



Red Lake Margaret Cochenour  
M E M O R I A L H O S P I T A L

# **Red Lake Margaret Cochenour Memorial Hospital**

## **Business Continuity Plan**

Version 2.0

Dec 18, 2024

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## Section I: Introduction

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### A. How to Use This Plan

In the event of a disaster which interferes with RLMCMH's ability to conduct business from one of its departments or the entire hospital, this plan is to be used by the responsible individuals to coordinate the business recovery of their respective areas and/or departments. The plan is designed to contain, or provide reference to, all of the information that might be needed at the time of a business recovery.

This plan is not intended to cover the operations of RLMCMH's separately structured Emergency Response Team.

#### Index of Acronyms:

(EOC) Emergency Operations Center

(IMT) Incident Management Team

(ERT) Emergency Response Team

(BCP) Business Continuity Plan

(IT) Information Technology

**Section I, Introduction**, contains general statements about the organization of the plan. It also establishes responsibilities for the testing (exercising), training, and maintenance activities that are necessary to guarantee the ongoing viability of the plan.

**Section II, Business Continuity Strategy**, describes the strategy that the Administrative Department will control/implement to maintain business continuity in the event of a facility disruption. These decisions determine the content of the action plans, and if they change at any time, the plans should be changed accordingly.

**Section III, Recovery Teams**, lists the Recovery Team functions, those individuals who are assigned specific responsibilities, and procedures on how each of the team members is to be notified.

**Section IV, Team Procedures**, determines what activities and tasks are to be taken, in what order, and by whom in order to affect the recovery.

**Section V, Appendices**, contains all of the other information needed to carry out the plan. Other sections refer the reader to one or more Appendices to locate the information needed to carry out the Team Procedures steps.

## B. Objectives

The objective of the Business Continuity Plan is to coordinate recovery of critical business functions in managing and supporting the business recovery in the event of a facilities (office building) disruption or disaster. This can include short or long-term disasters or other disruptions, such as fires, floods, earthquakes, explosions, terrorism, tornadoes, extended power interruptions, hazardous chemical spills, and other natural or man-made disasters.

**A disaster is defined as any event that renders a business facility inoperable or unusable so that it interferes with the organization's ability to deliver essential business services.**

**The priorities in a disaster situation are to:**

1. Ensure the safety of employees, patients, families, volunteers, contractors and visitors in the office buildings. (Responsibility of the ERT)
2. Mitigate threats or limit the damage that threats can cause. (Responsibility of the ERT)
3. Have advanced preparations to ensure that critical business functions can continue.
4. Have documented plans and procedures to ensure the quick, effective execution of recovery strategies for critical business functions.

The RLMCMH Business Continuity Plan includes procedures for all phases of recovery as defined in the Business Continuity Strategy section of this document.

## C. Scope

The Business Continuity Plan is limited in scope to recovery and business continuance from a serious disruption in activities due to non-availability of RLMCMH's facilities. The Business Continuity Plan includes procedures for all phases of recovery as defined in the Business Continuity Strategy of this document. This plan is separate from RLMCMH's Disaster Recovery Plan, which focuses on the recovery of technology facilities and platforms, such as critical applications, databases, servers or other required technology infrastructure (see Assumption #1 below). Unless otherwise modified, this plan does not address temporary interruptions of duration less than the time frames determined to be critical to business operations.

The scope of this plan is focused on localized disasters such as fires, floods, and other localized natural or man-made disasters. This plan is not intended to cover major regional or national disasters such as regional earthquakes, war, or nuclear holocaust. However, it can provide some guidance in the event of such a large scale disaster.

## D. Assumptions

The viability of this Business Continuity Plan is based on the following assumptions:

1. That a viable and tested IT Disaster Recovery Plan exists and will be put into operation to restore data center service at a backup site within five to seven days.
2. That the Incident management team has identified available space for relocation of departments which can be occupied and used normally within two to five days of a facilities emergency.
3. That this plan has been properly maintained and updated as required.
4. That each department has their own Business Continuity Plan outlined in the appendices of this document.
5. The functions and roles referenced in this plan do not have to previously exist within an organization; they can be assigned to one or more individuals as new responsibilities, or delegated to an external third party if funding for such services can be arranged and allocated.

## E. Changes to the Plan/Maintenance Responsibilities

Maintenance of the RLMCMH Business Continuity Plan is the joint responsibility of the RLMCMH management team, the Facilities Management Department, and the Business Continuity Coordinator.

### Each Department manager is responsible for:

1. Periodically reviewing the adequacy and appropriateness of its Business Continuity strategy.
2. Assessing the impact on the RLMCMH Business Continuity Plan of additions or changes to existing business functions, RLMCMH procedures, equipment, and facilities requirements.
3. Keeping recovery team personnel assignments current, taking into account promotions, transfers, and terminations.
4. Communicating all plan changes to the Business Continuity Coordinator so that the organization's Plan can be updated.

### Senior Leadership Team is responsible for:



1. Maintaining and/or monitoring offsite office space sufficient for critical RLMCMH functions and to meet the RLMCMH facility recovery time frames.
2. Communicating changes in the "Organization IT Disaster Recovery Plan" plan that would affect groups/departments to those groups/departments in a timely manner so they can make any necessary changes in their plan.
3. Communicating all plan changes to the Business Continuity Coordinator so that the master plan can be updated.

**The IT manager is responsible for:**

1. Keeping the organization's IT Recovery Plan updated with changes made to RLMCMH facilities plans.
2. Coordinating changes among plans and communicating to the Senior Leadership Team when other changes require them to update their plans.

### **F. Plan Testing Procedures and Responsibilities**

Each Department Manager is responsible for ensuring the workability of their Business Continuity Plan. This should be periodically verified by active or passive testing.

### **G. Plan Training Procedures and Responsibilities**

Each Department Manager is responsible for ensuring that the personnel who would carry out the Business Continuity Plan are sufficiently aware of the plan's details. This may be accomplished in a number of ways including; practice exercises, participation in tests, and awareness programs conducted by the Business Continuity Coordinator.

# Red Lake Margaret Cochenour Memorial Hospital

## Introduction

## Emergency Preparedness Department Business Continuity Plan

### H. **Plan Distribution List (emergency preparedness committee to decide)**

The RLMCMH Business Continuity Plan will be distributed to the following departments and/or individuals, and will be numbered in the following manner:

Plan ID No	Location	Person Responsible
1	NOSM	Director of Quality, Risk and Support Services
2	SURGE	Director of Quality, Risk and Support Services and Executive Assistant

## Section II: Business Continuity Strategy

### A. Introduction

This section of the RLMCMH Business Continuity Plan describes the strategy devised to maintain business continuity in the event of a facilities disruption. **This strategy would be invoked should RLMCMH or a section of RLMCMH somehow be damaged or inaccessible.**

It is assumed that each critical business function at your location also has their own group/department Business Continuity Plan, which is similar to this plan except the recovery procedures and appendices have been customized for each respective group/department based on size, and complexity.

### B. Business Function Recovery Priorities

The strategy is to recover critical RLMCMH business functions at the alternate site location. This can be possible if an offsite strategy has been put into effect by Office Services and Disaster Recovery/IT Teams to provide the recovery service. Information Systems will recover IT functions based on the critical departmental business functions and defined strategies.

Business Functions by Location are listed in **Appendix B (Recovery Priorities for Critical Business Functions)** **Note the appendices are also listed by department which each have their own Appendix B.** “Time Critical Business Functions,” i.e., those of which are of the most critical for immediate recovery at the secondary location are:

**Reference: Appendix B – Recovery Priorities for Critical Business Functions**

### C. Relocation Strategy and Alternate Business Site

In the event of a disaster or disruption to the office facilities, the strategy is to recover operations by relocating to an alternate business site. The short-term strategies (for disruptions lasting two weeks or less), which have been selected, include:

Primary Location	Alternate Business Site
Ambulance Base	Red Lake District High School

For all locations, if a long-term disruption occurs (i.e. major building destruction, etc.); the above strategies will be used in the short-term (less than two weeks). The long-term strategies will be to acquire/lease and equip new office space in another building in the same local area.

## D. Recovery Plan Phases

The activities necessary to recover from a RLMCMH facilities disaster or disruption will be divided into four phases. These phases will follow each other sequentially in time.

### 1. Disaster Occurrence

This phase begins with the occurrence of the disaster event and continues until a decision is made to activate the recovery plans. The major activities that take place in this phase includes: **emergency response measures, notification of management, damage assessment activities, and declaration of the disaster.**

### 2. Plan Activation

In this phase, the Business Continuity Plans are put into effect. This phase continues until the alternate facility is occupied, critical business functions reestablished, and computer system service restored to RLMCMH's Departments. The major activities in this phase include: **notification and assembly of the recovery teams, implementation of interim procedures, and relocation to the secondary facility/backup site, relocation of current patients, and re-establishment of data communications.**

### 3. Alternate Site Operations

This phase begins after secondary facility operations are established and continues until the primary facility is restored. **The primary recovery activities during this phase are backlog reduction and alternate facility processing procedures. The hospital will function as a field site until normal operations can be resumed.**

### 4. Transition to Primary Site

This phase consists of any and all activities necessary to make the transition back to a primary facility location.

## E. Vital Records Backup

All vital records for each RLMCMH department that would be affected by a facilities disruption are maintained and controlled by either the Department Manager or Disaster Recovery/IT. Some of these files are periodically backed up and stored at an offsite location as part of normal RLMCMH operations.

When the hospital requires on-site file rooms, scanning, and organization offsite storage locations, best practices advise using the Safe Beds house or one near-by Records Warehouse (as determined by need at the time of the incident) and another secure site for vital records and data back-up. All vital documents are typically located in files within the office complex and the most current back-up copies are in a secure off-site storage facility.

**F. Restoration of Hardcopy Files, Forms, and Supplies**

In the event of a facilities disruption, critical records located in each department may be destroyed or inaccessible. In this case, the last backup of critical records in the secure warehouse would be transported to the secondary facility. The amount of critical records, which would have to be reconstructed, will depend on when the last shipment of critical records to the offsite storage location occurred.

**RLMCMH management will arrange the frequency of rotation of critical records to the offsite storage site.**

The following categories of information can be exposed to loss:

1. Any files stored on-site in file cabinets and control file rooms.
2. Information stored on local PC hard drives.
3. Any work in progress.
4. Received and un-opened mail.
5. Documents in offices, work cubes and files.
6. Off-site records stored in the Records Warehouse (if this is not a secure, hardened facility).

**G. On-line Access to RLMCMH Computer Systems**

In the event of a facilities disruption, the IT Disaster Recovery Plan strategy should be to assist in re-establishing connectivity to the RLMCMH departments and to establish remote communications to any alternate business site location. If the data center is affected by a disaster or disruption, the IT Disaster Recovery Plan should include recovering processing at a pre-determined alternate site. Services covered would include; phones, cellular phones, pagers, communications, and all other services required for restoring limited emergency service to the organization.

In this case, data communications will be rerouted from the data processing hot or cold site to the respective alternate business site locations.

## H. Mail and Report Distribution

During the time that RLMCMH department operations are run from the secondary facilities, output reports and forms will have to be delivered to that location. The data center may or may not have the same print capability if the disruption affected the data center as well, so it may be necessary to prioritize printing of output.

The EOC Administration Team in conjunction with designated delivery/courier services will distribute mail to all RLMCMH alternate business sites. Due to the possibility of multiple alternate business sites and the additional travel time required for mail service activities, the number of mail pickups and deliveries could possibly be decreased from the normal daily routine to once daily. Mail pickup and delivery schedules, including overnight mail, will be established and communicated to each alternate business site. Overnight mail/package delivery carriers should be contacted directly by a business function for items requiring pickup after the last scheduled pickup by the EOC Administration Team. All overnight mail service vendors will be notified by the EOC Administration Team of appropriate alternate office addresses to redirect deliverables to RLMCMH personnel or provide for pick up at the post office by a Team member.

## **Section III: Recovery Teams**

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### **A. Purpose and Objective**

This section of the plan identifies who will participate in the recovery process for the RLMCMH Business Continuity Plan. The participants are organized into one or more teams. Each team has a designated team leader and an alternate for that person. Other team members are assigned either to specific responsibilities or as team members to carry out tasks as needed.

**The information in this section is organized into several subsections.**

### **B. Recovery Team Descriptions**

This section lists the team definitions for the RLMCMH Team and gives a short explanation of the function of each team or function.

RLMCMH Recovery Team:

**Responsible for oversight of the RLMCMH recovery functions.**

### **C. Recovery Team Assignments**

This section identifies the team roles and the specific responsibilities that have been assigned to the team.

**Team leader/Manager** - Overall coordination of their respective department's Recovery Team

**Backup Team Leader** - Duties to be assigned based on Recovery Team areas of responsibility.

**Team Member** - Duties to be assigned based on Recovery Team areas of responsibility

## D. Personnel Notification

This section specifies how the team members are to be notified if the plan is to be put into effect by identifying who calls whom, and in what order. Notification can also be made by using tools such as reverse 911 or other notification systems.

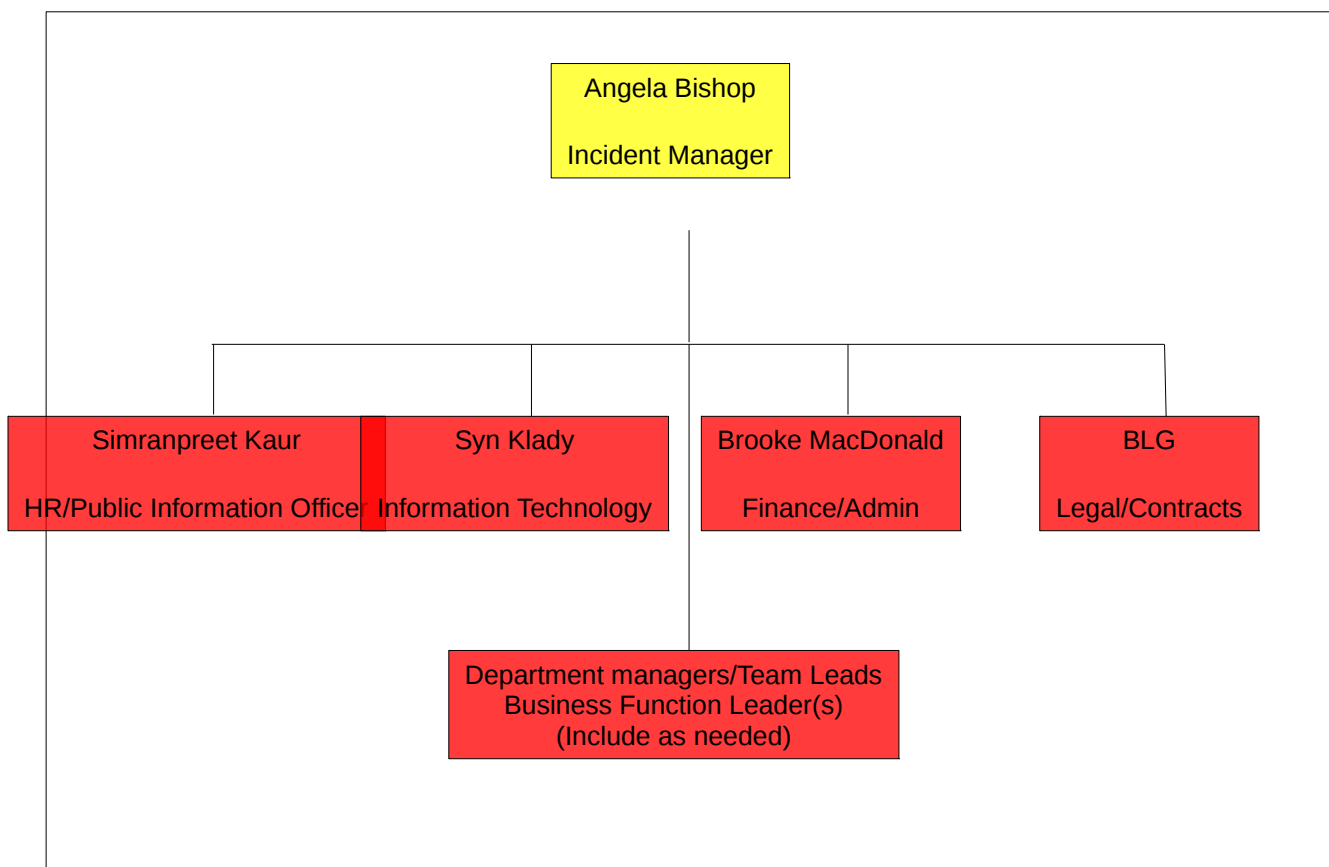
**Centralized employee list found on “Text Magic” or Call-in binders at nursing station**

## E. Team Contacts

This section identifies other people or organizations outside of each team who might need to be contacted during the recovery process. Their names and telephone numbers are provided.

Reference: [Appendix A – Employee Telephone Lists](#)

## F. Team Responsibilities





[illegible]

### **Business Continuity Coordinator – Director of Quality, Risk and Support Services**

In the event of a disaster, the Business Continuity Coordinator is responsible for ensuring that the following activities are successfully completed:

- Works with the RLMCMH Emergency Management Team to officially declare a disaster, and start the Disaster Recovery/Business Continuation process to recover RLMCMH's business functions at an alternate site.
- Alert RLMCMH's Senior Management that a disaster has been declared.
- Assist in the development of an official public statement concerning the disaster. The RLMCMH's EOC Communications Team Leader is the only individual authorized to make public statements about organization affairs.
- Monitor the progress of all Business Continuity and Disaster Recovery teams daily.
- Present Business Continuity Plan recovery status reports to Senior Management on a daily basis.
- Interface with appropriate work management personnel throughout the recovery process.
- Communicate directions received from RLMCMH's Senior Management to the EOC and Departmental Business Continuity Team Leaders.
- Provide on-going support and guidance to the Business Continuity teams and personnel.
- Review staff availability and recommend alternate assignments, if necessary.
- Work with RLMCMH's Senior Management to authorize the use of the alternate recovery site selected for re-deploying critical RLMCMH resources.
- Review and report critical processing schedules and backlog work progress, daily.
- Ensure that a record of all Business Continuity and Disaster Recovery activity and expenses incurred by RLMCMH is being maintained.

### **EOC Communications Team – Led by Director of Employment Services**

This team is responsible for providing information regarding the disaster and recovery efforts to:

- RLMCMH and organization offices Senior Management
- Customers
- Vendors/Contracts
- Media

- Regulatory Agencies
- Other Stakeholders
- Coordinating, submitting, and tracking any and all claims for insurance.

**EOC Human Resources Team – HR Manager/Finance**

This team is responsible for:

- Providing information regarding the disaster and recovery efforts to employees and families.
- Assisting in arranging cash advances if out of area travel is required.
- Notifying employee's emergency contact of employee injury or fatality.
- Ensuring the processing of all life, health, and accident insurance claims as required.
- Coordinates temporary organization employee requests.

**EOC Administration Team – EA assistants for RLMCMH and CCAS with Ward Clerks includes Stores and MDRD/Finance**

This team is responsible for:

- Ensuring the recovery/restoration personnel has assistance with clerical tasks, errands, and other administrative activities.
- Arranging for the availability of necessary office support services and equipment.
- Providing a channel for authorization of expenditures for all recovery personnel.
- Arranging travel for employees.
- Tracking all costs related to the recovery and restoration effort.
- Identifying and documenting when repairs can begin and obtaining cost estimates.
- Determining where forms and supplies should be delivered, based on damage to the normal storage areas for the materials.
- Contacting vendors to schedule specific start dates for the repairs.
- Taking appropriate actions to safeguard equipment from further damage or deterioration.
- Coordinating the removal, shipment, and safe storage of all furniture, documentation, supplies, and other materials as necessary.
- Supervise all salvage and cleanup activities.
- Coordinating required departmental relocations to the recovery sites.
- Coordinating relocation to the permanent site after repairs are made
- Assuring that arrangements are made for meals and temporary housing facilities, when required, for all recovery personnel.

- Assuring order placement for consumable materials (forms, supplies, etc.) for processing based upon input from the other teams.
- Notifying couriers of delivery disruption.
- Establishing internal mail delivery procedures and process.
- Assuring that mail, and reports are redirected to the proper location as required.

**Patient Care/ Emergency Response Team – CNE, DQR, CEO, Maintenance, NM, IPC**

This team is responsible for:

- The safety of all employees, patients and their families, volunteers and affiliates
- Inspecting the physical structure and identifying areas that may have sustained damage.
- Expanding on and/or revising the findings of the Preliminary Damage Assessment.
- Providing management with damage assessment reports and recommendations.
- Care for any injured persons
- Relocation of patients and patient supplies
- Determination of patient needs and transportation to alternate location
- Set up of field hospital and delivery of care
- Triage and set-up of new location

**Information Technology Recovery Team (See also Disaster Recovery Plan) – IT manager with assistance from CIO and Dryden IT**

This team is responsible for:

- Activating the IT Technology Recovery Plan (See also Disaster Recovery Plan).
- Managing the IT disaster response and recovery procedures.
- Mobilizing and managing IT resources.
- Coordinating all communications related activities, as required, with telephone & data communications, PC, LAN support personnel, and other IT related vendors.
- Assisting, as required, in the acquisition and installation of equipment at the recovery site.
- Ensuring that cellular telephones, and other special order equipment and supplies are delivered to teams as requested.
- Participating in testing equipment and facilities.
- Participating in the transfer of operations from the alternate site as required.

- Coordinating telephone setup at the EOC and recovery site.
- Coordinating and performing restoration or replacement of all desktop PCs, LANs, telephones, and telecommunications access at the damaged site.
- Coordinating Disaster Recovery/IT efforts between different departments in the same or remote locations.
- Training Disaster Recovery/IT Team Members.
- Keeping Senior Management and the EOC Business Continuity Coordinator appraised of recovery status.

## **Section IV: Recovery Procedures**

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### **A. Purpose and Objective**

This section of the plan describes the specific activities and tasks that are to be carried out in the recovery process for RLMCMH. Given the Business Continuity Strategy outlined in **Section II**, this section transforms those strategies into a very specific set of action activities and tasks according to recovery phase.

The Recovery Procedures are organized in the following order: recovery phase, activity within the phase, and task within the activity.

The recovery phases are described in **Section II.D** of the Plan. In the Recovery Procedures document, the phases are listed in the order in which they will occur. The description for each recovery phase begins on a new page.

Each activity is assigned to one of the recovery teams. Each activity has a designated team member who has the primary assignment to complete the activity. Most activities also have an alternate team member assigned. The activities will only generally be performed in this sequence.

The finest level of detail in the Recovery Procedures is the task. All plan activities are completed by performing one or more tasks. The tasks are numbered sequentially within each activity, and this is generally the order in which they would be performed.

## **B. Recovery Activities and Tasks**

### **PHASE I: Disaster Occurrence**

**ACTIVITY: Emergency Response and Emergency Operations Center Designation**

**ACTIVITY IS PERFORMED AT LOCATION: Main Office or Emergency Operations Center**

**ACTIVITY IS THE RESPONSIBILITY OF THIS TEAM: All Employees**

#### **TASKS:**

1. After a disaster occurs, quickly assess the situation to determine whether to immediately evacuate the building or not, depending upon the nature of the disaster, the extent of damage, and the potential for additional danger.

**Note:** If the CEO office is total loss, not accessible or suitable for occupancy, the remaining activities can be performed from the Emergency Operations Center (EOC) which is the ambulance base, after ensuring that all remaining tasks in each activity have been addressed. This applies to all activities where the Main Office is the location impacted by the disaster. The location(s) of the EOC are designated in **Appendix D - Emergency Operations Center (EOC) Locations**. The EOC may be temporarily setup at any one of several optional locations, depending on the situation and accessibility of each one. Once the Alternate site is ready for occupancy the EOC can be moved to that location.

2. Quickly assess whether any persons in your surrounding area are injured and need medical attention. If you are able to assist them without causing further injury to them or without putting yourself in further danger, then provide what assistance you can and also call for help. If further danger is imminent, then immediately evacuate the building.
3. If appropriate, evacuate the building in accordance with your building's emergency evacuation procedures. Use the nearest stairwells. Do not use elevators. Follow the patient evacuation sequence. Grab the Kardex, patient charts and any medical supplies you are able to beginning with crash carts and medication boxes/go kits.
4. **Outside of the building meet at Ambulance Base across parking lot. Do not wander around or leave the area until instructed to do so.**
5. Check in with your department manager for roll call. This is important to ensure that all persons are accounted for.
6. Provide medical assistance to all injured persons.
7. ERT to assess immediate patient needs and gather supplies
8. Begin determining and arranging patient transport as appropriate to either home, lodge or another accepting facility (triage based on need).





**ACTIVITY: Notification of Management**

**ACTIVITY IS PERFORMED AT LOCATION: At Any Available Phone**

**ACTIVITY IS THE RESPONSIBILITY OF: Charge nurse to Admin on call**

**PRIMARY: Charge nurse or designate to alert admin on call/in-charge**

**ALTERNATE: Admin on call to notify rest of management and below list**

**TASKS:**

1. Charge nurse informs the admin on call or admin in-charge who then notifies the senior management team if they have not been informed.
2. RLMCMH personnel are notified of the disaster by following procedures as included in **Section III. D. - Recovery Personnel Notification.**
3. Depending upon the time of the disaster, personnel are instructed what to do (i.e. stay at home and wait to be notified again, etc.)
4. Follow Code Orange disaster plan and call in process based on identified need.
5. CEO to Notify Ontario Health, Municipality and Provincial Emergency Operations Centre (PEOC)

**ACTIVITY: Preliminary Damage Assessment**

**ACTIVITY IS PERFORMED AT LOCATION: Main Office Location**

**ACTIVITY IS THE RESPONSIBILITY OF: Team Lead or Department Manager**

**TASKS:**

1. Contact the Organization Department of Quality, Risk and Support Services to determine responsibilities and tasks to be performed by each Department Management Team or employees.
2. If the Organization Incident Management Team requests assistance in performing the Preliminary Damage Assessment, warn all personnel to avoid all potential safety risks as follows:
  - Enter only those areas the authorities give permission to enter.
  - Ensure that all electrical power supplies are cut to any area or equipment that could pose a threat to personal safety by contacting the appropriate personnel (The Municipality, Fire Department or a Certified Electrician).
  - Ensure that under no circumstances is power to be restored to computer equipment until the comprehensive damage assessment has been conducted, reviewed, and authority to restore power has been expressly given by the Emergency Management Team.
3. Inform all team members that no alteration of facilities or equipment can take place until the Risk Management representatives (insurance and emergency services, fire, OPP, or experts in the field) have made a thorough assessment of the damage and given their written agreement that repairs may begin.
4. Instruct the Organization Incident Manager (CEO) to deliver the preliminary damage assessment status report immediately upon completion to HIROC, Ontario Health and other key community partners as required.
5. Facilitate retrieval of items starting with patient care items (contents of file cabinets -- petty cash box, security codes, network backup tapes, control books, etc.) needed to conduct the preliminary damage assessment.
6. Ensure that administrative support is available, as required.
7. Arrange a meeting with the Incident Management Team and Management Teams from other GROUPS/DEPARTMENTS in your facility (location) to review the disaster declaration recommendation that results from the preliminary damage assessment and to determine the course of action to be taken. With this group, determine the strategy to recommend to the board of governors (the Incident Manager will be responsible for communicating this to the board).

**ACTIVITY: Declaration of a Disaster**

**ACTIVITY IS PERFORMED AT LOCATION:** Main Office Location or Alternate Site/Emergency Operations Center

**ACTIVITY IS THE RESPONSIBILITY OF:** Incident Management Team

**TASKS:**

1. Actual declaration of a disaster is to be made by the Incident Management Team, after consulting with the board of governors. The Department Team Leads or Managers should wait for notification from the Incident Management Team that a disaster has been declared and that groups/departments are to start executing their Business Continuity Plans and relocate to their Alternate Business Site Location.
2. The person contacted verifies that the caller is someone who is authorized to do the notification.
3. The person contacted notifies the Team Lead/Manager, if they have not yet been contacted.
4. In the event the Incident Management Team cannot be assembled or reached, the Team Leaders from each Department at the location should assemble, gather appropriate information, consult with senior management, and make the decision whether to declare the disaster.
5. Because of the significance, disruption, and cost of declaring a disaster, appropriate facts should be gathered and considered before making the decision to declare a disaster. Individual groups/department personnel or the respective Departments should not unilaterally make a decision to declare a disaster. This is responsibility of the Incident Management Team.

## **PHASE II: Plan Activation**

**ACTIVITY: Notification and Assembly of Recovery Teams and Employees**

**ACTIVITY IS PERFORMED AT LOCATION: Alternate Site/Emergency Operations Center**

**ACTIVITY IS THE RESPONSIBILITY OF: Incident Management Team**

### **TASKS:**

1. The Incident Manager calls each member of the Incident management team, instructs them of what time frame to assemble at the RLMCMH Emergency Operations Center (to be decided at the time), and to bring their copies of the Plan. The location(s) of the EOC are designated in **Appendix D - Emergency Operations Center (EOC) Locations**. The EOC may be temporarily setup at any one of several optional locations, depending on the situation and accessibility of each one. Once the Alternate site is ready for occupancy the EOC can move to that location, if preferred.
2. Review the recovery strategy and action plan with the assembled team.
3. If necessary, adjust the management team assignments based on which members are available.
4. The Management Team contacts critical employees and tells them to assemble at the alternate site. If the alternate site is a long distance from the primary site (i.e. out-of-town), then individuals should make their own travel arrangements to the alternate site. Non-critical employees should be instructed to stay at home, doing what work is possible from home, until notified otherwise.
5. **In the event of a disaster that affects telecommunications service regionally**, the Incident Management Team should instruct critical employees to proceed to the alternate site even if they have not been contacted directly. Delays in waiting for direct communications can have a negative impact on RLMCMH's ability to recover vital services.

**ACTIVITY: Relocation to Alternate Site**

**ACTIVITY IS PERFORMED AT LOCATION: Red Lake District High School**

**ACTIVITY IS THE RESPONSIBILITY OF: All Critical Personnel from affected disaster area**

**TASKS:**

1. When instructed by the Incident Management Team, make arrangements to commute or travel to the alternate site. **Reference item #5 under Notification and Assembly Procedures for exception to this step.**
2. The Department needs to consult with the Team Lead/Manager and the Organization Incident Management Team to determine if access can be gained to the primary (damaged) site to retrieve vital records and other materials. The Organization Incident Management Team will only allow access to the primary site if the authorities grant access. This will be dependent upon the nature of the disaster and the extent of damage.
3. If allowed access to the primary site to retrieve vital records and other materials, **perform some pre-planning to determine what is most important to retrieve.** This may be necessary since the time you may be allowed access to the primary site may be minimal.
4. Depending on the amount of vital records and other materials you are able to retrieve from the primary site, make arrangements to transport this material to the alternate site. If the material is not too great, this could be accomplished by giving to employees to carry along with them. If the material is a large amount, then make arrangements for transport services.
5. Management and critical employees travel to alternate site.
6. Locate and implement the key job roles found in Appendix R

**ACTIVITY: Implementation of Interim Procedures**

**ACTIVITY IS PERFORMED AT LOCATION: Red Lake District High School**

**ACTIVITY IS THE RESPONSIBILITY OF: Incident Management Team**

**TASKS:**

1. After arrival at the alternate site, map out locations that can be used for workspace and patient care areas. This should include unused offices and cubicles, conference rooms, training rooms, lunch/break areas, and open space in hallways or in other areas. Refer to the High School site map for department locations designated within the school.
2. Obtain additional tables and chairs, either from the office or from outside rental agencies to provide additional workspace. Place in any available open areas but be cautious of not blocking exits for fire evacuation purposes.
3. Obtain supplies for patient care areas. This can include cots for patients from the RL fire base. Set up care area for current patients and in expectation of future patients. This should include places for current patients awaiting transfer. A triage area to accept new patients including a trauma area and minor treatment.
4. **Determine flexible working schedules for staff** to ensure that client and business needs are met, but also to enable effective use of space. This may require that some employee's work staggered shifts or may need to work evening or nightshifts. Labour unions can play a valuable role in supporting/designing with Management making the final decision.
5. Gather vital records and other materials that were retrieved from the primary site and determine appropriate storage locations, keeping in mind effectiveness of workgroups.
6. Determine which vital records, forms, and supplies are missing. Obtain from off-site storage location or from other sources, as needed, per Appendices E & F.
7. Developed prioritized work activities, especially if all staff members are not available.

**ACTIVITY: Establishment of Telephone Communications**

**ACTIVITY IS PERFORMED AT LOCATION: Red Lake District High School**

**ACTIVITY IS THE RESPONSIBILITY OF: IT Liaison**

**TASKS:**

1. Contact the Organization Disaster Recovery/IT Team to determine what activities they are taking to reroute telephone communications to the alternate site. **Do not directly contact the telephone company** - this will be handled by the Organization Disaster Recovery/IT Team.
2. If your alternate site is at another RLMCMH office, prepare a list of phone extensions which your staff will be temporarily using and provide this list to the alternate site switchboard attendant.
3. If your primary office phones will not be switched to the alternate site, let the Organization Disaster Recovery/IT Team know that the phones need to be transferred to the phone numbers you will be using at the alternate site.
4. Coordinate with the Organization Communications Team regarding contacting customers to notify them of the disaster situation, how RLMCMH is responding, and how you can be reached. **Do not contact customers until the Organization Communications Team has given you directions.**

**Organization Communications will provide you with scripts and guidance on how to discuss the disaster with customers to provide assurance that their confidence in RLMCMH will be maintained.**

**ACTIVITY: Restoring Data Processing and Data Communications with Primary or Secondary Backup Data Center**

**ACTIVITY IS PERFORMED AT LOCATION: Alternate Site**

**ACTIVITY IS THE RESPONSIBILITY OF THIS TEAM: IT Liaison**

**TASKS:**

1. Contact the Organization Disaster Recovery/IT Team to determine when the data center is to be recovered, if affected by the disaster. Also, discuss when data communications will be established between the primary or secondary backup data center and your alternate site.
2. If your alternate site is another RLMCMH office, determine if that site has access to the computer systems that RLMCMH uses. If so, work with local office management to determine how workstations can be shared between personnel from their groups/departments and RLMCMH. This may involve using flexible hours or multiple shifts for your personnel.
3. Discuss with the Organization Disaster Recovery/IT Team when and how replacement PC's and/or terminals will be provided to you at the alternate site and when they will be connected.
4. Discuss with the Organization Disaster Recovery/IT Team when the files from your normal PC/LAN servers and applications will be restored and how you can access those files. Also, work with other RLMCMH management at your alternate site to discuss using their LAN servers.
5. Discuss with the Organization Disaster Recovery/IT Team your normal application report distributions, such as when you can expect to receive standard computer reports and how they will be distributed to your alternate site.
6. Communicate the IT recovery status to all RLMCMH personnel who regularly use the systems.



**PHASE III: Alternate Site Operations**

**ACTIVITY: Alternate Site Processing Procedures**

**ACTIVITY IS PERFORMED AT LOCATION: Red Lake District High School**

**ACTIVITY IS THE RESPONSIBILITY OF: Alternate Site Operations Team**

**TASKS:**

1. Communicate with patients, clients and families regarding the disaster and re-solicit phone contacts (in conjunction with the Organization Communications Team)
2. Acquire needed vital documents/patient supplies
3. Access missing documents and files and reconstruct, if necessary
4. Set up operation
5. Order necessary patient supplies

**ACTIVITY: Manage work backlog reduction.**

**ACTIVITY IS PERFORMED AT LOCATION: Alternate Site**

**ACTIVITY IS THE RESPONSIBILITY OF: Alternate Site Operations Team**

**TASKS:**

1. Determine priorities for work backlogs to ensure the most important backlogged tasks are resolved first.
2. Set an overtime schedule, if required, based on staff and system availability.
3. Set backlog priorities, establish a backlog status reports if necessary, and communicate this to the appropriate persons.
4. Report the backlog status to Incident management Team on a regular basis.
5. If backlogs appear to be very large or will take a significant time to recover, determine if temporaries could be used for certain tasks to help eliminate the backlogs. If justified, arrange for temporaries to come in.

*Backlogs in this case also refers to care activities associated with patients, including outpatients*

**PHASE IV: Transition to Primary Operations**

**ACTIVITY: Changing Telephone and Data Communications Back to Primary Site**

**ACTIVITY IS PERFORMED AT LOCATION: Alternate Site**

**ACTIVITY IS THE RESPONSIBILITY OF: IT Liaison**

**TASKS:**

1. Coordinate with the Organization Disaster Recovery/IT Team to determine when RLMCMH will be relocating back to the primary site. Verify that they have a schedule to ensure that telephone and data communications are rerouted accordingly.
2. Discuss when and how PC's, terminals, and printers, if brought into the alternate site, will be de-installed, moved back to the primary site and re-installed.

Please note that no transitions to Primary Operations can occur until the affected areas have been signed off as operational from a structural integrity/essential services and Infection Control perspective.

**ACTIVITY: Terminating Alternate Site Procedures**

**ACTIVITY IS PERFORMED AT LOCATION: Alternate Site and Primary Site**

**ACTIVITY IS THE RESPONSIBILITY OF: Incident Management Team**

**TASKS:**

1. Determine with appropriate authorities (based on situation that occurred) that the building is safe to return to, ensuring structural integrity of the area.
2. Determine all essential services are operational in each area of the primary site that the organization will be returning to. (Electricity, Natural gas, Water, heating, oxygen, food supplies).
3. Ensure the area has been cleaned and signed off by the infection control nurse. Environmental decontamination should be considered in the following areas:
  1. Medical Equipment
  2. Ventilation systems
  3. Water removal and mold remediation
  4. Re-certification of food and storage prep areas
4. Determine which alternate site operating procedures will be suspended or discontinued and when.
5. Determine department order for return if entire hospital is affected.
6. Communicate the changes in procedures to all affected staff, clients, patients, families and volunteers
7. Determine if additional procedures are needed upon return to the primary site, such as to continue resolving work backlogs.

**ACTIVITY: Relocating Personnel, Records, and Equipment Back to Primary (Original) Site**

**ACTIVITY IS PERFORMED AT LOCATION: Alternate Site and Primary Site**

**ACTIVITY IS THE RESPONSIBILITY OF: Department Leads, Charges and Managers**

**TASKS:**

1. In conjunction with the Incident Management Team, determine when each department will be scheduled for relocating back to the primary site.
2. Communicate this schedule to all RLMCMH personnel.
3. Inventory vital records, equipment, supplies, and other materials, which need to be transported from the alternate site to the primary site.
4. Pack, box, and identify all materials to be transported back to the primary site.
5. In conjunction with the Organization Administration Team, make arrangement for a moving company or courier service to transport the boxes back to the primary site.
6. Determine order for patient transport based on care level and transportation requirements
7. Determine transport methods (i.e. ambulance, family, car, bus).
8. Set up receivers for incoming patients with location for patient and determine transport in a way that does not cause backlog in the hallway but rather allows for smooth transition for receiving staff.

## Section V: Appendices

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[Appendix A - Employee Telephone Lists](#)

[Appendix B - Recovery Priorities for Critical Business Functions](#)

[Appendix C - Alternate Site Recovery Resource Requirements](#)

[Appendix D - Emergency Operations Center \(EOC\) Locations](#)

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## Appendix A - Employee Telephone Lists

[illegible]

\* Indicates Team Leader  
\*\* Indicates Alternate Team Leader

## Appendix B - Recovery Priorities for Critical Business Functions

Department	Priorities	Maximum Allowable Downtime			
		1-2 Days	3-5 days	1-2 weeks	> 2 weeks
Contracts	Critical	X			



## Appendix C - Alternate Site Recovery Resource Requirements

### General Requirements

#	Description	Current Number	BCP Number	Comments
1.	Number of people			
2.	Square footage needed			
3.	Power Outlets 110V			Can use power strips
4.	Power Outlets 220V			
5.	Telephones			
6.	Telephone lines			
7.	Desks			
8.	Chairs			
9.	Tables			
10.	Photocopiers			
11.	Calculators			
12.	Microfiche Viewers			
13.	File Cabinets (specify type)			4 drawer lateral file cabinets
14.	Temporary Signage for new hospital site.			
15.	Other - Please attach list			

## Technical Requirements

#	Description	Current Number	BCP Number	Comments
1.	Telephone Lines (regular)			
2.	Telephone Lines (800 or special)			
3.	Single Line Telephone Sets			
4.	Other Type Telephone Sets TWO LINE			
5.	Stand-alone FAX Machines			
6.	PC's (including keyboards/mice)			
7.	LAN/WAN Connections			
8.	Printers - LAN			
9.	Printers - Direct attach to PC			
10.	PC Connectivity outside <ORGANIZATION NAME>* (Internet)			
11.	Other Computers			
12.	Fax – Stand alone			
13.	Other - Please attach list			

## Appendix D - Emergency Operations Center (EOC) Locations

Disaster Affecting Which Area/Building

EOC Location

### Recovery Locations and Travel Directions

#### Alternate Sites

Critical Function	Alternate Site
EOC Emergency Management Team	Ceo office, Ambulance Base
Evacuation site	Red Lake District High School site map on next page

**NOTE** - Provide directions to all alternate sites. Include address and phone number of site. Include Maps and Floor Plans.



## Appendix E - Vital Records

Description	Primary Location of Records	Alternate (Backup) Location of Records	Other Sources to Obtain Records
Settlement Agreements	Department File Cabinets	Vault	Scanned images on Network drive/Other Parties
Litigation Files	Department File Room	Scanned Images of pleadings on Network drive	Outside Counsel/Courts

## Appendix F - Forms and Supplies

[illegible]

## Appendix G - Vendor Lists

Type of Issue	Company	Contact Name	Contact Number	Notes
Boilers	Clow Darling	Mark	807-623-7485	
Plumbing	NGI	Ryan	807-728-1428	
Electrical	Viking Electric		807-728-3298	
HVAC	Redlake Plumbing		807-727-2008	
Fire Control Panel/Detectors	SFA	Gary	807-632-7466	
Sprinkler System	Vipond	Jack	807-623-1214	
Carpentry	Pace Builder	Riley	807-728-0066	
Flooring	Discount Carpet	Gord	807-707-5203	
Temp Control	Honeywell	Karan	807-620-6811	
Refrigeration	KC Refrigeration	Darren	807-464-2202	
Ambulance Doors	Hanover Door	Dennis	204-326-3667	
Elevator	TKE	Bennet	204-260-9132	
Laundry Equipment	Alberta Laundry	Darrell	800-661-1530	
Bio Hazard	Steri Cycle	Wayne	204-471-4538	
Filter Orders	Ackland/Grainger		888-602-0000	Acct #: 886392938
Oxygen - Bulk	Praxair/Linde		800-661-5312	Acct#: 9306993
Door Controllers	Ambassador	Sara	204-253-7170	
Signs/Posters	Sign Hawk	Trish	807-662-3246	
Pick Up	Steri Cycle	Wayne	204-697-4463	
Natural Gas Problems		Rob	807-529-4426	Emerg: 877-969-0999

SEE ALSO MAINTNENCE CARE FOR CONTACTS.

## Appendix H - Desktop Computer Configurations

Description of Desktop: Dell, etc **SEE IT BC PLAN**\_\_\_\_\_

Used By: All <Department Name> Employees\_\_\_\_\_

Business Activity Supported: \_\_\_\_\_

Connected to Which LAN's: \_\_\_\_\_

Used for Host Access (Which Applications): network printing\_\_\_\_\_

Special Features, Boards, Memory Size, Etc.: over 20 Gigs HD, over 128MB Memory \_\_\_\_\_

Over 850 MHz Processor(s)\_\_\_\_\_

Ethernet Net Cards, Fax/Modems\_\_\_\_\_

Proprietary Software required (indicate release number, version and/or level, as applicable:\_\_\_\_\_

**The IT Department maintains records on all desktop systems.**\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Appendix I - Computer System Reports

Report Name	Report Description	System Produced From	Alternate Sources of Report or Information
No special computer reports required.			

## Appendix J - Critical Software Resources

Software Application	Publisher or Vendor	Platform	Recovery Criticality

## **Appendix K - Alternate Site Transportation Information**

Employees will be notified (by team members), if a disaster is declared, as to the location and when to report. Since recovery site is local, transportation to the work location is up to the employee unless directed otherwise. Directions will be supplied at the time of notification, if necessary.

Patient transportation will occur based on care level needs. The primary objective for patients currently in the hospital will be to find an alternate location such as the lodge, home with family or another hospital. Those patients who will not be transported right away will need transport to the alternate site first before they can have other transportation arranged and this will occur based on care level and can include bus, personal vehicle or ambulance.

Local contacts for transportation include:

- Harmony Centre
- English River Miners
- Municipality

## **Appendix L - Alternate Site Accommodations Information**

Should alternate site accommodations be required team members will be notified. Employees will be contacted (by team members), if a disaster is declared, as to the location and where to go. Since accommodations are local, transportation to the work location is up to the employee unless directed otherwise. Directions will be supplied at the time of notification, if necessary.

Accommodations for patients will include a cot system. Local sources for cots may include:

- MNR
- Municipality
- OPP
- Mines

## Appendix M - Severity Impact Assessments <Department Name>

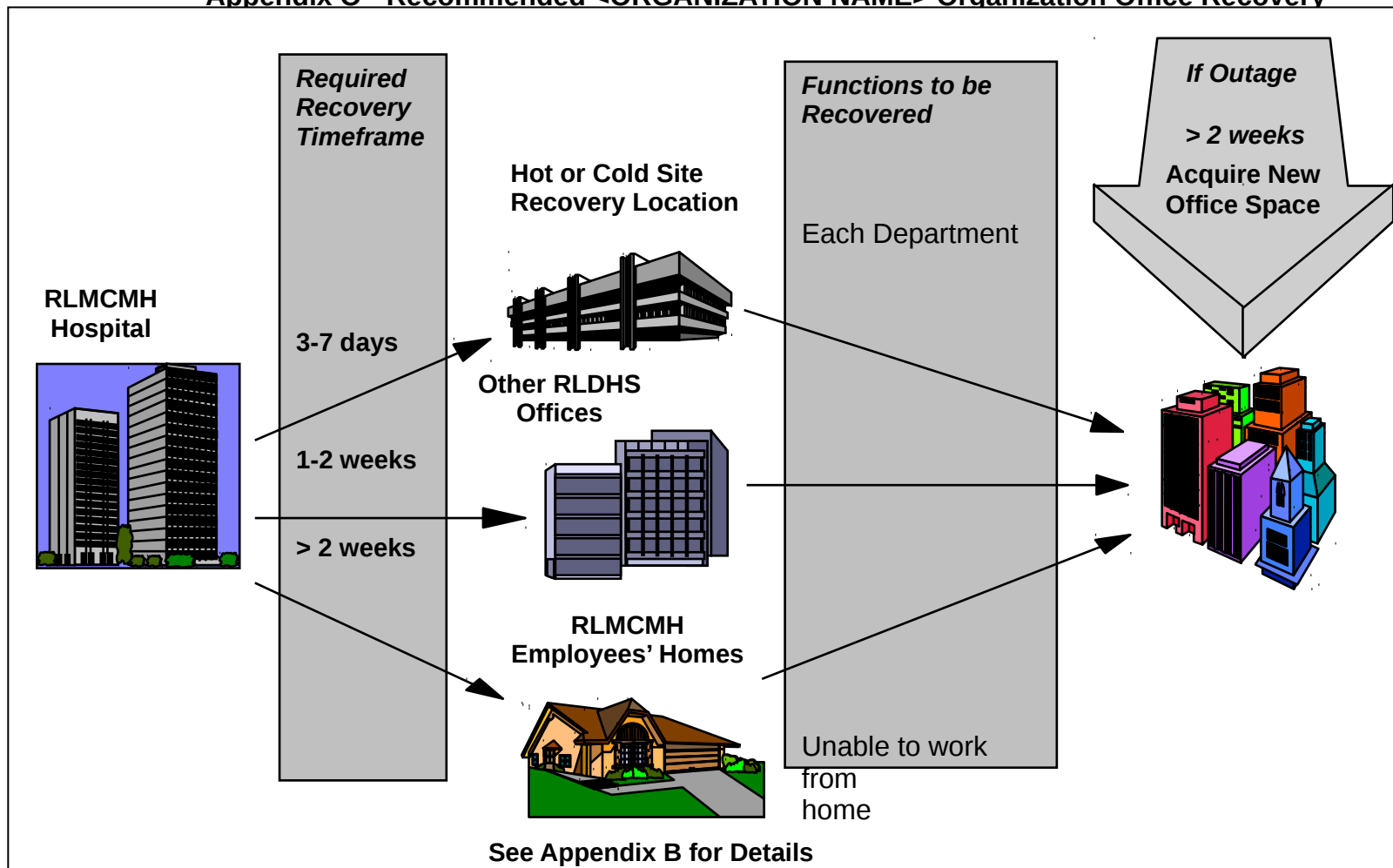
Severity of Impact							
		Least ----->		to ----->		Greatest	Comments
	Impact Area	1	2	3	4	5	
1	Cash Flow Interruption						
2	Inoperative Billing Systems						
3	Inoperative Financial Controls						
4	Loss of Customers						
5	Financial Reporting (Banks, IRS, etc.)						
6	Increases in Liability						
7	Loss of Public Image						
8	<Department Name> and Regulatory Violations						
9	Contractual Violations						
10	Vendor Liabilities & Relations						
11	Customer Liability & Relations						
12	Effect on Employee Morale						
13	Staff Resignations						

## Appendix N - Recovery Tasks List

Recovery Activation Date: \_\_\_\_\_

Task No.	Task Description	Estimated Time	Actual Time	Assigned To	Assigned Time	Completed Time	Comments
10	Receive Communication on emergency Situation						
20	Identify recovery site						
30	Retrieve Business Continuity Plans						
40	Notify department members identified in Appendix A						
50	Retrieval of department Vital Records						
60	Oversee delivery and placement of office equipment.						
70	Oversee delivery and placement of office supplies.						
80							

## Appendix O - Recommended <ORGANIZATION NAME> Organization Office Recovery



\*\*\*INSERT KEY JOB ROLES\*



