

Business Continuity Plan Example

<Insert organization name>

P h a r m a c y

Table of Contents

Section I: General	3
Section II: Activation	3
Section III: Overview	4
Section IV: Continuity Requirements	5
Mission Critical Services and Processes	5
Interdependencies	6
Mission Critical Equipment and Supplies	7
Mission Critical IT Applications	9
IT and Communications Downtime Procedures	9
Mission Critical Vital Records	11
Personnel	12
Section V: Continuity and Recovery	14
Initial Actions	14
Loss of Corporate Services	15
Alternate Location	16
Recovery and Resumption of Mission Critical Services	21
Appendix A: Schedules	22
BCP Update Schedule	23
BCP Exercise and Training Schedule	24

This Business Continuity Template has been developed by Wakefield Brunswick and provided by Santa Cruz County. It is intended to be sample data only. Please modify this document to reflect the policies and procedures at your organization.

Section I: General

The purpose of the Business Continuity Plan is to assist the organization with ensuring that mission critical services and process are maintained, restored or augmented to meet the designated Recovery Time Objectives (RTO).

Following the command/ICS structure, the Business Continuity Operations Branch will lead BCP activities to:

- a. Facilitate the acquisition of and access to essential recovery resources, including business records (e.g., patient medical records, purchasing contracts).
- b. Support the Infrastructure and Security Branches with needed movement or relocation to alternate business operation sites.
- c. Coordinate with the Logistics Section Communications Unit Leader, IT/IS Unit Leader and the impacted area to restore business functions and review technology requirements.
- d. Assist other branches and impacted areas with the restoring and resuming of normal operations.

Section II: Activation

In an event that disrupts normal operations and impacts essential operations of PHARMACY Department, measures are to be taken to prepare and pre-position resources to ensure continuity of mission critical services and processes. An algorithm of considerations and decisions are illustrated in the table below.

The Command Center (CC) responds to events that can impact the ability of <Insert facility name>\ to perform its normal daily functions. The CC is comprised of personnel with the knowledge and authority to provide support to the Emergency Response and Recovery activities.

<Insert algorithm>

NOTE: If your department cannot operate and/or there is a life safety issue, go directly to Evacuation Procedures located in the EOP.

Section III: Overview

This business continuity plan (BCP) is intended to be implemented when there is an event that disrupts normal business operations. Plan activation is described in Section II : Activation.

This plan defines the mission critical services and processes and procedures to ensure they can be continued and/or recovered when normal operations are not viable.

This BCP was developed in conjunction with the <Insert facility name> emergency planning effort. In developing this plan and all associated procedures, checklists and forms, the continuity between the <Insert facility name> and the associated departments can be ensured. Note that in order for the plan to be effective, exercises and trainings of this plan must be carried out by <Insert facility name> PHARMACY on an annual basis. Additionally, updates to the plan and all associated checklists, forms and procedures will be made on an annual basis in concert with the Office of Emergency Preparedness.

For purposes of this plan and all associated procedures, checklists and forms, an event is defined as any planned or unplanned situation that disrupts the normal operations of the department.

<Insert organization/department description and location>

This plan describes the procedures for continuity or, if needed, contingencies for the recovery of services at an alternate location. Strategies for continuing operations when key services are unavailable are detailed on page X.

Section IV: Continuity Requirements

This section of the BCP includes the Pharmacy department's mission critical services and processes, personnel, alternate operating location(s). This information is to be completed and maintained by Pharmacy Director, unless otherwise noted.

This plan will remain accessible to staff at all times in the Emergency Operations Plan located in the administration suite.

Updates are to be made in coordination with the Office of Emergency Preparedness.

Mission Critical Services and Processes

For purposes of the BCP, we only used processes deemed mission critical for continuity of the Pharmacy.

Mission Critical Service/Process	
RECOVERY TIME 2-8 HOURS	RECOVERY TIME 24-48 HOURS
Secure medication inventory	Code Blue participation
Store medication inventory	Receive medication shipments
Review and Process orders	Print labels
Access to medication inventory	Clinical services
Order dispensing	Medication order entry (keyed or scanned)
	Medication reconciliation
	Dispensing of medication
	Monitoring of antibiotic usage
	Waste disposal
	Data management
	Facility-wide medication management

Interdependencies

To perform mission critical services, the Pharmacy department depends on the following internal and external services:

Dependency	Service	Actions if Service is Unavailable
Powered Printer	Print medication labels	✓ [insert actions when dependency is unavailable]
Shipped Inventory	Receipt and process of medication orders	✓ [insert actions when dependency is unavailable]
		✓
		✓

Mission Critical Equipment and Supplies

During activations, the On-Duty Manager/Supervisor in coordination with the Pharmacy Storeroom staff will assess the Pharmacy department's Essential Equipment and Supplies and report the status to the Hospital Command Center (HCC) as requested. During this process the following steps will be taken:

- ✓ Document status of major equipment or critical supplies and how long they can operate with present supply of vital consumable materials.
- ✓ Take inventory of current equipment and supplies and create a resupply list.
- ✓ Check condition of storage or onsite stockpiles to determine the level of damage.

Quantity	Description
	Hood (Negative Air Flow)
	Pharmaceuticals (Medication Inventory)
	Medication Refrigerators
	Storage & Security
	Secure Transportation
	Transfer Medication Cart
	Rapid Sequence Intubation Kit
	Malignant Hyperthermia Cart
	Totes/Boxes
	Sanitation Supplies

Vendors/Resources Call List

Company	Point of Contact	Phone Number	Emergency contract in place? Y/N

Mission Critical IT Applications

Mission Critical Applications	
RECOVERY TIME 0 – 2 HOURS	Essential Function or Service
Cerner	Medication order entry, clinical services, medication reconciliation, data management, validating allergies, monitoring past doses
Omnicell	Facility-wide medication management, dispensing of medication
ERP	Orders and inventory
HI Jump	Handscanner to feed to ERP through Webwise
Webwise	Interface
Syncromatics	Transit system for delivery vehicle
SunQuest (LAB)	Determine pharmacy dosing based on lab results
Cardinal Health	Internet-based supply ordering portal

IT and Communications Downtime Procedures

Administrative responsibility of the downtime procedures resides with each department. Department responsibility includes maintenance of the downtime procedures, which specifies the alternative processes that are to be activated to assure continuity of clinical and other services during a downtime event. The downtime procedures are to be reviewed and tested, at minimum, on a yearly basis.

	Downtime Procedures Checklist
Computer & Network Disruption	 Activate the downtime procedures. MD will handwrite orders on manual order sheets. Pharmacy orders will be faxed. Stat or Urgent orders will be called in. List specific telephone instructions to be given to patients or other parties. (What exactly would you want people who speak to the patients say about the situation? Write this down so that everyone is saying the same thing.)
	Charts are located in A runner/courier will need to walk to

Computer	this location to retrieve patient charts for the rest of the day.
& Network	Keep track of data that were entered just prior to the system going down. Data
	should be checked when the system comes back up to make sure the information
Disruption	was not lost.
continued	
Recovery	Any new orders should be put into the system. All paper orders during disruption will be stored in the patient charts.
	Any patient families (or other parties) who were waiting for information will be called.
	Any dictation that was held due to the disruption should now be dictated into the restored system.
Downtime Procedures	Department will immediately activate the downtime procedures for telecommunications.
for	 Department will locate the personal cell phone listing kept within their
Telephone	department and initiate the cell phone call tree.
Disruption	If possible, the main department phone number(s) will be transferred to one of the remote sites for message taking.
	☐ The designated operator will be provided with a contact list of cell phone numbers. This designated operator will triage calls as they come in from patient families, etc. to the correct party. The message should be: ○ "Good Morning (afternoon). Would you kindly provide me with your name and phone number? We are currently experiencing a telephone outage. I will communicate your message to the correct division/individual and they will return your call. Our Telecommunications Staff is working on a resolution to the disruption."
Recovery	 Telephone Operator who has been taking calls will be alerted that main phone systems are back up and running. Fax machine will be checked for any queued messages and to make sure there is enough paper in machine to print all stored messages.

Mission Critical Vital Records

Vital Records are documents that have been pre-identified as critical to the continued operations of the Pharmacy, including those of significance to legal and financial rights of the organization.

Personnel will be deployed during an emergency to ensure the protection and ready availability of references, records and information systems needed to support essential functions under the full spectrum of emergencies. Personnel and locations of vital records have been identified before an event in order to have full access to use records and systems to conduct essential functions during a crisis event.

Record Number	Record Type	Location	Record Name/Function
	Paper		Employee files
	Paper/Electronic		Invoices
	Electronic		Patient Records
	Paper		Waiver, transfer forms, and process
	Paper		Templates for dispensing, tracking, and charging
	Electronic		CSOS 222 Forms
	Paper		Downtime MAR

Personnel

The personnel listed in the table below are those that have been deemed essential to their specific unit/department in maintaining mission critical services and operations.

The personnel listed below are also included on the Call Tree Notification, and are to be notified of BCP activation as determined on the Call Tree Notification.

Pharmacy Business Continuity Response Team Roles

Departmental Recovery Team Leader

Each department has identified its Departmental Recovery Team Leader. It is the role of this individual to work with the HCC to minimize the impact to departmental operations by resuming and recovering critical functions to the service levels and within the Recovery Time Objectives defined in this Business Continuity Plan.

Last Name	First Name	Home Phone	Cell Phone	Title

		Loss of Staffing			
Department		Evaluate current staffing levels.			
-		Activate your call list and notify employees as to plan activation and determine			
Manager		availability. Have staff report to department.			
		Notify human resources, managers, union representatives and other key			
		personnel as to status and plan implementation.			
		Explore alternative staff resource options. If needed:			
		 Identify similar core competencies that exist 			
		 Request staffing needs update from the labor pool to sustain essential 			
		functions.			
		 Secure contract staff or borrow from another facility. 			
		Cross train staff with similar competencies by educators.			
		Evaluate immediate and ongoing staff needs based on existing and predicted			
		levels of human resources available.			
		Identify contractors or other staff options that may alleviate problems			
		resulting from staff loss.			
		Assess flexible leave options that would allow employees to address family			
		needs while continuing to support the employing organization through a			
		flexible work plan where feasible.			
		Assessment of union issues surrounding overtime issues and sharing of			
	responsibilities among workers.				
		☐ Evaluation of potential health and safety issues that might arise through diversion of staff to new job roles and loss of critical staff in various			
		operational positions.			
		Prepare and implement contingency staffing schedule			

Section V: Continuity and Recovery

Following the occurrence of an event adversely impacting the ability to operate, decisions regarding continuity and/or recovery of operations and patient care will be made. The decision will be based on the results of the damage assessment, the nature and severity of the event and other information supplied by staff, emergency responders or inspectors. If the department experiences major damage, loss of staffing, a dangerous response environment or other problems that severely limit its ability to meet needs, the Incident Commander, in consultation with department leadership, may relocate operations.

Initial Actions

Notify employees of BCP activation.
Document status of major equipment and critical supplies (see Equipment and Supplies List).
Document pharmaceutical availability and determine need for additional pharmaceuticals.
Evaluate and document immediate staffing levels.
Determine how long you can operate in current state.
Assess need to close down department and/or relocate services.
Communicate status, including resource needs, department closure requirements and staffing
shortages to Hospital Command Center (HCC).
Communicate need to close down and/or relocate services to HCC.
Evaluate ongoing staff needs based on existing and predicted levels of human resources available.
Implement alternative staff resource options, including contractor staffing options that may
supplement staffing needs (i.e., runners).
Identify runners to submit orders to the pharmacy and dispense medications.
List specific telephone instructions to be given to patients or other parties. (What exactly would you
want people who speak to the patients say about the situation? Write this down so that everyone is
saying the same thing.)

Loss of Corporate Services

Each department depends on corporate services to operate. Department responsibility includes maintenance of the downtime procedures, which specifies the alternative processes that are to be activated to assure continuity of clinical and other services during a downtime event. The procedures are to be reviewed and tested, at minimum, on a yearly basis.

Loss of Power		Outlets served by the emergency generator are identified by red outlets.			
		Open curtains and drapes to take advantage of natural or off-site			
		lighting, as applicable.			
		Turn off "unnecessary" electrical equipment to reduce load on			
		generator. Also turn off any equipment that may have been running			
		when the power went out.			
		Ensure Omnicells are connected to outlets served by the emergency			
		generator, or move necessary medications into a refrigerator already			
	_	served by the generator.			
		Remove ice from ice machines and place into freezers that are supplied			
	_	by the emergency generator.			
		Ensure operation and availability of flashlights and batteries. In the event of the loss of the generator serving the facility, and the			
		commercial power source, the following would be required:			
		 <insert actions="" additional=""></insert> 			
Loss of HVAC		Notify Facilities. Should there be a failure of any equipment or portion			
LOSS OF TIVAC		Ciba DNAC and an ibat an early become all builts.			
LUSS OF TIVAC		of the HVAC system that cannot be corrected by the			
LOSS OF TIVAC		Engineering/Maintenance person on duty.			
LOSS OF TIVAC		Engineering/Maintenance person on duty. o If units are relocating the patients [e.g. holding area],			
LOSS OF TIVAC		Engineering/Maintenance person on duty. o If units are relocating the patients [e.g. holding area], determine if pharmacist is needed.			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. 			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building 			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. 			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. 			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. Open doors and windows, if possible, to take advantage of 			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. Open doors and windows, if possible, to take advantage of available breezes. 			
LOSS OF TIVAC		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. Open doors and windows, if possible, to take advantage of available breezes. Turn off lights as well as other heat-producing appliances whenever possible. Provide plenty of liquids for patients and staff. 			
Loss of Water		 Engineering/Maintenance person on duty. If units are relocating the patients [e.g. holding area], determine if pharmacist is needed. Use fans, if available. Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight. Open doors and windows, if possible, to take advantage of available breezes. Turn off lights as well as other heat-producing appliances whenever possible. 			

Alternate Location

<Insert organization>'s overall business continuity recovery strategy is based upon using existing internal resources for recovery of services and operations impacted by a disruptive event, whenever possible.
Primarily, this involves the relocation of departmental services to one of three alternates:

- i. The designated department staff would relocate to an alternate location, as identified in the Business Continuity Plan.
- ii. Designated department staff may be assigned to other work groups.
- iii. Staff equipped to work at home may be assigned to continue to work at home.

In an event where a primary Pharmacy department location is deemed to be inoperable or unsafe, the Pharmacy Director, or designee, will initiate department closure procedures and activate the alternate location which may provide full or limited operational capability.

NOTE: Relocation will be coordinated with the Hospital Command Center and/or the campus Emergency Operations Center, as appropriate.

Conditions for consideration: Security, controlled access, water source, ventilation/hoods, refrigeration, backup power.

☑ Full Operational Capability	☐ Limited Operational Capability
Address:	
Contact Number/s: ###-#####	
☐ Full Operational Capability	☑ Limited Operational Capability
Address: Contact Number/s: ###-#####	
☐ Full Operational Capability	☑ Limited Operational Capability
Address: Contact Number/s: ###-#####	

	Prior to Closing Down Department Checklist		
Department	☐ Review and fill out Closure Form		
Manager	☐ Determine discharge areas and inform those picking up patient(s) of the location		
	and circumstances of event.		
	☐ Determine which patients will need staff to accompany them during the relocation.		
	Any supplies or equipment needed for specialized treatment will be packaged and		
	evacuated with the patient (bedside and special medications).		
	☐ Patient medications to accompany patient, if possible:		
	 Must be dosage-specific for each patient. 		
	 Must be identified with patient name and medical record number. 		
	☐ Notify the state of need to move patients and gain authorization for movement of		
	controlled substances with patients.		
	☐ Controlled substance will not go with the patient unless a nurse or physician		
	accompanies the patient.		

	Department Closure Checklist	
Department		Coordinate with CC: criteria to shut down, location of alternate location, set up,
Manager		supplies needed, transport of equipment/supplies, fluids, areas designated for
		staff, security of medications and building, and I.T. accessibility.
		Notification of closure and relocation site with exact date/time to staff and
		departments.
	Equipn	nent and Supplies
		Request par level for supplies and determine essential needs for alternate site.
		Collaborate and gather supplies to include vital records to record care.
		Contact CC to have transport brought to loading area for supplies.
		Designate staff to load supplies in appropriate vehicles with inventory of those
		being relocated.
		Collaborate with I.T. areas for computer access, application availability and
		areas in need.
	Commi	unication
	_	
		Notify external agencies of relocation.
		Notification of PIO to release information about relocation.

Relocation Checklist Transportation ☐ Arrange transport of critical supplies and medications ☐ Notify Command: transport vehicles needed at loading area ☐ Contact alternate site in route to relocation site. ☐ Relocate to alternate site. **Alternate Location** ☐ Designate location for record collection and privacy with specified personnel. ☐ Place medications in designated area and secure. ☐ Inventory meds with pharmacy personnel. ☐ Establish the release process for medications from designated area with record keeping/charges. ☐ Designate staff to unload equipment/supplies and equipment to designated areas. Designate area for staff breaks and rest periods. Post signage. ☐ Ensure security of building with IC, Maintenance and local law enforcement agencies. Provide breaks and rest periods to staff. ☐ Re-evaluate staff schedule and needs per shift and adjust as needed. ☐ Assign staff to return and inventory equipment placing back into appropriate areas. ☐ Assign staff to patient care areas as needed.

Relocation Checklist (cont.) ☐ Collaborate with I.T., Business Office and Admissions: assignments of data **Department** entry not captured at alternate care site to be inputted into EMR. Manager ☐ Provide all hard copy records to those designated to enter data into EMR. ☐ Do not dispose of unsalvageable equipment. Everything must be inventoried and evaluated for insurance purposes. ☐ Use pre-existing order lists of products and supplies for each area to inventory supplies and create resupply lists. ☐ Identify any equipment and/or supplies currently in storage that can be used to replace missing or damaged items. ☐ Ensure that the environmental staff has the chemicals and cleaning supplies needed to begin clean up. Assist Biomed team to return and reconfigure medical equipment that was moved or disconnected during the relocation Work with Biomed teams and vendors to ensure that any specialized medical equipment and systems are functioning correctly. Work with IT and Communications to identify missing or damaged computers or communications equipment.

Recovery and Resumption of Mission Critical Services

Prior to returning to the primary site during the recovery phase, it is essential to determine the status of the facility and equipment. Once it is confirmed that essential infrastructure and supplies are available, services may be resumed at primary workspace/patient care unit. Preparations to initiate these actions should be taken at the earliest time possible.

	Recovery and Resumption of Mission Critical Services Checklist
Department	☐ Confirm with the CC to validate all clear to return to facility.
Manager	Assign staff to gather supplies.
	☐ Collect hard copy records.
	Contact IC on transport of equipment/supplies/meds, staff and records.
	Expand vendor managed inventories.
	Load supplies, equipment, records and return to facility.
	☐ Secure temporary staff.
	Extend work shifts at approved overtime pay rates.
	Obtain and monitor inventory levels routinely.
	☐ Designated staff to return to facility.
	☐ Return to facility.
	☐ Notify EMS agencies of reopening.
	☐ Notify PIO to release communication to public of reopening.

Appendix A: Schedules

BCP Update Schedule
BCP Exercise and Training Schedule

BCP Update Schedule

In order to ensure efficacy of the BCP it is to be reviewed and updated on the schedule as outlined below. Pharmacy is responsible for maintaining and carrying out the Update Schedule. Once updated, the Plan must be provided to all responsible parties and the previous version is to be gathered and destroyed.

NOTE: Following an event it will be determined whether an out-of-cycle update is required. If so, the update will be recorded and then will be revised and distributed as outlined above.

BCP updates may occur with:

The addition of new employees or transferred employees to your department.
The relocation of employees, supply areas or other resources.
Changes in departmental procedures that would affect downtime procedures.
Changes in staff or management telephone numbers, pagers, etc.
Changes in management or reporting structure within your department.
New computer systems to be used by your department.
Changes in vendors that you are using.
After an actual downtime occurs.
Annual review.

Scheduled Update	Plan Version

BCP Exercise and Training Schedule

The BCP will be exercised and trained on the schedule outlined below. Exercises and trainings should occur prior to the required plan update in order for the lessons learned to be reflected in the update.

The Director of Emergency Management is responsible for ensuring the exercises and trainings are carried out and documented.

Scheduled Update	Plan Version