The Virginia Department of Health Professions

Continuity of Operations Plan

Update April 2009
This Continuity of Operations (COOP) plan was prepared by the Virginia Department of Health Professions (DHP) to develop, implement and maintain a viable COOP capability. This COOP plan complies with applicable internal agency policy, state regulations and supports recommendations provided in Federal Continuity Directive 1 (FCD 1). This COOP plan has been distributed internally within DHP and with external organizations that might be affected by its implementation.

Approved: ____________________________ Date ____________
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The Virginia Department of Health Professions
Continuity of Operations Plan

TABLE OF CONTENTS

Approvals
Table of Contents
PRIVACY STATEMENT
RECORD OF CHANGES
EXECUTIVE SUMMARY
INTRODUCTION
PURPOSE
APPLICABILITY AND SCOPE
AUTHORITIES
REFERENCES
SITUATION
ASSUMPTIONS

ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES
  Key Personnel
  COOP Personnel Contact List
  External Contacts and Vendors
  COOP Plan Implementation Responsibilities
  Personnel Relations/Family Preparedness Planning

CONCEPT OF OPERATIONS

ESSENTIAL FUNCTIONS
PLANNING SCENARIOS

Assumptions

COOP Alert and Notification

COOP Plan Implementation

Scenario 1: Loss of Access to a Facility
  Phase I – Activation and Relocation
  Phase II – Alternate Facility Operations
  Phase III – Reconstitution

Scenario 2: Loss of Services Due to a Reduction of Workforce
  Phase I – Activation and Relocation
  Phase II – Alternate Operations
  Phase III – Reconstitution

Scenario 2: Loss of Services Due to a Reduction of Workforce
  Phase I – Activation and Relocation
  Phase II – Alternate Operations
  Phase III – Reconstitution

ORDERS OF SUCCESSION

DELEGATIONS OF AUTHORITY

ALTERNATE FACILITY LOCATIONS

GO KITS
  Professional Go Kits

MULTI-YEAR STRATEGY AND PROGRAM MANAGEMENT

TRAINING, TESTING AND EXERCISES
  Training
  Testing and Exercises
  Objectives
  Frequency
  Exercise Evaluation

COOP PLAN MAINTENANCE
  Plan Maintenance

ACRONYMS AND DEFINITIONS
APPENDICES

Appendix A: KEY PERSONNEL CONTACT LIST
Appendix B: COOP PERSONNEL CONTACT LIST
Appendix C: STAFF NOTIFICATION PROCEDURE
Appendix D: DHP ORGANIZATIONAL STRUCTURE
Appendix E: EXTERNAL CONTACTS AND VENDORS LIST
Appendix F: IN-HOUSE EMERGENCY PROCEDURES
Appendix G: ESSENTIAL FUNCTIONS
Appendix H: VITAL RECORDS
Appendix I: DHP RISK ASSESSMENT
Appendix J: ORDERS OF SUCCESSION
Appendix K: DHP COOP PANDEMIC INFLUENZA ANNEX
Appendix L: DHP TELEWORK DIRECTIVE
Appendix M: ALTERNATE LOCATION MOU

LIST OF TABLES

Table 1 - Level of Emergency and Decision Matrix
Table 2 - DHP COOP Planning Team
Table 3 - COOP Plan Maintenance Table
PRIVACY STATEMENT

Public disclosure of this document would have a reasonable likelihood of jeopardizing public safety by exposing vulnerabilities. It contains sensitive and confidential information that is not subject to FOIA under Virginia Code §2.2-3705.2. Accordingly, the Virginia Department of Health Professions is withholding this plan from full public disclosure. Refer any request for a copy of this document to Virginia Department of Health Professions’ legal counsel or the Virginia Attorney General’s office.
RECORD OF CHANGES

Submit recommended changes to this document to Virginia Department of Health Professions Mark Monson, Mark.Monson@dhp.virginia.gov.

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EXECUTIVE SUMMARY

No one will soon forget the tragedy of 9/11 or the bombing of the Federal Building in Oklahoma City. Also, the largest power outage in 30 years struck states from Ohio to Connecticut and into Canada for several days in August 2003. On September 18, 2003 Hurricane Isabel struck Virginia leaving many roads impassible to emergency response personnel and over one million residents without power.

The Virginia Department of Health Professions (DHP) Continuity of Operations Plan (COOP) is its plan of action to ensure the stability of essential functions during a wide range of potential emergencies and events. Today’s changing threat environment and unexpected and forecasted emergencies, large and small, make it essential that the Department has a plan for continuance of operations.

The fundamental objective of all state agencies is to provide reliable service. The obligation of DHP is to have this plan ready in order to provide its essential services, especially those involving public safety and health following an emergency.

Mission Statement

The mission of the Virginia Department of Health Professions is to enhance the delivery of safe and competent health care by licensing qualified health care professionals, enforcing standards of practice, and providing information to both practitioners and consumers of health care services.

Vision Statement

We envision the Department as a leader in ensuring the competency of health care providers; providing outstanding customer service to applicants, licensees and consumers of regulated services; promptly and thoroughly intervening where there are allegations of misconduct that threaten access to safe health care; providing useful and readily available information about health care practitioners which allows patients and their families to make informed decisions when selecting providers; and instilling in providers and consumers confidence in a system that authorizes and oversees the delivery of health care.

DHP’s COOP Objectives

- Maintain command, control, and direction during emergencies
- Provide organizational and operational stability
- Facilitate decision making during an emergency
- Ensure the continuation and restoration of DHP’s essential functions during and following an emergency
- Ensure the safety of employees and visitors
- Protect essential equipment, electronic files, records and other assets
- Reduce disruptions to operations
- Minimize damage and losses
Identify relocation sites, and ensure that operational and managerial requirements and emergency plans are developed and tested before an emergency occurs
Provide for the line of succession to critical management and technical positions
Provide resources and capabilities to develop plans for restoring or reconstituting regular activities, depending upon the scope, severity, and nature of the emergency
Ensure plans include the identification of various operational scenarios that address various emergencies (bomb threats, fire and medical emergencies, biological, weapon and/or chemical situations, etc.).

DHP’s COOP Planning Considerations

- Be capable of implementing COOP plans with and without warning and have essential services operational not later than 72 hours after activation
- Be capable of maintaining sustained basic services
- Include regularly scheduled testing, training and exercising of personnel, equipment, systems, processes and procedures used to support the agency during a COOP event
- If needed, locate alternate facilities in areas where the ability to initiate, maintain and terminate COOP is optimal
- Take advantage of existing agency field infrastructures and give consideration to other options, such as telecommuting, work-at-home and shared facilities
- Consider the distance of the alternate facility from the primary facility
- Include development, maintenance and review of COOP capabilities as part of the COOP plan
- Include a review and update of the COOP as a continuing event
- IT dependencies

The Information Technology (IT) infrastructure partnership between Virginia Information Technology Agency (VITA) and Northrop Grumman assumes responsibility for service delivery of the Commonwealth’s IT infrastructure needs under the supervision of VITA.

The partnership agreement made Northrop Grumman owner and manager of all agency technology equipment including network servers, desktop and laptop computers, voice and data networks, operating systems, e-mail, security, help desk services, and data center facilities. Disaster recovery of the above technology equipment also falls under VITA’s IT infrastructure partnership with Northrop Grumman.

The agency, therefore, has a significant disaster recovery dependency on Northrop Grumman’s ability to reinstate essential automated functions following a disaster.

DHP’s COOP planning is a continuing team effort, and is not the responsibility of one person or agency area. Planning is at every level of the department.

Elements of DHP’s COOP Plan

- Continuation of essential functions
- Delegation of authority
• Order of succession
• Alternate facilities
• Operable communications and IT operation.
• Vital records
• People management and safety, to include building evacuation.
• Identification disaster team members
• Tests, training, and exercises (to include COOP orientation of new staff).
• Devolution of functions
• Reconstitution
• Identification of other state on non-state agencies or entities that require continuing connection or notification
INTRODUCTION

The Virginia Department of Health Professions has operations that must be performed, or rapidly and efficiently resumed, in an emergency. While the impact of an emergency cannot be predicted, planning for operations under such conditions can mitigate the impact of the emergency on our people, our facilities and our mission. To that end, the Department has prepared a Continuity of Operations (COOP) plan.

COOP planning is a good business practice and is part of the fundamental mission of all agencies as responsible and reliable public entities. This COOP plan establishes policy and guidance framework to ensure the execution of the essential functions for the Department in the event that an emergency at the agency or in its service area threatens or incapacitates operations and/or requires the relocation of selected personnel and functions.

PURPOSE

The purpose of this COOP plan is to provide the framework for Virginia Department of Health Professions to restore essential functions in the event of an emergency that affects operations. This document establishes the Virginia Department of Health Professions COOP program procedures for addressing three types of extended disruptions:

- Loss of access to a facility (as in fire);
- Loss of services due to a reduced workforce (as in pandemic influenza); and
- Loss of services due to equipment or systems failure (as in information technology (IT) systems failure).

This plan details procedures for implementing actions to continue essential functions within the recovery time objectives established by the COOP Planning Team to maintain these essential functions for up to 30 days.

The Virginia Department of Health Professions is committed to the safety and protection of its personnel, contractors, operations, and facilities. This plan provides the agency with a framework that is designed to minimize potential impact during an event.
APPLICABILITY AND SCOPE

The COOP plan is applicable to all of the Virginia Department of Health Professions’ boards, departments, divisions, units, contractors and personnel. It also applies to the array of events and hazards that could threaten the agency and its performance of essential functions.

The COOP plan covers all facilities, systems, vehicles and buildings operated or maintained by the department. The COOP plan supports the performance of essential functions from alternate locations (due to the primary facility becoming unusable, for long or short periods of time) and also provides for continuity of management and decision-making at the agency in the event that senior management or technical personnel are unavailable.

The COOP plan will be distributed annually to senior managers following approval and submission. Training will be provided to Department personnel with identified responsibilities. The COOP plan will be shared with the Virginia Department of Emergency Management and other interested parties as appropriate.
AUTHORITIES AND REFERENCES

On March 15, 2007, the director approved and issued the Virginia Department of Health Professions Continuity of Operations Mission Statement establishing the agency’s philosophy and objectives in developing and implementing a comprehensive continuity of operations capability for all facets of the agency’s operation.

The COOP plan has been developed to implement this mission statement and has the full endorsement of the Department’s director and senior management.

The COOP plan complies with the following regulations and directives:

- Federal Continuity Directive 1 (FCD 1)
- Library of Virginia, Records Retention and Disposition Schedule
- Commonwealth of Virginia, Office of the Governor  
  o Executive Order 69 – Virginia’s Secure Commonwealth Initiative, 2004  
  o Executive Order 55 (2007) Continuing the Health Information Technology Council  
- Virginia Emergency Services and Disaster Law of 2000 (Chapter 32.2, Title 44 of the Code of Virginia as amended)

Though not required, the COOP plan addresses requirements identified in the Federal Emergency Management Agency, Continuity of Operations Federal Preparedness Circular 65, issued on June 15, 2004. The updated FPC 65 is available at:


References

- Emergency Management Accreditation Program (EMAP) Standard, April 2006.
- National Fire Protection Association (NFPA) 1600, December 2006.
- FEMA, Continuity of Operations Plan Template
SITUATION

The following situations impact and influence the Virginia Department of Health Professions’ COOP plan:

- The agency is located in a suburb of Richmond and operates out of a facility which houses 5 other state agencies.

- The agency represents 14 independent Boards staffed by 168 gubernatorial appointees.

- The agency has a MEL of 215 classified employees. In addition, there are currently 44 P-14 employees and approximately 15 temporary employees. 57 employees work out of home offices located across the Commonwealth.

- On any given work day there may be upwards of 100 members of the public attending agency business in the 2nd Floor Conference Center.

- The agency’s headquarters is located adjacent to highways that carry hazardous materials.
The assumptions used to support the Department of Health Professions’ COOP planning include the following elements.

- Leadership and personnel will continue to recognize responsibilities to public safety and exercise their authority to implement this COOP plan in a timely manner when confronted with events impairing agency essential functions.

- If properly implemented, this COOP plan will reduce or prevent disaster-related losses.

- Agency and non-agency personnel and resources located outside the area affected by the emergency or threat will be available as necessary to continue essential functions.

- Staff members who are normally available may be rendered unavailable by a disaster or its aftermath, or may be otherwise unable to participate in the recovery (such as from wide spread storm damage caused by a tornado or hurricane).

- Procedures are sufficiently detailed so someone other than the person primarily responsible for the work can follow them.

- Recovery of a critical subset of the agency’s functions and application systems will occur to allow the agency to continue essential functions adequately.

- A disaster may require agency users, clients and local agencies to function with limited automated support and some degradation of service until full recovery is made.
ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

In the event of activation or partial activation of the COOP plan, designated teams have been established by the Virginia Department of Health Professions to manage and perform essential functions. To staff the COOP response teams, the Department of Health Professions has identified key personnel to provide the management and technical expertise necessary to establish essential services within 72 hours after the emergency event. In addition, supporting personnel have been identified to perform critical activities necessary to sustain essential services for a period of up to 30 days.

The designated key and team personnel will:

- Manage the activation of the COOP plan
- Oversee implementation of emergency response procedures to ensure the safety of employees, contractors, customers and the general public
- Activate alternate facilities and supporting communications and information technology systems
- Coordinate with local responders
- Support legal activities on behalf of the agency
- Provide information
- Perform situation assessment for the agency infrastructure
- Oversee inspections and repair
- Develop temporary service plans
- Lead the recovery transition

The department has organized the following teams as part of the COOP operational scenario:

- COOP Planning Team
- Immediate Response Team
- Crisis Management Team
- Administration Team
- Damage Assessment and Reconstruction Team
- Information Systems Team
- Essential Functions Team

The following sections identify key personnel and outline major responsibilities of key and designated officials required to implement the Virginia Department of Health Professions’ COOP plan.
Key Personnel

Specific staffing requirements will vary widely among Department of Health Professions Boards and Cost Centers due to differences in their size, structure, mission and essential functions. Each essential function has associated personnel that are necessary to ensure continuity of operations. Without these personnel, the agency will not be able to perform its essential functions or meet the needs of citizens, contractors, and agency visitors. These personnel are necessary to carry out essential functions and in support of the Department of Health Professions’ mission. The Key Personnel Contact List is located in Appendix A.

COOP Personnel Contact List

The COOP Personnel Contact List documents the contact information for employees who are identified as essential personnel in the COOP Plan. They should be notified if the agency is threatened by or experiences an incident that requires COOP plan activation. The COOP Personnel Contact List is located in Appendix B; the Staff Notification Procedure is located in Appendix C; and the DHP Organizational Structure is located in Appendix D.

External Contacts and Vendors

External Contacts and Vendors are listed in Appendix E as required resources supporting those functions. Included is contact information for external vendors, suppliers or others who would most likely need to be contacted if the agency is threatened by or experiences an incident that requires COOP plan implementation.
COOP Plan Implementation Responsibilities

The following lists identify major responsibilities of key personnel and leadership required to implement Department of Health Professions’ COOP plan.

**The Director of the Department of Health Professions is responsible for:**

- Supporting and providing executive leadership for all emergency planning efforts
- Activating the COOP plan
- Providing policy direction, guidance and objectives during an incident requiring the implementation of the COOP plan
- Consulting with and advising appropriate officials during implementation of the COOP plan
- Appointing a COOP coordinator and planning team
- Providing final review and approval of the COOP Plan
- Ensuring appropriate testing, training and exercising of the plan
- Ensuring that an after action review and corrective action plan is developed
- Coordinating with media and government officials

**The COOP Coordinator is responsible for:**

- Ensuring the development, coordination and management of all activities required for the agency to perform its essential functions during an event or other situation that would disrupt normal operations
- Ensuring the coordinated implementation of the COOP plan and initiating appropriate notifications inside and outside the agency during COOP plan implementation
- Ensuring the preparation of site support plans to support the implementation of the COOP plan to facilitate the smooth transition of direction and operations from the primary location(s) to the alternate location
- Assisting in the identification of planning team members
- Identifying and assisting in resolving issues related to COOP plan development, activation, implementation and reconstitution
- Acting as a liaison between the planning team and the department leaders
- Coordinating and overseeing the reconstitution process
- Coordinating the development of a time-phased plan, listing functions and projects in order of priority for resuming normal operations
- Coordinating interaction with suppliers and vendors
- Making general management related business decisions
- Ensuring the business of the Department is ongoing and that clients, customers and staff remain informed
- Reporting to the DHP Director

**Emergency Response Coordinator is responsible for:**

- Serving as the Emergency Coordination Officer for VDEM
- Providing communication liaison between the Office of Commonwealth Preparedness, VDEM and the Virginia Department of Health Professions
- Coordinating with the Department of Emergency Management on emergency preparedness, response, and recovery issues
- Preparing and maintaining designated parts of the plan for which the agency is responsible
- Preparing and maintaining internal plans and procedures to fulfill the responsibilities designated in the plan
- Maintaining a roster of agency personnel to assist in disaster operations and ensure that persons on the roster are accessible and available for training, exercises, and activations of the plan
- Coordinating appropriate training for agency personnel assigned to disaster operations
- Preparing and maintaining internal emergency preparedness, response, and recovery plans for the agency’s resources (facilities, personnel, and assets) that outline a comprehensive and effective program to ensure continuity of essential state functions under all circumstances
- Coordinating the after action review and corrective action plan development
- Coordinating appropriate testing, training and exercising of the plan
- Developing quantifiable criteria for measuring and evaluating COOP performance
- Developing short and long term goals and objectives
- Assuring the State Coordinator of Emergency Management that preparedness plans for its facilities are coordinated with the applicable local emergency management agency
- Reporting to the COOP Coordinator

The COOP Planning Team is responsible for:
- Identifying management and policy issues
- Creating a planning schedule and milestones for developing COOP capabilities and obtaining plan approval
- Developing a mission statement for the team and program
- Establishing a schedule of ongoing team meetings
- Establishing COOP program objectives
- Establishing a review and maintenance cycle
- Establishing a testing and exercise cycle
- Identifying department-specific management and policy issues and potential solutions
- Identifying agency-wide issues and proposed recommendations for the COOP Planning Team’s consideration
- Advocating for adequate funding to accomplish the institution’s COOP strategy
- Reporting to the COOP Coordinator

The **Immediate Response Team (IRT)** is responsible for:
- Performing the initial assessment of damage and situation
- Ensuring the immediate safety and care of all employees, board members and visitors
- Eliminating, controlling and/or mitigating the source of the emergency
- Initiating the Department’s notification process
- Collecting information regarding the damage and cause of the emergency
- Reporting to the Crisis Management Team
The Crisis Management Team (CMT) is responsible for:
- Activating the COOP Plan
- Notifying the Administration Team (ADMT) of COOP activation
- Directing the recovery process by managing the recovery teams
- Coordinating with insurance agents, attorneys and government officials
- Serving as the official point of contact for all governmental, media and public inquires for information
- Controlling the disbursement of funds
- Supporting the restoration of DHP essential functions
- Making general management related business decisions

The Administration Team (ADMT) is responsible for:
- Notifying the leaders and back ups of the Damage Assessment and Restoration, Information Systems and Essential Functions Teams of COOP activation
- Establishing the Business Recovery Command Center if required
- Ensuring the provision of critical support functions at the temporary facility
- Working with appropriate state agencies on issues of risk management, legal and personnel matters, insurance, and disbursement of funds
- Working with suppliers and vendors
- Obtaining the required resources to support the department’s needs
- Supporting the initial restoration of DHP Essential Functions
- Reporting to the Crisis Management Team

The Damage Assessment and Restoration Team (DART) is responsible for:
- Performing both preliminary and detailed damage assessments
- Coordinating with the Crisis Management Team, landlord, maintenance providers and general contractor(s) on repairs, rebuilding, physical records restoration etc.
- Ensuring that non IT supportive equipment is ordered and installed
- Ensuring environmental support systems are operational
- Establishing a secure work area and obtain the resources needed to conduct business
- Coordinating with Information Systems Team, VITA and the NG Partnership to redirect/restore voice and data lines
- Assisting required agencies, activities and vendors in the redesign of the network
- Supporting the restoration of DHP essential functions
- Reporting to the Administration Team

The Information Systems Team (IST) is responsible for:
- Assessing IT damage
- Identifying and securing a location to install recovery hardware
- Restoring systems and user data
- Restarting production
- Serving as the key point of contact for VITA and the NG Partnership
- Supporting the restoration of DHP essential functions
- Reporting to the Administration Team
The Essential Functions Team’s is responsible for:
- Prioritizing business operations based on prioritization of essential functions
- Working with the recovery teams as needed
- Contacting key constituents as appropriate
- Implementing the restoration of DHP essential services
- Keeping normal business functions operational
- Reporting to the Administration Team

The agency’s staff is responsible for:
- Understanding their continuity roles and responsibilities within their respective departments
- Knowing and being committed to their duties in a continuity environment
- Understanding and being willing to perform in continuity situations to ensure an organization can continue its essential functions
- Ensuring that family members are prepared for and taken care of in an emergency situation

Personnel Relations and Family Preparedness Planning

The Department of Health Professionals requires that all employees complete the Virginia Terrorism Awareness training through the Commonwealth of Virginia Knowledge Center. DHP is also developing an Emergency Preparedness orientation that will be provided to all new employees within 60 days of hire. The orientation will provide information on personal and family preparedness planning as well as an overview of DHP’s in-house emergency procedures and COOP plan. While the ultimate responsibility for personal and family preparedness rests with the individual, DHP offers its employees basic informational resources so they can better prepare their families and themselves for an emergency. The DHP In-House Emergency Procedures are located in Appendix F.
CONCEPT OF OPERATIONS

A COOP plan must be ready to be implemented without prior warning. As such, the Department of Health Professions COOP Planning Team has developed a concept of operations, which describes the approach to implementing the COOP plan.

The plan can be fully implemented within 72 hours of activation and be capable of sustaining operations for up to 30 days. The broad objective of this COOP plan is to provide for the safety and well-being of Department of Health Professions’ personnel, contractors and visitors while enabling continued operations of the agency’s essential functions during any crisis or event.

The Director of the Department of Health Professions, or his or her designated successor, may implement this COOP plan. The COOP plan is implemented based on known or anticipated threats and emergencies that may occur with or without warning. The Department of Health Professions will use a time-phased approach for implementation whereby critical resources are deployed early and other resources will follow as needed.

- **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 a hurricane, a transportation accident resulting in a threat of a release of hazardous material (HAZMAT) or a threat of a terrorist incident.

- **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 are not at work. In these circumstances, while operations from the primary facility may be impossible, the majority of our employees will still be able to respond to instructions, including the requirement to relocate following proper notification.

- **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 department’s emergency response protocol of notification, evacuation, and situation assessment. The DHP In-House Emergency Procedures are located in Appendix F.

In each of these circumstances, the agency has developed an executive decision process that allows for a review of the emergency situation and determination of the best course of action for response and recovery. This process uses a decision matrix for implementing the COOP plan.
The decision matrix is presented in Table 1. Potential disruptions resulting from emergency events are classified in Emergency Levels 1 through 5. Using these emergency levels, the director, or a duly designated successor will activate or partially activate the COOP plan.

The decision matrix focuses on the way in which the emergency event may impact the capabilities of the agency to provide its essential functions. This decision grid provides guidance to leadership on responding to the variety of situations that could trigger activation or partial activation of the COOP plan. Recommended impacts and decisions may be modified based on the actual event.
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<th>Category</th>
<th>Impact on Agency</th>
<th>Decisions</th>
<th>Potential Event</th>
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<td>I</td>
<td>Alert</td>
<td>An actual or anticipated event might have an adverse impact of up to 12 hours on any portion of the agency but does not require any specific response beyond what is normally available.</td>
<td>Impacted department alerts appropriate personnel of situation and requests needed assistance. No COOP plan implementation required.</td>
<td>Major weather event forecast to impact area.</td>
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<td>II</td>
<td>Stand-by</td>
<td>An actual or anticipated event estimated to have minimal impact on operations for 12 to 72 hours that might require assistance beyond what is normally available.</td>
<td>Impacted department alerts appropriate personnel. Members of the COOP Planning Team are notified and placed on stand-by. Limited COOP plan implementation depending on individual department requirements.</td>
<td>Major weather event approaching facility. Workplace violence.</td>
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<td>III</td>
<td>Partial Implementation</td>
<td>An actual event estimated to disrupt the operations of essential functions for more than three days.</td>
<td>Impacted department alerts senior leadership. Members of the COOP teams are alerted and instructed on the full or partial implementation of the COOP plan. Implementation of the COOP plan approved by the senior leadership. Might require the mobilization of all resources. Might also require the movement of some personnel to an alternate facility location for a period of more than three days but less than seven days. Event requires command and control resources be applied to the issue.</td>
<td>Small fire localized to a portion of the building. Power outage. Moderate flooding</td>
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<tr>
<td>Level</td>
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<td>Decisions</td>
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<td>IV</td>
<td>Full Implementation</td>
<td>An actual event that significantly disrupts the operations of essential functions for more than seven days.</td>
<td>Impacted department alerts senior leadership. Members of the COOP teams are alerted and instructed on the full or partial implementation of the COOP plan. Might require activation of orders of succession. Might require the movement of significant number of personnel to an alternate location for a period of more than seven days. Event requires command and control resources be applied to the issue, and may require the complete mobilization of all resources.</td>
<td>Contamination or major structural damage to the facility. Major explosion, fire, flood, tornado, contagious health event, chemical contamination</td>
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ESSENTIAL FUNCTIONS
Using the criteria established by the Department of Health Professions COOP Planning Team, the agency has identified essential functions and personnel who have roles in performing those functions to meet its responsibilities to citizens, personnel, contractors, and visitors. The agency also has prioritized its functions by determining the essential functions’ recovery time objective (RTO).

The Department of Health Professions Essential Functions include:
- Paying Personnel
- Revenue Management
- Accounts Payable
- Data Support
- Issuing new licenses
- Renewing existing licenses
- Providing information on licensed individuals and facilities
- Investigating complaints and allegations of misconduct against licensed health care providers
- Inspecting licensed facilities
- Monitoring compliance of licensees with board orders
- Adjudicating cases against licensees
- Providing information to prescribers statewide regarding potential abuse and illegal obtaining of controlled substances (Prescription Monitoring Program)

The priority order for restoration of these functions in the event of a disaster or major emergency is:

- Providing information on licensed individuals and facilities
- Renewing existing licenses
- Issuing new licenses (particularly applications in process)
- Investigating complaints and allegations of misconduct against a licensed health care professional that poses an imminent threat and substantial danger or substantial danger but no imminent threat to the public (priorities A and B).
- Providing information to prescribers statewide regarding potential abuse and illegal obtaining of controlled substances (Prescription Monitoring Program)
- Operational and management reporting systems

A listing of the agency’s prioritized essential functions and their RTOs, along with all supporting resources including essential personnel and vital records, system and equipment required to execute them are located in Appendix G: Essential Functions and Appendix H: Vital Records.
PLANNING SCENARIOS

The COOP plan has been developed around a set of scenarios which reflect the Department of Health Professions’ assessment regarding the most likely types of events which may result in COOP plan activation.

The types of situations and/or scenarios that could necessitate the implementation of the department’s COOP plan are numerous and diverse. Some possible emergency events that could affect DHP operations and services include:

- A major weather event, particularly flooding, ice storm, tornado, or hurricane
- A major accident, such as a gas explosion or chemical spill
- Prolonged equipment or power failure
- Destruction of the agency’s central office
- Resource shortages
- Environmental contamination
- A significant health event or pandemic
- A terrorist event

The agency is vulnerable to a full range of hazards (man-made, natural and technological disasters). This section outlines the events considered most likely to occur and which have the greatest likelihood of causing significant interruptions in operations, programs, or services. The DHP Risk Assessment is located in Appendix I.

**Single-person emergency in-building during work hours**, examples: medical emergency or respondent disruption. This event would pose no threat to the building/fixed assets and no general evacuation would be required.

**Multiple-person emergency in-building during work hours**, examples: fire or building shutdown of services (water, power, HVAC). This event would require an evacuation and impact the facility.

**Criminal or terrorist event during work hours**, examples: hostage/other criminal act or domestic violence. This event would require an evacuation and impact the facility.

**Hacker attack ("incident")**. This event would not pose a threat to the building or its occupants. This could be restricted to the agency or could be an attack on VITA.

**Building unavailable with no structural issues involved**, examples: power outage or water contamination.

- **Short-term** (<3 business days). There would be no need to relocate staff. Paper files would be undamaged and accessible for retrieval. Backup servers would be available for L2K and email. The community infrastructure would not be affected and alternative sites would be readily available for scheduled board meetings/hearings.
• **Long-term** (≥ 4 business days). The assumptions for a short term event would still be valid, including the availability of alternative sites for board meeting/hearings. Relocation/reassignment of staff would be required.

**Building unavailable due to structural issues**

• **Fire – minor** (< 3 business days). This would involve smoke damage only, no water damage or outage. There would be no need to relocate staff. There would be no or minimal physical loss or damage to paper records or physical assets. Backup servers would be available for L2K and email. The community infrastructure would not be affected and alternative sites would be readily available for scheduled board meetings/hearings.

• **Fire – major** (≥ 4 business days). This event would cause major damage due to fire, smoke and water from sprinkler activation. There would be major loss of paper records and physical assets. The main servers would be unusable and the building would be inaccessible. Relocation of staff would be required. Salvage and/or recreation of case files/records/evidence would be required. The community infrastructure would not be affected and alternative sites would be readily available for scheduled board meetings/hearings.

**Community-wide disaster** (≥ 4 business days) examples: severe weather, large industrial accident or pandemic. Planning assumptions would include:

- Broad-based problems involving power, phones, and travel
- A duration longer than 3 business days
- Local back-up servers are not available/accessible
- No physical damage to the building or interior assets
- Local relocation sites are not available to DHP or may be taken by higher-priority organizations
- Local off-site IT access is not an option
- License 2000 and On-line licensing would be provided through System Automation host site
- A distant/remote satellite facility may have to be established for critical functions
- Broad impact on state government operations within the metro area
- Private sector organizations competing with state government for facilities and resources

**ASSUMPTIONS**

The assumptions used to support the Department of Health Professions’ COOP planning include the following elements.

- The agency is vulnerable to the full range of hazards (man-made, natural and technological disasters)
• If properly implemented, this COOP plan will reduce or prevent disaster-related losses
• Loss of access to a facility, reduction in workforce or loss of services might occur during or after operating hours
• Leadership and personnel will continue to recognize responsibilities to public safety and exercise their authority to implement this COOP plan in a timely manner when confronted with events impairing agency essential functions
• Agency and non-agency personnel and resources located outside the area affected by the emergency or threat will be available as necessary to continue essential functions
• Staff members who are normally available may be rendered unavailable by a disaster or its aftermath, or may be otherwise unable to participate in the recovery (such as from wide spread storm damage caused by a tornado or hurricane)
• Procedures are sufficiently detailed so someone other than the person primarily responsible for the work can follow them
• Recovery of a critical subset of the agency’s functions and application systems will occur to allow the agency to continue essential functions adequately
• A disaster may require agency users, clients and local agencies to function with limited automated support and some degradation of service until full recovery is made
• VITA/NG Partnership is able to establish and/or maintain computer and telecom capabilities

Activation of the COOP plan may involve:

• Deliberate and pre-planned movement of selected key personnel and technical personnel to an alternate operating facility
• Implementation of temporary work procedures and job assignments
• Delegation of emergency authorities to successors of senior management and technical personnel who are unavailable during the emergency
• Assignment of COOP teams to perform specific activities necessary to ensure essential functions

**COOP ALERT AND NOTIFICATION**

• Key Personnel and COOP team contact lists are maintained by Human Resources
• Initial notification is made by the senior staff to the Director, Chief Deputy Director and/or the Deputy Director for Administration.
• The decision to activate the COOP Plan is made by the Department Director or designee in coordination with executive leadership
• The COOP Coordinator notifies COOP teams and executive leadership of activation and provides initial directions. (For example, “Arrange at designated meeting location within two hours for initial assessment.”)
• The Immediate Response Team is responsible to notify all COOP Team Leads
• COOP Team Leads call all team members and provide initial instruction
• If appropriate, the Emergency Response Coordinator informs local and state emergency management of COOP activation
• If appropriate, the Emergency Response Coordinator initiates all staff call down as directed by COOP Coordinator
• The Emergency Response Coordinator initiates and maintains a communications update document on the DHP Documentum Repository for all staff
• The COOP Coordinator notifies the facility and operations personnel of activation
• DHP may utilize the voice mail system on the office phones to leave instructions to staff.
• The CMT coordinates any necessary press releases and public message update to the DHP website and main phone line (For example, “The office is temporarily closed until further notice.”)
• The COOP Coordinator or designee notifies all current active vendors, contractors, and suppliers of COOP plan activation and provides direction on activities that will need to be altered, suspended, or enhanced as a result
• As appropriate and necessary, the COOP Coordinator notifies the primary point of contact for surrounding organizations and jurisdictions of the COOP plan activation, any potential consequences and planned alternate actions that might be required until normal operations can be restored.

**COOP PLAN IMPLEMENTATION**

Implementation of the plan is based on three phases of operation: activation and relocation; alternate facility operations; and reconstitution.

**SCENARIO 1: LOSS OF ACCESS TO A FACILITY**

The following section addresses the agency’s procedures used when the COOP plan is implemented due to the loss of an operating facility, with or without advance notice.

**NOTE:** the ability of DHP to provide essential functions from an alternate location is dependent on VITA/NG Partnership establishing and maintaining computer and telecom capabilities at the alternate facility. Similarly, successful reconstitution is dependent on VITA/NG Partnership re-establishing computer and telecom capabilities at the original or alternate permanent site. The DHP COOP response and recovery timeline would be directly affected by the VITA/NG Partnership response and recovery timeline.

**Phase I – Activation and Relocation**

- The Agency Director or designee, in coordination with executive leadership, determines need and activates the COOP plan
- The Crisis Management Team notifies the remaining COOP team leaders and backups
- The COOP Coordinator in conjunction with the Emergency Response Coordinator initiates activities to support the actions being taken by the agency
- A briefing is held by the Crisis Management Team attended by COOP team leaders and key personnel
- An event specific COOP plan is developed which will include an ongoing agency communication plan and briefing schedule
- A Business Recovery Command Center (BRCC) is established if appropriate
Activated staff is informed of their roles and responsibilities and are directed to report to the alternate facility, the BRCC or telecommute

The alternate facility manager is notified of the potential activation and relocation

The Damage Assessment and Reconstruction Team initiates a damage assessment and secures the original facility

The Information Systems Team contacts VITA/Partnership staff to establish computer and telecom capabilities

Affected local, regional and state agencies are notified

All agency employees and contractors are notified regarding activation of the COOP plan and their status

The Crisis Management Team coordinates press releases and/or public message updates to the DHP website and main phone line (For example, “The office is temporarily closed until further notice.”)

Cost Center Managers and supervisors account for personnel throughout the duration of the COOP event

The Administration Team assembles and/or orders necessary documents, equipment and supplies required for operations at the alternate facility

The Administration Team tracks the status of the activation by recording staff hours; work assignments; costs incurred; resources required; adjustments to service provision or hours of operation; and all communications

The Essential Functions Team coordinates essential functions at regular facility, if available, until alternate facility is ready

Phase II – Alternate Facility Operations

Activated personnel assemble at the alternate facility location within the time frame established by the Crisis Management Team

Regular briefings and communication updates continue throughout the event and reconstitution

The Administration Team continues to track the status of the activation to include: staff hours; work assignments; costs incurred; resources required; adjustments to service provision or hours of operation; and all communications

The Information Systems Team coordinates with VITA/NG Partnership to establish and maintain computer and telecom capabilities

The Human Resources Director provides additional guidance as required by the situation to supportive personnel via available communication means

Delegation of Authority and Orders of Succession are activated as appropriate

The Damage Assessment and Reconstruction Team completes a damage assessment of the original facility and assists in supporting the operations at the alternate facility

The Crisis Management Team continues to provide guidance to contingency team personnel and information to the public

The Essential Functions Team coordinates the performance of any essential functions determined to be critical to operations from the alternate facility or using temporary work orders or procedures

The department re-establishes normal lines of communication within the agency, to external agencies, and to the public

Additional staff are activated to provide other services and functions as necessary
Additional guidance and information is provided to all personnel regarding the duration of alternate operations, payroll, time and attendance, duty assignments, etc.

The Damage Assessment and Reconstruction Team and the Information Systems Team coordinate the physical reconstitution at the original facility

The COOP Planning Team initiates efforts to return to normal operations (reconstitution)

The Crisis Management Team develops general guidance and policy on ending alternate operations and returning to a non-emergency status at the designated primary facility

The Administration Team establishes specific actions to ensure a timely and efficient transition of communications, direction and control, and transfer of vital records and databases to primary facility

Phase III – Reconstitution

The Essential Functions Team continues to coordinate the provision of essential services

The Agency Director or designee informs agency personnel that the threat of, or actual emergency, no longer exists, and provides instructions for resumption of normal operations using established notification procedures

The Crisis Management Team coordinates any necessary press releases and public message updates to the DHP website and main phone line (such as a resumption of normal services and hours of operation)

The Crisis Management Team reports the status of reconstitution to personnel, contractors, agency partners and other key contacts, such as local jurisdictions, as applicable

The COOP Planning Team conducts a review of its COOP operations and the effectiveness of its plans and procedures within 3 days of COOP deactivation and develops an After Action Report (AAR)

The department develops a task force to assess all phases and elements of the alternate operations and provide specific solutions to correct any areas of concern in the form of a Corrective Action Report (CAR)

The Crisis Management Team reports the status of reconstitution to personnel, contractors, agency partners and other key contacts, such as local jurisdictions, as applicable

The COOP Planning Team conducts a review of its COOP operations and the effectiveness of its plans and procedures within 3 days of COOP deactivation and develops an After Action Report (AAR)

The Emergency Response Coordinator, in coordination with the COOP Planning Team, makes appropriate revisions to the COOP Plan

The revised plan is approved by the Agency Director and a copy is provided to VDEM

Necessary adjustments are made to DHP testing, training and exercise activities
SCENARIO 2: LOSS OF SERVICES DUE TO A REDUCTION OF WORKFORCE

The following section addresses the procedures used when the COOP plan is activated due to the loss of services from a reduction in workforce, with or without advance notice.

NOTE: the ability of DHP to provide essential functions via telecommuting is dependent on VITA/NG Partnership maintaining computer and telecom capabilities. The DHP COOP response and recovery timeline would be directly affected by the VITA/NG Partnership response and recovery timeline.

Implementation procedures for addressing a loss of service due to a reduction of workforce are outlined in the DHP COOP Pandemic Influenza Annex, Appendix K.

Reduction in workforce due to a non contagious event would be managed through a prioritization of essential functions, ‘just in time’ cross training of remaining staff, leveraging crossed trained staff to ‘mentor’ where needed and adjustment in work schedules and assignments.

Phase I – Activation

- The Agency Director or designee, in coordination with executive leadership, determines need and activates the COOP plan
- The Crisis Management Team notifies the remaining COOP team leaders and backups
- The COOP Coordinator in conjunction with the Emergency Response Coordinator initiates activities to support the actions being taken by the agency
- A briefing is held by the Crisis Management Team attended by COOP team leaders and key personnel
- Relevant HR policies, department directives, orders of succession and delegation of authority are reviewed
- An event specific COOP plan is developed which will include an ongoing agency communication plan, briefing schedule and ‘just in time’ training plan
- The Information Systems Team notifies VITA/NG Partnership staff of COOP activation
- Affected local, regional and state agencies are notified
- All agency employees are notified regarding activation of COOP plan and their status using the Staff Notification Procedure
- Cost Center Managers and supervisors account for personnel throughout the duration of the COOP event
- The Crisis Management Team coordinates any necessary press releases and public message updates to the DHP website and main phone line (such as a reduction in hours of operation or services)
- The Administration Team initiates procedures for tracking the status of the activation to include: staff hours; work assignments; costs incurred; resources required; adjustments to service provision or hours of operation; all communications; and other related requirements associated with work performed off-site as outlined in DHP’s Teleworking directive.

Phase II – Alternate Operations

- Regular briefings and communication updates continue throughout the event and reconstitution
The Administration Team continues to track the status of the activation
The Information Systems Team coordinates with VITA/NG Partnership to meet changing computer and telecom capabilities needs
The Human Resources Director provides additional guidance as required by the situation to supportive personnel via available communication means
The Crisis Management Team continues to provide guidance to contingency team personnel and information to the public
The Essential Functions Team coordinates the performance of any essential functions determined to be critical to operations
Adjustments are made to work schedules and assignments as appropriate and inline with DHP’s alternative work schedule and telework policies. DHP’s telework directive is located in Appendix L
Orders of succession and delegation of authority are activated as appropriate
The staff mentoring and ‘just in time’ training plan is implemented as appropriate
Additional guidance and information is provided to all personnel regarding the duration of alternate operations, payroll, time and attendance, duty assignments, etc.
The COOP Planning Team initiates efforts to return to normal operations (reconstitution)

Phase III – Reconstitution
- The Essential Functions Team continues to coordinate the provision of essential services
- The Department Director or designee informs agency personnel that the department is ceasing alternate work arrangement operations and provides instructions for resumption of normal operations
- The Crisis Management Team coordinates any necessary press releases and public message updates to the DHP website and main phone line (such as a resumption of normal services and hours of operation)
- The COOP Planning Team conducts a review of its COOP operations and the effectiveness of its plans and procedures within 3 days of COOP deactivation and develops an After Action Report (AAR)
- The department will develop a task force to assess all phases and elements of the alternate operations and provide specific solutions to correct any areas of concern in the form of a Corrective Action Report (CAR)
- The Emergency Response Coordinator, in coordination with the COOP Planning Team, makes appropriate revisions to the COOP Plan
- The revised plan is approved by the Agency Director and a copy is provided to VDEM
- Necessary adjustments are made to DHP testing, training and exercise activities
SCENARIO 3: LOSS OF SERVICES DUE TO EQUIPMENT OR SYSTEM FAILURE

The following section addresses the procedures used when the COOP plan is implemented from the loss of services due to equipment or system failure, with or without advance notice.

**NOTE:** the ability of DHP to provide essential functions is dependent on VITA/NG Partnership maintaining computer and telecom capabilities. Similarly, successful reconstitution is dependent on VITA/NG Partnership re-establishing computer and telecom capabilities at the original or alternate permanent site. The DHP COOP response and recovery timeline would be directly affected by the VITA/NG Partnership response and recovery timeline.

**Essential systems dependent on internet connectivity and server access include:**
- License 2000, My License Office - critical system for licensing, discipline, and enforcement activities
- Documentum - content management platform and repository
- Prescription Monitoring Program application
- CARS – Commonwealth Accounting and Reporting System
- CIPPS – Commonwealth Integrated Payroll Personnel System
- PMIS – Personnel Management Information System
- eVA – Commonwealth web-based purchasing system
- Nursys – National Council of State Boards of Nursing license verification
- File Transfer Protocol access – Pearson VUE, PSI
- Suntrust Lockbox Browser – check viewing
- Merchant Connect – electronic payment processing
- Bank of America Works – electronic payment processing
- viaKlix – credit card payment processing
- Email
- Telephone VOIP
- BlackBerry
- Pagers

**Other essential services/systems:**
- Mail delivery
- Utilities
- Supply Vendors

**Phase I – Activation and Relocation**
- The Agency Director or designee, in coordination with executive leadership, determines need and activates the COOP plan
- The Crisis Management Team notifies key personnel and support staff of affected essential function(s) of the loss of service or system failure
- The Administration Team coordinates with the affected Cost Center Manager, procurement manager, and the Technology Director to develop an event specific COOP plan which will include a communication plan
The Information Systems Team (if outage involves information systems/IT) and/or the Damage Assessment and Reconstruction Team (if outage is telecom) coordinate with VITA/NG Partnership to establish and maintain computer and telecom capabilities.

In the event of a COV technological systems failure, the Crisis Management Team, the Administration Team and the affected Cost Center Manager coordinate with other state agencies with operational systems to temporarily operate key functions from their facilities (HR, Accounting).

In the event of a private vendor systems failure the Crisis Management Team, the Administration Team, the Procurement Manager and the affected Cost Center Manager coordinate with the affected vendor to develop a temporary procedural adjustment (ex. manual check processing, faxing contractor reports).

An event specific COOP plan is developed which will include an ongoing agency communication plan, briefing schedule and ‘just in time’ training plan to address any procedural changes.

The Crisis Management Team coordinates any necessary press releases and public message updates to the DHP website and main phone line (such as reduction in hours of operation or services).

The Administration Team initiates procedures for tracking the status of the activation to include: staff hours; work assignments; costs incurred; resources required; adjustments to service provision or hours of operation; and all communications.

Phase II – Alternate Operations

- Regular briefings and communication updates continue throughout the event and reconstitution.
- The Crisis Management Team, the Administration Team, and the affected Cost Center Manager make necessary adjustments to services and/or service hours if appropriate.
- The Administration Team continues to track the status of the activation.
- Essential functions continue to be provided utilizing the event specific COOP plan.
- The Crisis Management Team continues to provide guidance to all personnel in regards to duration of alternate operations.
- The COOP Planning Team initiates efforts to return to normal operations (reconstitution).

Phase III – Reconstitution

- The Essential Functions Team continues to coordinate the provision of essential services.
- The Department Director or designee informs agency personnel that the department is ceasing the adjusted operational procedures and provides instructions for resumption of normal operations.
- The Crisis Management Team coordinates any necessary press releases and public message updates to the DHP website and main phone line (such as a resumption of normal services and hours of operation).
- Cost Center Managers and supervisors resume normal operations.
- The COOP Planning Team conducts a review of its COOP operations and the effectiveness of its plans and procedures within 3 days and develop an After Action Report (AAR).
- The department will develop a task force to assess all phases and elements of the alternate operations and provide specific solutions to correct any areas of concern in the form of a Corrective Action Report (CAR).
- The Emergency Response Coordinator, in coordination with the COOP Planning Team, makes appropriate revisions to the COOP Plan
- The revised plan is approved by the Agency Director and a copy is provided to VDEM
- Necessary adjustments are made to DHP testing, training and exercise activities
DELEGATION AND SUCCESSION OF AUTHORITY

In the event that executive leadership, senior management or senior technical personnel are unavailable during an emergency, the department has developed a set of procedures to govern both orders of succession and delegations of authority.

- Authorized successors have been identified for key management and technical positions within the agency.

- Authorities have been pre-delegated for making policy determinations and decisions. All such pre-delegations specify what the authority covers, what limits may be placed upon exercising it, who (by title) will have the authority, and under what circumstances.

The Director of the Department of Health Professions has the authority to direct the activities of the agency during an emergency situation unless directed otherwise by the Governor or State Coordinator of Emergency Management. In the absence of the Agency Director, the designation of authority is hereby delegated to the following positions in the succession shown below.

In the event of an emergency, disaster, or other situation which causes the agency’s COOP plan to be initiated, in the absence of the Agency Director the following individuals are hereby authorized to take any and all actions – fiscal, procurement, personnel, programmatic, or otherwise – necessary to operate the agency and addresses its business needs to the same extent as accorded to the agency head as provided by law or regulation.

<table>
<thead>
<tr>
<th>Title</th>
<th>Current Incumbent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Deputy Director</td>
<td>Emily Wingfield</td>
</tr>
<tr>
<td>Deputy Director for Administration</td>
<td>Mark Monson</td>
</tr>
<tr>
<td>Director of Enforcement</td>
<td>Faye Lemon</td>
</tr>
<tr>
<td>Executive Director, Board of Medicine</td>
<td>Dr. William Harp</td>
</tr>
<tr>
<td>Executive Director, Board of Nursing</td>
<td>Jay Douglas</td>
</tr>
<tr>
<td>Executive Director, Board of Pharmacy</td>
<td>Elizabeth (Scotti) Russell</td>
</tr>
<tr>
<td>Executive Director, Board of Dentistry</td>
<td>Sandra Reen</td>
</tr>
<tr>
<td>Executive Director, Boards of Optometry, Veterinary Medicine &amp; Health Professions</td>
<td>Elizabeth Carter</td>
</tr>
<tr>
<td>Executive Director, Boards of Long Term Care, Physical Therapy, Funeral Directors and Embalmers &amp; Audio – Pathology</td>
<td>Lisa Hahn</td>
</tr>
<tr>
<td>Regional Supervisor, Central Virginia</td>
<td>Pamela Twombly</td>
</tr>
</tbody>
</table>
Regional Supervisor, Southwest Virginia  Jennifer E. Baker
Regional Supervisor, Tidewater  Patricia Stigall
Regional Supervisor, Northern Virginia  William Hurst

See Appendix A: Key Personnel Contact List

Orders of Succession for other key employees are located in Appendix J.

The first obligation of employees of the Department of Health Professions in an emergency, other than prior military obligation, is to their duties and assignments given them by this agency. DHP personnel, therefore, should not be committed to fill emergency services roles or assignments in other state or local departments or agencies without the prior written approval of the agency Director.

Central Office personnel will report to their official duty stations or to other designated site(s) as directed by alert instructions where they may be given emergency assignments or instructions for future reporting. During the course of the emergency event, from initial response to recovery and restoration of normal operations, all DHP personnel may be asked to work irregular hours, varying schedules, and at alternate locations as required and deemed necessary by agency management. Accommodations to individual employee’s personal situations will be made to the extent feasible.

All efforts will be made to ensure employees remain fully employed for the duration of the emergency event; however the nature and duration of the emergency may require schedule changes, shift work and furloughs.

ALTERNATE FACILITY LOCATIONS

The Department of Health Professions recognizes that normal operations may be disrupted and that there may be a need to perform essential services at an alternate facility.

In preparing the scope of what is needed at an alternate facility, the Department of Health Professions identified the capabilities of an alternate facility that are essential for the continuing of operations.

To ensure adequate support for personnel located at alternate facilities, the department has also addressed requirements for staffing and the essential services that need to be provided at the alternate facility.

Each essential service may need a different level of security and access control. To ensure that appropriate measures are in place, the department has also identified security requirements for each essential service.
To meet these requirements, the department has entered into a Memorandum of Understanding with the Southside Virginia Training Center (SVTC). A copy of this MOU is located in Appendix M.

This memorandum of understanding was developed to support DHP in the event of an emergency and was developed in the spirit of partnership as all parties involved benefit from the agreement.

The Southside Virginia Training Center and the central office of DMHMRSAS agree to provide floor space in the SVTC/VITA computer room for the Department of Health Professions to house emergency servers for their systems. In the event of an emergency for The Department of Health Professions, DHP would have use of the conference rooms and command centers available in building 111.

SVTC and the Department of Health Professions agree that there will be no lease or rental cost associated with this agreement. There will be no administrative costs charged to the Department of Health Professions since their costs are negligible.

In the event of an emergency that requires the Department of Health Professions to vacate its office space, DMHMRSAS agrees to host DHP’s disaster recovery efforts at the Petersburg campus until such time as DHP can return to its office space or make arrangements for long-term temporary space. DMHMRSAS’ offer to host DHP’s disaster recovery efforts includes the provision of physical space and support services as outlined below and is contingent on the availability of space on the Petersburg campus and DMHMRSAS’ ability to provide requisite services to its clients and patients.

This Memorandum of Understanding outlines in general terms the services provided by SVTC, and the requirements of the client agency to receive support services. It is also intended to define the channels of communications and methods to resolve campus problems.

Emergency back-up power is provided to building 111 by a 300kw generator adjacent to the building. This generator is new at the time of this agreement and is capable of providing sufficient power to operate the building, including DHP’s equipment for an unlimited timeframe assuming no mechanical breakdown and the availability of diesel fuel. The generator is under a preventative maintenance contract.

NOTE: the ability of DHP to provide essential functions is dependent on VITA/NG Partnership establishing and maintaining computer and telecom capabilities at the alternate facility. Similarly, successful reconstitution is dependent on VITA/NG Partnership re-establishing computer and telecom capabilities at the original or alternate permanent site. The DHP COOP response and recovery timeline would be directly affected by the VITA/NG Partnership response and recovery timeline.
# DHP COOP ALTERNATE FACILITY

## Southside Virginia Training Center

<table>
<thead>
<tr>
<th>Address</th>
<th>26317 W. Washington Street Building 111, Petersburg, VA 23801</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>(804) 524-7000</td>
</tr>
<tr>
<td>Contact</td>
<td>Acting Facility Director, William Hawkins (804) 524-7208</td>
</tr>
</tbody>
</table>

## Directions

- **A**: 9960 Mayland Dr, Richmond, VA 23233-1485
- 1: Start out going EAST on MAYLAND DR toward GASKINS RD. 0.1 mi
- 2: Turn RIGHT onto GASKINS RD. 0.5 mi
- 3: Merge onto I-64 E toward RICHMOND. 10.6 mi
- 4: Merge onto I-95 S via EXIT 0 on the LEFT. 24.0 mi
- 5: Merge onto I-85 S/US-460 W via EXIT 51 toward DURHAM/ATLANTA. 4.8 mi
- 6: Merge onto US-1 N/US-460 BR E/BOYDTON PLANK RD via EXIT 63B. 1.5 mi
- 7: Turn LEFT onto NORTH RD. 0.0 mi
- 8: Turn RIGHT onto EAST RD. 0.3 mi
- 9: End at 26317 W. Washington Street Petersburg, VA 23803
All key personnel are expected to create and maintain a “go-kit” which is accessible to them 24-7 to enhance his or her preparedness for responding to incidents. A go-kit should contain those items a team member considers essential to supporting operations at an alternate site. Each kit may be somewhat unique, but most should include:

- Continuity of Operations (COOP) plan
- Current contact lists for personnel and external parties
- CD-ROMs or memory sticks
- General office supplies (small amount)
- Cellular telephone, Blackberry
- Office telephone contact list
- Personal family preparedness and communications plan
- Personal supplies such as medication

The following is a list of positions whose job responsibilities include having access to their kits at all times:

1. Director and Chief Deputy Director
2. Deputy Director for Administration
3. COOP Coordinator
4. Emergency Response Coordinator
5. Director of Enforcement
MULTI-YEAR STRATEGY AND PROGRAM MANAGEMENT

The Department of Health Professions has developed an approach to maintaining a viable COOP capability. This approach ensures the review and update of the COOP plans and its supporting documents; the orientation of training of both existing and newly hired/appointed personnel; and the testing of the COOP capability through internal, local, regional and state exercises.

Roles and responsibilities of the COOP Team include:

- Maintaining documents that grant authority for the creation, modification, ongoing maintenance, and execution of the COOP plan;
- Identifying issues that will impact the frequency of changes required to the COOP plan;
- Establishing a review cycle;
- Establishing a testing and exercise cycle; and
- Guiding and prioritizing mitigation activities that the Cost Centers need to undertake.
Table 2
Department of Health Professions COOP Planning Team

COOP Planning Team Coordinator: Mark Monson, Deputy Director for Administration, DHP

Emergency Response Coordinator: Kathy Siddall, Program Development and Implementation Manager

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Department</th>
<th>Telephone</th>
<th>E-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark Monson</td>
<td>Deputy Director for Administration</td>
<td>802-367-4552</td>
<td><a href="mailto:Mark.monson@dhp.virginia.gov">Mark.monson@dhp.virginia.gov</a></td>
</tr>
<tr>
<td>Kathy Siddall</td>
<td>Program Development and Implementation Manager</td>
<td>802-367-4559</td>
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</tr>
</tbody>
</table>

TRAINING, TESTING AND EXERCISES

To maintain the agency’s COOP capability, an all-hazard COOP training, testing, and exercise program will be established. Major components of this program will include training all staff in their COOP responsibilities; conducting periodic exercises to test and improve COOP plans and procedures, systems, and equipment; and instituting a multi-year process to ensure continual plan updates in response to changing conditions.

Training

Training on the DHP’s COOP plan will be provided to all of the department’s staff. The level of training will be dependent upon their work location and responsibilities.

- Introduction to COOP planning (new personnel and contractors)
- DHP COOP Plan Overview (all staff and board members)
- COOP plan Activation and Relocation (key personnel)
- Cross training for essential functions (supportive personnel)
- National Incident Management System (leadership)
- Incident Command System (leadership)

Training on the full plan will be provided to all staff housed in the headquarters building at the Perimeter Center, 9960 Mayland Drive. Overview training will be given to the agency’s field staff sufficient to familiarize them with the plan’s purpose and approach. Likewise, overview presentations will be made to the licensing boards to familiarize them with the plan’s purpose and approach.

After the initial training, refresher training will be provided to staff annually.
The contents of the training will be tailored to the specific audience. All employees and board members will be provided with an overview of the plan, the plan’s philosophy, assumptions and objectives, and the delegation/succession of authority. For headquarters staff additional information will be provided on:

- Evacuation procedures
- Purpose of the teams and their structures
- After-hour procedures and expectations
- The need for flexibility, particularly in work scheduling and hours

**Testing and Exercises**

Tests and exercises are an important part of COOP readiness. By testing elements of the COOP plan, such as alert, notification and activation procedures, vital records recovery, and information technology systems the agency can determine if appropriate policies and procedures are in place.

Exercises are events that not only test the plan but allow participants to apply their skills and knowledge to improve operational readiness. Exercises also allow planners to evaluate the effectiveness of previously conducted tests and training activities. Exercises serve to assess, validate, or identify problems with specific aspects of COOP plans, procedures, systems, and facilities.

- A *tabletop exercise* is a simulation activity in which a scenario is presented and participants in the exercise respond as if the scenario was really happening.
- A *Functional exercise* simulates a function (e.g., alert, notification) within a real incident. Functional exercises test a single part of COOP activation to be tested independently of other responders.
- A *Full-scale exercise* tests the agency’s total response capability for COOP situations. These exercises are as close to reality as possible, with personnel being deployed and systems and equipment being implemented.

DHP will rely primarily on table-top scenarios to exercise its COOP plan. Functional exercises will be used to a lesser extent and would focus primarily on the IT components of the plan.

Annual table-top exercises will be conducted by the COOP Planning Team. Exercises and tests involving specific sections or procedures within the COOP Plan, such as the ‘All Staff Notification Procedure’, will occur on a random basis.

NOTE: as a state agency, the Department of Health Professions is an integral part of the broader operations and services of Virginia state government. As part of state government, the agency lacks the autonomy and authority to take independent actions in testing and exercising certain key areas. The services and COOP capability of VITA and the NG Partnership play a critical and essential role in DHP’s ability to successfully implement its COOP plan.
Objectives

- Training agency staff
- Identifying and correcting plan weaknesses
- Validating plan assumptions, expectations, processes, and procedures
- Maintaining awareness of and familiarity with the plan
- Revealing resource gaps
- Improving coordination
- Practicing using the communication network
- Clarifying roles and responsibilities
- Improving individual performance
- Improving readiness for a real incident

Frequency

The plan will be reviewed and evaluated through exercises conducted randomly, but no less than once per year. Additional exercises and reviews will be conducted as needed to stay current with changes in agency personnel as well as directives and guidance from state central agencies. General responsibility for determining the extent and frequency of the exercises will be maintained by the COOP Planning Team, or others so designated by the agency director.

Exercise Evaluation

At the conclusion of each exercise a review of the exercise by the participants will be conducted by the COOP Planning Team. The information gathered from participants and observers of the exercise will be incorporated in an After Action Report. This report will summarize the extent of the exercise, the participants, results, findings and recommendations for change.

The department will develop a task force to assess all phases and elements of the exercise and provide specific solutions to correct any areas of concern in the form of a Corrective Action Report (CAR). The CAR will form the basis for COOP Plan revision.
COOP PLAN MAINTENANCE

The Virginia Department of Health Professions Department Emergency Response Coordinator is the lead in ensuring that the DHP COOP plan is updated and maintained in accordance with established schedules.

Whenever the plan is updated, it should be reissued with the update recorded on the COOP Plan Record of Changes.

For a listing of major responsibilities of essential personnel and leadership required for development and maintenance of the DHP COOP plan please see the ‘COOP Plan Implementation Responsibilities’ section of this document.
<table>
<thead>
<tr>
<th>Activity</th>
<th>Tasks</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan update and certification</td>
<td>▪ Review entire plan for accuracy</td>
<td>Semi-annually</td>
</tr>
<tr>
<td></td>
<td>▪ Incorporate lessons learned and changes in policy and philosophy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Manage distribution of plan updates</td>
<td></td>
</tr>
<tr>
<td>Maintain and update Orders of Succession</td>
<td>▪ Obtain names of current incumbents and designated successors</td>
<td>As-needed</td>
</tr>
<tr>
<td></td>
<td>▪ Update Delegation of Authorities</td>
<td></td>
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<tr>
<td>Checklists</td>
<td>▪ Update and revise checklists</td>
<td>As needed</td>
</tr>
<tr>
<td></td>
<td>▪ Ensure annual update/validation</td>
<td>Annually</td>
</tr>
<tr>
<td>Update rosters of all positions</td>
<td>▪ Confirm/update information on members of COOP Teams</td>
<td>Semi-annually</td>
</tr>
<tr>
<td>Appoint new members of the COOP Planning Team</td>
<td>▪ Qualifications determined by COOP Leaders</td>
<td>As needed</td>
</tr>
<tr>
<td></td>
<td>▪ Issue appointment letter and schedule member for orientation</td>
<td></td>
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<tr>
<td>Maintain alternate work site readiness</td>
<td>▪ Check all systems</td>
<td>Semi-annually</td>
</tr>
<tr>
<td></td>
<td>▪ Verify access codes and systems</td>
<td></td>
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<tr>
<td></td>
<td>▪ Cycle supplies and equipment as needed</td>
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<tr>
<td>Review and update supporting Memoranda of Understanding/Agreements</td>
<td>▪ Review for currency and new needs</td>
<td>Annually</td>
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<tr>
<td></td>
<td>▪ Incorporate changes, if required</td>
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<tr>
<td></td>
<td>▪ Obtain signature renewing agreement or confirming validity</td>
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<tr>
<td>Train new members</td>
<td>▪ Provide an orientation and training class</td>
<td>Within 60 days of appointment</td>
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<tr>
<td></td>
<td>▪ Schedule participation in all training and exercise events</td>
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<tr>
<td>Orient new policy officials and senior management</td>
<td>▪ Brief officials on COOP</td>
<td>Within 60 days of appointment</td>
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<tr>
<td></td>
<td>▪ Brief each official on his/her responsibilities under the COOP</td>
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<tr>
<td>Plan and conduct exercises</td>
<td>▪ Conduct internal tests or exercises</td>
<td>Semi-annually</td>
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<tr>
<td></td>
<td>▪ Support and participate in joint exercises with local, regional,</td>
<td>As needed</td>
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<tr>
<td></td>
<td>▪ Support and participate in interagency exercises</td>
<td>Annually or as needed</td>
</tr>
<tr>
<td>Maintain security clearances</td>
<td>▪ Obtain, maintain and update appropriate security clearances</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
ACRONYMS AND DEFINITIONS

This glossary was created to provide stakeholders, users, and associates with differing backgrounds, clarification and definitions for significant terms and all acronyms used throughout the COOP Planning process, while maintaining a level of standards.

<table>
<thead>
<tr>
<th>ACRONYM</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>24/7</td>
<td>24 hours a day, 7 days a week</td>
</tr>
<tr>
<td>A/V</td>
<td>Audio/Visual</td>
</tr>
<tr>
<td>ADM</td>
<td>Administration</td>
</tr>
<tr>
<td>ARC</td>
<td>American Red Cross</td>
</tr>
<tr>
<td>ARES</td>
<td>Amateur Radio Emergency Services</td>
</tr>
<tr>
<td>BIA</td>
<td>Business Impact Analysis</td>
</tr>
<tr>
<td>CD</td>
<td>Compact Disc</td>
</tr>
<tr>
<td>CERT</td>
<td>Community Emergency Response Team</td>
</tr>
<tr>
<td>CMT</td>
<td>Crisis Management Team</td>
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<tr>
<td>COG</td>
<td>Continuity of Government</td>
</tr>
<tr>
<td>COOP</td>
<td>Continuity of Operations</td>
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<tr>
<td>COV</td>
<td>Commonwealth of Virginia</td>
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<tr>
<td>DHS</td>
<td>Department of Homeland Security</td>
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<tr>
<td>DRP</td>
<td>Disaster Recovery Plan</td>
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<tr>
<td>DRT</td>
<td>Disaster Recovery Team</td>
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<tr>
<td>EBS</td>
<td>Emergency Broadcast System</td>
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<tr>
<td>EM</td>
<td>Emergency Management</td>
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<tr>
<td>EMAP</td>
<td>Emergency Management Accreditation Program</td>
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<td>EMT</td>
<td>Emergency Medical Technician</td>
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<td>EOC</td>
<td>Emergency Operations Center</td>
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<td>EOP</td>
<td>Emergency Operations Plan</td>
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<td>ERC</td>
<td>Emergency Relief Center</td>
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<tr>
<td>ERT</td>
<td>Emergency Response Team</td>
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<tr>
<td>FAQ</td>
<td>Frequently Asked Questions</td>
</tr>
<tr>
<td>FEMA</td>
<td>Federal Emergency Management Agency</td>
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<tr>
<td>HAZMAT</td>
<td>Hazardous Materials</td>
</tr>
<tr>
<td>IC</td>
<td>Incident Commander</td>
</tr>
<tr>
<td>ICS</td>
<td>Incident Command System</td>
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<tr>
<td>NAWAS</td>
<td>National Warning System</td>
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<tr>
<td>NG</td>
<td>Northrup Grumman (contractor to VITA)</td>
</tr>
<tr>
<td>NIMS</td>
<td>National Incident Management System</td>
</tr>
<tr>
<td>NOAA</td>
<td>National Oceanic and Atmospheric Administration</td>
</tr>
<tr>
<td>NRP</td>
<td>National Response Plan</td>
</tr>
<tr>
<td>NWS</td>
<td>National Weather Service</td>
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<tr>
<td>RFI</td>
<td>Request for Information</td>
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<tr>
<td>RFP</td>
<td>Request for Proposal</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedure</td>
</tr>
<tr>
<td>VERT</td>
<td>Virginia Emergency Response Team</td>
</tr>
<tr>
<td>VITA</td>
<td>Virginia Information Technologies Agency</td>
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<tr>
<td>WMD</td>
<td>Weapon of Mass Destruction</td>
</tr>
</tbody>
</table>
ACRONYMS AND DEFINITIONS

ABC Fire Extinguisher: Chemically based devices used to eliminate ordinary combustible, flammable liquid and electrical fires.

Activity: A function performed by an organizational unit.

Activation: When all or a portion of the recovery plan has been put into motion.

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

Alert: Advanced notification that an emergency or disaster situation may occur.

Alternate Database/Records Access: The safekeeping of vital resources, facilities and records and the ability to access such resources in the event the COOP plan is activated.

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

Applicability: Capable of or suitable for being applied.

Assessment: The evaluation and interpretation of measurements and other information to provide a basis for decision-making.

Assumptions: A basic understanding about unknown disaster situations that the disaster recovery plan is based upon.

Authority: A citation used in defense or support of the source from which the citation is drawn. A conclusive statement or set of statements.

Back Office Location: An office or building, used by the organization to conduct support activities that is not located within an organization's headquarters or main location.

Backup: The practice of copying information, regardless of the media to provide a duplicate copy.

Backup Position: A list of alternative personnel who can fill a recovery team position when the primary person is not available.

Backup Strategies (Recovery Strategies): Alternative operating method (i.e., platform, location, etc.) for facilities and system operations in the event of a disaster.

Baseline: A reviewed and approved release of artifacts that constitutes and agreed-on basis for further evolution or development and that can be changed only through a formal procedure, such as configuration and change management.

Biological Weapons: Weapons using organic (plant or animal) material designed to injure or kill by use of illness producing bacteria, virus, rickettsia or toxin.

Business Continuity: The ability of an organization to ensure continuity of service and support for its customers and to maintain its viability before, after and during an event.

Business Impact Analysis (BIA): The process of analyzing all business functions and the effect that a specific disaster may have upon them. In addition, a BIA identifies the resources required to support these functions.

Business Interruption: Any event, whether anticipated (i.e., public service strike) or unanticipated (i.e., blackout) which disrupts the normal course of business operations.

Business Interruption Cost: The costs or lost revenue associated with an interruption in normal business operations.

Business Process: A business process defines a set of business actions, where each action is a sequence of actions that a business performs that yields an observable result of value to a particular
business resource. A business process can include manual and automated processes as well as physical entities such as physical forms and software.

**Building Alert System:** A system that alerts employees there is an emergency that requires them to leave the building. Examples of alert systems include fire alarms and building PA systems.

**Certified Business Continuity Planner (CBCP):** CBCP’s are certified by the Disaster Recovery Institute, a not-for-profit corporation, which promotes the credibility and professionalism in the Disaster Recovery industry.

**Chain of Communication:** A list of names of agency personnel in the order that they will be notified in the event of an emergency; persons on the list may be responsible for communicating information to their subordinates in the agency and to those lower on the list.

**Chained Processes:** Chained processes are Business Processes that rely on other Business Process in order for them to properly function.

**Checklist Test:** A method used to test a completed disaster recovery plan. This test is used to determine if the information such as phone numbers, manuals, equipment, etc. in the plan is accurate and current.

**Citizen Emergency Response Team (CERT):** The program helps train people to be better prepared to respond to emergency situations in their communities. When emergencies occur, CERT members can give critical support to first responders, provide immediate assistance to victims, and organize spontaneous volunteers at a disaster site. CERT members can also help with non-emergency projects that help improve the safety of the community.

**Class/Level of Emergency:** A decision matrix or flowchart that ties the organization’s reaction to the type or intensity of an emergency.

**Cold Site:** An alternate site that is reserved for emergency use, but which requires the installation of equipment before it can support operations. Equipment and resources must be installed in such a facility to duplicate the essential business functions of an organization. Cold-sites have many variations depending on their communication facilities, UPS systems, or mobility.

**Command and/or Control Center:** A centrally located facility having adequate phone lines to begin recovery operations. Typically it is a temporary facility used by management to begin coordinating the recovery process and used until the alternate sites are functional.

**Communications Failure:** An unplanned interruption in electronic communication between a terminal and a computer processor, or between processors, as a result of a failure of any of the hardware, software, or telecommunications components comprising the link.

**Communications Recovery:** The component of Disaster Recovery which deals with the restoration or rerouting of an organization’s telecommunication network, or its components, in the event of loss.

**Communications Systems:** Those telecommunications systems generally supporting the business of the entire organization and are not specific to a particular function. Nevertheless, some functions have communication methods that are peculiar to that function. Intra-organization communication systems link various divisions and functions within an organization. There may also be inter-organization systems — integrated systems tying the communication systems of two or more organizations together.

**Concept of Operations:** Explains how the organization will implement its COOP Plan, and specifically, how it plans to address each critical COOP element.

**Continuity of Government (COG):** The effort to ensure continued leadership, authorities, direction and control and preservation of records, thereby maintaining a viable system of government.

**Continuity of Operations (COOP):** An internal effort within individual components of the government to assure that capability exists to continue essential functions across a wide range of potential emergencies through a planning document.
ACRONYMS AND DEFINITIONS

**Continuity of Operations Plan:** A set of documented procedures to resume or restore critical business processes following a disruption. This plan must be coordinated with the IT Disaster Recovery Plan to ensure the recovery time objective (RTO) is addressed and is consistent in each document and that recovery strategies and supporting resources neither negate each other nor duplicate efforts. The program or business owners typically develop this plan, as they are most familiar with their business processes.

**COOP Coordinator/Point of Contact (POC):** serves as the agency’s manager for all COOP activities. The Coordinator has overall responsibility for developing, coordinating and managing all activities required for the agency to perform its essential functions during an emergency or other situation that would disrupt normal operations. The first step in the COOP planning process is selecting a COOP coordinator, also known as the Point-of-Contact (POC). The POC remains in constant communication with both the Virginia Department of Emergency Management (VDEM) and a representative from the Office of Commonwealth Preparedness (OCP).

**COOP Plan Maintenance:** Steps taken to ensure the COOP plan is reviewed and updated at some predetermined time period and whenever major changes occur.

**COOP Planning Team:** A team responsible for COOP planning for an agency. This team requires a good mix of organization professionals and includes members from all levels of management and staff. It also consists of members from various divisions of the organization, including those not directly related to the mission, such as human resources. Team members should act as COOP coordinators for their respective functions, elements or divisions.

**Cooperative Hot Sites:** A hot site owned by a group of organizations available to a group member should a disaster strike.

**Coordinate:** To advance systematically an exchange of information among principals who have or may have a need to know certain information in order to carry out their role in a response.

**Core:** The heart, or central part, of something.

**Counterterrorism:** The full range of activities directed against terrorism, including preventive, deterrent, and response and crisis management efforts.

**Crisis:** A critical event, which, if not handled in an appropriate manner, may dramatically impact an organization's profitability, reputation, or ability to operate.

**Crisis Management:** The overall coordination of an organization's response to a crisis, in an effective, timely manner, with the goal of avoiding or minimizing damage to the organization's profitability, reputation, or ability to operate.

**Crisis Management Team:** Composed of senior management, this team controls and directs the COOP recovery process.

**Damage Assessment:** The process of assessing damage, following a disaster, to computer hardware, vital records, office facilities, etc. and determining what can be salvaged or restored and what must be replaced.

**Declaration Fee:** A one-time fee, charged by an Alternate Facility provider, to a customer who declares a disaster. Some recovery vendors apply the declaration fee against the first few days of recovery.

**Dedicated Line:** A reestablished point-to-point communication link between computer terminals and a computer processor, or between distributed processors that does not require dial-up access.

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

**Deliverable:** An output from a process that has a value, material or otherwise, to a customer.

**Designated Assembly Area:** a predetermined area for employees to report in the event the building needs to be evacuated as a result of an emergency or disaster.
ACRONYMS AND DEFINITIONS

**Devolution:** Transfer of rights, powers, property, or responsibility to another.

**Dial Backup:** The use of dial-up communication lines as a backup to dedicated lines.

**Dial-Up Line:** A communication link between computer terminals and a computer processor, which is established on demand by dialing a specific telephone number.

**Disaster:** Any event that creates an inability on an organization’s part to provide essential business functions for some predetermined period of time.

**Disaster Recovery:** The methodical restoration and reconstitution of facilities, data, records, systems and equipment after a disruption to operations that has caused damage and/or destruction of these resources. The process used once a disaster has occurred to quickly regain business continuity.

**Disaster Recovery Plan:** The advance planning and preparations, which are necessary to minimize loss and ensure continuity of the essential business functions of an organization in the event of disaster. The document defines the resources, actions, tasks and data required to manage the business recovery process in the event of a business interruption.

**Disaster Recovery Team:** A structured group of teams ready to take control of the recovery operations if a disaster should occur.

**Downloading:** Connecting to another computer and copying a program or file from that system.

**Electronic Vaulting:** Transfer of data to an offsite storage facility via a communication link rather than via portable media. Typically used for batch/journal updates to critical files to supplement full backups taken periodically.

**Emergency:** A sudden, unexpected event requiring immediate action due to potential threat to health and safety, the environment, or property.

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

**Emergency Operations Center (EOC):** The site from which civil government officials (municipal, county, State and Federal) exercise direction and control in an emergency.

**Emergency Operations Plan (EOP):** A plan that provides facility-wide procedures for emergency situations that generally includes personnel safety and evacuation procedures.

**Emergency Preparedness:** The discipline, which ensures an organization, or community's readiness to respond to an emergency in a coordinated, timely, and effective manner.

**Emergency Procedures:** A plan of action to commence immediately to prevent the loss of life and minimize injury and property damage.

**Emergency Public Information:** Information, which is disseminated primarily in anticipation of an emergency or at the actual time of an emergency and in addition to providing information, frequently directs actions, instructs, and transmits direct orders.

**Emergency Response Team (ERT):** Employees who have been selected to ensure that building evacuation is carried out as planned, evacuated building occupants are directed to assigned assembly points where they will be accounted for, and persons needing assistance to evacuate are attended to.

**Employee Relief Center:** A predetermined location for employees and their families to obtain food, supplies, financial assistance, etc., in the event of a catastrophic disaster.

**Evacuation:** Organized, phased, and supervised dispersal of civilians from dangerous or potentially dangerous areas, and their reception and care in safe areas.

**Evacuation Route/Exit:** The means by which employees can depart the building during an emergency or disaster.

**Event:** The specification of a significant occurrence that has a location in time and space.

**Execution:** The act or mode or result of performance.
Executive Summary: Briefly outlines the organization and content of the COOP plan and describes what it is, whom it affects and the circumstances under which it should be executed.

Exercise: An event that allows participants to apply their skills and knowledge to improve operational readiness. Exercises allow planners to evaluate the effectiveness of previously conducted tests and training activities.

Extended Outage: A lengthy, unplanned interruption in system availability due to computer hardware or software problems, or communication failures.

Facilities: A location containing the equipment, supplies, voice and data communication lines, to conduct transactions required to conduct business under normal conditions.

Family Planning: Information an agency should provide to employees that they could share with their families about preparing for an emergency in advance.

File Backup: The practice of dumping (copying) a file stored on disk or tape to another disk or tape. This is done for protection in the event the active file gets damaged.

File Recovery: The restoration of computer files using backup copies.

File Server: The central repository of shared files and applications in a computer network (LAN).

First Responder: Local police, fire, and emergency medical personnel who first arrive on the scene of an incident and take action to save lives, protect property, and meet basic human needs.

Full Scale Exercise: Tests the agency’s total response capability for COOP situations. These exercises are as close to reality as possible, with personnel being deployed and systems and equipment being implemented.

Functional Exercise: Simulate a function within a real incident. Functional exercises test a part of COOP activation to be tested independently of other responders.

Generator: An independent source of power usually fueled by diesel or natural gas.

Glossary: A collection of specialized terms with their meanings. Contains a listing of all the terms and acronyms that are contained in the various project deliverables and in conjunction with continuity of operations/disaster readiness planning.

Go-Kits: Organizational - Packages of records, information, communication and computer equipment and other items related to emergency operations. They should contain items that are essential to supporting the team member’s operations at the alternate facility. Family – A container that contains the basic necessities for survival, such as food and water.

Halon: A gas used to extinguish fires effective only in closed areas.

Hands-On Training: Provides practice in specialized skills, allows for practice of newly acquired skills and helps maintain proficiency at infrequently used skills.

Hazard: A source of danger.

Hot Site: An alternate facility that has the equipment and resources to recover the business functions affected by the occurrence of a disaster. Hot-sites may vary in type of facilities offered (such as data processing, communication, or any other essential business functions needing duplication). Location and size of the hot-site will be proportional to the equipment and resources needed. A fully equipped facility, which includes stand-by computer equipment, environmental systems, communications capabilities and other equipment necessary to fully support an organization’s immediate work and data processing requirements in the event of an emergency or a disaster.

Human Capital Management: The process of acquiring, optimizing and retaining the best talent by implementing processes and systems matched to the organization’s underlying mission.
ACRONYMS AND DEFINITIONS

**Human Threats:** Possible disruptions in operations resulting from human actions (i.e., disgruntled employee, terrorism, etc.).

**Implementation:** To give practical effect to and ensure of actual fulfillment by concrete measures.

**Internal Call List:** Standard format for an emergency-call tree for employees.

**Internal Hot Sites:** A fully equipped alternate processing site owned and operated by the organization.

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

**Interoperable Communication:** Communication that provides the capability to perform essential functions, in conjunction with other agencies and organizations, until normal operations can resume.

**Interruption:** An outage caused by the failure of one or more communications links with entities outside of the local facility.

**Introduction:** Explains the importance of COOP planning to the organization. It may also discuss the background for planning, referencing recent events that have led to the increased emphasis on the importance of a COOP capability for the organization.

**IT Recovery Plan:** A plan developed in support of the COOP Plan. This plan provides the steps required to recover the IT infrastructure that supports essential functions and applications.

**IT Recovery Process:** Defines a specific set of actions that a business must take to recover IT functions that support business processes.

**Key Personnel:** Those positions required to be filled by the local government or deemed essential by the State or individuals whose absence would jeopardize the continuation of an organization’s essential functions.

**Legal and Financial Records:** Records essential to the protection of the legal and financial rights of an agency and of the individuals directly affected by the agency’s activities.

**Liaison:** An agency official sent to another agency to facilitate interagency communications and coordination.

**Line Rerouting:** A service offered by many regional telephone companies allowing the computer center to quickly reroute the network of dedicated lines to a backup site.

**Line Voltage Regulators:** Also known as surge protectors. These protectors/regulators distribute electricity evenly.

**Local Area Network (LAN):** A short distance data communications network used to link computers and peripheral devices (such as printers) under some form of standard control. A LAN can be extended with point-to-point wireless access points, thereby extending the coverage area inside large buildings or to nearby buildings within the campus.

**Loss:** The unrecoverable business resources that are redirected or removed as a result of a disaster. Such losses may be loss of life, revenue, market share, competitive stature, public image, facilities, or operational capability.

**Magnetic Ink Character Reader (Micr) Equipment:** Equipment used to imprint machine-readable code. Generally, financial institutions use this equipment to prepare paper data for processing, encoding (imprinting) items such as routing and transit numbers, account numbers and dollar amounts.

**Mainframe Computer:** A high-end computer processor, with related peripheral devices, capable of supporting large volumes of batch processing, high performance on-line transaction processing systems, and extensive data storage and retrieval.

**Media Relations:** Cultivating and maintaining two-way communications with the public through various media outlets.

**Memorandum of Agreement/Understanding (MOA/MOU):** A contract to provide a service, which includes the method of performance, the fees, the duration, the services provided and the extent of security and confidentiality maintained. An agreement made by a group of organizations to
share processing facilities and/or office facilities, if one member of the group suffers a disaster.

**Method:** A regular and systematic way of accomplishing something; the detailed, logically ordered plans or procedures followed to accomplish a task or attain a goal. The implementation of an operation, the algorithm or procedure that affects the results of an operation.

**Milestone:** The point at which iteration formally ends; corresponds to a release point.

**Mission Critical Function:** An essential function with a RTO of zero.

**Mitigation:** Long-term, proactive projects and strategies to help reduce the loss of life and property resulting from natural hazards. Measures employed to prevent, detect or contain incidents, which if unchecked, could result in disaster. The technique of instituting mechanisms to lessen the exposure to a particular risk.

**Mobile Hot Site:** Large trailer containing backup equipment and peripheral devices delivered to the scene of the disaster. It is then hooked up to existing communication lines.

**Multiyear Strategy and Program Management Plan:** This plan is critical to developing and managing a viable agency COOP capability. It will assist COOP planners in defining short and long-term COOP goals and objectives. The plan should develop requirements, identify tasks and milestones, and outline a plan of action to accomplish the tasks within an established schedule. Additionally, it will provide a common basis and informational format for developing and defending COOP budget submissions.

**Mutual Aid Agreement:** As between two or more entities, public and/or private, the pre-arranged rendering of services in terms of human and material resources when essential resources of one party are not adequate to meet the needs of a disaster or other emergency. Financial aspects for post-disaster or post-emergency reimbursements may be incorporated into the agreement.

**Natural Threats:** Events caused by nature causing disruptions to an organization.

**Network Outage:** An interruption in system availability as a result of a communication failure affecting a network of computer terminals, processors, or workstations.

**Node:** The name used to designate a part of a network. This may be used to describe one of the links in the network, or a type of link in the network (for example, Host Node or Intercept Node).

**Non-Vital Records:** Records or documents, which, if irretrievably lost or damaged, will not materially, impair the organization's ability to conduct business.

**Off-Line Processing:** A backup mode of operation in which processing can continue manually or in batch mode if the on-line systems are unavailable.

**Off-Site Processing:** A backup mode of operation in which processing can continue throughout a network despite loss of communication with the mainframe computer.

**Off-Site Storage Facility:** A secure location, remote from the primary location, at which backup hardware, software, data files, documents, equipment, or supplies are stored.

**On-Line Systems:** An interactive computer system supporting users over a network of computer terminals.

**Operating Software:** A type of system software supervising and directing all of the other software components plus the computer hardware.

**Orders of Succession:** A formula that specifies by position who will automatically fill a position once it is vacated.

**Orientation Training:** Usually the first type of training conducted, it is typically presented as a briefing.

**Organization Chart:** A diagram representative of the hierarchy of an organization's personnel.
ACRONYMS AND DEFINITIONS

Organization-Wide: A policy or function applicable to the entire organization and not just one single department.

Outsourcing: The transfer of data processing functions to an independent third party.

Parallel Test: A test of recovery procedures in which the objective is to parallel an actual business cycle.

Peripheral Equipment: Devices connected to a computer processor, which perform such auxiliary functions as communications, data storage, printing, etc.

Personnel Accountability: Ensures that all personnel are safe, essential employees have arrived at the site and replacement personnel and augmentees can be identified quickly, when necessary.

Plan: A systematic arrangement of elements or important parts.

Platform: Hardware or software architecture of a particular model or family of computers (i.e., IBM, Tandem, HP, etc.)

Preventive Controls: Measures in place to prevent loss of function of systems and of data critical to an agency’s essential functions.

Primary Essential Functions: Those functions that enable State agencies to provide vital services, exercise civil authority, maintain the safety and well being of the citizens, sustain the industrial/economic base in an emergency. Business activities or information, which could not be interrupted or unavailable for several business days without significantly jeopardizing operation of the organization.

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

Project Initiation: The first phase of the COOP Planning Process. This phase serves as the foundation for the entire project and should focus on creating a single point from which to start.

Public Communication: Communication with various sectors of the public to influence their attitudes and opinions in the interest of promoting a person, product, or idea.

Public Information Officer (PIO): Official at headquarters or in the field responsible for preparing and coordinating the dissemination of public information in cooperation with other responding Federal, State, and local agencies.

Purpose: The project purpose outlines the goals for the COOP Planning Process as detailed during the Project Initiation Phase.

Rapid Recall List: Cascading list of key agency personnel and outside emergency personnel in order of notification.

Record Retention: Storage of historical documentation for a set period of time, usually mandated by state and federal law or the Internal Revenue Service.

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

Reconstitution Manager: The individual who will coordinate and oversee the reconstitution process and who will develop the reconstitution plan.

Reconstitution Plan: Plan outlining the process by which agency personnel resume normal agency operations from the original or a replacement primary facility.

Recovery: Recovery, in this document, includes all types of emergency actions dedicated to the continued protection of the public or to promoting the resumption of normal activities in the affected area.

Recovery Action Plan: The comprehensive set of documented tasks to be carried out during recovery operations.

Recovery and Restoration Resources: Contractors with the ability to restore damaged records, systems and/or equipment.

Recovery Time Objective (RTO): The period of time in which systems, applications or functions must be recovered after an outage.
ACRONYMS AND DEFINITIONS

References: A sign or indication that refers a reader or consultant to another source of information.

Relocation: Establish in a new place.

Repository: A storage place for object models, interfaces, documents, files, and implementations.

Response: Those activities and programs designed to address the immediate and short-term effects of the onset of an emergency or disaster.

Risk: An ongoing or impending concern that has a significant probability of adversely affecting business continuity.

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

Salvage and Restoration: The process of reclaiming or refurbishing computer hardware, vital records, office facilities, etc. following a disaster.

Satellite Communication: Data communications via satellite. For geographically dispersed organizations, may be viable alternative to ground-based communications in the event of a disaster.

Scope: Predefined areas of operation for which a disaster recovery plan is developed.

Scribe: An individual who is responsible for documenting information discuss during COOP Planning Team Meetings.

Senior Management: A team of individuals at the highest level of organizational management who have the day-to-day responsibilities of managing an agency.

Server: An information resource or a set of processes on an information resource providing services to clients across a network.

Shelter-In Place: This is a precaution aimed to keep you safe while remaining indoors. Shelter-in-place means selecting a small, interior room, with no or few windows, and taking refuge there.

Simulation Test: A test of recovery procedures under conditions approximating a specific disaster scenario. This may involve designated units of the organization actually ceasing normal operations while exercising their procedures.

Stakeholder: Any person or representative of an organization who has a stake – a vested interest – in the outcome of a project or whose opinion must be accommodated. A stakeholder can be an end user, a purchaser, a contractor, a developer, or a Project Manager.


Structured Walk-Through Test: Team members walk through the plan to identify and correct weaknesses.

Supportive Essential Function: Any secondary functions on which a primary essential function depends. These functions can operate both within and outside the agency.

Supportive Function: Business activities or information, which could be interrupted or unavailable indefinitely without significantly jeopardizing critical functions of an organization.

System Outage: An unplanned interruption in system availability as a result of computer hardware or software problems, or operational problems.

Tabletop Exercise: A simulation activity in which a scenario is presented and participants in the exercise respond as if the scenario was really happening.

Technical Threats: A disaster-causing event that may occur regardless of any human elements.

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

Test: An evaluation of a capability against an established and measurable standard. Tests are conducted to evaluate capabilities, not personnel.
ACRONYMS AND DEFINITIONS

Tier: a rank of articles; especially, one of two or more ranks arranged one above another.

Training: Instruction in core competencies and skills and is the principal means by which individuals achieve a level of proficiency.

Uninterruptible Power Supply: A backup power supply with enough power to allow a safe and orderly shutdown of the central processing unit should there be a disruption or shutdown of electricity.

Uploading: Connecting to another computer and sending a copy of program or file to that computer.

Usability: The practice of taking the physical and psychological requirements of human beings into account when designing programs and writing documents.

User Contingency Procedures: Manual procedures to be implemented during a computer system outage.

Virginia Emergency Response Team (VERT): Representatives from state and federal agencies and volunteer organizations augment the Virginia Emergency Response Team (VERT) during disasters to ensure that needed resources are provided to disaster stricken areas.

Vital Records, Systems and Equipment: A document, regardless of media, system or piece of equipment, which, if damaged or destroyed, would disrupt business operations and information flows and result in considerable inconvenience and expense in order to recreate the record.

Voice Recovery: The restoration of an organization's voice communications system.

Warm Site: An alternate processing site which is only partially equipped.

Weapon of Mass Destruction (WMD): A WMD is any device, material, or substance used in a manner, in a quantity or type, or under circumstances evidencing intent to cause death or serious injury to persons or significant damage to property.

Wide Area Network (WAN): A data telecommunications network typically extending a LAN outside a building, over common carrier lines, to link to other LANs that are geographically dispersed. In some situations, point-to-point wireless access points can be used to replace the common carrier lines.

Workaround: A temporary solution when dealing with a bug or other unresolved problem that enables users to “work around” it until it’s fixed.

Workflow: The sequence of activities performed in a business that produces a result of observable value to an individual actor of the business.
ACRONYMS AND DEFINITIONS

1.1 DEFINITIONS OF DEPARTMENT SPECIFIC TERMS

A

Administration Team (ADMT) – The Administration Team provides the first critical business support functions at the temporary facility following the declaration of a disaster.

Administrative Proceedings Division (APD) - The Administrative Proceedings Division (APD) of DHP provides support to the Boards in the processing and adjudication of disciplinary cases.

Agency - The Department of Health Professions (DHP)

Agency Operations - The critical functions, activities and resources of DHP

Agency Warden – As designated by Agency Director. This individual has absolute authority over all personnel in the agency during the evacuation of the building.

Alternate Site – The location, other than the main facility, that can be used to conduct operational functions

Auditing – The thorough examination and yearly evaluation of plans and procedures to verify their correctness and currency

B

Backup Team Leader – This individual serves as backup to the Team Leader in the event the Team Leader is absent or unavailable.

Boards- The 14 health regulatory boards under the auspices of DHP.

Board Members – Individuals appointed by the Governor to the health regulatory boards.

Building Evacuation Team – This team is comprised of individuals who are responsible for the orderly evacuation of the building by employees of and visitors to the Department of Health Professions during emergency situations. Each member is assigned specific duties and responsibilities as related to Emergency Evacuation and Threat Procedures.

Business Recovery Command Center (BRCC) – The Business Business Recovery Command Center is the temporary location that allows the ADMT team to set up and provide the agency’s core programs and business functions operational until the Essential Functions team can get fully operational.
**ACRONYMS AND DEFINITIONS**

**Business Recovery Coordinator** – This person is designated by and reports to the Crisis Management Team leader and operates from the emergency operations center.

**C**

**CAPP** – Commonwealth Accounting Policies and Procedures. The CAPP manual is the official accounting policies and procedures for all state agencies and is issued by the Department of Accounts.

**CARS** – Commonwealth Accounting and Reporting System. CARS is the official, statewide computerized accounting system for the Commonwealth and is managed by the Department of Accounts.

**Circuit Inventory** – This inventory is a complete list of the agency’s components and circuits that make up the agency’s voice and data network.

**CIPPS** – Commonwealth Integrated Personnel and Payroll System. CIPPS is the official statewide computer system for processing payrolls and is managed by the Department of Accounts.

**Continuation** - The process of continuing the major operations of DHP during the recovery phase in an emergency situation.

**Continuity Planning** – The process of developing advance arrangements and procedures that enable DHP to respond to an emergency event in such a manner that critical functions continue with minimal interruption.

**Controls** - Measures designed to reduce or deter threats.

**Control Center** - The designated central location of decision making in the event of a disaster or emergency.

**COOP Teams** - Teams mobilized and utilized as designated by the Agency Director, during a disaster or emergency. These include the Immediate Response, Crisis Management, Administration, Information Systems, and Damage Assessment and Reconstruction Teams.

**Cost Center Manager** - The designated manager of the Cost Center (generally an operational unit) of the Department of Health Professions

**Crisis Management Team (CMT)** – The Crisis Management Team is activated by the ADMT. The primary responsibilities of this team are to phone the additional teams and their members into activation and to set up the EOC.

**Critical Agency Functions** - The major business operations of DHP, including licensure, discipline, and investigations. These critical functions must be restored to ensure that DHP’s
ACRONYMS AND DEFINITIONS

protects its assets, satisfy regulations and statutes and meet the needs of licensees and other customers. (These are also known as Essential Functions.)

**D**

**Damage Assessment and Reconstruction Team (DART)** – The Damage Assessment and Reconstruction Team is responsible for providing the initial or preliminary damage assessment report to the CMT. These individuals are knowledgeable about DHP from a facilities and hardware standpoint.

**Data Communications** – The movement of data between geographically separate locations via public and/or private electrical or optical transmission systems.

**Declaration of Emergency** - When the Governor declares that the safety and welfare of the people of the state require the exercise of extreme emergency measures due to a threatened or actual disaster.

**Director of DHP** - The person appointed by the Governor to be the agency head of DHP. The Director has the authority to direct the activities of the agency during an emergency or disaster unless otherwise directed by the Governor

**Disaster** - A sudden, unplanned event causing great damage or loss. In the operational environment, any event that creates an inability on part of the agency to provide the critical functions for some predetermined period of time.

**Disaster Mitigation** - Actions and activities designed to reduce the degree of risk or harm to life and property in the event of an emergency or disaster.

**Department of Health Professions (DHP)** - A Virginia state agency that is responsible for the licensure, regulation, and discipline of designated health care professionals.

**E**

**Emergency Management Team (EMT)** – The Emergency Management Team is responsible for the day-to-day direction and coordination of the recovery effort. They maintain an up-to-date status of recovery efforts and recommend appropriate recovery actions, as needed.

**Emergency Operations Center (EOC)** – The Emergency Operations Center is the temporary location that allows designated senior members of the agency to assemble shortly after an apparent disaster or related event to organize the timely resumption of business operations.

**Emergency Response Plan (ERP)** - A plan that ensures the safety and security of DHP employees, customers and visitors in the event of a natural or man-made disaster or emergency,
including terrorist attacks. This plan also will assist DHP in resuming its business operations as quickly as possible.

**EMS** - Emergency Medical Services of the State of Virginia

**Essential Functions Team (EFT)** – The Essential Functions Team is comprised of individuals knowledgeable in a particular aspect of the agency’s mission and programs. This team shares common skills and works together to fulfill a critical mission to the agency’s clients.

**Essential Personnel** - Personnel that are designated by the agency Director as essential during certain emergencies.

\[ F \]

**Federal Emergency Management Agency (FEMA)** - The federal agency whose responsibilities include the formulation of national policy on emergency preparedness.

**Floor Warden** – This individual has absolute authority over all personnel on the assigned floor during an emergency evacuation of the building. The Floor Warden will oversee the orderly evacuation of ALL offices on the assigned floor.

\[ G \]

**Hearings** – Formal proceedings before a regulatory board, the purpose of which is to take evidence regarding a potential violation of law or regulation upon relevant factual issues through an adversarial, trial-like process.

\[ I \]

**Immediate Response Team (IRT)** – This team conducts the initial assessment of the emergency event and starts the recovery process in motion.

**Impact Analysis** – The process of determining the impact on DHP should a potential loss identified by the risk analysis actually occur.

**Inclement Weather Policies** – Policies promulgated by DHP, in concert with the Department of Human Resources Management, which provide guidance and direction to employees in the event of a weather event which adversely affects the programs or operations of the agency.

**Informal Fact Finding Conference** – Upon determining that a practitioner should be subject to disciplinary proceedings, the board may appoint a special conference committee, composed of not less than two members of the health regulatory board.
ACRONYMS AND DEFINITIONS

**Infrastructure** - The basic installations and facilities on which the continuance and growth of a community depend, such as power plants, transportation systems, and communication systems.

**Institutional Support Team (IST)** – The Institutional Support Team provides support services to the EST and all other recovery teams. The team’s primary focus is on purchasing, payroll, human resources and security. This team shares common skills and works together to provide the normal administrative and fiscal functions required of the agency.

**IT** - Information technology, including hardware, software, and the associated communication networks.

**Licensee** - Any person or entity that holds a valid Virginia license, registration, or certification issued by DHP. In its generic sense, this term encompass all persons who hold a license, certification, or registration issued by the agency.

**Local Emergency** - The condition declared by the local governing body when, in its judgment, the threat or actual occurrence of a disaster is or threatens to be of sufficient severity and magnitude to warrant coordinated local government action to prevent or alleviate the damage or loss, hardship or suffering.

**Migration Plan** – This plan provides specific details of the move back to the repaired/rebuilt facility after the construction is complete.

**My License Office (MLO)** – A Web-based version of the agency’s mission critical, proprietary computer software program used for the issuance and renewal of licenses, tracking inspections and disciplinary cases, and tracking compliance with board orders.
O

Planning Project Teams - Groups of people representing key organizational areas that work together and follow documented responsibilities for the design, development, and implementation of a continuity plan.

PMIS – Personnel Management Information System. PMIS is the official statewide computerized personnel tracking system and is managed by the Department of Human Resources Management.

Preparedness – The activities, programs, and systems developed prior to an emergency or disaster that are used to support and enhance mitigation, response, and recovery to disasters.

Q

Reciprocal Agreement – An agreement between DHP and any other organization that allows one organization to process data for the other in case of disaster.

R

Recovery Coordinators – Three positions that exist within the emergency operations center to provide focal points for recovering business units. These three positions are the business recovery team operations coordinator, business recovery team staff coordinator, and business recovery team support coordinator.

Recovery Plan - An approved set of arrangements and procedures that enable an organization to respond to a disaster and resume its critical functions within a defined time frame.

Regional Managers - The supervisory staff of DHP's Field Regions within the Enforcement division.

Regions - The investigatory and inspection Field Regions of DHP's Enforcement division. These regions are Northern Virginia, Southwest Virginia, Tidewater, and Central Virginia.

Relocatable Shell - Computer-ready cold site that can be transported to a disaster site so that needed equipment can be obtained and installed near the original location.

Relocation – The physical move back to the rebuilt, restored, or replacement place of business.
ACRONYMS AND DEFINITIONS

**Restore/Return** - When DHP returns to its present location or relocates to a permanent location after a disaster or emergency.

**Resumption** - The process of resuming full or limited business operations after a disaster or emergency.

**Resumption Planning** - The process of developing advance arrangements and procedures that would enable DHP to respond to an event that lasts for an unacceptable period of time and return to performing its critical functions after an interruption.

**Risk Analysis** – The process of identifying the risks to DHP and assessing the critical functions, exposure, and evaluating the cost for controls. Risk analysis often involves an evaluation of the probabilities of a particular event.

**S**

**Sources** - Persons or entities who provide information or complaints about a licensee of DHP.

**Stairwell Monitor** – This individual is stationed at the entrance of the stairwell during an emergency evacuation of the building to ensure that all personnel evacuate in an orderly manner. This individual will also assist those with special needs and will ensure that the stairwell doors are kept closed except when being used to evacuate the floor.

**State Equipment** - Equipment or products that are state property.

**State of Emergency** - The condition declared by the Governor, when, in his judgment, the threat or actual occurrence of a disaster in any part of the state is of sufficient severity and magnitude to warrant disaster assistance by the state. The emergency declaration allows state agencies to quickly respond to needs of citizens, reassign personnel and resources, and deploy vehicles and equipment to respond to the incident. A State of Emergency allows the government to act more quickly than it can during non-emergency times to supplement the effort and available resources of any locality or relief organization.

**Succession of Authority** - The designation of authority in the absence of the Agency Director.

**T**

**Team Leader** – This individual leads and coordinates the efforts of the assigned team. This individual is knowledgeable in the critical function areas specific to the assigned team.

**Telecommunications** - Communicating at a distance. With respect to data communications, telecommunications is a general term that applies to data transmitted by electrical, optical, or acoustical means between separate processing facilities. All of the Field Investigatory
staff and many internal staff, licensees and customers use telecommunication daily with DHP to send or obtain critical information.

**Threat** – An event that would cause a risk to become a loss. Threats consist of natural phenomena such as tornadoes and earthquakes and man-made incidents such as bomb threats, disgruntled employees, and power failures.

**U**

**V**

**Virginia Information Technologies Agency (VITA)** – The Virginia Information Technologies Agency is the Commonwealth’s consolidated, centralized information technology organization. VITA’s responsibilities fall into three primary categories: operation of the IT infrastructure; governance of IT investments; and procurement of technology for VITA.

**Voice and Data Team (VADT)** – The Voice and Data Team is responsible for developing and documenting the voice and data communication configurations necessary for business recovery and is to ensure that all components necessary for recovery are available.

**W**

**Warning** - The alerting of public officials, emergency support services and the general public to a threatened emergency or disaster.

**X**

**Y**

**Z**

**Zone Warden** – The individual assigned to a particular area or zone of the agency for evacuation purposes. The Zone Warden will assist the Floor Warden in coordinating the safe evacuation of personnel in their assigned zone on a floor.
THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX A

KEY PERSONNEL CONTACT LIST
REDACTED
THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX B

COOP PERSONNEL CONTACT LIST
REDACTED
THE DEPARTMENT OF HEALTH PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX C

STAFF NOTIFICATION PROCEDURE
A phone tree is necessary to quickly communicate with and/or mobilize employees of the Virginia Department of Health Professions (DHP) in an emergency situation.

I. Each Cost Center Manager is responsible for developing a phone tree for his/her Cost Center.

II. Activation of the DHP’s department-wide phone tree will occur as follows:

   a) Department Director/designee will contact Cost Center Managers/designee.

   b) Cost Center Managers/designees will activate the phone tree for their respective Cost Centers.

For the phone tree to be effective in an emergency, the following is necessary:

- Cost Center Managers must maintain and have available current contact information for all employees in their respective areas (office phone, home phone, cell phone, pager - as appropriate).

  All staff members are required to provide emergency contact information to their respective Cost Center Manager and to the Human Resource Office.

- Supervisors within each Cost Center should maintain and have available current contact information for each employee in their respective programs.

- Contact information should be reviewed and verified regularly - once every six months is recommended.

- If an emergency is declared and employees are not able to be contacted per the phone tree protocol employees have been instructed to check the DHP main phone line outgoing message and website updates for information regarding office closing. They have also been instructed to monitor their work voice mail and work email periodically for instructions regarding reporting to work. Information may also be available via the media.

- Once an emergency is declared a message document will be posted and updated in the DHP Documentum Repository to provide staff with current information.
THE DEPARTMENT OF HEALTH PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX D

DHP ORGANIZATIONAL STRUCTURE
Director, Sandra W. Ryals

Department of Health Professions
2009 Organizational Structure
Agency 223

Revised 3/26/09
Dept. of Health Professions
2009 Organizational Structure

**Finance/Material Management**

Deputy for Admin
M. Monson #00176
(Gen Admin Mgr III)

- **P-14**
  - P. Spera #W0033
    (Gen Admin Mgr III)

  **Accounting Unit**
  - Accounting Director
    A. Watkins #00089
    (Financial Services Mgr II)

    **Accounts Payable Supervisor**
    V. Gee #00011
    (Financial Services Man I)

    **Senior Accountant**
    D. Pearson #00041
    (Financial Services Spec I)

    **Fiscal Specialist**
    J. Hayes W0108
    (Admin and Off Spec III)

  **Revenue Supervisor**
  E. Poore #00142
  (Financial Services Man I)

    **Fiscal Specialist**
    A. Resnick #00263
    (Admin and Off Spec III)

    **Fiscal Specialist**
    W. Gregory #00238
    (Admin and Off Spec III)

  **Material Management**
  - Agency Contracts Mgr.
    R. Watson #00109
    (Procurement Officer II)

  **Internal Auditor**
  A. Reed #00291
  (Auditor II)

  **Purchasing Officer**
  P. Grosbach #00088
  (Procurement Officer I)

  **Implementation Mgr**
  K. Siddall #00161
  (Policy & Plan Mgr I)

  **Admin Asst.**
  On-hold #00193
  (Admin and Off Spec III)

  **N. Mehta #W0080**
  (Admin & Off Spec III)

  **A. Stelly #W0096**
  (Admin & Off Spec III)

  **Receipting Supervisor**
  Vacant #00292
  (Financial Services Spec I)

Revised 3/26/09
Dept. of Health Professions
2009 Organizational Structure

Human Resources

Human Resource Director
D. Barnett #00027
(HR Mgr II)

Assistant HR Director
Barbara New #00093
(HR Analyst II)

HR Administrator
S. Williams #00087
(Admin and Off Spec III)

HR Administrator
T. Campbell #00287
(Admin and Off Spec III)

Revised 3/26/09
Deputy Director for Administration
M. Monson #00176
(Gen Admin Mgr III)

Technology Director
P. Paquette #00140
(Info Tech Mgr II)

Database Administrator
R. Nicula #00152
(Info Tech Spec III)

Web Systems Analyst
M. Gallini #00181
(Info Tech Spec III)

Systems Analyst
B. Culibrk #00268
(Info Tech Spec III)

Sr. Application Specialist
S. Cecchi #00165
(Info Tech Spec II)

P-14 Computer Ops Tech
Vacant #W0077
(Info Tech Spec II)

Systems Analyst
S. White #00281
(Info Tech Spec III)

Admin & Office Spec III
#00262
Vacant

Admin & Office Spec III
#00261
T. Long-Matthews

Compliance Safety Off II
#00192
A. Joyner

Computer Ops. Tech. I
#00260
T. Clark

Application Engineer Vacant #00298
(Info Tech Spec III)

Application Engineer Vacant #00299
(Info Tech Spec III)

Sr. Application Specialist
L. Duncan #00025
(Info Tech Spec II)

Dept. of Health Professions
2009 Organizational Structure

Information Systems Division - Data

Revised 3/26/09
Dept. of Health Professions
2009 Organizational Structure

Board of Pharmacy

Executive Director
S. Russell #00005
(Pharmacy Manager)

Deputy Director
C. Reiniers-Day #00146
(Prog Admin Spec II)

Admin & Off Spec III
B. Revere #00035
(Admin and Off Spec III)

S. Beasecker #00206
(Comp/Safety Off IV)

P-14 Admin & Off Spec III
Vacant #W0071
(Admin and Off Spec III)

Deputy Director
C. Juran #00229
(Pharmacist II)

Admin & Off Spec III
T. Mallory #00038
(Admin and Off Spec III)

Admin & Off Spec III
G. Williams #00028
(Admin and Off Spec III)

P-14 Admin & Off Spec III
V. Davis #W0091
(Admin & Off Spec III)

P-14 Admin & Off Spec III
S. Davenport #W0092
(Admin & Off Spec III)

Revised 3/26/09
Dept. of Health Professions
2009 Organizational Structure

Prescription Monitoring Program (PMP)

Chief Deputy Director
E. Wingfield #00177
(Chief Deputy)

PMP Program Manager
R. Orr #00164
(Prog Admin Mgr II)

P-14 Admin & Off Spec III
D. Carter #W0068
(Admin and Off Spec III)

Mgmt Analyst
C. McKann #00286
(Prog. Admin. Spec. II)

Admin & Off Spec III
J. Burgess #00234
(Admin and Off Spec III)
Dept. of Health Professions
2009 Organizational Structure

Board of Dentistry

Executive Director
S. Reen #00006
(Prog Admin Manager III)

Deputy Executive Director
A. Heaberlin #00227
(Prog Admin Spec II)

Admin & Office Spec III
K. Lackey #00119
(Admin and Off Spec III)

Admin & Office Spec III
H. Vu #00264
(Admin and Off Spec III)

Admin & Office Spec III
S. Small #00205
(Admin and Off Spec III)

Regulatory Boards
Admin & Off Spec III
T. Parrish #00163
(Admin and Off Spec III)

P-14 Case Manager - Dis
#W0082 Deborah Southall
(Comp Safety/Off IV)

P-14 Case Manager - Dis
#W0095 R. DeMatteo
(Comp Safety/Off IV)

P-14 Admin & Off Spec III
W0020 L. Vacant
(Admin and Off Spec III)
Dept. of Health Professions
2009 Organizational Structure

Board of Audiology, Speech Language Pathology, Physical Therapy, Long-Term Care Administrators, Funeral and Funeral Embalmers

Executive Director
L. Hahn #00265
(Prog Admin Manager III)

License Operations Manager
A. Artis #00078
(Comp/Safety Off III)

Admin Staff Asst.
H. Manke #W0100
(Admin & Off Spec III)

Admin Staff Asst.
Vacant #00269
(Admin & Off Spec III)

Discipline Operation Manager
R. Minor #00266
(Comp/Safety Off III)

Discipline
J. Meade #00030
(Admin & Off Spec III)

Licensing/Discipline
P. Horner #00029
(Admin & Off Spec III)

Admin Staff Asst.
Vacant #W0110
(Admin & Off Spec III)
Dept. of Health Professions
2009 Organizational Structure

Behavioral Sciences Boards

Executive Director
E. Brown #00068
(Prog Admin Manager III)

Deputy Director
P. Larimer #00277
(Prog Admin Spec II)

Administrative & Off Spec III

P-14 Admin & Office Spec III
C. Miller #W0034
(Comp/Safety Off III)

Board of Psychology
Vacant #00024

Board of Counseling
D. Pollick #00067

Board of Social Work
C. Chappell #00123

Revised 3/26/09
Dept. of Health Professions
2009 Organizational Structure
Board of Medicine

Executive Director
W. Harp #00076
(Physician Mgr II)

Operations Manager
C. Morton #00133
(Compliance/Safety Officer III)

Licensure Unit
Deputy Director
O. Powers #00008
(Prog Admin Spec II)

Admin & Office Spec III
D. Mason #00230
(Admin & Off Spec III)

B. Hutson-Bryan #00014
(Admin & Off Spec III)

T. Farmer #00101
(Admin & Off Spec III)

P. Smith #00015
(Admin & Off Spec III)

E. Joyner #00212
(Admin & Off Spec III)

Medical Review Coordinator
B. Matusiak #00191
(Physician Mgr I)

Discipline Unit
Deputy Director
J. Deschens #00042
(Prog Admin Mgr III)

Exec. Asst
J. Wood #00021
(Admin & Off Spec III)

Case Manager
T. Hines #00221
(Compl/Safety Off III)

Regulatory Boards Administrator
R. Dixson #00155
(Prog Admin Spec II)

P-14 Admin & Office Spec III
A. Fowlkes #W0048
(Admin & Off Spec III)

M. Dundon #00085
(Admin & Off Spec III)

M. Dobson #00050
(Admin & Off Spec III)

K. Blanton #00267
(Admin & Off Spec III)

Vacant #W0075
(Admin & Off Spec III)

Revised 3/26/09
Dept. of Health Professions
2009 Organizational Structure
Healthcare Workforce Data Center

Healthcare Workforce
B. Beck #W0004
(Prog Admin Mgr III)

Policy Specialist
Vacant #00289
(Policy and Planning Spec II)

Administrative Specialist
Vacant #00290
(General Admin Supv I/Coord I)

P-14 Intern
C. Thompson #W0106
(Policy Plan Spec I)

Revised 3/26/09
APPENDIX E

EXTERNAL CONTACTS AND VENDORS
<table>
<thead>
<tr>
<th>Vendor/External Contact</th>
<th>Primary Contact Name</th>
<th>Physical Address</th>
<th>Telephone Office</th>
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<th>Fax</th>
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<tr>
<td>Health and Human Services</td>
<td>Marilyn B. Tavenner, Secretary of Health and Human Resources Executive Assistant: Alicia Cavanaugh</td>
<td>7700 Midlothian Turnpike, Richmond VA 23236</td>
<td>804-692-2578</td>
<td>804-692-5272</td>
<td>804-291-8828 (b)</td>
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<tr>
<td></td>
<td>Gail Jaspen, Deputy Secretary</td>
<td></td>
<td>804-874-1289 (cell)</td>
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<tr>
<td>Governor</td>
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<tr>
<td>VDEM Headquarters</td>
<td></td>
<td>10501 Trade Court, Richmond VA 23236</td>
<td>804-897-6500</td>
<td>804-897-6506</td>
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<tr>
<td>County of Henrico, Div of Fire Division of Risk Management</td>
<td>Linda Lilly</td>
<td>786-6018</td>
<td>804-501-4901</td>
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<tr>
<td></td>
<td>Division of Purchases and Supply</td>
<td>Ron Bell</td>
<td>(804) 786-3846</td>
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<tr>
<td>Attorney General’s Office</td>
<td>Howard Casway</td>
<td>786-1023</td>
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<td>Division of Engineering &amp; Buildings</td>
<td>Bruce Brooks</td>
<td>(804) 786-1821</td>
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<td>Landlord</td>
<td>Christine Johnson</td>
<td>(804) 780-3030</td>
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<td>DOA - Payroll</td>
<td>Kim Wood</td>
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<td>DOA General Accounting</td>
<td>Fay Lion</td>
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<td>Department of Human Resources Management</td>
<td>Rue White</td>
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<td>Virginia Information Technologies Agency</td>
<td>Customer Care Center</td>
<td>1-866-637-8482</td>
<td>1-804-786-3932</td>
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<td>toll free 1-800-296-7070</td>
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<td>1-888-667-3000</td>
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<td>Help Desk</td>
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<td>866-637-8482</td>
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<td>Correctional Enterprises</td>
<td>Robert Hammond</td>
<td></td>
<td>(804) 743-4115</td>
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<td></td>
<td>Stephen Palmese</td>
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<td>(804) 784-3551</td>
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<td>Chasen's Business Interiors - Modular Furniture</td>
<td>Chris Cash</td>
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<td>804-673-8127</td>
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<td>Virginia Correctional Enterprises - Office Supplies/Furnishings</td>
<td>Dewain Hammond</td>
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<td>804-743-4100</td>
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<tr>
<td>Office of the Attorney General</td>
<td>Frank Pedrotty, Senior Assistant</td>
<td>300 East Main Street Richmond,</td>
<td>(804) 786-2071</td>
<td></td>
<td>804-225-3064</td>
<td><a href="mailto:fpedrotty@oag.state.va.gov">fpedrotty@oag.state.va.gov</a>, <a href="http://www.oag.state.va.us/">www.oag.state.va.us/</a></td>
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<td>Facility Landlord</td>
<td>Christine Johnson</td>
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<td>(804) 780-3030</td>
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<td>National Council of State Boards of Nursing (NCSBN) NCLEX-RN and NCLEX-PN Testing Contract (They have a sub-contract with PearsonVUE)</td>
<td>Michael Tomaselli</td>
<td>111 East Wacker Drive, Suite 2900 Chicago, Illinois 60601</td>
<td>(312) 525-3627</td>
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<td>PearsonVUE National Nurse Aide Assessment Program (NNAAP) Nurse Aide Certification Exam (They have a sub-contract with NACES in Texas)</td>
<td>Sue Durante</td>
<td>P.O. Box 13785 Philadelphia, PA 19101-3785</td>
<td>800-274-3444, ext. 5010</td>
<td>610-617-5010</td>
<td>888-204-6183</td>
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<td>Nurse Aide Competency Evaluation Service (NACES)</td>
<td>Kris Winning or Debbi Giossi</td>
<td>7600 Burnet Road, Suite 440 Austin, Texas 78757-1292</td>
<td>Kris Winning 800-758-6028, ext. 190 Debbi Giossi 800-758-6028, ext. 168</td>
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<tr>
<td>Psychological Services, Inc. (PSI) Medication Aide Examination</td>
<td>Alon Schwartz, Manager of Operations</td>
<td>3210 E Tropicana Las Vegas, NV 89121</td>
<td>800-367-1565</td>
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<td>818-439-5438</td>
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<td>DOA - (Revenue Contact)</td>
<td>Melinda Fleet</td>
<td>The James Monroe Building/101 North 14th St, 2nd floor, Richmond, VA 23219</td>
<td>804-225-2376</td>
<td></td>
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<td><a href="mailto:Melinda.Fleet@doa.virginia.gov">Melinda.Fleet@doa.virginia.gov</a></td>
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<td>DOA - (A/P Contact)</td>
<td>Faye Lion</td>
<td>The James Monroe Building/101 North 14th St, 2nd floor, Richmond, VA 23219</td>
<td>804-225-2384</td>
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<td><a href="mailto:Fay.Lion@doa.virginia.gov">Fay.Lion@doa.virginia.gov</a></td>
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<td>System Automation</td>
<td>Horowitz Sol</td>
<td>First Floor, Columbia, MD 21046</td>
<td>301-837-8000</td>
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<td><a href="mailto:shorwitz@systemautomation.com">shorwitz@systemautomation.com</a></td>
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<tr>
<td>Suntrust-Baltimore Lockbox</td>
<td>Pearl MacDonald-Lockbox</td>
<td>Suntrust Bank/1000 Stewart Ave, Glen Burnie, MD 21061</td>
<td>1-800-345-3679</td>
<td></td>
<td>410-590-8298</td>
<td><a href="mailto:BaltimoreLockbox_Service@SunTrust.com">BaltimoreLockbox_Service@SunTrust.com</a> or <a href="mailto:Pearl.MacDonald@suntrust.com">Pearl.MacDonald@suntrust.com</a></td>
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<td>Suntrust-Commercial</td>
<td>J. Michael Lohr</td>
<td>919 East Main Street, 22nd Floor, Richmond, VA 23219</td>
<td>804-782-5962</td>
<td>804-782-5626</td>
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<td><a href="mailto:mike.lohr@suntrust.com">mike.lohr@suntrust.com</a></td>
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<tr>
<td>VITA</td>
<td>John Tackley</td>
<td>11751 Meadowville Lane, Chester, VA 23836</td>
<td>804-416-6165</td>
<td>804-416-6361</td>
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<td><a href="mailto:john.tackley@vita.virginia.gov">john.tackley@vita.virginia.gov</a></td>
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<tr>
<td>ELAVON</td>
<td>Jason Cole</td>
<td>7300 Chapman Hwy, Knoxville, TN 37920</td>
<td>865-403-8898</td>
<td>865-403-5898</td>
<td></td>
<td><a href="mailto:Jason.Cole@elavon.com">Jason.Cole@elavon.com</a></td>
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<tr>
<td>Treasury - (Revenue Contact)</td>
<td>Debbie Seitz</td>
<td>101 North 14th Street, Richmond, VA 23219</td>
<td>804-225-2647</td>
<td>804-225-3187</td>
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<td><a href="mailto:Debbie.Seitz@trs.virginia.gov">Debbie.Seitz@trs.virginia.gov</a></td>
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<td>Treasury - (A/P Contact)</td>
<td>Kitty Corker</td>
<td>101 North 14th Street, Richmond, VA 23219</td>
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<td><a href="mailto:Kitty.Corker@doa.virginia.gov">Kitty.Corker@doa.virginia.gov</a></td>
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<td>Bank of America</td>
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<td>1-888-449-2273</td>
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<td>Payroll Service Bureau</td>
<td>Kim Wood or Jean Turlington</td>
<td>The James Monroe Building/101 North 14th St, 2nd floor, Richmond, VA 23219</td>
<td>804-786-5909 or 804-225-2270</td>
<td>804-786-2095</td>
<td></td>
<td><a href="mailto:Kim.Wood@doa.virginia">Kim.Wood@doa.virginia</a> or <a href="mailto:Jean.Turlington@doa.virginia.gov">Jean.Turlington@doa.virginia.gov</a></td>
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THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX F

IN-HOUSE EMERGENCY PROCEDURES
IN-HOUSE EMERGENCY PROCEDURES

In-house emergencies or crisis must be addressed with a common sense approach. Remember to remain as calm as possible during the emergency. This section of the plan will address what personnel need to do before the arrival of emergency first responders.

General Considerations

Employees and board members are encouraged to use common sense; for example be aware if someone does not belong in your workplace (no identification badge, unfamiliar face, unusual or suspicious activity.) If observed report to your Supervisor, in turn who should report to security.

Handicapped Employees - Human Resources with the appropriate Cost Center Manager will identify this population in the respective work areas and ensure that there are at least two to four personnel assigned to assist them if there is a need for evacuation from the building. The Cost Center Manager of each Department will coordinate this aspect for their respective areas.

Agitated, Assaultive, and Aggressive Behavior

Without A Weapon

- Remain calm; confrontational behavior could escalate the behavior.

- Dial 9-911.

- All persons in the immediate vicinity should calmly leave the area and report to a designated area.

- Employees should leave the area if directed, and the supervisor of the area should notify building Security at 9-432-3816.

- Once employees or board members have cleared this area, do not re-enter the area until the incident is resolved and you are instructed to do so and emergency personnel have declared the area safe.

- **Do not be a hero.**

- The Supervisor will notify the Agency Director/successor of the incident.

- Await further directions, if possible, from law enforcement officials.

- In the event of disruptive behavior occurs during a hearing, the Board should call a recess, allowing all persons to leave the room, and the Senior Staff Member or designee should dial 9-911.

If it is known in advance that a particular respondent has previously exhibited aggressive behavior, arrangements should be made for police or armed security to monitor the hearing.
IN-HOUSE EMERGENCY PROCEDURES

**Agitated, Assaultive, or Aggressive Behavior - Weapon Involved**

- Remain Calm, it is **IMPORTANT** not to agitate this already nervous and anxious person. If you do not remain calm, your behavior could cause the situation to escalate.

- If the assailant gives you instructions, follow these instructions as calmly as possible.

- Anyone not directly involved in the incident that becomes aware of an incident must first call **9-911**. Next, call building Security (9-432-3816) and inform them of the situation. Begin notifying employees, visitors, and board members to evacuate the building as appropriate. Be very careful in how others are notified. **Avoid causing a panic.**

- Sometimes it is safer to stay where you are (i.e. if the assailant is in the hallway and you are in a conference room or office area). If your only method of departing is to exit through the area where the assailant is located or can potentially be located, stay where you are.

- Remain calm and use common sense until emergency personnel arrive and can take command of the situation. **DO NOT BE A HERO.**

- In the event of an evacuation, do not return to your work area unless instructed to do so.

**Biological or Chemical Attack**

- Eliminate or minimize avenues of physical contact among others to prevent contamination.

- Follow public service and emergency instructions.

- Data will ensure that automated functions essential for agency operations and customers are functional, secured, and accessible.

- Rely on law enforcement and other emergency responders to provide information as to when it is safe to return to work.
IN-HOUSE EMERGENCY PROCEDURES

Bomb Threats

- If you receive the call, try to obtain as much as possible, particularly the time the bomb will go off, its location, what it looks like, and any distinguishing background noises of the caller.

- Call 9-911 or have someone call 9-911 for you.

- **DO NOT use CELL PHONES.** The cell phone signal may serve as a trigger.

- Notify the Agency Director/Successor immediately. (Notify Landlord)

- Remain as quiet as possible- directions may need to be given by fire or safety officials. (Evacuate only if order is given).

- Enter the closest stair well, if possible. Do not take the elevators unless you have been instructed to do so.

- Move as quickly and safely as possible to your outside designated or directed area.

- Do not stop in the lobby or stair wells.

- Cost Center Managers are asked to stay with their group and have available an account of the staff. This information will be collected by designated safety members (in orange vest).

- Human Resources will be responsible for obtaining the sign in sheets from the front desk on the 3rd floor for visitors, board members and customers.

- Human Resources will be responsible for giving the sign-in-sheets to fire or emergency officials and to assist officials in accounting for board members and visitors.

**IF YOU RECEIVE A BOMB THREAT**

**UTILIZE THE FOLLOWING BOMB THREAT CHECK LISTS**
## IN-HOUSE EMERGENCY PROCEDURES

**BOMB THREAT CHECK LISTS – REMEMBER TO RECORD INFORMATION**

### QUESTIONS TO ASK:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>When is bomb going to explode?</td>
</tr>
<tr>
<td>2.</td>
<td>Where is it right now?</td>
</tr>
<tr>
<td>3.</td>
<td>What does it look like?</td>
</tr>
<tr>
<td>4.</td>
<td>What kind of bomb is it?</td>
</tr>
<tr>
<td>5.</td>
<td>What will cause it to explode?</td>
</tr>
<tr>
<td>6.</td>
<td>Did you place the bomb?</td>
</tr>
<tr>
<td>7.</td>
<td>Why?</td>
</tr>
<tr>
<td>8.</td>
<td>What is your address?</td>
</tr>
<tr>
<td>9.</td>
<td>What is your name?</td>
</tr>
</tbody>
</table>

### EXACT WORDING OF THE THREAT:

- [Blank Line]
- [Blank Line]
IN-HOUSE EMERGENCY PROCEDURES

BOMB THREAT OBSERVATIONS TO RECORD

SEX OF CALLER:____  RACE:____  AGE:____  LENGTH OF CALL:____
NUMBER AT WHICH CALL IS RECEIVED:_______________  TIME:___  DATE:__/__/__

CALLER’S VOICE

<table>
<thead>
<tr>
<th>CALM</th>
<th>SOFT</th>
<th>DISTINCT</th>
<th>RASPY</th>
<th>DISGUISED</th>
</tr>
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<tbody>
<tr>
<td>ANGRY</td>
<td>LOUD</td>
<td>SLURRED</td>
<td>DEEP</td>
<td>ACCENT</td>
</tr>
<tr>
<td>EXCITED</td>
<td>LAUGHTER</td>
<td>NASAL</td>
<td>RAGGED</td>
<td>WHISPERED</td>
</tr>
<tr>
<td>SLOW</td>
<td>CRYING</td>
<td>STUTTER</td>
<td>CLEARING THROAT</td>
<td>CRACKING VOICE</td>
</tr>
<tr>
<td>RAPID</td>
<td>NORMAL</td>
<td>LISP</td>
<td>DEEP BREATHING</td>
<td>FAMILIAR</td>
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</table>

IF VOICE IS FAMILIAR, WHO DID IT SOUND LIKE

BACKGROUND SOUNDS

<table>
<thead>
<tr>
<th>STREET NOISES</th>
<th>OFFICE</th>
<th>LOCAL</th>
<th>STATIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>KITCHEN NOISES</td>
<td>FACTORY</td>
<td>LONG DISTANCE</td>
<td>VOICES</td>
</tr>
<tr>
<td>PA SYSTEM</td>
<td>ANIMAL NOISES</td>
<td>BOOTH</td>
<td>MOTOR</td>
</tr>
<tr>
<td>MUSIC</td>
<td>CLEAR</td>
<td>HOUSE NOISES</td>
<td></td>
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THREAT LANGUAGE

<table>
<thead>
<tr>
<th>EDUCATED</th>
<th>IRRATIONAL</th>
<th>TAPED</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOUL</td>
<td>INCOHERENT</td>
<td></td>
</tr>
</tbody>
</table>

REPORT CALL IMMEDIATELY TO

<table>
<thead>
<tr>
<th>NAME:</th>
<th>PHONE NUMBER:</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YOUR NAME:</th>
<th>POSITION:</th>
<th>PHONE NUMBER:</th>
</tr>
</thead>
</table>
IN-HOUSE EMERGENCY PROCEDURES

Fire Emergencies

Primary objective – To get to a safe location away from the fire and assist others, if possible, in getting to a safe location.

- Call 9-911 first and then notify the Landlord's front Desk at 9-432-3816 (Security).
- Notify all individuals in your area.
- Pull the alarm if you discover the fire.
- Use common sense to determine if the use of a fire extinguisher is appropriate.
- Shut doors.
- Remain as quiet as possible- directions may need to be given by fire or safety officials.
- Enter the closest stair well, if possible. Do not take the elevators unless you have been instructed to do so by a fire official.
- Move as quickly as safely possible to your outside designated or directed area.
- Do not stop in the lobby or stair wells.
- Cost Center Managers, or designees, are asked to stay with their respective group and have available an accounting of their staff. This information will be collected by designated safety members (in orange vest).
- Human Resources will be responsible for obtaining the sign in sheets from the front desk on the 5th floor for visitors, board members and customers.
- Human Resources will be responsible for giving the sign-in-sheets to fire or emergency officials and to assist officials in accounting for board members and visitors.
IN-HOUSE EMERGENCY PROCEDURES

Medical Emergencies

In the event of a medical emergency in your area or any part of the building:

• Call 9-911.

• Tell EMS where the emergency situation is located.

• Administer any first aid that you are qualified to administer.

• Notify the Landlord’s front Desk at 9-432-3816 (Security) and let them know where the emergency is located.

• Make the individual as comfortable as possible.

• Instruct EMS to return to the elevator that goes to the loading dock (Classroom Level).

• Do not crowd the individual or obstruct the EMS workers.
THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX G
ESSENTIAL FUNCTIONS
<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Essential Personnel and Back-up</th>
<th>Vendors and External Contacts</th>
<th>Vital Records</th>
<th>Equipment</th>
<th>Systems</th>
<th>RTO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paying Personnel</td>
<td>Venita Gee, Ellen Kallenberger, Deb Pearson, Debbie Barnett, Barbara New, Sharon Williams, Payroll Service Bureau Representative</td>
<td>DOA/PSB</td>
<td>Payroll Records</td>
<td>PC, Phone, Printer</td>
<td>Internet Access to CIPPS, DOA website for secure links to systems, Finance_Shared drive, PMIS</td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Accounts Payable</td>
<td>Venita Gee, Stanley Jackson, Deborah Pearson, Anita Watkins</td>
<td>DOA, Treasury, VITA, Bank of America</td>
<td>Vendor Records, A/P Records, eVA Records</td>
<td>PC, Phone, Printer</td>
<td>Internet access to CARS, eVA, Finance_Shared drive, DOA website for secure links to systems</td>
<td>Bank of America Works</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
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</tr>
<tr>
<td>Adjudicating cases against licensees</td>
<td><strong>APD</strong>&lt;br&gt;James L. Banning&lt;br&gt;Lorraine B. McGehee&lt;br&gt;Anne G. Joseph&lt;br&gt;Susan C. Brooks</td>
<td>Office of the Attorney General&lt;br&gt;Administrative Proceedings Witnesses</td>
<td>Disciplinary Case Files</td>
<td>PC Telephones</td>
<td>L2K Shared Drives Internet</td>
<td>12 to 24 Hours</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
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</tr>
<tr>
<td>Issuing new licenses</td>
<td>Annie Artis, Jeanette Meade, Pam Horner, Holly Meade, Missy Currier, Denise Christian, Rai Minor</td>
<td>Examination Vendors, Other State Boards, Universities, Associations</td>
<td>Application File, Establishment File,</td>
<td>PC, Phone Fax, copier, scanner</td>
<td>L2K, Internet &amp; Email access</td>
<td>24-48 hours</td>
</tr>
<tr>
<td>Renewing existing licenses</td>
<td>Same personnel as shown above</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
<td>48-72 hours</td>
</tr>
<tr>
<td>Providing information on licensed individuals and facilities</td>
<td>Same personnel as shown above</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
<td>24-48 hours</td>
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<td>Inspecting licensed facilities</td>
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</tr>
<tr>
<td>Adjudicating cases against licensees</td>
<td>Rai Minor, Annie Artis, Missy Currier</td>
<td>Court Reporters, Law Offices,</td>
<td>Disciplinary Case File and Licensure File</td>
<td>Same</td>
<td>L2K</td>
<td>48-72 hours</td>
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<tr>
<td>Monitoring compliance of licensees with board orders</td>
<td>Kathy Truesdale, Rai Minor, Annie Artis</td>
<td>N/A</td>
<td>Board Order</td>
<td>Same</td>
<td>Same</td>
<td>72 hours</td>
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<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
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<tr>
<td>Revenue Management</td>
<td>Gloria Williams Tiffany Mallory Betty Revere Susan Beasecker</td>
<td></td>
<td></td>
<td>PC</td>
<td>L2K</td>
<td>12-48</td>
</tr>
<tr>
<td>Issuing new licenses</td>
<td>Gloria Williams Tiffany Mallory Betty Revere Susan Beasecker</td>
<td>L2K</td>
<td>PC</td>
<td>L2K</td>
<td></td>
<td>12-48</td>
</tr>
<tr>
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<td>Gloria Williams Tiffany Mallory Betty Revere Susan Beasecker</td>
<td></td>
<td></td>
<td>PC</td>
<td>L2K, Internet</td>
<td>12-48 hours</td>
</tr>
<tr>
<td>Providing information on licensed individuals and facilities</td>
<td>Gloria Williams Tiffany Mallory Betty Revere Scotti Russell Caroline Juran</td>
<td></td>
<td></td>
<td>PC</td>
<td>L2K</td>
<td>12-72</td>
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<tr>
<td>Adjudicating cases against licensees</td>
<td>Cathy Reiniers-Day Scotti Russell Betty Revere</td>
<td></td>
<td></td>
<td>PC</td>
<td>L2K</td>
<td></td>
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<tr>
<td>Monitoring compliance of licensees with board orders</td>
<td>Susan Beasecker Cathy Reiniers-Day</td>
<td></td>
<td></td>
<td>PC</td>
<td>L2K</td>
<td></td>
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<td>Essential Function</td>
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<tr>
<td>Data Support</td>
<td>Pat Paquette, Dick Nicula, Mike Gallini, Kening Wang, Stephen White, Biljana Culibrk, Mae La Donna Duncan, Sarah Cecchi, Tarwanda Clark, Teresa Long-Mathews, Angela Joyner</td>
<td>VITA, Northrop Grumman (NG), System Automation, Optimum Technology, EMC, Microsoft, Moore Forms, Verizon</td>
<td>Northrop Grumman (NG) for backup tapes</td>
<td>Northrop Grumman (NG) for servers, switches, routers, firewalls, desktop PCs, Laptops, Tablets, printers.</td>
<td>Electricity, Internet Access, FTP site access, IT Infrastructure and operational access to Email, MS Outlook, MyLicense Office (L2K), Prescription Monitoring, EMC Documentum, and Print and Folding Services</td>
<td>Out of agency’s hands. Could be weeks to months depending on availability of electricity and NG’s ability to meet agency infrastructure needs and priority of their workload</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
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<tr>
<td>Procurement, Purchasing &amp; Contracts</td>
<td>Kathy Lackey Huong Vu</td>
<td>Applicants State Boards</td>
<td>Orders</td>
<td>PC, phone</td>
<td>License 2000</td>
<td>24 to 72 hours</td>
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<tr>
<td>Issuing new licenses</td>
<td>Kathy Lackey Shirley Small Sandra Reen</td>
<td>Applications</td>
<td>Contracts</td>
<td>PC, phone</td>
<td>License 2000</td>
<td>5 to 24 hours</td>
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<tr>
<td>Renewing existing licenses</td>
<td>Kathy Lackey Shirley Small Sandra Reen</td>
<td>Public Media</td>
<td>Applications</td>
<td>PC, phone</td>
<td>License 2000 Internet</td>
<td>24 to 72 hours</td>
</tr>
<tr>
<td>Providing information on licensed individuals and facilities</td>
<td>Kathy Lackey Shirley Small Sandra Reen</td>
<td>Respondents Witnesses Attorneys Media</td>
<td>Disciplinary Case files</td>
<td>PC, phone</td>
<td>License 2000 Legislative Information System</td>
<td>24 to 72 hours</td>
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<tr>
<td>Investigating complaints and allegations of misconduct against licensed health care providers</td>
<td>Alan Heaberlin Deb Southall Sandra Reen</td>
<td>Respondents Witnesses Attorneys Media</td>
<td>Disciplinary Case files</td>
<td>PC, phone</td>
<td>License 2000 Legislative Information System</td>
<td>24 to 72 hours</td>
</tr>
<tr>
<td>Adjudicating cases against licensees</td>
<td>Alan Heaberlin Teresa Parrish Sandra Reen Board</td>
<td>Respondents Witnesses Attorneys Media</td>
<td>Disciplinary Case files</td>
<td>PC, phone</td>
<td>License 2000 Legislative Information System</td>
<td>24 to 72 hours</td>
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<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
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<tr>
<td>Monitoring compliance of licensees with board orders</td>
<td>Rose DeMatteo, Alan Heaberlin, Sandra Reen</td>
<td>Respondents HPIP</td>
<td>Notices Orders</td>
<td></td>
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<td>Promulgating regulations</td>
<td>Sandra Reen, Governor DPB, Regulatory Public</td>
<td></td>
<td>Disciplinary Case files, Compliance case files</td>
<td>PC, phone</td>
<td>License 2000</td>
<td>24 to 72 hours</td>
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<td>Providing information on practice requirements</td>
<td>Sandra Reen, Huong Vu, Public Licensees, Media</td>
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<td>Statutes Regulations</td>
<td></td>
<td>Documentum Regulatory TownHall</td>
<td>72 to 120 hours</td>
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<td>Vital Records</td>
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</tr>
</tbody>
</table>
| Investigating complaints and allegations of misconduct against licensed health care providers | 1. Faye Lemon  
2. Sammy Johnson  
3. Assigned Regional Manager  
4. Case Intake Analyst  
4. Kim Hood | Licensees  
Sources of complaints  
Facilities  
Other State & Federal Agencies  
Law Enforcement | Investigative reports  
All evidence | PC  
Telephone  
Printers  
Fax | L2K  
Internet  
Documentum | 72 hours? |
| Inspecting licensed facilities                          | 1. Sammy Johnson  
2. Faye Lemon  
3. Assigned Regional Manager  
4. Staff, BOP | Facilities  
Licensees  
Other State & Federal Agencies  
Law Enforcement | Inspection Reports/Forms  
Board Inspection Information | PC  
Telephone  
Printers  
Fax | L2K  
Internet  
Documentum | 72 hours? |
<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Essential Personnel and Back-up</th>
<th>Vendors and External Contacts</th>
<th>Vital Records</th>
<th>Equipment</th>
<th>Systems</th>
<th>RTO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issuing new licenses</td>
<td>Cousins Farmer Joyner, E. Smith, P. Powers</td>
<td>All parties to the applications</td>
<td>Applications and supporting documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K</td>
<td>72 hours</td>
</tr>
<tr>
<td>Renewing existing licenses</td>
<td>Hutson-Bryant Powers</td>
<td>All parties to the applications</td>
<td>Renewal data and supporting documentation</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K</td>
<td>72 hours</td>
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<tr>
<td>Providing information on licensed individuals and facilities</td>
<td>Mason Powers Backed up by entire Medicine staff</td>
<td>All enquirers</td>
<td>Phone logs</td>
<td>Phone, PC, fax</td>
<td>L2K, DHP Website, Legislative Information System</td>
<td>72 hours</td>
</tr>
<tr>
<td>Adjudicating cases against licensees</td>
<td>Matusiak, Deschenes Dixon Harp</td>
<td>Court Reporters, Meal Vendors, Respondents, Witnesses, Attorneys, Public, Media</td>
<td>Investigative Reports, Notices, Statements of Particulars, and Orders</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K, DHP Website, Legislative Information System</td>
<td>72 hours</td>
</tr>
<tr>
<td>Providing information to</td>
<td>Harp</td>
<td>Medical organizations, PMP</td>
<td></td>
<td>PC, phone, fax,</td>
<td>DHP Website, Legislative</td>
<td>72 hours</td>
</tr>
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<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
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</tr>
<tr>
<td>Monitoring compliance of licensees with board orders</td>
<td>Dixson Blanton Deschenes Harp</td>
<td>Licensees, Monitors, HPMP, CME Providers, Enforcement Division</td>
<td>Orders Required reports, Investigative reports, CME documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>Information System, PMP</td>
<td>72 hours</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
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<td>------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Issuing new licenses Nurse Practitioner (NP &amp; Prescriptive Authority license)</td>
<td>Charlotte Creed/ Denikia Clark</td>
<td>Official Transcript from Nursing School</td>
<td>Applications and supporting documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K; NURSYS; (DEA) Drug Enforcement Administration</td>
<td>72 hours</td>
</tr>
<tr>
<td>Issuing new licenses Registered Nurse (RN license)</td>
<td>Denikia Clark/Alesia Baskin/Maria Holt</td>
<td>Official Transcript from Nursing School</td>
<td>Applications and supporting documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K; NURSYS</td>
<td>72 hours</td>
</tr>
<tr>
<td>Issuing new licenses Licensed Practical Nurse (LPN license)</td>
<td>Alesia Baskin/Denkia Clark/Maria Holt</td>
<td>Official Transcript from Nursing School</td>
<td>Applications and supporting documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K; NURSYS</td>
<td>72 hours</td>
</tr>
<tr>
<td>Renewing existing licenses (NP, RN, LPN)</td>
<td>Marie Molnar/ Creed/Holt</td>
<td>Renewal data &amp; supporting documentation</td>
<td>PC, phone, fax, copier, scanner</td>
<td></td>
<td>L2K; NURSYS; DEA</td>
<td>72 hours</td>
</tr>
<tr>
<td>Issuing new &amp; Renewal Certifications (Certified Nurse Aide)</td>
<td>Francine Greer/ShaRon Clanton</td>
<td>Certificate of Completion from School; electronic NNAAP exam results from</td>
<td>Applications and supporting documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K; FTP file from Pearson VUE</td>
<td>72 hours</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
</tr>
<tr>
<td>--------------------</td>
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<td>---------</td>
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</tr>
<tr>
<td>Issuing new &amp; Renewal Registrations (Medication Aide)</td>
<td>Pam Haskin-Robinson/ Lindsey Watson</td>
<td>PearsonVUE</td>
<td>Certificate of Completion from School; electronic exam results from PSI; DSS Direct Care Staff Certificate</td>
<td>Applications and supporting documents</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K; FTP file from PSI</td>
</tr>
<tr>
<td>Providing information on licensed individuals and schools</td>
<td>Gayle Stanley/ ShaRon Clanton</td>
<td></td>
<td>Phone logs</td>
<td>Phone, PC, fax</td>
<td>L2K, DHP Website, Legislative Information System</td>
<td>72 hours</td>
</tr>
<tr>
<td>Adjudicating cases against licensees (NP, RN &amp; LPN) (Summary Suspensions &amp; Priority A Cases)</td>
<td>Jay Douglas/ Gloria Mitchell Linda Kleiner</td>
<td></td>
<td>Board members, Respondents, Witnesses, Attorneys, Public, Media</td>
<td>Investigative Reports, Notices, Statements of Particulars, and Orders</td>
<td>PC, phone, fax, copier, scanner</td>
<td>L2K, DHP Website, Legislative Information System</td>
</tr>
<tr>
<td>Adjudicating cases against licensees (CNA &amp; Med Aide)</td>
<td>Brenda Krohn/ Jodi Power</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DHPCOOPessentialFunctionsExternalContactsNursing032509
In the event of a disaster or major emergency, the priority order for restoration of these functions are:

- **Renewing and Issuing new licenses** (NP, RN, LPN, CNA, & Med Aide)
- **Providing information on licensed individuals and nursing schools**
- **Investigating complaints and allegations of misconduct against licensed health care** (Summary Suspensions and Priority A cases)

**Other Functions**
Investigating complaints and allegations of misconduct against licensees (other than Summary Suspension and Priority A Cases) could be postponed by Executive Order.

Inspecting Nursing Education and Nurse Aide Education Programs: could be postponed by Executive Order.

Promulgating Regulations and/or Emergency Regulations could be expedited by Executive Order.

Issuing and renewing Massage Therapy Certifications could be postponed by Executive Order.

See next page for additional information.

**Vendors and External Contracts**
National Council of State Boards of Nursing (NCSBN)
NCLEX-RN and NCLEX-PN Testing Contract
111 East Wacker Drive, Suite 2900
Chicago, Illinois 60601
Contact: Michael Tomaselli  Phone: (312) 525-3627
(They have a sub-contract with PearsonVUE)

PearsonVUE
National Nurse Aide Assessment Program (NNAAP)
Nurse Aide Certification Exam
BOARD OF NURSING
Essential Functions
03.25.09

P.O. Box 13785
Philadelphia, PA 19101-3785
Contact: Sue Durante
Phone: 1-800-274-3444, ext. 5010; or 1-610-617-5010; or 1-888-204-6183
(They have a sub-contract with NACES in Texas)

Nurse Aide Competency Evaluation Service (NACES)
7600 Burnet Road, Suite 440
Austin, Texas 78757-1292
Contact: Kris Winning
Phone: 1-800-758-6028, ext. 190; or
Contact: Debbi Giossi
Phone: 1-800-758-6028, ext. 168

Psychological Services, Inc. (PSI)
Medication Aide Examination
3210 E. Tropicana
Las Vegas, NV  89121
Contact: Alon Schwartz, Manager of Operations
Phone: 1-800-367-1565; or 1-818-439-5438
<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Essential Personnel and Back-up</th>
<th>Vendors and External Contacts</th>
<th>Vital Records</th>
<th>Equipment</th>
<th>Systems</th>
<th>RTO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue Management</td>
<td>Elizabeth Carter (ED and Cost Center Manager for Optometry, BHP, and Vet Med)</td>
<td></td>
<td>Budget reports from Finance</td>
<td>PC, phone</td>
<td>Internet Access, E-mail, Documentum, Excel</td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Procurement, Purchasing &amp; Contracts</td>
<td>Elizabeth Carter (ED for all three boards) Terri Behr (Vet Med) Carol Stamey (Optometry/BHP) Backup-Dana Davis (Opt/BHP) Vacant P-14 (Vet Med)</td>
<td>Variety of approved SWAM Companies</td>
<td>Purchasing Receipts and Vouchers</td>
<td>PC, phone</td>
<td>Internet Access, E-mail, Documentum, Excel</td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Data Support</td>
<td>Carol Stamey (Optometry/BHP/VetMed) DATA Personnel</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issuing new licenses</td>
<td>Elizabeth Carter (ED for both licensing Boards) Terri Behr (VetMed) Carol Stamey (Optometry)</td>
<td>L2K/MLo, Documentum</td>
<td></td>
<td>PC, DHP Server, Scanning</td>
<td>Internet, E-mail, L2K/MLo Access</td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Providing</td>
<td>Terri Behr (VetMed)</td>
<td>L2K/MLo,</td>
<td></td>
<td>PC, DHP</td>
<td>Internet, E-mail</td>
<td>12 to 72</td>
</tr>
</tbody>
</table>

Vital Records: PC, phone

Equipment: Internet Access, E-mail, Documentum, Excel

Systems: Internet, E-mail, L2K/MLo Access

RTO: 12 to 72 hours
<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Essential Personnel and Back-up</th>
<th>Vendors and External Contacts</th>
<th>Vital Records</th>
<th>Equipment</th>
<th>Systems</th>
<th>RTO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investigating complaints and allegations of misconduct against licensed health care providers</td>
<td>Carol Stamey (Optometry &amp; BHP's dialysis technicians, dietitians, and nutritionists) Elizabeth Carter (ED for all three Boards)</td>
<td>Documentum</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Board staff receive reports from Enforcement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inspecting licensed facilities (Monitoring deficiencies)</td>
<td>Elizabeth Carter ED Terri Behr Vet Med</td>
<td>PC, DHP Server</td>
<td>Internet, E-mail, L2K/MLo Access</td>
<td></td>
<td></td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Adjudicating cases against licensees</td>
<td>In coordination with APD Elizabeth Carter (ED for both licensing Boards) Terri Behr (VetMed) Carol Stamey (Optometry)</td>
<td>PC, DHP Server</td>
<td>Internet, E-mail, L2K/MLo Access</td>
<td></td>
<td></td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Providing information to prescribers statewide</td>
<td>Elizabeth Carter (ED for both licensing Boards) Terri Behr (VetMed) Carol Stamey (Optometry)</td>
<td>PC, DHP Server</td>
<td>Internet, E-mail, L2K/MLo Access</td>
<td></td>
<td></td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
</tr>
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<td>----------------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>regarding potential abuse and illegal obtaining of controlled substances.</td>
<td>Carol Stamey (Optometry) Terri Behr (VetMed) Both assisted by Susan</td>
<td></td>
<td></td>
<td>PC, DHP Server</td>
<td>Internet, E-mail, L2K/MLo Access</td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Monitoring compliance of licensees with board orders</td>
<td>Elizabeth Carter (ED BHP) Susan Stanbach (Agency Senior Management Analyst)</td>
<td></td>
<td></td>
<td>PC, DHP Server</td>
<td>Internet, E-mail, L2K/MLo Access</td>
<td>12 to 72 hours</td>
</tr>
<tr>
<td>Virginia Performs and internal agency performance management reporting</td>
<td>Neal Kauder, President of Visual Research, Inc.</td>
<td></td>
<td>DPB &amp; DHP Website and hard copy files</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
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</tr>
<tr>
<td>Providing information to prescribers statewide regarding potential abuse and illegal obtaining of controlled substances.</td>
<td>Ralph Orr Carolyn McKann Jackie Burgess</td>
<td>Optimum Technology</td>
<td>PMP Database</td>
<td>PC, Phone, servers</td>
<td>Internet access for PMP software and to PMP servers</td>
<td>24-72hrs</td>
</tr>
<tr>
<td>Essential Function</td>
<td>Essential Personnel and Back-up</td>
<td>Vendors and External Contacts</td>
<td>Vital Records</td>
<td>Equipment</td>
<td>Systems</td>
<td>RTO</td>
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<td>--------------------------------------------------------------------------------</td>
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<td>------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Procurement, Purchasing &amp; Contracts</td>
<td>Renee Watson Peter Grosbach</td>
<td>DGS, VITA, eVA</td>
<td>Contracts, purchase orders and supporting documents</td>
<td>PC, FAX, phone</td>
<td>Internet Access Eva Documentum Bank of America Works</td>
<td>72 hours</td>
</tr>
</tbody>
</table>
THE DEPARTMENT OF HEALTH PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX H

VITAL RECORDS
VENDORS, VITAL RECORDS, AND DATABASES

A successful COOP plan provides for the protection, accessibility, and recovery of the agency’s vital records, systems, and equipment. These are the records, systems, and equipment that if irretrievable, lost, or damaged will materially impair the agency’s ability to conduct business and carry out essential functions.

The Department of Health Professions has identified vital records and databases, which must be available to support performance of essential functions. The department has also identified vendors and contractors available to support restoration of vital records, systems, and/or processes. (See following pages)
<table>
<thead>
<tr>
<th>Record Name/Category</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approximate volume</th>
<th>Copies Routinely Kept/Available</th>
<th>Replacement period</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOU(S) &amp; MOA(S)</td>
<td>Paper files</td>
<td>Book Case</td>
<td>(1) 3-ring binder</td>
<td>Y - kept on 3rd shelf</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td></td>
<td>Paper &amp; electronic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director's Correspondence</td>
<td></td>
<td>File Cabinet</td>
<td>1 drawer</td>
<td>Y - kept in File Cabinets #2&amp;3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>files</td>
<td>File Cab &amp; H drive</td>
<td>2 folders</td>
<td>Y - kept in File Drawer</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Original Directives</td>
<td></td>
<td>File Cabinet #1</td>
<td>2 drawers</td>
<td>Y -kept in File Cabinet 1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>files</td>
<td>File Cabinet</td>
<td>1 folder</td>
<td>Y - kept in File Cabinet</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Paper &amp; electronic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Historical Files</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FIOA</td>
<td>Paper files</td>
<td>File Cabinet</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Staff Meeting Files</td>
<td>Electronic</td>
<td>Outlook</td>
<td></td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>Agency Calendar</td>
<td></td>
<td>File Cabinet</td>
<td></td>
<td>Y -kept in File Cabinet 4</td>
<td></td>
</tr>
<tr>
<td>Studies &amp; Reports</td>
<td>Paper</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Biennial Reports</td>
<td></td>
<td>Copy retained at State Library</td>
<td></td>
<td>Y -kept in File Cabinet 1</td>
<td></td>
</tr>
<tr>
<td>Legal Opinions</td>
<td>Paper files</td>
<td>File Cabinet</td>
<td></td>
<td>Y -kept in File Cabinet 1</td>
<td></td>
</tr>
</tbody>
</table>

*Might not be considered vital
<table>
<thead>
<tr>
<th>Record Name/Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounting Ledgers and Original</td>
<td>Ledgers and Original Batch Headers</td>
</tr>
<tr>
<td>Batch Headers</td>
<td>Record Format: Electronic</td>
</tr>
<tr>
<td></td>
<td>Record Location: Finance G: drive</td>
</tr>
<tr>
<td></td>
<td>Approximate Volume: 268 MB</td>
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<td></td>
<td>Are copies kept or routinely available: Yes</td>
</tr>
<tr>
<td></td>
<td>Replacement Time: Immediate</td>
</tr>
<tr>
<td>Vendor Invoices and Interagency</td>
<td>Record Format: Paper</td>
</tr>
<tr>
<td></td>
<td>Record Location: Accounting Unit File Area or</td>
</tr>
<tr>
<td></td>
<td>Individual Cubicle based on Processing Flow</td>
</tr>
<tr>
<td></td>
<td>Approximate Volume: 2 Lateral, 5 Drawer File</td>
</tr>
<tr>
<td></td>
<td>Cabinets</td>
</tr>
<tr>
<td></td>
<td>Are copies kept or routinely available: Yes from</td>
</tr>
<tr>
<td></td>
<td>the vendor or originating state agency</td>
</tr>
<tr>
<td></td>
<td>Replacement Time: Within 14 days</td>
</tr>
<tr>
<td>Payroll Records</td>
<td>Record Format: Paper</td>
</tr>
<tr>
<td></td>
<td>Record Location: Deb Pearson's cubicle</td>
</tr>
<tr>
<td></td>
<td>Approximate Volume: 1 Lateral, 3 drawer file</td>
</tr>
<tr>
<td></td>
<td>cabinet; 1 metal cabinet with 5 shelves</td>
</tr>
<tr>
<td></td>
<td>Are copies kept or routinely available: Based on</td>
</tr>
<tr>
<td></td>
<td>stage of processing; from Payroll Service Bureau</td>
</tr>
<tr>
<td></td>
<td>Replacement Time: Immediate</td>
</tr>
<tr>
<td>Travel Reimbursement Vouchers</td>
<td>Record Format: Paper and Electronic</td>
</tr>
<tr>
<td></td>
<td>Record Location: Accounting Unit File Area or</td>
</tr>
<tr>
<td></td>
<td>Individual Cubicle based on Processing Flow</td>
</tr>
<tr>
<td></td>
<td>Approximate Volume: 2 Lateral, 5 Drawer File</td>
</tr>
<tr>
<td></td>
<td>Cabinets</td>
</tr>
<tr>
<td></td>
<td>Are copies kept or routinely available: Yes from</td>
</tr>
<tr>
<td></td>
<td>the travelers</td>
</tr>
<tr>
<td></td>
<td>Replacement Time: Within 14 days</td>
</tr>
<tr>
<td>Record Name/Category:</td>
<td>Deposit Records</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Record Format:</td>
<td>Paper and Electronic</td>
</tr>
<tr>
<td>Record Location:</td>
<td>Accounting Unit File Area or Individual Cubicle based on Processing Flow</td>
</tr>
<tr>
<td>Approximate Volume:</td>
<td>2 Lateral, 5 Drawer File Cabinets</td>
</tr>
<tr>
<td>Are copies kept or routinely available:</td>
<td>Yes from Banking Institution and Treasury</td>
</tr>
<tr>
<td>Replacement Time:</td>
<td>Immediate</td>
</tr>
<tr>
<td>RECORD CATEGORY</td>
<td>RECORD NAME</td>
</tr>
<tr>
<td>-----------------</td>
<td>------------------------------------</td>
</tr>
<tr>
<td>Enforcement</td>
<td>Investigative Reports</td>
</tr>
<tr>
<td></td>
<td>Compliance Summary Reports</td>
</tr>
<tr>
<td></td>
<td>Compliance Tracking Files</td>
</tr>
<tr>
<td></td>
<td>Evidence</td>
</tr>
<tr>
<td></td>
<td>Complaint and inspection Information (just received)</td>
</tr>
</tbody>
</table>
## VITAL RECORDS
### BOARD OF OPTOMETRY

<table>
<thead>
<tr>
<th>Record Name/Category</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approximate Volume</th>
<th>Copies Routinely Kept (Y/N)</th>
<th>Where?</th>
<th>Replacement Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pending Licensure Applications, transcripts, national board scores &amp; verifications of</td>
<td>Paper</td>
<td>File cabinet</td>
<td>1 file drawer</td>
<td>originals only</td>
<td>Pending file drawer</td>
<td>Timeframe for required resubmissions vary - perhaps up to a month.</td>
</tr>
<tr>
<td>licensure from other jurisdictions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finalized Licensure Applications</td>
<td>Paper</td>
<td>File cabinet</td>
<td>2 lateral file drawers</td>
<td>originals only</td>
<td>File drawer until archived, then microfiche retained in microfiche box</td>
<td>Timeframe for required resubmissions vary - perhaps up to a month.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open Disciplinary Cases &amp; Compliance Pending Files</td>
<td>Paper</td>
<td>File cabinet</td>
<td>1 lateral file drawer</td>
<td>originals for most cases, but also presentation copies for informal and formal hearings</td>
<td>Open case file drawers and open space on desk and in window</td>
<td>Complete reconstruction would be dependent upon Enforcement's, APD's, and/or Compliance's copies. -- Timeframe depends upon the volume being requested, best estimate up to a month.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Closed Disciplinary Cases</td>
<td>Paper</td>
<td>File cabinet</td>
<td>2 lateral file drawers</td>
<td>originals only</td>
<td>File drawer until archived, then microfiche retained in microfiche box</td>
<td>Complete reconstruction would be dependent upon available Enforcement, APD, and/or Compliance copies, whether Notices and Orders had been posted on License Lookup, and whether the case file has been microfilmed. If purged before microfilming, then the files would be irretreivable. Timeframe to reconstruct available files could take up to long three months.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Correspondence</td>
<td>Paper</td>
<td>Desk drawer (this year’s) &amp; file cabinet drawer for older correspondence up to three years)</td>
<td>1 desk drawer and half of file drawer</td>
<td>originals &amp; print offs of e-mails</td>
<td>Ms. Stamey's files &amp; P-14's desk drawer</td>
<td>Retain up to three years, then destroyed. While there are e-mails, the majority of correspondence was received by mail and fax and would require in depth research to obtain copies.</td>
</tr>
</tbody>
</table>

DHPCOOPVitalRecords031009 6 of 16
<table>
<thead>
<tr>
<th>Record Name/Category</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approximate Volume</th>
<th>Copies Routinely Kept (Y/N)</th>
<th>Where?</th>
<th>Replacement Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOIA Files</td>
<td>Paper</td>
<td>Desk drawer</td>
<td>2 desk drawers</td>
<td></td>
<td></td>
<td>License Lookup has those within the past 15 years. Older documents available in FOIA file would need to be retrieved from microfiche/film</td>
</tr>
<tr>
<td>Policy Issue Files</td>
<td>Paper</td>
<td>File cabinet</td>
<td>5 file drawers</td>
<td>originals</td>
<td>Open area</td>
<td>Approximately 10% of files could be retrieved from outside organizations. However, the majority are comprised of correspondence and research on policy topics dating back decades and are irretrievable.</td>
</tr>
<tr>
<td>Agenda Files</td>
<td>Paper</td>
<td>File cabinet</td>
<td>2 lateral drawers</td>
<td>originals</td>
<td>Ms. Stamey's files</td>
<td>Files from Jan 2004 to current would be retrievable. Files prior to Jan 2004 have been sent to Library of Va. Storage.</td>
</tr>
<tr>
<td>Minutes</td>
<td>Paper July 2005 forward also posted to Town hall</td>
<td>Notebooks</td>
<td>7 (2 1/2 inch) notebooks</td>
<td>originals</td>
<td>Ms. Stamey's shelf</td>
<td>Minutes have been posted electronically since July 2005. Books on shelf 1995 to current. Older minutes shipped to Library of Virginia Storage.</td>
</tr>
<tr>
<td>Personnel &amp; Board member files &amp; travel expenditures</td>
<td>Paper</td>
<td>Desk drawers</td>
<td>3 desk drawers</td>
<td>originals</td>
<td>Liz' desk and cabinet</td>
<td>Some not replaceable but most could be researched with Finance and the Secretary of the Commonwealth's office within a month.</td>
</tr>
<tr>
<td>Record Name/Category</td>
<td>Record Format</td>
<td>Record Location</td>
<td>Approximate Volume</td>
<td>Copies Routinely Kept (Y/N)</td>
<td>Where?</td>
<td>Replacement Time Frame</td>
</tr>
<tr>
<td>----------------------</td>
<td>---------------</td>
<td>-----------------</td>
<td>--------------------</td>
<td>-----------------------------</td>
<td>--------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>General Correspondence</td>
<td>Paper</td>
<td>File cabinet drawers for correspondence up to three years</td>
<td>1 desk drawer</td>
<td>originals &amp; print offs of e-mails</td>
<td>Ms. Stamey's desk drawer &amp;</td>
<td>Retain up to three years, then destroyed. While there are e-mails, the majority of correspondence was received by mail and fax and would require in depth research to obtain copies.</td>
</tr>
<tr>
<td>Policy study reports</td>
<td>Paper &amp; web posting</td>
<td>Main reports in Director's area</td>
<td>1 file cabinet drawer</td>
<td>1-3 copies maintained for studies over the past three years</td>
<td>BHP filing area</td>
<td>Reports could be downloaded from website within a day. Reports are posted from 1995 to present</td>
</tr>
<tr>
<td>Policy study materials</td>
<td>Paper, Word, SPSS, &amp; Excel files</td>
<td>File cabinets up to three years then forwarded to Library of Va. Storage</td>
<td>5 file cabinet drawers</td>
<td>papers -- all originals</td>
<td>BHP filing area</td>
<td>In depth research and contact with original sources would be required to replace, if possible at all. Could take six months.</td>
</tr>
<tr>
<td>Personnel &amp; Board member files &amp; travel expenditures</td>
<td>Paper</td>
<td>Desk drawers</td>
<td>3 desk drawers</td>
<td>originals</td>
<td>Liz’ desk and cabinet</td>
<td>Some not replaceable but most could be researched with Finance and the Secretary of the Commonwealth's office within a month.</td>
</tr>
</tbody>
</table>
Record Name: BJA Federal Grant Files
Format: Paper and electronic
Location: PMP File cabinet
Some copies or original signed documents may be available in Director’s Office
Replacement time Frame: within 30 days
10 folders

Record Name: Advisory Committee
Format: Paper and electronic
Location: PMP File cabinet,
Minutes Posted on Town Hall
Minute book, 5 folders
Replacement time Frame: within 30 days

Record Name: Daily Request forms (faxed requests)
Format: Paper
Location: PMP File cabinet, overflow storage
3 drawers, 9 file boxes
Replacement time Frame: within 30 days

Record Name: Non-reporting Dispensers
Format: Paper and electronic
Location: PMP File cabinet, overflow storage
1 file drawer
Replacement time Frame: within 30 days

Record Name: Phone contact sheets
Format: Paper
Location: Program manager office

Replacement time Frame: within 14 days

Record Name: Contract information
Format: Paper and electronic
Location: Program Manager Office,
DHP Contract Officer
1 file drawer
Replacement time Frame: within 14 days
1. Applications for initial dental and dental hygiene licenses and OMS registrations and cosmetic certifications
   - Format: Paper and microfiche
   - Location: File cabinets
   - Volume: @ 10 filing cabinet drawers and @ 4 microfiche cabinet drawers
   - Copies kept: No
   - Replacement timeframe: Immediate for paper ones

2. Renewal and reinstatement applications for dentists and dental hygienists
   - Format: Paper
   - Location: File cabinets
   - Volume: @ 3 filing cabinet drawers
   - Copies kept: No
   - Replacement timeframe: Within 30 days

3. Radiation Safety Course Applications
   - Format: Paper
   - Location: File cabinets
   - Volume: @ 2 filing cabinet drawers
   - Copies kept: No
   - Replacement timeframe: Within 30 days

4. Minute books
   - Format: Paper and for recent minutes also posted on web page and Regulatory Town Hall
   - Location: Notebooks and record boxes
   - Volume: 14
   - Copies kept: No
   - Replacement timeframe: Within 30 days

5. Board Orders
   - Format: Paper and License Look-up on web
   - Location: Notebooks
   - Volume: 15
   - Copies kept: No
   - Replacement timeframe: Within 30 days
6. **Disciplinary case files**
   - Format: Paper and hard evidence then on microfiche
   - Location: File cabinets, on top of file cabinets, at work stations in boxes or on shelves, chairs and desks
   - Volume: @23 filing cabinet drawers and @10 shelves
   - Copies kept: Once cases are ready for probable cause review copies are made Original case file and one copy kept for one yr then
   - Replacement timeframe: Immediate for open cases

7. **FOIA files on licensees**
   - Format: Paper and License Look-up on web
   - Location: File cabinets
   - Volume: @ 4 filing cabinet drawers
   - Copies kept: No
   - Replacement timeframe: Within 30 days

8. **Travel requests and reimbursement forms**
   - Format: Paper
   - Location: File cabinets
   - Volume: @ 2 filing cabinet drawers
   - Copies kept: No
   - Replacement timeframe: Within 30 days

9. **General correspondence files**
   - Format: Paper
   - Location: File cabinets
   - Volume: @ 2 filing cabinet drawers
   - Copies kept: No
   - Replacement timeframe: Within 30 days
VITAL RECORDS
BOARD OF MEDICINE

Licensing
   All electronic files
   All pending/working applications

Discipline
   All open case files at Board level, to include all correspondence, notices, orders, minutes etc.
   that are associated with an open case
   Cases on microfilm/microfiche
   FOIA files

Practitioner Information
   All case files still in process

Other
   Board meeting and Advisory Board meeting minutes
VITAL RECORDS
BOARD OF PHARMACY

Category - 1600 licensee files (pharmacist & technicians)
600 intern applicants
100 foreign interns
Location: 2 filing cabinets in Board office
Volume: 2 five-drawer lateral filing cabinets
Copies Available-No, although most information is available has been transcribed into L2K, except applicant pictures and original affidavits
Replacement time frame—would probably not be able to replace for those files that are still active and have not been sent for microfilming.

Category - 4,000 plus Facility Folders (pharmacy, wholesale distributors, medical equipment suppliers, controlled substance registrations, physician selling, etc)
Format- primarily paper with some recent inspection-related information in database
Location- 4 1/2 filing cabinets in Board office and 1/2 filing cabinet in Caroline Juran's office
Volume- 5 filing cabinets
Copies available- No. However, some inspectors may have copies of recent inspections and applications, but no guarantee. Many of the scanned images of applications and DEA 106 forms received since January 1, 2007 may be accessed in Caroline Juran's and Sammy Johnson's saved emails. Most letters sent from the Board within the past few years would be available on the G-drive, however, responses and correspondence from the facility would not be available anywhere. Not sure if older correspondence sent from the Board would be accessible.
Replacement time frame- May never be able to replace all information, especially with facilities that have been licensed for many years.

Category: Disciplinary Files which also include reinstatement files and compliance files; open and closed files.
Format: Paper and database
Location: in and on filing cabinets and 4 staff persons desks
Volume: approximately four filing cabinets
Copies kept: Yes, for open cases that are sent to APD, they have copies of the case only; not necessarily all of the correspondence. If not sent to APD, the only other copy is in the enforcement division which has the narrative portion on discs, but no evidence.
Replacement time frame: unknown, but expect months.

Category: Disciplinary Public Documents:
Notices, Orders and Consent Orders - Copies of the notices and the originals of all the others are maintained in the disciplinary section.
Confidential Consent Agreements - CCAs are not public and must be kept separately and are located in the disciplinary section.
Volume: Filing cabinets for public information = 1.5
Copies: CCAs are also in the disciplinary file that is eventually microfilmed.
All others: on the website as well as copies in the disciplinary files.
Replacement time frame:
If a disciplinary file is microfilmed and a copy maintained off-site, it should take two months or so to copy all CCAs. The others can be printed from the website.
# Vital Records

## Board of Counseling

<table>
<thead>
<tr>
<th>Record Name</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approx. Volume</th>
<th>Copies kept?</th>
<th>Replacement time frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant files</td>
<td>Paper</td>
<td>File cabinets</td>
<td></td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>Active discipline files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>½ file drawer</td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>FOIA files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>½ file drawer</td>
<td>Yes: Electronically on DHP’s “License Look-up”</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Closed discipline files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>1 4-drawer file cabinet</td>
<td>No</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Minutes</td>
<td>Paper</td>
<td>Stacked in Diana’s Pollick’s cubicle</td>
<td>2 file drawers worth</td>
<td>Yes: Electronically on Town hall (but only for the last 5 years)</td>
<td>Within 30 days</td>
</tr>
</tbody>
</table>

## Board of Psychology

<table>
<thead>
<tr>
<th>Record Name</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approx. Volume</th>
<th>Copies kept?</th>
<th>Replacement time frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>4 file drawers</td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>Active discipline files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>1 file drawer</td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>FOIA files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>1 file drawer</td>
<td>Yes: Electronically on DHP’s “License Look-up”</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Closed discipline files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>4 file drawers</td>
<td>No</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Minutes</td>
<td>Paper</td>
<td>Notebooks</td>
<td>2 file drawers</td>
<td>Yes: Electronically on Town hall (but only for the last 5 years)</td>
<td>Within 30 days</td>
</tr>
</tbody>
</table>

## Board of Social Work

<table>
<thead>
<tr>
<th>Record Name</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approx. Volume</th>
<th>Copies kept?</th>
<th>Replacement time frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>7 drawers</td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>Active discipline files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>3 drawers</td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>FOIA files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>1 drawer</td>
<td>Yes: Electronically on DHP’s “License Look-up”</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Closed discipline files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>4 drawers</td>
<td>No</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Minutes</td>
<td>Paper</td>
<td>Notebooks</td>
<td>1 file drawer and 5 notebooks kept in Arnice Covington’s cubicle</td>
<td>Yes: Electronically on Town hall (but only for the last 5 years)</td>
<td>Within 30 days</td>
</tr>
</tbody>
</table>

Regarding restoring records that are destroyed: for those records listed above for which copies are not kept, they would not be able to be restored. The only solution is to have the records scanned and stored electronically, which would take many man hours.
# VITAL RECORDS
## BOARDS OF
### Long-Term Care Administrators
### Physical Therapy
### Audiology & Speech Pathology

<table>
<thead>
<tr>
<th>Record Name /Category</th>
<th>Record Format</th>
<th>Record Location</th>
<th>Approximate volume</th>
<th>Routinely kept or routinely available? (Y/N) If yes where?</th>
<th>Replacement time frame (immediate, w/in 14 days w/in 30 days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant files</td>
<td>paper</td>
<td>file cabinet</td>
<td>300</td>
<td>Yes, in file cabinet</td>
<td>immediate</td>
</tr>
<tr>
<td>Alpha files</td>
<td>paper</td>
<td>File cabinet</td>
<td>400</td>
<td>Yes, in file cabinet</td>
<td>immediate</td>
</tr>
<tr>
<td>Investigation files</td>
<td>paper</td>
<td>Cubicle and file cabinet</td>
<td>Fluctuates 30 to 50</td>
<td>Yes, in cubicle and file cabinet</td>
<td>immediate</td>
</tr>
<tr>
<td>Closed files</td>
<td>Paper</td>
<td>File cabinet</td>
<td>Fluctuates 50</td>
<td>Yes, file cabinet</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td>FOIA files</td>
<td>Paper</td>
<td>File cabinet</td>
<td>Numerous files for 3 Bds</td>
<td>Yes, in file cabinet</td>
<td>w/in 14 days</td>
</tr>
<tr>
<td>Credential files</td>
<td>paper</td>
<td>Cubicle</td>
<td>Fluctuates 10-15</td>
<td>Yes, cubicle</td>
<td>immediate</td>
</tr>
<tr>
<td>MIF files</td>
<td>Paper</td>
<td>Boxes and file cabinet</td>
<td>10 boxes 2 file drawers</td>
<td>Yes</td>
<td>w/in 30 days</td>
</tr>
<tr>
<td>Correspondence</td>
<td>electronic</td>
<td>Outlook</td>
<td>500 e-mails</td>
<td>Yes, e-mail sent folder</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td>Case Tracker</td>
<td>Excel</td>
<td>Computer</td>
<td>48 KB (currently expected to expand)</td>
<td>Yes, G: drive /discipline</td>
<td>immediate</td>
</tr>
<tr>
<td>Disciplinary Letters</td>
<td>Word</td>
<td>Computer</td>
<td>30+ letters</td>
<td>Yes, G: drive LTCA/discipline; PT/discipline; and ALSP/discipline Also in My Documents/discipline</td>
<td>immediate</td>
</tr>
<tr>
<td>Contacts</td>
<td>Outlook</td>
<td>Computer</td>
<td>Currently 15 will expand</td>
<td>Yes</td>
<td>w/n 14 days</td>
</tr>
<tr>
<td>Orders</td>
<td>paper</td>
<td>3-ring binder</td>
<td>5 binders file cabinet</td>
<td>Yes</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td>CCA</td>
<td>paper</td>
<td>3-ring binder</td>
<td>3 binders cube</td>
<td>Yes</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td>Contacts</td>
<td>Paper</td>
<td>Cube wall</td>
<td>4 sheets</td>
<td>Yes</td>
<td>w/n 14 days</td>
</tr>
<tr>
<td>PT Scores</td>
<td>Paper</td>
<td>3 ring binder file cabinet</td>
<td>10 binders File cabinet</td>
<td>Yes</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td>Previous regulations</td>
<td>Paper</td>
<td>3-ring binder file cabinet</td>
<td>2 binders file cabinet</td>
<td>Yes</td>
<td>w/n 30 days</td>
</tr>
<tr>
<td>Record Name</td>
<td>Format</td>
<td>Location</td>
<td>Volume</td>
<td>Copies Routinely Kept</td>
<td>Replacement Time Frame</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>------------</td>
<td>-------------------------------</td>
<td>---------------------</td>
<td>-----------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Licensure Applications</td>
<td>Paper</td>
<td>File cabinets</td>
<td>8</td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>Licensure Data Base</td>
<td>Electronic</td>
<td>L2K database</td>
<td></td>
<td>No</td>
<td>Immediate</td>
</tr>
<tr>
<td>Nursing Education Program Files</td>
<td>Paper</td>
<td>File cabinets</td>
<td>4</td>
<td>No</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Disciplinary Cases/Investigation/</td>
<td>Paper</td>
<td>File cabinets</td>
<td>6</td>
<td>No</td>
<td>Within 30 days</td>
</tr>
<tr>
<td>Open Cases</td>
<td></td>
<td>In individual offices</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disciplinary Orders</td>
<td>Electronic</td>
<td>DHP license lookup</td>
<td>Unknown</td>
<td>No</td>
<td>14 days</td>
</tr>
<tr>
<td>Disciplinary Cases/Closed Cases</td>
<td>Paper</td>
<td>Boxes in individual offices</td>
<td>80 – 100</td>
<td>No</td>
<td>30 days</td>
</tr>
<tr>
<td>Old Manual Licensure Records</td>
<td>Paper</td>
<td>File cabinets</td>
<td>2</td>
<td>No</td>
<td>14 days</td>
</tr>
</tbody>
</table>
APPENDIX I

DHP RISK ASSESSMENT
Using the model developed by COOP Consulting, a risk assessment was conducted of the threats and the risks judged most likely to affect the programs and operations of the Department of Health Professions. The vulnerability to such threats provides for the identification of their potential for occurrence and severity of impact. The primary objective of this analysis was to identify the most critical risks that would likely cause an interruption of the agency’s operations for a period greater than 3 business days. Those risks which scored the highest using the COOP Consulting matrix serve as the basis for the agency’s COOP plan.

Threats have been generally grouped into three categories:

- Natural
- Human
- Technical

Each threat was then qualified by:

- Probability factor (low = 1, medium = 2, high = 3).
- Threat factor (sum of 1 plus Speed of Onset [where slow = 0, fast = 1] plus Forewarning, [where forewarning = 0, no forewarning = 1] plus Duration [where short = 0, long = 1]).
- Impact (low = 1, medium = 2, high = 3).

Weighted results are calculated by this formula:

\[
\text{Probability} \times \text{Threat Factor} \times \text{Impact} = \text{Relative Weight}
\]

The accompanying matrix presents findings for a variety of threats to the agency’s programs and services.
## DEPARTMENT OF HEALTH PROFESSIONS RISK ASSESSMENT

<table>
<thead>
<tr>
<th>Threats with Realistic Likelihood of Occurrence</th>
<th>Threat Factor Probability Factor</th>
<th>Threat Factor</th>
<th>Impact</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Speed of Onset</td>
<td>Forewarning</td>
<td>Duration</td>
<td>Threat Sum</td>
</tr>
<tr>
<td>Fire: Internal--Major/Catastrophic</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Medical Emergency</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Power Outage--Internal</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Thunder/Electrical Storm</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>HVAC Failure</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Hurricane</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Arson</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Bombing</td>
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<td>Riot/Civil Disorder</td>
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**Threats with Likelihood of Occurrence Close to Nil**

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<thead>
<tr>
<th>Threat</th>
<th>Probability Factor</th>
<th>Threat Factor</th>
<th>Speed of Onset</th>
<th>Forewarning</th>
<th>Duration</th>
<th>Impact</th>
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<td>Labor Dispute/Strike</td>
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<tr>
<td>Volcanic Activity</td>
<td>medium</td>
<td></td>
<td>fast</td>
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<tr>
<td>Aircraft Crash</td>
<td>high</td>
<td></td>
<td>no forewarning</td>
<td></td>
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<tr>
<td>Radioactive Contamination</td>
<td></td>
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<tr>
<td>Earthquake (Magnitude 5 or more)</td>
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<tr>
<td>Upstream Dam/Reservoir Failure</td>
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<tr>
<td>Seasonal/Local Flooding</td>
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<tr>
<td>Major Landslide/Mudslide</td>
<td></td>
<td></td>
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<tr>
<td>Subsidence Faulting</td>
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<td></td>
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<tr>
<td>Tidal Flooding</td>
<td></td>
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<tr>
<td>Tsunami</td>
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<tr>
<td>Sandstorm</td>
<td></td>
<td></td>
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<tr>
<td>Epidemic</td>
<td></td>
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<tr>
<td>Media Failure</td>
<td></td>
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</tbody>
</table>

Key: Probability Factor
- low: 1
- medium: 2
- high: 3

Threat Factor: sum of 1 plus

- Speed of Onset: slow 0, fast 1
- Forewarning: forewarning 0, no forewarning 1
- Duration: short 0, long 1
- Impact: low 1, medium 2, high 3
THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX J

ORDERS OF SUCCESSION
## DEPARTMENT OF HEALTH PROFESSIONS COOP
### KEY PERSONNEL ORDERS OF SUCCESSION
**03.25.09**

### APD Orders of Succession
**03.25.09**

<table>
<thead>
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<th>Key Position</th>
<th>Successor 1</th>
<th>Successor 2</th>
<th>Successor 3</th>
<th>Successor 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>APD Director</td>
<td>Lorraine B. McGehee</td>
<td>Anne G. Joseph</td>
<td></td>
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</tr>
<tr>
<td>James L. Banning</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APD Office Manager</td>
<td>Genette Jones</td>
<td>Asia Williams</td>
<td></td>
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<tr>
<td>Susan C. Brooks</td>
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### ASLP/LTC/PT/FUNERAL Orders of Succession
**03.30.09**

<table>
<thead>
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<th>Key Position</th>
<th>Successor 1</th>
<th>Successor 2</th>
<th>Successor 3</th>
<th>Successor 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director – Lisa Hahn</td>
<td>Annie Artis</td>
<td>Rai Minor</td>
<td>Lisa Hahn</td>
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<tr>
<td>Licensure Operations Manager - Annie Artis</td>
<td>Rai Minor</td>
<td>Lisa Hahn</td>
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</tr>
<tr>
<td>Discipline Operations Manager – Rai Minor</td>
<td>Annie Artis</td>
<td>Lisa Hahn</td>
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<tr>
<td>Compliance Case Manager – Kathy Truesdale</td>
<td>Rai Minor</td>
<td>Lisa Hahn</td>
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</tbody>
</table>

### BOARD OF COUNSELING Orders of Succession
**03.25.09**

<table>
<thead>
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<th>Key Position</th>
<th>Successor 1</th>
<th>Successor 2</th>
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<th>Successor 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director</td>
<td>Evelyn B. Brown</td>
<td>Patricia L. Larimer</td>
<td>Diana Pollick</td>
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</tr>
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### Data Orders of Succession 03.25.09

<table>
<thead>
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<th>Successor 3</th>
<th>Successor 4</th>
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</thead>
<tbody>
<tr>
<td>Pat Paquette, Technology</td>
<td>Mark Monson</td>
<td>Dick Nicula</td>
<td>Mike Gallini</td>
<td>Stephen White</td>
</tr>
<tr>
<td>Director</td>
<td></td>
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</tr>
<tr>
<td>Dick Nicula, Database</td>
<td>Pat Paquette</td>
<td>Stephen White</td>
<td>Mike Gallini</td>
<td>Kening Wang</td>
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<tr>
<td>Administrator</td>
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<tr>
<td>Data Operations</td>
<td>Mae La Donna Duncan</td>
<td>Sarah Cecchi</td>
<td>Biljana Culibrk</td>
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### Board of Dentistry Orders of Succession 03.25.09

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</thead>
<tbody>
<tr>
<td>Sandra Reen</td>
<td>Alan Heaberlin</td>
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<tr>
<td>Executive director</td>
<td>Deputy Executive Director</td>
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### Enforcement Orders of Succession 03.25.09

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<tbody>
<tr>
<td>Director of Enforcement-Faye</td>
<td>Sammy Johnson</td>
<td>Pam Twombly and Jennifer Baker- Regional</td>
<td>Addison Hurst and Pat Stigall- Regional</td>
<td>Wanda Jackson-</td>
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<tr>
<td>Lemon</td>
<td>Deputy of Enforcement</td>
<td>Managers</td>
<td>Managers</td>
<td>Lead Intake Analyst</td>
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<td>Key Position</td>
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<tr>
<td>Anita Watkins, Accounting Director</td>
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<td>Venita Gee, Disbursements Manager</td>
<td>Deborah Pearson, Senior Accountant</td>
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<tr>
<td>Charles Giles, Budget Manager</td>
<td>Mark Monson, Deputy Director for Administration</td>
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<tr>
<td>Renee Watson, Agency Contracts Manager</td>
<td>Peter Grosbach, Purchasing Officer</td>
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<tr>
<td>Venita Gee, Disbursements Manager</td>
<td>Deborah Pearson, Senior Accountant</td>
<td>Stanley Jackson, Fiscal Specialist</td>
<td>Judy Hayes, Fiscal Specialist</td>
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<tr>
<td>Ellen Kallenberger, Revenue Manager</td>
<td>Anita Resnick, Fiscal Specialist</td>
<td>Stanley Jackson, Fiscal Specialist</td>
<td>Wesley Gregory, Fiscal Specialist</td>
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<tr>
<td>Peter Grosbach, Purchasing Officer</td>
<td>Renee Watson, Contracts Manager</td>
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</tr>
<tr>
<td>Deborah Pearson, Senior Accountant</td>
<td>Venita Gee, Disbursements Manager</td>
<td>Ellen Kallenberger, Revenue Manager</td>
<td>Stanley Jackson, Fiscal Specialist</td>
<td>Anita Resnick, Fiscal Specialist</td>
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<tr>
<td>Stanley Jackson, Fiscal Specialist</td>
<td>Anita Resnick, Fiscal Specialist</td>
<td>Judy Hayes, Fiscal Specialist</td>
<td>Deborah Pearson, Senior Accountant</td>
<td>Wesley Gregory, Fiscal Specialist</td>
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<tr>
<td>Anita Resnick, Fiscal Specialist</td>
<td>Stanley Jackson, Fiscal Specialist</td>
<td>Wesley Gregory, Fiscal Specialist</td>
<td>Judy Hayes, Fiscal Specialist</td>
<td>Deborah Pearson, Senior Accountant</td>
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# DEPARTMENT OF HEALTH PROFESSIONS COOP
## KEY PERSONNEL ORDERS OF SUCCESSION
### 03.25.09

### HUMAN RESOURCES
**Orders of Succession**  
**03.25.09**

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<tr>
<td>Debbie Barnett</td>
<td>Barbara New</td>
<td>Sharon Williams</td>
<td>Teresa Campbell</td>
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### BOARD OF MEDICINE
**Orders of Succession**  
**03.25.09**

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</thead>
<tbody>
<tr>
<td>Executive Director Harp</td>
<td>Deputy for Discipline Deschenes</td>
<td>Deputy for Licensure Powers</td>
<td>Medical Review Coordinator Matusiak</td>
<td>Discipline Case Manager Dixson</td>
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### BOARD OF NURSING
**Orders of Succession**  
**03.25.09**

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</thead>
<tbody>
<tr>
<td>Jay Douglas, Executive Director</td>
<td>Paula Saxby, Deputy</td>
<td>Jodi Power, Deputy</td>
<td>Brenda Krohn, Deputy</td>
<td>Gloria Mitchell, Deputy</td>
</tr>
<tr>
<td>Charlotte Creed, Office Manager</td>
<td>Amy Davis, Administrative Assistant</td>
<td>Donna Lee, Administrative Assistant</td>
<td>Laura Mueller, Administrative Assistant</td>
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### BOARD OF PHARMACY
**Orders of Succession**  
**03.25.09**

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<tbody>
<tr>
<td>Scotti Russell, Executive Director, Board of Pharmacy</td>
<td>Caroline Juran</td>
<td>Cathy Reiniers-Day</td>
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### BOARD OF PSYCHOLOGY
#### Orders of Succession

03.25.09

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<tbody>
<tr>
<td>Executive Director</td>
<td>Evelyn B. Brown</td>
<td>Patricia L. Larimer</td>
<td>Diana Pollick</td>
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### BOARD OF SOCIAL WORK
#### Orders of Succession

03.25.09

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<tr>
<td>Executive Director</td>
<td>Evelyn B. Brown</td>
<td>Patricia L. Larimer</td>
<td>Catherine Chappell</td>
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THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX K

DHP COOP PANDEMIC INFLUENZA ANNEX
CONTINUITY OF OPERATIONS PLAN

PANDEMIC INFLUENZA ANNEX

June 2, 2008
<table>
<thead>
<tr>
<th>Section</th>
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<tbody>
<tr>
<td>General Assumptions</td>
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<tr>
<td>Department-Specific Assumptions</td>
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<tr>
<td>Telecommuting</td>
<td>5</td>
</tr>
<tr>
<td>Alternate Work Schedules</td>
<td>6</td>
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<tr>
<td>Cross-training</td>
<td>8</td>
</tr>
<tr>
<td>Infection Control and Workforce Protection</td>
<td>8</td>
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<tr>
<td>Policies</td>
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INTRODUCTION

The purpose of this annex is to build on the Department of Health Professions’ (DHP) existing Continuity of Operations (COOP) plan so that the agency is prepared to respond to and mitigate the effects of a workforce reduction due to pandemic influenza outbreak. The focus of COOP planning for pandemic influenza is on effective and efficient human capital management to provide for the continued performance of essential functions and services. This annex might have applications beyond that of pandemic influenza for other highly communicable diseases of public health consequence, or any other event that results in workforce reductions for extended periods of time.

The underpinning of DHP’s programs and work efforts is License 2000 (L2K), a proprietary licensing computer system licensed by DHP from System Automation. Without access to L2K, a significant majority of agency staff would not be able to perform their assigned duties. As of this writing, L2K does not have web-based functionality. Therefore, in order to enable staff whose duties rely on L2K access to telework in the event of a pandemic flu event, all affected employees would have to be provided with agency-owned equipment. (Current security constraints preclude the use of employee-owned equipment to access L2K.) The cost of providing every affected employee with the necessary equipment to enable them to telework during a pandemic flu event is prohibitive. Accordingly, pandemic flu mitigation planning has to be based on the assumptions that teleworking will be available only to a small contingent of employees, the building will be open for business as usual, and all staff whose duties rely on access to L2K will have to come into the office.

However, the agency has initiated an effort with System Automation to upgrade its licensing system to a web-based version of L2K known as My License Office (MLO). It is expected that the installation of the upgrade to MLO will be complete in January, 2009. Testing and implementation will take some time after that. Once MLO is fully operational and web-based accessibility is realized, employees will be able to telework using their own equipment. When that occurs, this plan will be updated to reflect the new operational parameters.

ASSUMPTIONS

General Assumptions

- DHP has an up-to-date, comprehensive COOP plan that has been maintained and exercised on a regular basis.
- Susceptibility to pandemic influenza will be universal, impacting the Commonwealth of
Virginia employees at the same rate as the general population.

- Because of the uncertain nature of pandemic influenza, all employees and their families may be equally susceptible to illness. Therefore, while planning is critical to mitigate the effects of a pandemic outbreak, it is virtually impossible to predict the extent to which individual organizational units and essential functions may be affected.

- Pre-event planning is critical to ensure a prompt and effective response to a pandemic influenza, as its spread will be rapid, reoccurring (in multiple waves), and difficult to stop once it begins.

- At the height of a given pandemic wave, workforce absenteeism might rise as high as 40% and last several weeks as the wave passes. Some degree of permanent workforce loss will occur due to mortalities.

- At the state level, the Commonwealth’s Emergency Operations Plan, which is in compliance with the National Response Plan and the National Incident Management System (NIMS), will provide the framework to coordinate response and recovery operations and associated support to address the consequences of a pandemic disease outbreak.

- Additional resources that might be accessed through mutual aid agreements, contracts, and the emergency management system including state and federal resources will not be available for a widespread event.

- Telecommunications connectivity might be limited.

- Individuals who recover from a pandemic virus, with or without treatment, will likely have a significant degree of immunity and may be able to serve in key positions for response.

- To control the spread of disease, measures such as isolation, quarantine, and social distancing might be implemented which will impact the Commonwealth and its agencies’ ability to conduct business activities.

- Schools, child care and adult day care centers might be closed.

**Department-Specific Assumptions**

- Agency staff will be encouraged to telework to the extent possible. However, teleworking is not expected to be an available option for those staff who must rely on access to L2K or the state’s mainframe computers (e.g., CARS and PMIS).

- Computer equipment cannot be provided to all employees who may want to work from home. Some level of reliance on personal, non-state computer equipment will have to be accommodated.
Due process conferences and hearings will have to be continued. Participation and attendance will be limited to those persons absolutely essential to the matter at hand. Remote access and teleconferencing will be maximized to the extent possible. Boards will utilize agency subordinates to the greatest extent possible for informal conferences.

Nursing students and other visitors will be strongly discouraged from attending public meetings (e.g., due process hearings and conferences and board meetings) during the duration of the pandemic outbreak.

Walk-up renewals will be carefully managed. Partnering with DPOR’s customer service center to accommodate walk-up renewals will be implemented to the extent possible.

The computer infrastructure will remain intact and VITA and NG Partnership will ensure that networks, agency computer systems and applications, and telecom systems remain fully operational.

Until document management is fully implemented and operational, physical documents will have to be obtained and exchanged by teleworking employees.

Primary finance, payroll, procurement, and records management activities are not expected to be performed remotely. Employees in these areas will most likely have to be physically present in the building to perform their duties. Certain human resources activities will be similarly affected.

Employee assignments and duties at all levels will be dynamic and may have to change from time to time to meet agency business requirements and to keep priority work flowing. Employees may be assigned to other agencies as required by the Governor. Furloughs may be required.

Some level of safety/hygiene provisions will be made for staff, including gloves, masks, and hand sanitizers/disinfectants.

Priorities of disciplinary cases may shift during the course of the pandemic outbreak depending on absenteeism and staff and board member availability.

Due to workforce absenteeism during the various waves of the pandemic outbreak, the priority of agency functions may have to change over time as key employees become unavailable to work. Agency support functions (finance, procurement, IT, HR, etc.) may be equally affected.

Little to no assistance will be provided by state government generally or other state agencies.

Vendors and the private sector will be equally affected by the outbreak. Thus, competition for limited resources will be high.

ALTERNATE WORK ARRANGEMENTS
To support social distancing practices and mitigate the spread of disease, certain employees may be required to perform duties at home or off-site. Telework, telecommuting, alternate work schedules, and consolidation of service locations are strategies for continuing essential services in the event of pandemic influenza.

**Telecommuting**

The Department of Health Professions follows policies and procedures as defined by the Department of Human Resource Management (DHRM) and Virginia Information Technology Agency (VITA).

Listed below are the functions that might be performed off-site and their associated equipment and remote access requirements.

<table>
<thead>
<tr>
<th>Function that might be Performed at Home or Off-site</th>
<th>Equipment / Software to Support Function</th>
<th>Remote Access to Network System Required (yes/no)</th>
<th>Use Home Computer (yes/no)</th>
<th>Access Already Granted (yes/no)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Database management</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Website maintenance</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Enforcement – complaints/ initial intake</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Budgeting and cost allocations</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>HR screening</td>
<td>PC &amp; Printer</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>HR policy development</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Reading cases, Notices and Orders, and issuing same</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Credentials Review</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Preparation for Board Meetings</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Compliance management work</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Regulatory/statutory tracking</td>
<td>PC &amp; Printer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Alternate Work Schedules

Alternate work schedules for staff will be used to the maximum extent feasible. Schedules and individuals will vary depending on event circumstances and can not be determined too far in advance of the event. There are far too many changes in individuals’ lives to attempt to establish a set list without constant updates. Plus, the availability of individuals won’t be known until a real threat is determined. The agency has, however, recently revised its alternative work schedule policy. The changes to the alternative work schedule policy, when partnered with the agency’s newly developed telework policy, will greatly expand the agency’s flexibility in dealing with events such as a pandemic flu outbreak. The updated policy is being implemented in June, 2008.

VENDORS

The Department of Health Professions has several essential services provided by vendors, other departments, and contractors. The Department of Health Professions has taken steps to ensure that these providers of services have their own COOP plan. In addition, DHP has identified other potential sources for services in the event the primary vendor or contractor cannot provide essential services.

<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Vendor or Department</th>
<th>Service Provided</th>
<th>Contract Manager</th>
<th>Alternate Vendors or Departments</th>
<th>Contingency Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copy Center/internal mail/copier maintenance &amp; repair</td>
<td>Virginia Business Systems</td>
<td>Copy Center/internal mail/copier maintenance &amp; repair</td>
<td>Procurement Manager</td>
<td></td>
<td>None</td>
</tr>
<tr>
<td>Tri-fold stock paper – renewal notices and licenses</td>
<td>Moore Wallace</td>
<td>Tri-fold stock paper – renewal notices and licenses</td>
<td>Data</td>
<td>Agency maintains a 90-day supply on hand. Vendor maintains a 60-day supply.</td>
<td></td>
</tr>
<tr>
<td>Service Area</td>
<td>Affected Count</td>
<td>Description</td>
<td>Responsible Party</td>
<td>Resource Count</td>
<td>Description</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------------</td>
<td>----------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Case review and Expert Witness</td>
<td>Multiple</td>
<td>Provide expert assistance in the probable cause review of cases and in testimony at formal hearings</td>
<td>Multiple, at board level</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Examination and Testing Services</td>
<td>Multiple</td>
<td>Provide profession-specific examination services to candidates for licensure</td>
<td>Procurement Manager</td>
<td>None</td>
<td>It is not expected that there will be a significant disruption in examination and testing services. There are multiple testing sites across the state, and several tests can be taken in multiple states. Ample opportunities should exist throughout the pandemic event for applicants to satisfy licensure examination requirements.</td>
</tr>
<tr>
<td>Credentials Review</td>
<td>Multiple</td>
<td>Provide expert review of credentials of candidates for licensure</td>
<td>Multiple at board level</td>
<td>Individuals within profession who are available and willing to assist</td>
<td>Seek other licensed individuals</td>
</tr>
<tr>
<td>Network and infrastructure support</td>
<td>VITA and Northrup Grumman</td>
<td>IT network and infrastructure support</td>
<td>N/A</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>
### Licensing system

<table>
<thead>
<tr>
<th>System Automation</th>
<th>Technical support to agency for licensing software</th>
<th>Agency IT Director</th>
<th>None</th>
</tr>
</thead>
</table>

Day-to-day operation of License 2000 (L2K) does not rely on the availability of SA. SA’s availability is of primary importance during upgrades and the addition of new services and modules. It is unlikely that there will be a critical need to upgrade an existing or add a new service during a pandemic event.

### HUMAN CAPITAL MANAGEMENT

#### Cross-training

In order to maximize human resources, DHP will endeavor to provide staff development and cross-training to agency employees to minimize the impact of significant reductions in workforce for extended periods of time. Each organizational unit is responsible for ensuring that staff is sufficiently cross-trained to maintain the unit’s essential functions.

#### Infection Control and Workforce Protection

In the event of a pandemic flu outbreak, DHP will implement the following strategies to support social distancing:

- Face-to-face meetings will be conducted only when absolutely necessary. Meetings, will be conducted via phone, the Internet, or some combination of the two when possible. Board meetings, informal conferences, and formal hearings will continue to be held as needed.

- Public meetings will continue to be held in compliance with the Freedom of Information Act. However, nursing students and other visitors will be strongly discouraged from attending public meetings during the course of the pandemic flu event.
■ Employees will be instructed on cough etiquette and proper hand washing techniques.
■ Alternate work schedules will be used to the fullest extent possible.
■ Telecommuting and teleworking will be expanded to the degree possible.
■ Masks and hand sanitizers are on hand and will be provided to employees as needed.

Policies

It is expected that ill employees will stay home and should refer to the Public Health Emergency Leave Policy No. 4.52 effective June 10, 2007.

HR Policies

Existing human resource management policies and regulations that apply to all executive branch agencies will be made available to all staff and will be applied to manage employees in response to pandemic illness. DHRM will administer the Public Health Emergency Leave and all related human resource policies, to include application, interpretation, granting expectations based on agency business needs, and advising the Attorney General’s Office and Governor of the need for temporary waivers to existing policies or the issuance, amendment, or suspension of the provisions of the Virginia Personnel Act as required by Executive Order 4 (2006). Agency HR staff are currently reviewing Agency Directives and will ensure they comply with standards set forth in this Annex.

- Key DHRM Policies: (See web link: http://www.dhrm.state.va.us/hrpolicy/policy.html)
  4.52 Public Health Emergency Leave (see Attachment 1)
  1.25 Hours of Work
  1.30 Layoff
  1.35 Emergency Closings
  1.57 Severance Benefits
  1.60 Standards of Conduct
  1.61 Telecommuting
  1.65 Temporary Work Force Reduction
  1.70 Terminations/Separation from State Service
  1.90 Workforce Planning
  2.05 Equal Employment Opportunity
  2.10 Hiring
  2.20 Types of Employment
3.05 Compensation
3.10 Compensatory Leave
3.15 Overtime Leave
4.05 Administrative Leave
4.10 Annual Leave
4.17 Emergency/Disaster Leave
4.20 Family Medical Leave
4.25 Holidays
4.35 Leave Sharing
4.40 School Assistance and Volunteer Service Leave
4.45 Leave Without Pay (Conditional/Unconditional)
4.50 Military Leave
4.55 Sick Leave
4.57 Virginia Sickness and Disability Program
4.60 Worker’s Compensation
5.05 Employee Training and Development

Key DHP Directives: (H:\DIRECTIVES)

General Directives

1.1 Mission Statement
1.2 Communication with Public Officials
1.3 Lines of Authority, Responsibility & Communication
1.4 Agency Staff Titles
1.5 Business Hours/Flex Time
1.6 Disclosure of Information
1.7 Disclosure of Information to Health Practitioners Intervention Program
1.8 Conduct of Surveys
1.9 Internet Privacy Policy Statement
1.10 Sponsored Programs
1.11 Mainframe & Web System Security Procedures
1.12 Extension of Time for Active Duty Servicemen
1.13 Activity Reports
1.14 Information Systems Technology Usage
1.15 Incident Reporting
1.16 Retention of Applications & Applicant Documentation
1.17 Publication of Notices & Orders on the Department websites
1.18 Web Site Policy Statement
1.19 Remote Site Internet & Equipment Usage
1.20 Access to High-Speed Internet by Remote Site Employees

Rulemaking and Legislation Directives

2.1 Promulgation of Regulations
2.2 Publication of Regulations
2.3 Legislative Coordinator

Case Decision Directives

3.1 Orders
3.2 Petition for Reinstatement
3.3 Subpoenas
3.4 Complainant Notification
3.5 Temporary Licenses Pursuant to Executive Order 97

Enforcement Directives

4.1 Receipt & Investigation of Allegation of Misconduct
4.2 Unlicensed Activity
4.3 Reports to the National Practitioner Data Bank
4.4 Requesting Information from the National Practitioner Data Bank
4.5 Tampering Threat Procedures
4.6 Agency Standards for Case Resolution
4.7 Compliance with Licensure Laws

Finance Directives

5.1 Procurement of Nonprofessional Service
5.2 Procurement of Goods
5.3 Sole Source Procurement for Examination Services
5.4 Compensation for Members of Appointed Bodies
5.5 Principles/Establishment of Fees
5.6 Travel Reimbursement
5.7 Use of State Vehicles
5.8 Equal Opportunity in Agency Procurement
5.9 In-house Revenue Receipting Procedures
5.10 Use of Grant Funds Derived from *United States v. Dinkar N. Patel*
5.11 Distribution of Controlled Substance Registration (CSR) Funds

**Human Resources Directives**

6.1 Recruiting & Filling Vacant Positions
6.2 Outside Employment
6.3 Wage Positions
6.4 Leave without Pay
6.5 Sick Leave Usage
6.6 Classified Non-Exempt Employees & Wage Employees, Record-Keeping & Overtime
6.7 Classified Exempt Employees
6.8 Breaks for Non-Exempt Employees
6.9 Tuition Reimbursement
6.10 Exit Policy
6.11 Reimbursement of Employees for Professional Fees
6.12 Leave Share Guidelines

**Adjunct Emergency Workforce Strategy**

Sufficient staffing will be crucial to the emergency management process. Innovative and expeditious means may be employed to achieve this objective, including the authority of the executive branch agencies to re-deploy staff to other work locations. At the Governor’s discretion, employees may be redeployed across agencies by direct order or through the implementation of the Adjunct Emergency Workforce. This supplemental staffing strategy is designed to reinforce services to citizens by closing critical gaps in staffing at emergency response team agencies during periods of extended emergencies. DHP’s Adjunct Emergency Workforce will be identified.

The Adjunct Emergency Workforce Strategy will be communicated to staff. Department-specific criteria will be established for staff to help them determine if they can participate in the adjunct emergency workforce and procedures will be established within the department for tracking personnel who participate in the Adjunct Emergency Workforce (i.e., approval forms, sign-up sheet).

In addition, the Agency Director has the authority to re-deploy staff as necessary to meet the business needs of the agency.

**Absenteeism Tracking**

The impact of absenteeism will be monitored on a statewide basis. DHRM will establish a system for collecting and organizing absenteeism data from all executive branch agencies and reporting results to the State Emergency Coordinator, State Health Commissioner and the Governor’s Office. The data will categorize the impact of absenteeism rates (moderate severe,
critical) by location to expedite the decision process for state executives and public health officials.

Workers’ Compensation

The State Employees Workers’ Compensation Services and its contractor will receive and handle claims arising out of a pandemic, including issues related to teleworking during the event. WCS has developed a disaster response plan to address conditions that may occur during a pandemic or other disaster. Electronic claim documentation is backed up to an alternate location on a nightly basis. The retrieval of claims data and re-start of issuance of workers’ compensation benefit payments within three days, well within statutory requirements will continue. Continuity of medical bill payments is ensured by the ability to process payments remotely through multiple locations and approval is possible from any computer with internet access.

Pursuant to §65.2-401 of the Code of Virginia, “Ordinary disease of life” coverage for those state employees engaged in the direct delivery of health care, or in the course of employment as emergency rescue personnel and those volunteer emergency personnel referred to in §65.2-101.

Public Health Emergency Leave Policy

DHRM Policy 4.52, Public Health Emergency Leave, will be made available to and reviewed with staff. It is incorporated into this Annex as Attachment 1.

Communicating Work Assignments

DHP will establish procedures for communicating work assignments to personnel working off-site. Procedures for tracking work assignments, hours, and other related requirements associated with work performed off-site are incorporated in DHP’s Teleworking directive.

Staff Reassignments

The Agency Director has the authority to re-deploy staff within and throughout the agency as necessary to meet the business needs of the agency. All reassignments will be consistent with policy.

Reporting and Work Assignments Procedures

The agency will encourage telecommuting, alternate work schedules, and multi-shift approaches to promote social distancing. This strategy will be reinforced through frequent communication with agency employees. DHP maintains a valuable communications network using computer e-mail to disseminate information rapidly to subscriber users. Meetings, conferences, and teleconferences are the secondary means of communication and will occur on an as-needed basis.

Essential Employee Status

Upon activation of the Pandemic Influenza Annex, all employees of DHP are considered essential employees unless informed to the contrary by the HR Director. Designation as an essential employee may change over time as the business needs of the agency change and evolve
during the pandemic event. Each employee’s circumstances will be considered on an individual basis.

IMPLEMENTATION

This annex might be implemented in part or in whole, by the DHP Director, Office of the Secretary of Health and Human Resources, or the Office of the Governor. This plan might be implemented prior to a declaration of exceptional circumstances in order to meet agency business needs.

To mobilize the necessary resources to respond to a pandemic influenza, the Health Commissioner will make a declaration of a Communicable Disease of Public Health Threat in the anticipation of Exceptional Circumstances or in response to a specific incident.

The Agency Director, or in her absence, the Chief Deputy Director and the Deputy Director for Administration, will make the decision regarding implementation of this annex.

Employees will be notified by e-mail, phone, meetings, and/or mail, depending on their location.
Checklist

DHP will take the follow steps upon activation of this annex:

- Convene Department COOP Team
- Review Department COOP plans
- Review pandemic influenza planning assumptions
- Develop department specific planning assumptions for pandemic influenza
- Review essential functions
- Ensure essential functions are prioritized
- Identify cross-training needs of staff to ensure at least three and preferably five persons can perform essential functions
- Identify functions that can be performed off-site
- Establish procedures associated with staff working off-site
- Identify orders of succession five to six deep for key personnel
- Identify staff who can work alternate work schedules.
- Establish alternate work schedules (i.e., staggered hours to support social distancing).
- Identify vendor or department needs and contingency options for services should primary vendor or department not be able to provide service(s)
- Review human resource management guidance and polices
- Determine if additional human resource procedures are needed within the department
- Establish human resource procedures as needed
- Review infection control measures
- Establish procedures for mitigating the spread of disease by identifying infection control measures that the department will take
- Educate staff on how to control the spread of disease
- Ensure good communication strategy with staff
- Document the information identified above in the pandemic influenza annex
- Distribute and train staff on department’s plan and annex
THE DEPARTMENT OF HEALTH
PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX L

DHP TELEWORK DIRECTIVE
Department of Health Professions

DIRECTOR’S POLICY # 76-1.21

TELEWORKING

Effective Date: June 16, 2008

Approved By: [Signature]
Sandra Whitley Ryals, Director

PURPOSE

To permit designated employees to work at alternate work locations for part of their workweek.

POLICY

In accordance with Department of Human Resource Management (“DHRM”) Policy No. 1.61, Telecommuting¹, the Department of Health Professions (“DHP” or “Department”) shall designate employees to work at alternate work locations for part of their workweek in order to promote general work efficiencies and enhance employee retention while decreasing employee’s commuter costs and environmental pollution.

DEFINITIONS

- **Alternate Work Location**: An approved work site that includes employee’s home or a satellite office where official state business is performed.

- **Central Workplace**: The Department’s place of work where employees are normally located, i.e., The Perimeter Center, 9960 Mayland Drive, Suite 300, Richmond, VA 23233.

- **Employee**: A full-time classified, part-time classified or wage employee.

- **Teleworker**: An employee who works at his or her alternate work location for part of the workweek.

- **Remote Site Worker/Staff/Employee**: An employee who works at his or her home or other designated alternate work location all of the workweek and who does not have dedicated office space at the Central Workplace.

- **Teleworking**: A work arrangement where supervisors direct or permit employees to perform their usual job duties at their alternate work location, in accordance with their same performance expectations and other agency approved or agreed-upon terms. This arrangement is also referred to as “Telecommuting.”

Department of Health Professions

DIRECTOR’S POLICY # 76-1.21

TELEWORKING

Approved By: [Signature]

Effective Date: June 16, 2008

Sandra Whitley Ryals, Director

- **Employee Initiated Teleworking**: A work arrangement where employees request to telework and management approves when such arrangements support the agency’s business needs.

- **Business Mandated Teleworking**: A work arrangement where the business needs mandate teleworking for part of the work week either as a condition of employment or if there is a business necessity for doing so.

- **Teleworking Agreement**: The Department’s written agreement with the employee that details the terms and conditions of the employee’s work at his or her alternate work location.

- **Work Schedule**: The employee’s designated hours of work regardless of work location.

- **FLSA Workweek**: The FLSA workweek for non-exempt employees shall be 12:01 a.m. Saturday through 12:00 (midnight) Friday.

**ELIGIBILITY**

Employee Initiated Teleworking is not an entitlement, but rather a management option where such arrangements support the agency’s business needs. DHP’s management has sole discretion to designate positions for teleworking and supervisors are expected to consider work performance in determining eligibility.

DHP supports teleworking for employees whose job duties lend themselves to this arrangement provided certain requirements are met. All positions do not lend themselves to teleworking arrangements.

A Teleworking Agreement is required for both Employee Initiated Teleworking and Business Mandated Teleworking.

DHP may require an employee to telework as a condition of employment. In such cases, this requirement will be included when the position is recruited.
Suitability of Work for Teleworking

The nature of the work shall be suitable for teleworking. Suitability for teleworking depends on job content, rather than job role, title, or work schedule.

(See Attachment A – Tele-Eligible Checklist\textsuperscript{2})

Suitable Characteristics of Teleworkers
Teleworking is best suited for employees who are organized, highly disciplined, and conscientious self-starters requiring minimal supervision. Employees must achieve and maintain a performance rating of “contributor” or higher to qualify for teleworking.

TELEWORKING AGREEMENT

Employees shall sign the teleworking agreement and comply with conditions set forth prior to teleworking.

Supervisors and managers must agree to the terms of the teleworking agreement before employees are permitted to work at an alternate work location.
(See Attachment B – Teleworking Agreement)

Supervisors, as well as employees requesting to telework, may terminate the teleworking agreement at their discretion, preferably providing two weeks notice. This does not apply in the case of business-mandated teleworking.

GENERAL PROVISIONS

Policies and procedures that normally apply to DHP employees remain the same. Teleworking assignments do not change the conditions of employment or required compliance with policies and procedures.

Employees who telework shall comply with all state and DHP policies, practices and guidelines. A Teleworker shall notify his or her supervisor immediately of any situation that interferes with his or her ability to perform the job.

Teleworking shall not adversely affect the performance of the teleworker or his or her co-workers.

\textsuperscript{2}http://www.dhhr.virginia.gov/resources/telecommute/checklist.pdf
Compensation and Benefits

An employee’s compensation and benefits will not change when teleworking.

DHP will compensate teleworkers as required by the Fair Labor Standards Act (FLSA) and D11P policies and pay practices.

Hours of Work

The total number of hours that employees are expected to work will not change, regardless of work location.

Employees who telework are expected to follow the policies and procedures established by their supervisor for tracking time, requesting time off and approval of time off. DHP procedures must be followed for reporting sick or disability situations.

Prior management approval to work overtime is required and failure to obtain this approval may be addressed under the Standards of Conduct. FLSA and DHP policies and pay practices for overtime apply.

Employees are expected, when necessary, to participate in staff meetings, progress review meetings or other business-related meetings, even when working at their alternate work location. Previously designated work schedules may be modified as necessary provided management agrees. In addition, any teleworking schedule may be adjusted as business needs dictate.

Teleworking is not intended to serve as a substitute for child or adult care. If children or adults in need of primary care are in the alternate work location during employee’s work hours, some other individual must be present to provide the care.

Use of Leave

Teleworking is not intended to be used in place of sick leave (DRHM Policy 4.55), Family and Medical Leave (DRHM Policy 4.20), leave used under the Virginia Sickness and Disability Program (DRHM Policy 4.57), Workers’ Compensation leave (DRHM Policy 4.60), or other types of leave.
However, management in conjunction with Human Resources may determine whether or not it is appropriate to offer teleworking as an opportunity for partial or full return to work from traditional sick leave, short term or long-term disability based on the criteria normally applied to decisions regarding the approval of teleworking.

Central Work Location Closing/Inclement Weather/Emergency Closing

When there is inclement weather or an emergency closing at the central workplace, each individual teleworker’s situation is looked at on an individual basis. Determinations shall be based on job duties and expectations.

Safety Requirements

Employees working at an alternate work location shall practice safe work habits and shall review the following checklist and note on the Checklist and Employee Certification Form (Attachment C) whether the alternate work location environment is safe and free from potential hazards. The alternate work location may be reviewed or inspected by the employee’s supervisor or other appropriate DHP personnel.

a. The work location should be free of asbestos-containing materials. If the space contains asbestos-containing material, it must be undamaged and in good condition.
b. The space should be free of indoor air quality problems and have adequate ventilation for the desired occupancy.
c. The space should be free of excessive noise hazards.
d. A potable (drinkable) water supply must be available along with lavatories with hot and cold running water.
e. Stairways with four or more steps should be equipped with handrails.
f. All circuit breakers and/or fuses in electrical panels should be labeled and in good working order.
g. All electrical equipment and wiring must be properly grounded and free of recognized hazards that would cause physical harm.
h. Aisles, doorways, floor surfaces, and corners should be free of obstructions to permit visibility and movement.
i. All wheels, legs, and rungs on chairs are secure and sturdy.
j. The work area is not overly furnished and is free of excessive amounts of combustibles.
k. Floor surfaces are clean, dry, level and free of worn or frayed seams.
l. Carpets are secured to the floor and are free of worn or frayed seams.
m. Phone lines, electrical cords and computer wires are properly secured.
Injury Compensation

Employee is covered by the appropriate provisions of the Commonwealth’s Workers’ Compensation Program or the Virginia Sickness and Disability Program, as appropriate, if injured while performing official duties at the Central Workplace or Alternate Work Location during the set work hours. An employee who is injured at his or her alternate work location shall follow the same reporting procedures as if the injury occurred at the Central work location.

Supervisor Responsibility

Work performed at alternate work locations is considered official state business. The duties, performance, and work expectations shall be fully discussed with the employee prior to implementing the teleworking agreement.

The supervisor shall monitor productivity deadlines and work produced and shall measure and evaluate the employee’s job performance when teleworking in accordance with established performance management policies and procedures.

The supervisor shall clearly communicate procedures to track and document hours worked by non-exempt employees covered under the Fair Labor Standards Act (FLSA).

USE OF EQUIPMENT, SUPPLIES, AND DATA

Employees working at alternate work locations or the central workplace are responsible for the security and confidentiality of any information, documents, records, or equipment in their possession. Removal of confidential documents is done at the risk of the employee and requires supervisory approval. Employees are responsible for immediately reporting any information or documents that have been lost or damaged to their supervisor. Employees must agree to follow agency security procedures in order to ensure confidentiality and security of data.

In the event that equipment becomes temporarily inoperable or the employee is unable to perform job duties at the alternate work location, the employee and his or her supervisor should reach an agreement of whether other work assignments can be performed without relying on the equipment or if the employee should report to the central workplace.
Telephones and Related Items

Employees who have been assigned a BlackBerry or other cell phone device shall forward their Central Workplace phone to their BlackBerry/cell phone in order to make and receive calls while teleworking. Employees who have not been assigned a BlackBerry/cell phone device shall check their work phone for messages periodically each day they telework.

Employees to whom a state-owned BlackBerry/cell phone has not been issued should not, in most cases, have a business need to make long distance calls when teleworking and are expected to plan their work so as to make such phone calls while in the Central Workplace. However, if business related long distance phone calls are made, the agency will reimburse the teleworker provided sufficient documentation is submitted and approved by their supervisor consisting of an itemized copy of the phone bill with the cost of the long distance charge clearly displayed.

State-Owned Equipment

Use of state equipment for teleworking is dependent on the availability of funds and equipment. State provided equipment and connectivity method (broadband, DSL, etc.) for the alternate work location is not an entitlement and will vary based upon the needs of a particular job or assignment. (For Remote Site Employees, see Directive No. 1.20, Access to High-Speed Internet by Remote Site Employees)

Authorized Use and Maintenance – Authorized employees who have prior supervisory approval may use state-owned equipment for legitimate DHP business purposes. Authorized employees are responsible for protecting state-owned equipment from damage and unauthorized use. State-owned equipment used in the normal course of employment will be maintained, serviced and repaired by VITA or VITA’s authorized leasing agent.

Employee-Owned Equipment

Employees may use their own equipment to perform work at their alternate work location. Employees who use their equipment are responsible for any costs incurred with equipment maintenance. DHP will not assume responsibility for the cost of equipment not provided by DHP, or for its repair, service, home maintenance or any other incidental cost (i.e., utilities), associated with its use at the teleworker’s alternate work location.
DEPARTMENT OF HEALTH PROFESSIONS
Tele-Eligible Checksheet

Position No. ________________________ or Employee Name ____________________________
Role Title ________________________
Work Title ________________________
Work Unit ________________________

<table>
<thead>
<tr>
<th>JOB CONSIDERATIONS</th>
<th>✓ COMPLETE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider the Purpose of the Position and the nature of work to be performed as described in the EWP. Is it primarily information or service-based?</td>
<td></td>
</tr>
<tr>
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**DEPARTMENT OF HEALTH PROFESSIONS**

**DIRECTOR'S POLICY # 76-1.21**

**TELEWORKING**

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**EMPLOYEE CONSIDERATIONS**

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The following constitutes an agreement on the terms and conditions of teleworking between the Department of Health Professions (“Agency”) and ________________ (“employee”) entered into on ____________, 200__.

1. Employee agrees to participate in teleworking and to adhere to applicable agency and state guidelines, policies and directives.

2. Employee agrees to participate in teleworking for an initial period not to exceed one year, beginning ____________, and ending ________________.

NOTE: This agreement may be extended beyond the initial period, if agreeable to the agency and to the employee. In such case, the terms of the agreement should be reviewed and updated as necessary.

3. A copy of the Telework policy (Director’s Policy # 76-1.21) has been given to the employee.

   Yes ________  No ________

WORK LOCATION/SCHEDULE

1. Employee’s central workplace is the Perimeter Center, 9960 Mayland Drive, Suite 300, Richmond, Virginia 23233.

2. Employee’s Alternate Work Location is ________________.

3. At the Central Workplace, employee’s work hours will normally be from _____ to _______ on the following days: ____________________________.

4. At the Alternate Work Location, employee’s work hours will normally be from _____ to _______ on the following days: ____________________________.

5. Employee’s time and attendance will be recorded the same as performing official duties at the Central Workplace.

6. Supervisors will maintain a copy of the teleworker’s work schedule, and employee’s time and attendance will be recorded the same as if performing official duties at the Central Workplace.
WORK STANDARDS/PERFORMANCE

1. Employee will meet with the supervisor to receive assignments and to review completed work as necessary or appropriate.

2. Employee will complete all assigned work according to work procedures mutually agreed upon by the employee and the supervisor, and according to guidelines and expectations stated in the employee’s performance plan.

3. Supervisor will evaluate employee’s job performance according to the employee’s performance plan.

COMPENSATION/BENEFITS

1. All salary rates, leave accrual rates and travel entitlements will remain as if the employee performs all work at the Central Workplace.

2. Employee who works overtime that has been approved in accordance with Agency policy will be compensated in accordance with applicable laws and state policy.

3. Employee agrees that failing to obtain proper approval for overtime work may result in his/her removal from teleworking in addition to other appropriate action.

4. Employee agrees to follow established Agency policy and procedures for requesting and obtaining approval of leave.

EQUIPMENT/EXPENSES

1. Employee who borrows agency equipment agrees to protect such equipment in accordance with agency guidelines. State-owned equipment will be serviced and maintained by the agency.

2. If employee provides own equipment, he/she is responsible for servicing and maintaining it.

3. Neither the agency nor the state will be liable for any damages to the employee’s personal or real property during the performance of official duties or while using agency or state equipment at the employee’s Alternate Work Location.

4. Neither the Agency nor the state will be responsible for operating costs, home maintenance, or any other incidental costs (e.g., utilities) associated with the use of the employee’s Alternate Work Location.

5. If assigned a BlackBerry or other cell phone device, employee agrees to forward his/her Central Workplace phone to his/her BlackBerry/cell phone in order to make and receive calls while teleworking. If not assigned a BlackBerry/cell phone device, employee agrees to check his/her work phone for messages periodically each day he/she teleworks.

6. Employee who does not have a state-owned BlackBerry/cell phone should not, in most cases, have a business need to make long distance calls when teleworking and agrees to plan his or her work so as to make such phone calls while in the Central Workplace.
However, if business related long distance phone calls are made from the Alternate Work Location, the Agency agrees to reimburse employee provided sufficient documentation is submitted and approved by his or her supervisor consisting of an itemized copy of the phone bill with the cost of the long distance charge clearly displayed.

7. State-owned or leased equipment has been issued to employee as follows:
   N/A: ___________
   Or
   List: __________________________

SAFETY

1. Employee is covered by the appropriate provisions of the Commonwealth’s Workers’ Compensation Program or the Virginia Sickness and Disability Program, as appropriate, if injured while performing official duties at the Central Workplace or Alternate Work Location.

2. Employee agrees to certify that the Alternate Work Location is safe and free from hazards.

3. Supervisor will investigate all accident and injury reports immediately following notification and may inspect the Alternate Work Site.

CONFIDENTIALITY/SECURITY

Employee will apply approved safeguards to protect agency and state records from unauthorized disclosure or damage, and will comply with the Agency’s confidentiality requirements as well as privacy requirements set forth in state law and policy.

TERMINATION OF AGREEMENT

1. Employee may terminate participation in teleworking at any time unless it is a condition of employment. Two weeks’ notice to the agency is recommended.

2. Agency may terminate employee’s participation in teleworking at any time. Employees may be withdrawn for reasons to include, but not limited to, declining performance and organizational benefit. Two weeks’ notice to the employee is recommended when feasible.

__________________________          __________________________
Employee Signature          Date

__________________________          __________________________
Supervisor Signature          Date

__________________________          __________________________
Cost Center Manager Signature          Date

__________________________          __________________________
Agency Head or Designee Signature          Date
# DEPARTMENT OF HEALTH PROFESSIONS
## CHECKLIST AND EMPLOYEE CERTIFICATION FORM

**EMPLOYEE NAME:**

**SUPERVISOR NAME:**

**LOCATION:**

**PHONE:**

The following checklist is designed to assess the overall safety of the alternate work location. Each participant should read and complete the self-certification safety checklist. Upon completion, the checklist should be signed and dated by the participating employee and immediate supervisor.

The alternate work location is located (check one):
- □ in home
- □ not in home

Describe the designated work area:

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13. Are aisles, doorways, and corners free of obstructions to permit visibility and movement?

14. Are file cabinets and storage closets arranged so drawers and doors do not open into walkways?

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16. Is the work area overly furnished?

17. Are the phone lines, electrical cords, and extension wires secured under a desk or alongside a baseboard?

18. Is the office space neat, clean and free of excessive amounts of combustibles?

19. Are floor surfaces clean, dry, level, and free of worn or frayed seams?

20. Are carpets well-secured to the floor and free of frayed or worn seams?

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DEPARTMENT OF HEALTH PROFESSIONS
Tele-Eligible Checksheet

Position No. _____ or Employee Name _____
Role Title _____
Work Title _____
Work Unit _____

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   Yes ☐ No ☐

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Employee Signature                  Date
Supervisor Signature                 Date
Cost Center Manager Signature        Date
Agency Head or Designee Signature    Date
DEPARTMENT OF HEALTH PROFESSIONS
CHECKLIST AND EMPLOYEE CERTIFICATION FORM

EMPLOYEE NAME: _____

SUPERVISOR NAME: _____

LOCATION: _____

PHONE: _____

The following checklist is designed to assess the overall safety of the alternate work location. Each participant should read and complete the self-certification safety checklist. Upon completion, the checklist should be signed and dated by the participating employee and immediate supervisor.

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Describe the designated work area:

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Employee Signature ___________________________ Date ________________

Supervisor Signature ___________________________ Date ________________
THE DEPARTMENT OF HEALTH PROFESSIONS
CONTINUITY OF OPERATIONS PLAN

APPENDIX M

ALTERNATE LOCATION MOU
HOT SITE MEMORANDUM OF UNDERSTANDING

Emergency Back-up Hot Site

Memorandum of Understanding

between

Southside Virginia Training Center

and

Department of Health Professions

October, 2005
TABLE OF CONTENTS

Section I – Introduction

Section II – SVTC Support Services

Section III – Services
    Mail Services
    Housekeeping Services
    Physical Plant Services
    Power Plant Services
    Safety, Police and Fire Protection

Section IV – Communications and Problem Resolution

Section V – DHP Provisions

Section VI – MOU Terms and Amendments

Section VII – Authority
SECTION I – INTRODUCTION

On the Southside Campus of the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMRMRSAS) are Central State Hospital, Hiram W. Davis Medical Center, Virginia Center for Rehabilitative Services, Virginia Information Technologies Agency, and Southside Virginia Training Center (SVTC). The campus is the largest and most unique facility of the Department of Mental Health, Mental Retardation and Substance Abuse Services. On the Southside Campus, mental health, mental retardation and acute care services are provided at one location. Southside Virginia Training Center provides common support services to all five facilities on campus. This memorandum of understanding is developed to support an additional state agency in the event of an emergency and is developed in the spirit of partnership as all parties involved benefit from the agreement.

The Southside Virginia Training Center and the central office of DMRMRSAS agree to provide floor space in the SVTC/VITA computer room for the Department of Health Professions to house emergency servers for their systems. In the event of an emergency for The Department of Health Professions, DHP also would have use of the conference rooms and command centers available in building 111.

SVTC and the Department of Health Professions agree that there will be no lease or rental cost associated with this agreement. There will be no administrative costs charged to the Department of Health Professions since their costs are negligible.

In the event of an emergency that requires the Department of Health Professions to vacate its office space, DMRMRSAS agrees to host DHP’s disaster recovery efforts at the Petersburg campus until such time as DHP can return to its office space or make arrangements for long-term temporary space. DMRMRSAS’ offer to host DHP’s disaster recovery efforts includes the provision of physical space and support services as outlined below and is contingent on the availability of space on the Petersburg campus and DMRMRSAS’ ability to provide requisite services to its clients and patients.

This Memorandum of Understanding outlines in general terms the services provided by SVTC, and the requirements of the client agency to receive support services. It is also intended to define the channels of communications and methods to resolve campus problems.

Emergency back-up power is provided to building 111 by a 300kw generator adjacent to the building. This generator is new at the time of this agreement and is capable of providing sufficient power to operate the building, including DHP’s equipment for an unlimited timeframe assuming no mechanical breakdown and the availability of diesel fuel. The generator is under a preventative maintenance contract.
SECTION II
SVTC - SUPPORT SERVICES

The primary mission of Southside Virginia Training Center’s Support Services is to provide an environment which encourages the maximum potential development of resident/patients so that they may enjoy a high quality of life while maintaining respect for their dignity, unique personal character and personal needs. The Department of Health Professions agrees to respect this primary mission and the rules of the campus.

SECTION III
SERVICES

The following outlines the services that SVTC will provide and the responsibilities that the Department of Health Professions has in receiving them, should circumstances warrant.

MAIL SERVICES

I. Department Description

Role Statement: The role of the Mail Service Department is to provide mail services for the clients/patients and employees of the Southside MHMRSAS Complex.

Goals and Objectives Statement: The Mail Department’s goal is to provide a reliable and accurate mail service 5 days a week.

II. Department Program/Services

The Mail Department is responsible for providing routine mail service to the Southside MHMRSAS Complex.

<table>
<thead>
<tr>
<th>Category of Support</th>
<th>Services</th>
<th>Receiver of Service Will</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mail</td>
<td>Provide a daily service in accordance with delivery schedule.</td>
<td>Provide notification of change for specific delivery destinations.</td>
</tr>
</tbody>
</table>

HOUSEKEEPING SERVICES

I. Department Description

Role Statement: The primary mission or role of the Housekeeping Department is to provide a germ-free, safe, pleasant, and functional environment for residents/patients, employees and visitors at the Southside MHMRSAS complex.
Goal and Objective Statement: The goal of the Housekeeping Department is to maintain an error-free rating on all departmental and Medicaid/Medicare inspections and to meet all JCAHO and DOJ requirements.

II. Department Program/Services

The Housekeeping Department will provide housekeeping services to administrative areas as manpower and funding are available; administrative areas are normally cleaned by the evening shift.

<table>
<thead>
<tr>
<th>Category of Support</th>
<th>Services</th>
<th>Receiver of Service Will</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleaning of all used buildings and areas up to 30 feet from the building</td>
<td>Standards of cleaning for all support categories will meet the specific expectations, including frequency contained in the Housekeeping Environmental Procedures and Information Manual. A copy of the manual will be available in each organizational unit, and is reviewed every two years.</td>
<td>Control staff movement in areas during cleaning. Review and provide input to the Housekeeping Environmental Procedures and Information Manual. Allow access to areas to be cleaned during normal business hours.</td>
</tr>
<tr>
<td>Cleaning of Equipment/Storage Areas</td>
<td>Clean storage areas on scheduled basis.</td>
<td>Provide support and cooperation. Have boxes off floor and on shelving. Housekeeping will not stack or remove equipment for purpose of cleaning storage area.</td>
</tr>
<tr>
<td>Cleaning of Other Administrative or Activity Building</td>
<td>Clean used office or activity space.</td>
<td>Maintain clean environment and cooperate with Housekeeping staff.</td>
</tr>
</tbody>
</table>

**PHYSICAL PLANT SERVICES**

1. **Department Description**

   Role Statement: The primary function of Physical Plant Services (maintenance) is to provide maintenance of structures, utilities, and equipment in a manner that will provide for the safety, comfort and other needs of patients/residents and will protect the proprietary interests of the Commonwealth.

   Goal and Objective Statements:
Goal - To maintain or return facilities to as built or better conditions.

Objectives –

a. Full implementation of a Preventive Maintenance Program.

b. To improve visible esthetics of the complex by developing and implementing a comprehensive sign, street and landscape plan.

c. To continually review the organization for the best utilization of personnel.

d. To continue to identify Capital Outlay needs and solicit funding for major improvements and demolition.

e. To improve planning, estimating and scheduling process.

II. Department Program/Services

The Physical Plant will provide preventive maintenance, corrective maintenance, renovations, betterment and/or technical assistance for all buildings, and certain program equipment within established guidelines including twenty-four hour, seven day per week emergency response with patient living areas receiving the highest priority.

<table>
<thead>
<tr>
<th>Category of Support</th>
<th>Services</th>
<th>Receiver of Service Will</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Maintenance</td>
<td>Provide utility services (electric, heat, air conditioning, and water).</td>
<td>Report all failures in a timely manner.</td>
</tr>
<tr>
<td></td>
<td>Maintain building temperate between 68° to 78° F.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Provide skilled craftsmen for the repair of certain furniture and equipment.</td>
<td>Ensure timely request for needed repairs.</td>
</tr>
<tr>
<td></td>
<td>Survey buildings on a weekly basis per preventive maintenance schedules and make corrections and adjustments to HVAC, plumbing and electrical systems, as well as the building structure as needed. Call-in work requests will also be addressed daily according to urgency (emergency calls, etc.).</td>
<td>Designate responsible unit personnel to call emergency work requests to the customer service desk at 4-7623. Routine work requests will be submitted on the Work Request forms #863 and #181, call-ins, or other electronic means as agreed.</td>
</tr>
<tr>
<td>Service</td>
<td>Description</td>
<td>Responsibilities</td>
</tr>
<tr>
<td>------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Facility Renovation</td>
<td>Provide technical assistance, estimates and DMH 862. Provide skilled craftsmen for minor projects within approved guidelines. Track costs on MP2 system</td>
<td>Coordinate concerns with Director of PPS. Responsible for costs of any renovations requested.</td>
</tr>
<tr>
<td>Pest Control</td>
<td>Provide contract pest control for the complex on a regular rotating schedule and special attention as required.</td>
<td>Maintain a clean environment, free of open food items in desk drawers, closets, cabinets, etc., and report any pest problems.</td>
</tr>
<tr>
<td>Trash Removal</td>
<td>Provide for the removal of trash from the complex.</td>
<td>Responsible for placing trash in dumpsters and keeping dumpsters’ locked.</td>
</tr>
<tr>
<td>MP2/CMMS</td>
<td>Manage the automated maintenance and work order system.</td>
<td>Provide staff for training. Adhere to systems policy and procedures.</td>
</tr>
<tr>
<td>Grounds</td>
<td>Provide for the grooming and care of turf and landscape campus-wide on a scheduled basis. Provide for directional and informational street signs. Provide for snow and ice removal from streets, walks and parking areas.</td>
<td>Make special requirements known at least one week in advance.</td>
</tr>
</tbody>
</table>

**POWER PLANT SERVICES**

I. Department Description

**Role Statement:** The role of the Power Plant is to supply steam to buildings to provide heat and hot water.

Goal and Objective Statement: The goal of the Power Plant is to supply the required quality and quantity of steam to meet the needs of those served.

The objectives of the Power Plant are:
a. Through training maintain materials readiness at the highest possible level.
b. Through training raise the operational expertise of the shift personnel.

II. Services

The client is responsible for prudent use of the resources provided by the Power Plant, i.e. close windows in the winter; and report malfunctioning items.

SAFETY, POLICE & FIRE PROTECTION

I. Department Description

Role Statement: The primary role of the Campus Safety, Police & Fire Protection Department is to provide support to the established programs of SVTC, CSH & HWDMC for the safety of all patients, residents, employees and visitors while protecting the property and facilities of the Southside DMHMRASAS Complex.

Goal & Objective Statement: The goal of this department is to provide a management and administrative support system, which ensures the efficient and effective delivery of the safety, police and fire protection services in order to provide a safe environment for SVTC, CSH, and HWDMC.

II. Department Program/Services

This department is a support/service organization. It provides safety, police & fire support/services to the campus. These functions are performed seven days a week, 24 hours a day. The department is responsible for 719 acres, 81 buildings, 45 alarm systems, 38 sprinkler systems, 6 range hood systems and over 700 portable fire extinguishers. All SVTC, CSH & HWDMC employees are ultimately responsible for the safety and security of their assigned work areas. The Department of Safety/Police and Fire Protection provides assistance in these areas.

<table>
<thead>
<tr>
<th>Category of Support</th>
<th>Services</th>
<th>Receiver of Service Will</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety</td>
<td>Provide consulting services to each facility's Safety Comm.</td>
<td>Provide latest information on internal safety policies for review.</td>
</tr>
<tr>
<td></td>
<td>Ensure that the facility's alarm/fire systems are inspected as required.</td>
<td>Respond with a plan of correction if necessary.</td>
</tr>
<tr>
<td></td>
<td>Maintains safety library on standards.</td>
<td>Contacts supplier for information.</td>
</tr>
<tr>
<td>Police</td>
<td>Provide routine police patrol to prevent criminal activity, control traffic and ensure internal/external security</td>
<td>Support the supplier by ensuring that staff is following their own safety/security measures.</td>
</tr>
</tbody>
</table>
measures are maintained through positive community relations.

Compiles all criminal and civil incident/report information to present or prosecute through the courts if necessary or to be handled internally by the individual facility.

Must initiate a request for an investigation and cooperate with all criminal justice personnel.

<table>
<thead>
<tr>
<th>Fire</th>
<th>Must initiate a request for an investigation and cooperate with all criminal justice personnel.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Provides testing and monitoring of all fire detection/suppression systems as required by JCAHO/Medicaid, NFPA State Fire Marshal and Life Safety Code.</td>
</tr>
<tr>
<td></td>
<td>Implement Interim Life Safety Measures (ILSM) as appropriate.</td>
</tr>
<tr>
<td></td>
<td>Report any deficiencies for immediate repair.</td>
</tr>
<tr>
<td></td>
<td>Upon detection of a system malfunction repair, will ensure that it is replaced or repaired, and ensure unit managers are aware of the problem.</td>
</tr>
<tr>
<td></td>
<td>Be responsible for ensuring the drills are performed and critiqued.</td>
</tr>
<tr>
<td></td>
<td>Maintains records of all fire drills done on every shift once per month by all facilities.</td>
</tr>
<tr>
<td></td>
<td>Notify SVTC Fire Department according to their fire plan.</td>
</tr>
<tr>
<td></td>
<td>Will respond to all fires and fire alarms to extinguish if necessary and to report to the appropriate authority.</td>
</tr>
<tr>
<td></td>
<td>Ensure attendance.</td>
</tr>
<tr>
<td></td>
<td>Provide in-service training that may be requested.</td>
</tr>
<tr>
<td></td>
<td>Investigations will be conducted in accordance with State law and local policies and procedures.</td>
</tr>
<tr>
<td></td>
<td>Notify SVTC Security Department promptly of all incidents.</td>
</tr>
</tbody>
</table>

| Training | Assist or provide training for new employee orientation if requested. |
|          | Ensure attendance. |
|          | Provide in-service training that may be requested. |

| Investigations | Investigations will be conducted in accordance with State law and local policies and procedures. |
|                | Notify SVTC Security Department promptly of all incidents. |
Effective communication is essential to the success of any organization. It is especially critical at the Southside Campus. Competing demands and limited resources often lead to conflicts, which can only be resolved through clear and effective communication. It is incumbent upon the Facility Directors and Service Directors to effectively communicate demands and limitations to each other. In addition Directors and agency management, in an effort to produce mutual understanding of support services, must attempt to communicate policies, positions, demands and limitations to personnel within their respective agencies.

**Direct Communications**

Direct communications between support services department head or supervisors are encouraged for routine functions. It is entirely appropriate for a program/building supervisor to discuss routine housekeeping or maintenance concerns with a Housekeeping Supervisor. If satisfaction for routine matters cannot be achieved by dealing directly with support service personnel, then the programmatic supervisor should address the issue to the next level of support service supervision. However, the intent is to have routine matters addressed at the closest level of supervision to the actual task or problem.

**Formal Communications**

When more formal communication or non-routine demands are necessary such communication should originate from the office of the Department of Health Professions. These requests should normally be addressed to the Director Environment of Care or Director of Administration depending on the issue; but may, if more appropriate, be addressed to the Facility Director, SVTC. The intent of formal communications is to communicate non-routine, unusual special requests or non-resolved problems to appropriate management levels.

**SECTION V**

**DHP PROVISIONS**

For purposes of establishing an emergency back-up hot site, DHP is authorized, at its own expense, to place the following equipment in the SVTC/VITA computer room.

A. Two (2) server racks with electrical power to each;
B. Up to Two (2) T-1 lines
D. Three (3) metal racks to stack notebook computers and operating supplies
E. Up to (10) Wireless Access Points (WAP) throughout building 111.
F. One (1) 5’ x 3’ worktable and (2) chairs to accommodate technicians in the computer room

DHP agrees to pay for any special building modifications or services necessary to accommodate the hot site in the SVTC/VITA computer room. Any related maintenance costs will be also be borne by DHP, either directly or as a reimbursement to DMRMRSAS.
DHP will be responsible for setting up, testing, maintaining, and operations of its own computer equipment. If agreeable to both parties, specific tasks may be subcontracted with DMHMRSAS/VITA, including daily backup and data imports to maintain the site as a true hot site.

SECTION VI
MOU TERM AND AMENDMENTS

This agreement is set for five (5) years and may be renewed or cancelled at the end of the five years.

Amendments to this agreement may be made at any time upon written agreement by both parties.

SECTION VII
AUTHORITY

This Memorandum of Understanding is effective on the date when the Director of the Department of Health Professions, the Facility Director of Southside Virginia Training Center, and the Commissioner of the DMHMRSAS have signed below.

Robert A. Nebiker  
Director, Department of Health Professions

John A. Holland, Jr., M.D.  
Facility Director, SVTC

__________________________    __________________________
Date        Date

James S. Reinhard, M.D.  
Commissioner, DMHMRSAS

__________________________
Date
DIRECTIONS TO HOT SITE

Southside Virginia Training Center (Mental Health):
26317 W. Washington St.
Petersburg, VA 23803

Start:
Richmond, VA 23230-1723, US

End: 26317 W. Washington

Directions

From the West End of Richmond take I-64 E toward I-95 / RICHMOND. 6.3 miles
I-64 E becomes I-95 S. 24.0 miles
Merge onto I-85 S / US-460 W via EXIT 51 toward DURHAM / ATLANTA. 4.7 miles
Merge onto US-1 N / US-460 BR E / BOYDTON PLANK RD via EXIT 63B. 1.4 miles

As you come off of the exit Southside Virginia Training Center will be on the right – right across from McDonalds

Once you enter the facility:
Go to the 1st stop sign which is a “T” intersection
Go left
Go straight until you reach the last building on the left
Building# 111

See map on next page.