of the COOP and establishment of communications links with PHP and the EMT at an assembly site, the Director or designee orders the cessation of operations at the “affected” county health department facility.
2. The PinCHD notifies PCEM or the County Warning Point using the existing emergency communication pathways (*See Attachment 3: Emergency*

Communication Pathways – COOP) that an emergency relocation of a county health department facility is complete and provides contact numbers.

3. As appropriate, press, news media, outside customers, vendors and other service providers are notified by the PIO that the PinCHD has been temporarily relocated.

E. Site-Support Responsibilities

Following notification that a relocation of the county health department facility has been ordered or is in progress, the appropriate ARP Facility Manager will implement site-support procedures and prepare to receive the EMT within six hours and the essential staff within 12 hours.

VI. Operations

A. Execution of Mission Essential Functions

Upon activation, the EMT will begin providing support for the following functions:

1. Monitor and assess the situation that required the relocation;
2. Monitor the status of personnel and resources;
3. Ensure the preparedness planner has established and maintained contact with the appropriate CEOC and the State ESF-8 Emergency Coordinating Officer, or other designated person;
4. Plan and prepare for the restoration of operations at the county health department facility or other long-term facility.

B. Establishment of Communications

1. The IT Division will ensure all necessary and preplanned communications systems are established, adequate, and functioning properly;
2. The IT Division will service and correct any faulty or inadequate communications systems, or contract someone to do so.
3. All activities performed by the IT Division under COOP activation will be in accordance with *Appendix 1: Continuity of Operations Plan for Information Technology*.

C. Relocation of Group Responsibilities

Essential Staff Responsibilities – As soon as possible following their arrival at the designated alternate facility, the essential staff will begin providing support for the following functions:

1. The Director of Administrative Services will disseminate administrative and logistics information to the essential staff upon arrival. This information should generally cover the operational procedures for the next 30 days.
2. The essential staff will receive continual briefings and updates from PHP and their associated EMT.
3. The essential staff will perform the mission essential functions of the affected CHD facility as necessary.

D. Augmentation of Staff

1. If it becomes evident that the essential staff cannot ensure the continuous performance of mission essential functions, the EMT will determine the positions necessary to ensure the continuous performance of mission essential functions.
2. The EMT will then ensure that the identified positions are staffed with individuals who have the requisite skills to perform the tasks.

E. Amplification of Guidance to Essential and Non Essential Personnel

1. The Director of Administrative Services, in conjunction with the PIO, will develop an informative Memorandum for dissemination to all PinCHD employees regarding the duration of alternate operations, pertinent information on payroll, time and attendance, duty assignments, and travel authorizations and reimbursements.
2. The PinCHD Director will approve this Memorandum and the Administrative Services Director will then distribute the document to the relocated personnel and the non-essential staff through appropriate media and other available sources.

VII. Reconstitution and Termination

A. Overview

Within 24 hours of an emergency relocation, the Facility Manager will initiate operations to salvage, restore, and recover the affected county health department facilities after the approval of the local and Federal law enforcement and emergency services involved.

Reconstitution procedures will commence when the Facility Manager ascertains that the emergency situation has ended and is unlikely to recur. Once this determination has been made, one or a combination of the following options may be implemented, depending on the situation.

1. Continue to perform mission essential functions at the ARP for up to 30 days.
2. Begin an orderly return to the affected county health department facility and reconstitute full operations.
3. Begin to establish a reconstituted county health department facility in some other facility.

B. Reconstitution and Termination Plans and Schedules

1. PHP will develop Reconstitution and Termination Plans and Schedules to ensure an orderly transition of all CHD functions, personnel, equipment, and records from the temporary alternate location to a new or restored county health department facility.
2. The PinCHD Director will approve the plans and schedules prior to the cessation of operations.
3. PHP will oversee the Reconstitution and Termination process.

C. Procedures

EMT will oversee the orderly transition of all county health department functions, personnel, equipment, and records from the ARP to a new or restored county health department facility. Upon a decision by the PinCHD Director that the county health department facility can be reoccupied or that a different facility will be established as a new county health department facility:

1. The Facility Manager, in conjunction with the Safety Committee and the IT Department, will conduct appropriate security, safety, and health assessments for suitability prior to relocating back to the primary county health department facility or another building.
2. When necessary equipment and documents are in place at the new or restored county health department facility, the staff remaining at ARP will transfer mission essential functions and resume normal operations.

D. After-Action Review and Remedial Action Plan

1. An After-Action Review information collection process will be initiated prior to the cessation of operations at the ARP. The information collected will, at a

minimum, include information from any employee working during COOP activation and a review of the strengths and weaknesses at the conclusion of the operations.

2. The information should be incorporated into a COOP Remedial Action Plan. Recommendations for changes to the COOP and any accompanying documents will be developed and incorporated into the COOP Annual Review Process.

E. Testing, Exercise and Evaluation

1. This plan will be reviewed annually by all EMT and approved by the PinCHD Director.
2. PHP will train CHD employees on the key aspects of this plan. This training will be conducted at new employee orientation, quarterly staff meetings, all-day in-services or any means appropriate.
3. Exercises will include a test of the alert and notification system, with and without warning, during duty and non-duty hours. This plan will be practiced annually by use of a tabletop exercise or a drill/field exercise.
4. The call down trees will be tested twice per year during a Call-Down Drill initiated by the appropriate EMT member for their area of supervision and an After Action Report (AAR) will be submitted to PHP.
5. PHP will create an agency-wide AAR following each exercise and drill, and will incorporate lessons learned/remedial actions into annual revisions of this COOP. Upon review and testing of the plan, if funding is needed, the PinCHD will address it.
6. The Director of Information Technology will be responsible for training, exercising and evaluating staff within the Division of Information Technology on the *Continuity of Operations Plan for Information Technology*.

VIII. Authorities and References

A. Authorities and Reference

This document complies with state Comprehensive Emergency Management Plan (CEMP) guidance and Florida Statute 252.365, Emergency Management, Chapter 2002-43, Florida Law (Relating to Disaster Preparedness) and all applicable existing CHD emergency procedures. Specifically, it is designed to ensure the County Health Department is prepared to respond to emergencies, recover from them, and mitigate against their impacts.

B. Acronyms

AAR	After Action Report
ARP	Alternate Relocation Point
CEMP	Comprehensive Emergency Management Plan
CEOC	County Emergency Operations Center
COOP	Continuity of Operations Plan
EMT	Executive Management Team
ESF	Emergency Support Function
FDOH	Florida Department of Health
FEMA	Federal Emergency Management Agency
IMT	Incident Management Team
IT	Information Technology
PHP	Public Health Preparedness
PCEM	Pinellas County Emergency Management
PinCHD	Pinellas County Health Department
PIO	Public Information Officer
RDSTF	Regional Domestic Security Task Force
SEOC	State Emergency Operations Center

IX. Checklist, Attachments, and Appendices

A. Checklists:

1. CHECKLIST I: Pinellas County Health Department Director Checklist
2. CHECKLIST II: Public Health Preparedness Execution Checklist
3. CHECKLIST III: Executive Management Team Execution Checklist
4. CHECKLIST IV: Affected Center Manager Execution Checklist

B. Attachments:

1. ATTACHMENT 1: Facility Directory
2. ATTACHMENT 2: Personnel Directory (Essential/Non-Essential)
3. ATTACHMENT 3: Emergency Communication Pathways – COOP

C. Appendices

1. Continuity of Operations Plan for Information Technology
 - a) Due to the secure nature of the *Continuity of Operations Plan for Information Technology*, it is not included in this document. Please refer to the Director of Information Technology for further details.

CHECKLIST I

PINELLAS COUNTY HEALTH DEPARTMENT DIRECTOR CHECKLIST

√		Notes
	Make decision to implement Pinellas County Health Department COOP	
	Determine which CHD facilities are affected and require relocation	
	Determine which mission essential function in the closed facilities require reestablishment at alternate facilities	
	Determine which alternate facility will be used	
	Identify essential Staff <ul style="list-style-type: none"> ▪ EMT members ▪ Clinical personnel (RN, LPN) ▪ Clinic direct support staff ▪ IT staff ▪ Facilities staff ▪ Key supervisors of any displaced mission essential function 	
	Identify Executive Management Team and necessary personnel to include (but not limited to): <ul style="list-style-type: none"> ▪ EMT ▪ Maintenance ▪ HIPAA Coordinator 	
	Direct PHP to coordinate EMT and essential staff to assemble at alternate site	
	If mission essential functions cannot be reestablished, request assistance from state and neighboring CHDs	
	Direct PHP to initiate phone tree call down to all staff and to update Hotline	
	Notify: <ul style="list-style-type: none"> Deputy State Health Officer RDSTF Health & Medical Co-Chair ESF #8 at State EOC EMT Staff PCEM 	
	Determine staffing requirements and work hours for essential staff	
	Determine when to implement reconstitution and termination of the COOP	

CHECKLIST II

PUBLIC HEALTH PREPAREDNESS EXECUTION CHECKLIST

√		Notes
	Upon notification of activation of the COOP:	
	Confirm status of closed facilities, alternate facilities, mission essential functions and essential staff	
	Ensure notification of EMT and essential staff	
	Ensure initiation of phone tree call down	
	Ensure completion of phone tree call down	
	Direct EMT and essential staff to assemble at alternate location	
	Notify county warning point (EOC)	
	Provide guidance concerning the use of drive-away kits	
	Assist EMT to establish essential functions	
	Assist business manager to communicate personnel requirement to all staff	
	Ensure facility manager and MIS department provide support at alternate facility	
	Oversee reconstitution and termination of COOP	

CHECKLIST III

EXECUTIVE MANAGEMENT TEAM EXECUTION CHECKLIST

√		Notes
	Monitor and assess the situation requiring relocation	
	Monitor and access the status of personnel and resources	
	Upon notification, initiate phone tree call down. Ensure completion of the call down	
	Upon notification, assemble at alternate site	
	Recommend essential functions to be established at alternate site	
	Recommend essential staff required for essential functions	
	Determine the positions necessary to ensure the continuous performance of mission essential functions and staff with individuals who have the requisite skills to perform the tasks.	
	Ensure staff is ready with drive-away kits for efficient performance of essential functions	
	Determine status and guidance for nonessential staff	
	Prepare for restoration of operations at the relocated facility	

CHECKLIST IV

AFFECTED CENTER MANAGER EXECUTION CHECKLIST

√		Notes
	Assist Director to determine which facilities are affected	
	Ensure vacated facilities are secured	
	Activate security and access controls at alternate site	
	Prepare alternate site for EMT and essential staff	
	Initiate operations to salvage, restore and recover affected facilities	
	Ensure security, safety and health sustainability is available before reconstituting affected building	
	Assist reconstitution of essential functions in primary facility.	

**ATTACHMENT 1
FACILITY DIRECTORY**

Both a primary alternate facility and a secondary alternate facility are identified for each current facility (and service center) in the county.

This directory serves as planning document and is subject to change

	Current Facility and service	Primary Alternate Facility	Secondary Alternate Facility
1	St. Petersburg 205 Dr. M. L. King St. N. St. Petersburg, FL 33701 (727) 824-6900	Largo	Clearwater
2	Pinellas Park 6350 76 th Avenue North Pinellas Park, FL 33781 (727) 547-7780	St. Petersburg	Largo
3	Clearwater 310 North Myrtle Ave. Clearwater, FL 33755 (727) 469-5800	Tarpon Springs	Largo
4	Tarpon Springs 301 South Disston Avenue Tarpon Springs, FL 34689 (727) 942-5457	Clearwater	Largo
5	Largo 12420 130 th Avenue Largo, FL 33774 (727) 588-4040	St. Petersburg	Pinellas Park
6	Center Bay 4175 East Bay Drive Clearwater, FL 33764 (727) 538-7277	Largo	St. Petersburg
7	Northeast High 1717 54 th Avenue North St. Petersburg, FL 33714 (727) 570-3025	St. Petersburg	Pinellas Park

ATTACHMENT 2

ESSENTIAL PERSONNEL DIRECTORY

Personnel Directory available on the PinCHD Intranet Site:

<http://chd52sweb/Directory/COOPIndex.asp>

The screenshot shows a Microsoft Internet Explorer browser window displaying the PinCHD Shelter Teams Listing page. The address bar shows the URL <http://chd52sweb/Directory/COOPIndex.asp>. The page features a header with the Pinellas County Health Department logo and a navigation menu. The main content area is titled "Hurricane & Evacuation Information" and "Continuity of Operations Information (COOP)". A list of links is displayed, with "COOP Listing - without Work/Home Phone" circled in red. A red arrow points from a callout box on the right to this link. The callout box contains the text "COOP Listing – without Work/Home Phone". A small "Back" button is visible below the link.

PinCHD Shelter Teams Listing - Microsoft Internet Explorer provided by Pinellas CHD52

File Edit View Favorites Tools Help

Address <http://chd52sweb/Directory/COOPIndex.asp>

Home Policies Forms Publications Emp. of the Month Links What's New?

Divisions/Offices/Units

- Admin. Services
- Office of Planning and Performance Improvement
- Directors Office
- Disease Control
- Environmental Health
- EH/Environmental Engineering
- FH/Step Up, Florida! Healthy Lifestyles
- FH/Community Health
- FH/Dental Health
- FH/Health Center Services
- FH/WIC & Nutrition
- Information Technology (IT)
- Office of Minority Health
- Public Health Preparedness Program

Employees' Tools

- Center Information
- Crystal Enterprise Services/Time Reports
- Customer Surveys
- Employees Communication

Hurricane & Evacuation Information
Continuity of Operations Information (COOP)

- COOP Listing - without Work/Home Phone
- Shelter Team Listing

Back

COOP Listing – without Work/Home Phone

Local Intranet

ATTACHMENT 3 Emergency Communication Pathways – COOP

Centers for Disease
Control and Prevention

→ = Formal Requests (i.e. Resources)
→ = Information

