Healthcare COOP 101: A Practical Approach

Prepared for the Northeast Region Healthcare Coalition (NERHCC)
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ALL CLEAR
EMERGENCY MANAGEMENT GROUP

Introductions

All Clear Emergency Management Group

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Instructions for the Webinar

- Information will be provided by the facilitators.
- There will be discussion questions throughout the presentation. Use the "chat" feature to provide your answers.
- Use the "chat" feature at any time to ask questions of the facilitators.

NERHCC COOP Project

- Step 1: COOP Overview Webinar (this webinar)
- Step 2: In-Person COOP Workshop Series
  - COOP Workshop #1: February 5, 2020 – Ft. Collins
  - COOP Workshop #2: February 13, 2020- Haxtun
- Step 3: COOP Follow-up Webinar
  - To Be Scheduled Following Final COOP Workshop

Objectives

- Describe the terms and elements that are part of a COOP.
- Provide a healthcare-specific COOP overview.
- Understand the benefits of a COOP and the COOP planning process.
- Identify problem areas to address in the COOP Workshop.
- Discuss the importance of COOP Planning for NERHCC.

Agenda

- COOP 101: The Elements of COOP
- The COOP Planning Process
- Practical Advice for your agency's COOP

Discussion Question

- Where are you in the COOP planning process?

  - Haven't started yet
  - Have started but don't have a written plan
  - Have a drafted plan
  - Have a complete plan. I'm looking to improve it.

Use the chat feature to respond to the question.

Discussion Question

- What are you struggling with in the COOP development process?

Use the chat feature to respond to the question.

COOP 101:
The Elements of COOP

COOP 101:
The Elements of COOP

- **Continuity of Operations Plan (COOP)**

the organizational plan *to ensure the performance of essential functions* during a wide range of emergencies and events.

- **Business Continuity (BC)**

the *capability* of the organization to continue delivery of products or services at acceptable predefined levels following a disruptive incident.

- **Disaster Recovery (DR)**

the *plan* on how to recover from the disruptive event.

COOP 101:
COOP in 90 Seconds

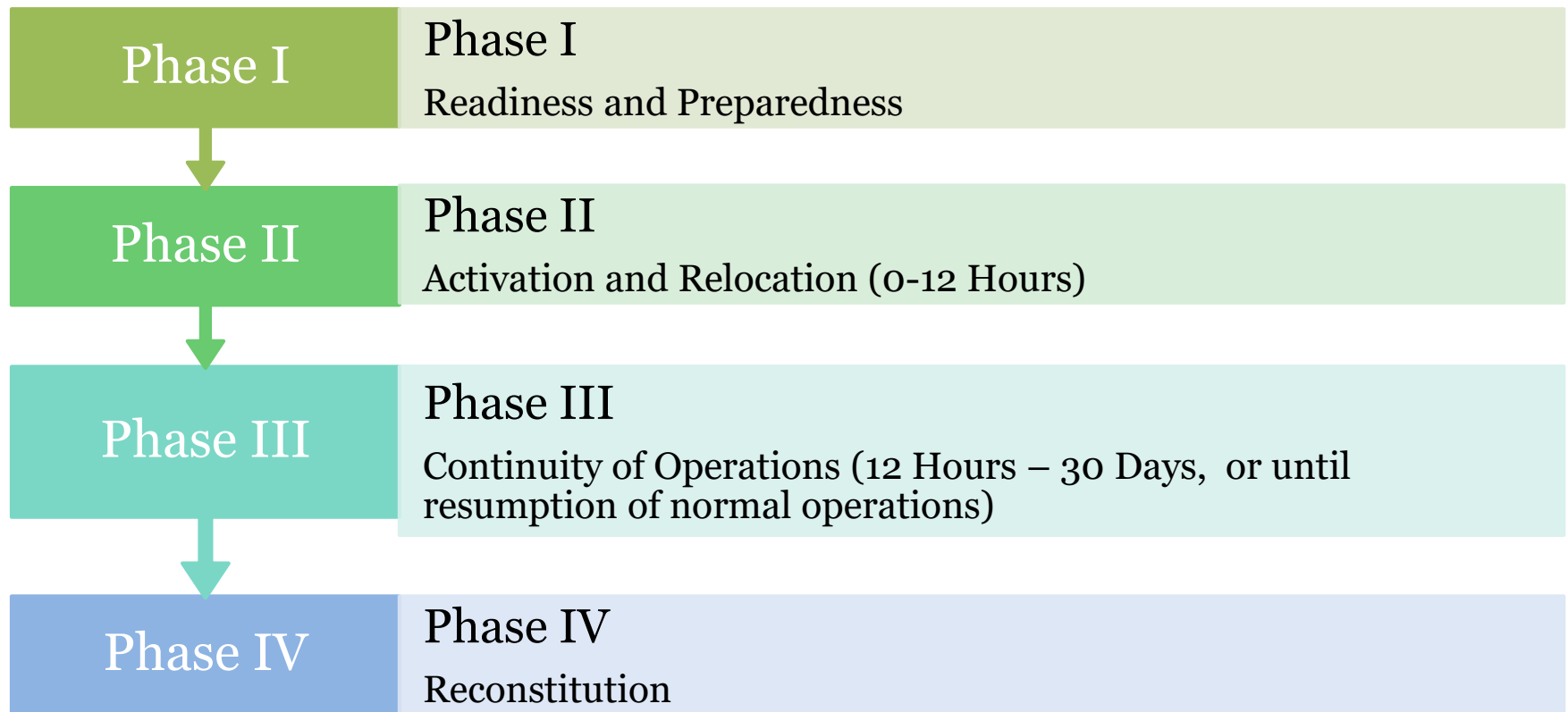| Normal Business Operations	• Fully Staffed • Infrastructure Operable
Alternate Work Location	• Fully Staffed • Infrastructure Compromised
Devolution of Control	• Unable to Staff • Infrastructure Compromised

COOP 101:
Elements of COOP

COOP 101: Phases of Continuity

Phase I

Phase I
Readiness and Preparedness

Phase II

Phase II
Activation and Relocation (0-12 Hours)

Phase III

Phase III
Continuity of Operations (12 Hours – 30 Days, or until resumption of normal operations)

Phase IV

Phase IV
Reconstitution

COOP 101:
The Key Elements of COOP

- Essential Functions
- Orders of Succession
- Delegations of Authority
- Continuity Facilities
- Continuity Communications
- Essential Records Management
- Human Resources
- Devolution of Control and Direction
- Reconstitution
- Training, Exercises, and Review

COOP 101:
Essential Functions

A limited set of organization-level functions or duties that should be continued throughout (or resumed rapidly) after a disruptive event.

"Mission Critical Functions"

COOP 101:
Orders of Succession

Provisions for re-assigning senior leadership roles during an emergency in the event that any of those leaders are unavailable to execute their duties.

COOP 101: Delegation of Authority

Identification, by position, of the authorities for making policy decisions at organizational locations.

COOP 101: Continuity Facilities

Continuity facilities are locations where leadership and critical services may operate during a continuity event. These may include alternate locations or virtual offices from which to continue essential operations.

COOP 101: Continuity Communications

Continuity Communications are the systems that support full communications among leadership, internal elements, and other organizational entities to perform Essential Functions during a COOP activation.

COOP 101:
Vital Records Management

Vital records management is the identification, protection, and availability of information systems and applications, electronic and hardcopy documents, references, and records needed to support Essential Functions during a continuity event.

COOP 101:
Human Capital

Human capital involves policies, plans, and procedures that address human capital needs during a COOP event, such as guidance on pay, leave, work scheduling, benefits, telework, hiring, authorities, and flexibilities.

COOP 101: Devolution of Control and Direction

Devolution is the capability to transfer statutory authority and responsibility for the hospital's functions from the primary operating staff and facilities to another organization's employees and facilities, specifically after a catastrophic event.

COOP 101: Reconstitution of Operations

Reconstitution is the process by which the organization can resume normal operations from the original or a replacement of the primary operating site(s).

COOP 101:
Training and Testing Program

Training provides the skills and familiarizes personnel with procedures and tasks. Tests and exercises serve to assess and validate all the components of COOP, policies, procedures, systems, and facilities.

Discussion Question

- Do you have any questions about the key elements of COOP?

Use the chat feature to respond to the question.

COOP Planning Process

Why COOP Planning?

- Legal Authority and Guidance

The National Continuity Policy (NSPD 51/HSPD 20)	• Requires all Federal Executive Branch agencies to develop continuity capability • Established 8 National Essential functions
Federal Continuity Directive (FCD) 1	• Provides direction to developing continuity plans and programs.
Continuity Guidance Circular (CGC) 1	• Provides guidance for non-Federal organizations (State, local, tribal) in continuity planning.

Why COOP Planning? (Cont.)

- CMS Regulatory Requirements

CFR §482.15(a)(3) TAG: E-0007	• Address patient population, including, but not limited to, persons at-risk; the type of services the hospital has the ability to provide in an emergency; and **continuity of operations, including delegations of authority and succession plans.**
CFR §482.15(b)(7) TAG: E-0025	• (7) The development of arrangements with other hospitals and other providers to receive patients in the event of limitations or cessation of operations to **maintain the continuity of services to hospital patients**.

Why COOP Planning? (Cont.)

- Joint Commission Standards and Elements of Performance

EM.02.01.01, EP 12	• Continuity of operations strategy that covers a succession plan and delegation of authority plan
EM.02.01.01, EP 16	• Procedures guiding implementation are defined in the emergency management plan, continuity of operations plan, and other preparedness and response protocols.
EM.04.01.01, EP 3	• Coordination of continuity of operations planning with the system's integrated program

Why COOP Planning? (Cont.)

- CDPHE Statement of Work (SOW) 2019-2020

Goal #1	• Increase Emergency Preparedness in Colorado through Healthcare Coalition development as they prepare for, respond to and recover from medical surge emergencies.
Objective #3	• No later than the expiration date of the Contract, Healthcare Coalitions shall improve Capability 3.
Primary Activity #1	• The Contractor shall report HCC Mission Essential Functions.

Benefits of Continuity Planning

ENSURE PERFORMANCE OF ESSENTIAL FUNCTIONS

MINIMIZE DAMAGE TO CRITICAL PROCESSES

ENSURE SUCCESSION OF LEADERSHIP

MITIGATE DISRUPTIONS TO OPERATIONS

PROTECT ESSENTIAL FACILITIES/RESOURCES

ACHIEVE TIMELY RECOVERY

RESUME FULL SERVICE TO CUSTOMERS

EOP vs. COOP vs. Continuity of Care

Emergency Operations Plan (EOP)	Continuity of Operations (COOP)	Continuity of Care
• Base plan for emergency management program • Activated in response to an incident • Typically covers the first 0-96 hours of an incident • Focus of the EOP is to manage an emergency	• Annex of the EOP • Activated in response to a business interruption anticipated to last longer than 12 hours • Required to be functional within 12 hours and sustainable up to 30 days • Focus of the COOP is to ensure business continuity	• According to the World Health Organization (WHO) "Continuity of care is the degree to which a series of discrete health care events is experienced by people as coherent and interconnected over time and consistent with their health needs and preferences." • Viable as a result of EOP and COOP Planning

Healthcare Emergency Management & Business Continuity Framework
Continuity | Response | Recovery

Governance & Crisis Management

Emergency Operations Planning (EOP)

Plans, procedures and resources for all four emergency phases (mitigation, preparedness, response, and recovery), for all types of emergencies and disasters.

Continuity of Operations (COOP) Planning

Plans, procedures and resources to maintain and/or recover mission critical services and processes impacted by an event causing an interruption of normal operations.

Disaster Recovery Planning (DRP)

Plans, procedures and resources to maintain and/or recovery the information technology systems, network, and telecommunications services.

| Safety/Fire | Incident Specific Plans | Emergency Operations | Organizational/Departmental Operations for Clinical, Business & Research | | Network | Systems and Applications | Telecom |

Safety Procedures	Utility Interruption	Patient Clinical & Support Activities	Business Continuity Branch Director (Service Continuity, Records Preservation and Business Relocation Units)	Essential Services
Fire Procedures	Human, Natural, Technological Hazard Response	Management of Staff, Resources and Assets		Downtime Procedures
Emergency Codes		HICS, Crisis Comm, Triage, Surge, Public Health, Evacuation		Vital Records, Equipment and Supplies

An integrated, multi-disciplinary program focused on supporting and strengthening the organization's core mission

The Most Important Part: Business Impact Analysis (BIA)

- Educate staff on the purpose of COOP
- Use your organizational chart to determine the key departments
- Develop a BIA questionnaire to collect from all departments (based on COOP Elements)
- Determine the best way to collect the data
  - Web form
  - Electronic survey
  - Word document

From BIA Data to COOP

- Who answers the survey?
- How do you gather the information?
- How long do you give them to respond?
- How do you offer technical advice/help?
- How do you analyze the information?
- How does the information fit into the COOP?

Excel Format

Interdependencies/ Relationships		
In the first column, list the divisions and stakeholders that provide or depend on your division, office, or program for critical input, goods, services, or the exchange of data required for performing functions and services. Identify the *Operational Impact Rating* for each interdependency and relationship. A guide for the *Operational Impact Rating* can be found below. In the final column, describe the interdependencies and the relationships with external organizations. The information captured in this section will provide a notification blueprint if the division/office is experiencing downtime.		

Rating Level	Operational Impact
Level 1	*Critical* - Immediate changes to operations and
Level 2	*High* - High operational impact with priority decision
Level 3	*Medium* - Medium operational impact with delayed
Level 4	*Low* - Low operational impact with longer term

	Interdependency (Internal)	Operational Impact Rating	Description of Interdependency
1	Health Facilities and Emergency Medical Services Division	3	Assist with emergency preparedness planning
2			
3			
4			
5			

	Relationship (External)	Operational Impact Rating	Description of Relationship
1	Local Public Health Agencies	1	Assist in emergency preparedness planning, training, and exercises

Word Format

F. Dependencies/Relationships

Describe significant dependencies or relationships with other business units within public health or outside organizations. Who depends on you? This is intended to help the organization understand how the business units interact.

How would you rate each dependency/relationship based on priority for the business unit? (1 – Critical, 2 – High, 3 – Moderate, 4 – Low)

Internal Business Unit	Critical	Description of Dependencies/Relationship

External Organizations	Critical	Description of Dependencies/Relationship

SurveyMonkey Format

22. **Staffing - Vacancies -** What positions are currently vacant in your business unit? Is this position likely to be filled in the next six months?

Example: 1 Public Health Nurse, not likely to be filled due to [reason]

23. **Orders of Succession -** Designated staff when business unit leadership is debilitated or incapacitated.

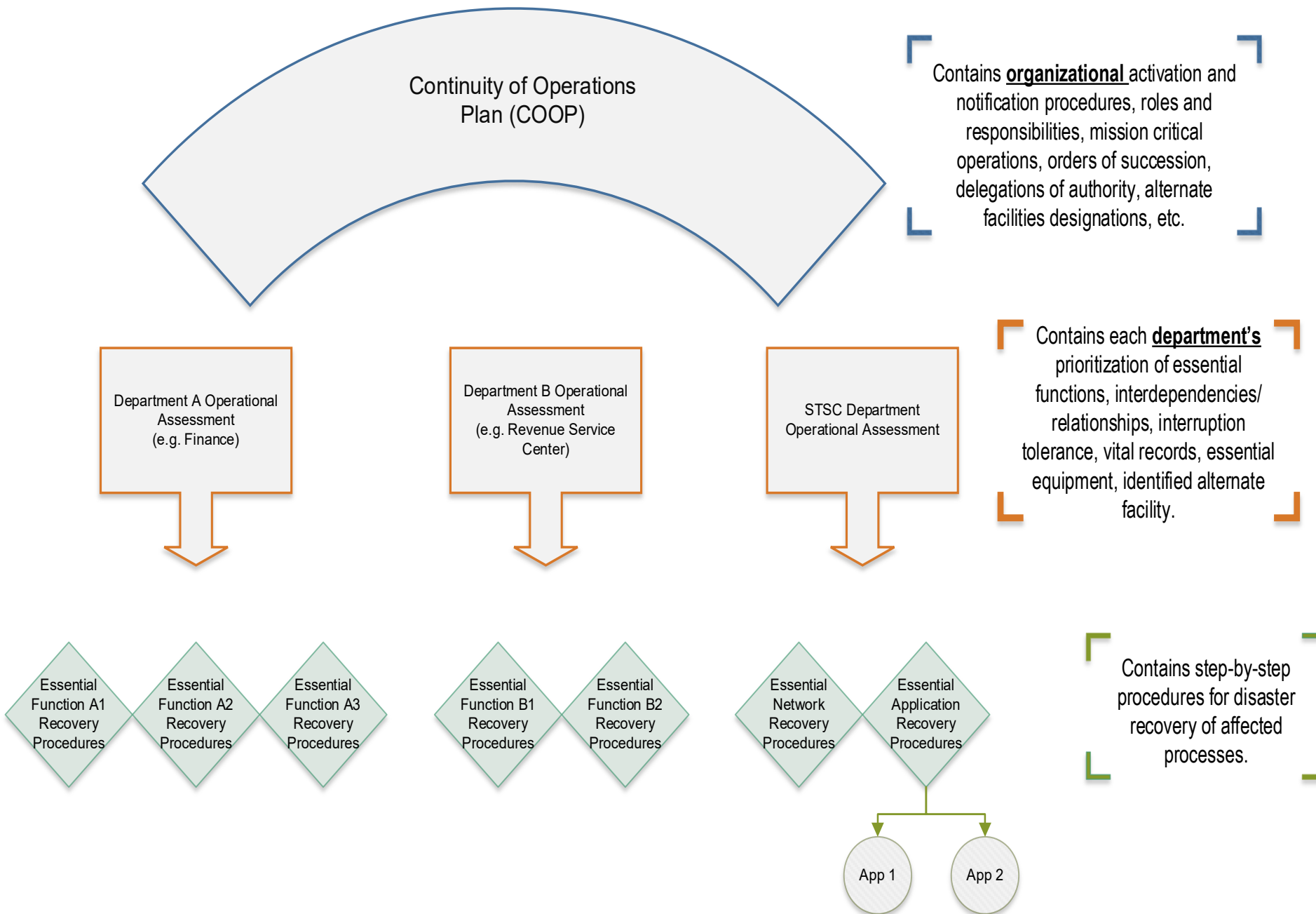| Business Unit Leadership Title	
Successor's Title	
Second Successor's Title	
Third Successor's Title	

COOP Planning Process

- Key Elements of Healthcare COOP
  - Essential Functions (organizations and/or department level functions)
  - Personnel
  - Logistics and support
  - Communications
  - Reconstitution
  - Training, Testing, and Review

Continuity of Operations Plan

Continuity of Operations
Plan (COOP)

Contains **organizational** activation and notification procedures, roles and responsibilities, mission critical operations, orders of succession, delegations of authority, alternate facilities designations, etc.

Department A Operational Assessment
(e.g. Finance)

Department B Operational Assessment
(e.g. Revenue Service Center)

STSC Department Operational Assessment

Contains each **department's** prioritization of essential functions, interdependencies/ relationships, interruption tolerance, vital records, essential equipment, identified alternate facility.

Essential Function A1 Recovery Procedures

Essential Function A2 Recovery Procedures

Essential Function A3 Recovery Procedures

Essential Function B1 Recovery Procedures

Essential Function B2 Recovery Procedures

Essential Network Recovery Procedures

Essential Application Recovery Procedures

Contains step-by-step procedures for disaster recovery of affected processes.

App 1

App 2

Tips from the Umbrella Diagram

1. IWAD – "If We Were All Dead" – have COOP processes set so everyone/anyone to be able to pick up and use.
2. Consider "Essential – Important – Non-Essential" categories.
3. Start with the departments, gather information, and then start to talk organization level COOP.
4. Determine your assumptions:
   - Plan A – stay in facility as long as possible
   - Plan B – relocate to another facility. Build COOP around these assumptions

COOP Planning Process: Essential Functions

What are some essential functions in healthcare facilities?

Think about functions that support the mission of your organization.

How do you decide what the essential functions of your organization are?

Use the chat feature to respond to the question.

Essential Functions: Some Examples

- Facility and personnel security
- Lab capabilities consistent with facility need
- Long-term care of elderly and other vulnerable populations
- Medical billing
- Regulatory standards
- Patient care (triage, treatment, emergency, inpatient, outpatient)
- Patient decontamination and stabilization
- Patient movement to appropriate care centers
- Patient tracking
- Postmortem care and disposition

Essential Functions

Essential Function:	Prioritization:	Lead Department:
Regulatory Standards		
Medical Billing		
Lab services		

Prioritize Essential Functions

Essential Function:	Prioritization:	Lead Department:
Regulatory Standards		
Medical Billing		
Lab services		

How would you prioritize "Regulatory Standards"?
How would you prioritize "Medical Billing"?
How would you prioritize "Lab Services"?

Critical – the function cannot be delayed
Important – the function can be delayed but should be resumed as soon as possible
Non-essential – the function can be delayed until normal business operations resume

Use the chat feature to respond to the question.

Identify the Lead Department

Essential Function:	Prioritization:	Lead Department:
Regulatory Standards		
Medical Billing		
Lab services		

Who is the lead department for "Regulatory Standards"?
Who is the lead department for "Medical Billing"?
Who is the lead department for "Lab Services"?

Use the chat feature to respond to the question.

Essential Functions Support: Medical Billing

- Query the Lead Department
  - What are your minimal staffing requirements? Hours of operation?
  - What other resources are required?
  - What data and data systems are required?
  - How would you get the resources you need to become operational within 12 hours of a disruption?
  - What other departments do you rely on to perform your function?

Questions?

Use the chat feature to ask questions of the facilitators.

Personnel: Orders of Succession and Delegation of Authority

- Orders of Succession and Delegation of Authority
  - Order of Succession: individuals who would sequentially assume responsibility for highest levels of authority and leadership positions.
  - Delegation of Authority to Carry Out Essential Functions: List of trained/qualified staff for each essential function and limitations to authority.
    - *Administrative: for full operational activities*
    - *Emergency: temporary delegation during emergency*

Medical Billing

Medical Billing Leadership			
	Title	**Successor's Title**	**Delegation of Authority (Administrative or Emergency)**
1	**Director of Medical Billing**	**Medical Billing Manager**	
2	**Medical Billing Manager**	**Medical Billing Supervisor**	
3	**Medical Billing Supervisor**	**Medical Billing Lead**	

What authority should the Medical Billing Manager have?
What authority should the Medical Billing Supervisor have?
What authority should the Medical Billing Lead have?

Use the chat feature to respond to the question.

Personnel: Human Resources

- Plan for reduction in workforce
- Plan for employees working from home
- Emergency policies for overtime, leave with/without pay, flexible leave options, vacation time, sick time
- Potential health and safety issues
- Union issues
- Employee assistance program
- Employee support (food, transportation, child/pet/elder care)

Medical Billing

Topic	Location
Plan for reduction in workforce	
Plans for employees to work from home	
Emergency policies for overtime, leave with pay, leave without pay, flexible leave options, vacation time, sick time	
Potential health and safety issues/liability	
Union issues with any of the above	
Employee Assistance Program for mental health and health insurance provisions	
Employee Support Plans (food and lodging, transportation, Childcare / elder care, pet care)	

Where do your HR policies live?
Are any of these policies up to the department?

Use the chat feature to respond to the question.

Questions?

Use the chat feature to respond to the question.

Logistics and Support: Alternate Facilities

- Pre-Identified locations (one close, one further)
  - Equipment / supplies
  - Security
  - Formal agreement to use the space
  - Other needs: restrooms, utilities, food preparation
- Pre-Identified Services
  - Level and scope of care (clinical services)
  - Staffing requirements
  - Transportation of patients, patient tracking, EMR

Medical Billing

Department Name and Location	Alternate 1	Alternate 2	Specific Department Needs/Services	# of Staff
Medical Billing Admin. Bldg. 200 Main St.	Clinical Services 500 Main Street	Work at Home employees	- Billing software access - PC, internet, phones, desk - Restrooms	6

What else may Medical Billing need in an alternate location?

Use the chat feature to respond to the question.

Logistics and Support: Information Technology

- What IT systems does Medical Billing need access to?
- What equipment is needed?
- Can Medical Billing be accomplished at a remote location?
- How would Medical Billing be relocated to an alternate facility?

Logistics and Support: Vital Records

Vital File, Record, or Database	Form of Record (e.g., hardcopy, electronic)	Pre-positioned at Alternate Facility	Hand Carried to Alternate Facility	Backed up at Third Location
Contact List	Hard copy			
Alternate Sites and data	electronic			
Medical Record Database	electronic			

What vital records would Medical Billing need access to?

Use the chat feature to respond to the question.

Communications:
Medical Billing

- How is Medical Billing notified of a disruptive event?
- How does Medical Billing communicate with their staff?
- How does Medical Billing know when to relocate?
- How does Medical Billing communicate from their alternate site?
- Can Medical Billing devolve to another organizations?

Reconstitution: Medical Billing

- What would Medical Billing need to ensure before they return to their primary location?
- What support would they need?

Training, Testing, and Review: Medical Billing

- What training would the Medical Billing staff need in regards to COOP?
- What tests of the plan could Medical Billing staff participate in?

Questions?

Use the chat feature to respond to the question.

Practical Advice

- Ask for resources (we have them!)
- Build your Business Impact Analysis (BIA) Questionnaire early
- Use technology to collect and store data
- Leadership engagement
- Break this into manageable pieces
- Use existing committees or meetings
  - EM – EOC – Regulatory – Patient Safety
  - Steering Committee vs. Worker Bee Committee

Discussion Question

- What are some topics that we should include in the workshop?

Use the chat feature to respond to the question.

COOP Development Workshop

prepared for the

Northeast Region Healthcare Coalition

Save the Date!

The Northeast Region Healthcare Coalition (NERHCC) has contracted with All Clear Emergency Management Group to provide a series of Continuity of Operations (COOP) Plan training and development workshops for healthcare coalition members in the northeast region. Register below for an upcoming workshops.

COOP Development Workshop #1	COOP Development Workshop #2
Date: February 5, 2020	**Date:** February 13, 2020
Time: 9:00am-3:00pm	**Time:** 10:00am-4:00pm
Location: Pathways, 305 Carpenter Road, Fort Collins, CO 80525	**Location:** Haxtun Community Center, 125 E Wilson St, Haxtun, CO 80731

Workshop Objectives

- Provide an outline and additional resources for COOP Plan writing
- Practical tips and tricks for COOP plan writing
- Facilitate initial discussion regarding NERHCC Mission Essential Functions
- Develop standardized Business Impact Analysis (BIA) Questionnaire

To Register: Click HERE

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Your Next Steps

- Register for the In-Person Workshop
  - https://www.surveymonkey.com/r/3BWVD53
- Review COOP Resources (provided by link)
- Obtain copy of your Organization Chart
- Review the NERHCC COOP Worksheet

Thank you!

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