

Developing a Laboratory Continuity of Operations Plan

Guidelines

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Assistant Commissioner

Minnesota Department of Health

APHL Annual Meeting

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Board of Director's Charge

To Emergency Preparedness and Response Committee

- ❑ Develop a COOP for public health laboratories
- ❑ Assumptions:
 - Public health laboratories vary considerably
 - Differ in organization, structure, and operation
 - Each laboratory must develop its own COOP
- ❑ Outcome:
 - Guidance document to assist development process
 - Available as a CD in registration packet

Presentation

- Part 1:

What are the elements of a laboratory COOP

- Part 2:

How can these elements be implemented

Definition of Lab COOP

- ❑ Comprehensive, pre-event public health laboratory plan
- ❑ Designed to minimize interruption of lab operation
- ❑ All necessary procedures, policies, and arrangements
- ❑ Rapid, effective response to unexpected disruption
- ❑ Ensure resumption of operations within acceptable time

Purpose

- ❑ Minimize interruption of the laboratory's operation
- ❑ Ensure resumption within acceptable time
- ❑ Rapid shift to recovery and continuation of activities
- ❑ Continue as viable governmental entity during crisis

Importance

- ❑ Public health laboratories provide essential activities
- ❑ Generate critical data to inform health decisions
- ❑ Uniquely focused on population health and safety
- ❑ Provide special expertise and response capability
- ❑ Must ensure continuation of these essential activities
- ❑ Must continue as a viable government entity during crises

Basic Features

- ❑ Pre-identified list of essential testing/support activities
- ❑ Pre-arranged plan of action to continue without delay

Basic Features

- ❑ Applies to essential operations, infrastructure, and resources
 - ❑ Laboratory has unique features for distinctive consideration
 - Extensive instrumentation
 - Dedicated space
 - Special air handling
-
- ❑ Laboratory plan must be integrated with agency-wide COOP

Time-Sensitive Activities

- ❑ Must be recovered in relatively short period of time
- ❑ May be less than 24 hours, e.g., newborn screening

Establish Planning Team

- ❑ Appoint project lead
- ❑ Determine staff to serve on planning team
 - Senior staff
 - Representatives from all areas
- ❑ Set overall scope
- ❑ Establish timeline to complete project
- ❑ Planning team acquires technical input

Elements of the COOP

- Vulnerability Assessment
- Incident Assessment
- Plan Activation
- Notification
- Incident Command
- Identification of Core Functions

Elements of the COOP

- Identification of Alternate Laboratories
- Arrangements for Assistance
- Pre-Positioned Supplies and Workstations
- Preparation and Storage of “Go-Pack”
- Training and Exercises
- Annual Updates Review

Developing a Laboratory Continuity of Operations Plan

Guidelines

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Public Health Laboratory Division

Minnesota Department of Health

Vulnerability Assessment

- ❑ Probability lab will experience a disruptive event
- ❑ Need to determine:
 - What could happen
 - What is the likelihood of it happening
 - What can be done to mitigate the possibility

Mitigation of Disruptive Events

- Internal measures:
 - Building security systems
 - Backup power supplies
 - Fire suppression systems
 - Redundant data systems

Mitigation of Disruptive Events

□ External measures:

- Effective public safety services
- Protective building construction
- No hazardous environmental conditions

General Categories of Threats

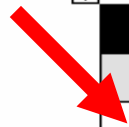
- ❑ Extreme weather conditions
- ❑ Major equipment failure
- ❑ Protracted personnel matters
- ❑ Extensive building damage
- ❑ Compromised building utilities
- ❑ Failed communication systems
- ❑ Civil disturbance
- ❑ Acts of terrorism

Vulnerability Assessment

- ❑ Planning team creates list of vulnerabilities
 - Categorize vulnerabilities
 - Develop mitigation strategies when possible
 - Use to guide planning strategies
-

- ❑ Use Site Vulnerability Analysis Form to document

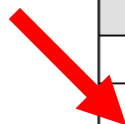
Vulnerability Assessment



Site Vulnerability Analysis		
Threat	Mitigation	Risk
Electrical power failure	Backup power generator	Low

Vulnerability Assessment

Site Vulnerability Analysis		
Threat	Mitigation	Risk
Electrical power failure	Backup power generator	Low
Decreased staff availability (Pan Flu)	None	Medium/High



Incident Assessment

- ❑ Incident Assessment Team
 - Knowledge and authority
 - Senior personnel
 - Lab operations
 - Safety
 - Facilities management
- ❑ Assess nature and extent of disruption
- ❑ Use Damage Assessment Form to document

Incident Assessment

Incident Commander

Date: _____ Time: _____ Nature of Incident: _____



Status Assessment	Response	Comments
Has the agency call tree been activated?	Yes No Unknown	
Has the Command Center been activated?	Yes No Unknown	
What functions have been affected		
Did the Supplies, Facilities & Equipment Support Group recommend declaring an emergency?	Yes No Unknown	
Have the local fire and/or police departments been contacted (if appropriate)?	Yes No Unknown	
Has the Governor declared a state of emergency?	Yes No Unknown	
Have any other agencies declared an emergency? If yes, please list in comments.	Yes No Unknown	
Has the agency declared an emergency? If yes:	Yes No Unknown	
Has the alternate location been activated?	Yes No Unknown	
Has the emergency management department been notified for the activation of the emergency operation center?	Yes No Unknown	
Has the agency real estate management been notified?	Yes No Unknown	
Have required agency phones been forwarded?	Yes No Unknown	
Can all agency data be restored?	Yes No Unknown	

Incident Assessment

Incident Commander

Date: _____ Time: _____ Nature of Incident: _____



Status Assessment	Response			Comments
Has the agency call tree been activated?	Yes	No	Unknown	
Has the Command Center been activated?	Yes	No	Unknown	
What functions have been affected				
Did the Supplies, Facilities & Equipment Support Group recommend declaring an emergency?	Yes	No	Unknown	
Have the local fire and/or police departments been contacted (if appropriate)?	Yes	No	Unknown	
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Has the agency real estate management been notified?	Yes	No	Unknown	
Have required agency phones been forwarded?	Yes	No	Unknown	
Can all agency data be restored?	Yes	No	Unknown	

Incident Assessment

Personnel Support Group Supervisor

Date: _____ Time: _____ Nature of Incident: _____

Status Assessment	Response			Comments
Has the building been evacuated?	Yes	No	Unknown	
Are all the agency staff accounted for?	Yes	No	Unknown	
Has the agency Emergency Information Hotline been activated?	Yes	No	Unknown	
Are any of the agency staff injured?	Yes	No	Unknown	
Where were injured agency staff taken?				
Are there any agency fatalities?	Yes	No	Unknown	
Have family members been contacted?	Yes	No	Unknown	

Completed by: Personnel Support Group Supervisor

Incident Assessment

Personnel Support Group Supervisor

Date: _____ Time: _____ Nature of Incident: _____

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Are any of the agency staff injured?	Yes	No	Unknown	
Where were injured agency staff taken?				
Are there any agency fatalities?	Yes	No	Unknown	
Have family members been contacted?	Yes	No	Unknown	

Completed by: Personnel Support Group Supervisor

Incident Assessment

Status Assessment	Response	Comments
Is there still roof access in the xx stairwell ?	Yes No Unknown	
Is any interior hall/aisle blocked or partially blocked?	Yes No Unknown	
Does at least one of the elevators work?	Yes No Unknown	
Is the loading area accessible?	Yes No Unknown	
Is at least one stairwell open?	Yes No Unknown	
Are there any gas leaks?	Yes No Unknown	
Is there any flooding of the building?	Yes No Unknown	
Has the building been checked for contaminants?	Yes No Unknown	
Does the building need to be decontaminated?	Yes No Unknown	
Is the air contaminated?	Yes No Unknown	
Are there air quality problems?	Yes No Unknown	
Is any building water contaminated?	Yes No Unknown	
Has the Building Management Company's insurance inspected the site?	Yes No Unknown	
Is there any water damage ?	Yes No Unknown	
Is there any smoke damage?	Yes No Unknown	
Is there any wind damage?	Yes No Unknown	
Is there any damage from explosives?	Yes No Unknown	
Is there any damage from fire?	Yes No Unknown	
Are the electrical/mechanical closets intact?	Yes No Unknown	

Incident Assessment

Status Assessment	Response	Comments
Is there still roof access in the xx <u>stairwell</u> ?	Yes No Unknown	
Is any interior hall/aisle blocked or partially blocked?	Yes No Unknown	
Does at least one of the elevators work?	Yes No Unknown	
Is the loading area accessible?	Yes No Unknown	
Is at least one stairwell open?	Yes No Unknown	
Are there any gas leaks?	Yes No Unknown	
Is there any <u>hoarding</u> of the building?	Yes No Unknown	
Has the building been checked for contaminants?	Yes No Unknown	
Does the building need to be decontaminated?	Yes No Unknown	
Is the air contaminated?	Yes No Unknown	
Are there air quality problems?	Yes No Unknown	
Is any building water contaminated?	Yes No Unknown	
Has the Building Management Company's insurance inspected the site?	Yes No Unknown	
Is there any water <u>damage</u> ?	Yes No Unknown	
Is there any smoke damage?	Yes No Unknown	
Is there any wind damage?	Yes No Unknown	
Is there any damage from explosives?	Yes No Unknown	
Is there any damage from fire?	Yes No Unknown	
Are the electrical/mechanical closets intact?	Yes No Unknown	

Incident Assessment

Building Management Company

Date: _____ Time: _____ Nature of Incident: _____

Status Assessment	Response			Comments
Are all first floor building exits secure?	Yes	No	Unknown	
Is there power in the lobby?	Yes	No	Unknown	
Is there power in the stairwells?	Yes	No	Unknown	
Are interior emergency lights working?	Yes	No	Unknown	
Are exterior lights working?	Yes	No	Unknown	
Is the ventilation system working?	Yes	No	Unknown	
Is the fire alarm system working?	Yes	No	Unknown	
Is there power in all hallways?	Yes	No	Unknown	
Are there any exposed electrical wires?	Yes	No	Unknown	
Is there any exposed mechanical equipment?	Yes	No	Unknown	
Is there heat in common spaces?	Yes	No	Unknown	
Is there A/C in common spaces?	Yes	No	Unknown	
Are any windows broken in common spaces?	Yes	No	Unknown	
Is there hot and cold water in common spaces?	Yes	No	Unknown	
Are the restrooms functional?	Yes	No	Unknown	
Are the mechanical closets intact?	Yes	No	Unknown	
Are all the building electrical and data outlets working?	Yes	No	Unknown	
Are all lighting fixtures intact?	Yes	No	Unknown	
Are any locks not working?	Yes	No	Unknown	
Are the master keys intact?	Yes	No	Unknown	
Is the security system working, including the cameras?	Yes	No	Unknown	
Are all the parking spaces accessible?	Yes	No	Unknown	

Incident Assessment

Building Management Company

Date: _____ Time: _____ Nature of Incident: _____

Status Assessment	Response			Comments
Are all first floor building exits secure?	Yes	No	Unknown	
Is there power in the lobby?	Yes	No	Unknown	
Is there power in the stairwells?	Yes	No	Unknown	
Are interior emergency lights working?	Yes	No	Unknown	
Are exterior lights working?	Yes	No	Unknown	
Is the ventilation system working?	Yes	No	Unknown	
Is the fire alarm system working?	Yes	No	Unknown	
Is there power in all hallways?	Yes	No	Unknown	
Are there any exposed electrical wires?	Yes	No	Unknown	
Is there any exposed mechanical equipment?	Yes	No	Unknown	
Is there heat in common spaces?	Yes	No	Unknown	
Is there A/C in common spaces?	Yes	No	Unknown	
Are any windows broken in common spaces?	Yes	No	Unknown	
Is there hot and cold water in common spaces?	Yes	No	Unknown	
Are the restrooms functional?	Yes	No	Unknown	
Are the mechanical closets intact?	Yes	No	Unknown	
Are all the building electrical and data outlets working?	Yes	No	Unknown	
Are all lighting fixtures intact?	Yes	No	Unknown	
Are any locks not working?	Yes	No	Unknown	
Are the master keys intact?	Yes	No	Unknown	
Is the security system working, including the cameras	Yes	No	Unknown	
Are all the parking spaces accessible?	Yes	No	Unknown	

Incident Assessment

Response Team Leader

Date: _____ Time: _____ Nature of Incident: _____



Status Assessment	Response			Comments
Is newborn screening laboratory damaged?	Yes	No	Unknown	
	Yes	No	Unknown	
	Yes	No	Unknown	
	Yes	No	Unknown	
	Yes	No	Unknown	
	Yes	No	Unknown	
	Yes	No	Unknown	

Completed by: Activity Coordinator

Activation of Plan

- ❑ Establish authority for plan activation
- ❑ Establish triggers for plan activation

- ❑ Establish incident response teams
 - Assessment
 - Notification
 - Other

- ❑ Integrate teams with agency-wide ICS

Notifications

- ❑ Immediate activation of the COOP “Notification” team
- ❑ Notification team contacts additional key staff
 - All required response teams (Assessment team)
 - Agency Health Officer
 - State Epidemiologist
 - All impacted agency leaders
 - All laboratory staff
 - All impacted submitters of samples and specimens
 - All alternate laboratories

Notifications

- ❑ Establish database for essential contacts
- ❑ Establish notification lists and call down trees
 - Staff
 - Clients
 - Couriers
 - Others

- ❑ Establish Activation and Notification SOP's
 - Manual
 - Automated

- ❑ Utilize Contact Database

	A	B	C	D	E	F	G	H	I
1	Personnel Listing								
2	Position	First Name	Last Name	Email - primary	Email - secondary/persc	Work Phone	Home Phone	Alternate Numbers	
3									
4									
5									
6									
7									
8									
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10									
11									
12									
13									
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35									

Internal Staff

	A	B	C	D	E	F	G	H	I	J
--	---	---	---	---	---	---	---	---	---	---

1	Clients									
2	Name	Address	Primary Contact	Phone - Primary	Alternate Contact	Phone - Alternate	Fax	Email/s	Service/s Provided	Mechanism for Repo

Clients

K1

1 Vendors

2	Name	Address	Primary Contact	Phone - Primary	Alternate Contact	Phone - Alternate	Fax	Email/s	Customer Account	Product/s Provided	Method
3											
4											
5											
6											
7											
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35											

Vendors

1 Couriers

2 Name Primary Contact Phone - Primary Alternate Contact Phone - Alternate Fax Email/s

3

4

5

6

7

8

9

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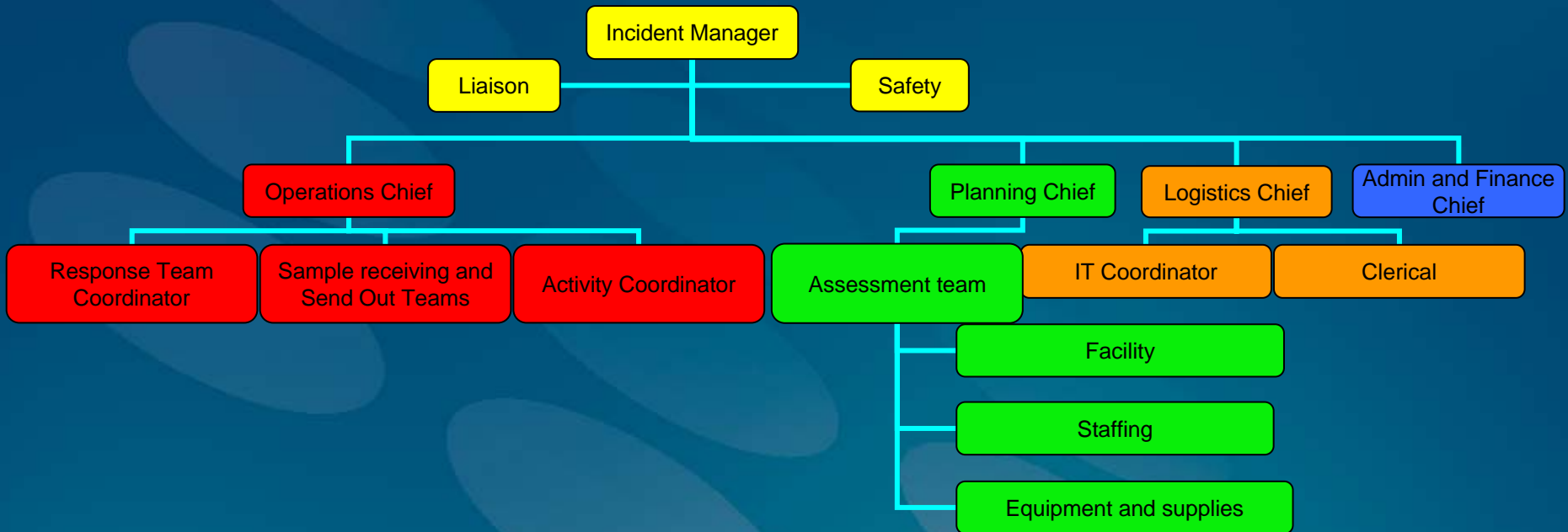
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34

35

Couriers

Incident Command



Incident Command

- ❑ Identify an incident commander
- ❑ Establish off site command location
- ❑ Activate command as soon as possible
- ❑ Pre-identify structure and positions three deep

Incident Command

- ❑ Integrate lab into larger agency ICS structure
- ❑ Pre-determine who incident response teams report to
- ❑ Create Job Action Sheets for various ICS positions
- ❑ Train and exercise staff in the various ICS positions

Incident Command

- ❑ Pre-identify teams and members as needed
- ❑ Each team responsible for a specific incident activity
- ❑ Each team reports within the ICS structure
- ❑ Examples of teams:

IT Response

Sample Receiving

Results Recovery

Assessment

Activity Response

Sample Send Out

Sample Recovery

Notification

Incident Command

Incident Response Teams

Team	Responsibilities
Assessment	Assess laboratory operational capability and make decisions regarding COOP activation
Notification	Notify laboratory staff and other key individuals and groups with information and guidance
Sample Recovery	Determine status of samples stored in the laboratory facility, what testing is in progress, and what actions to take

Incident Command

Incident Response Teams

Team	Responsibilities
Sample Receiving/Send Out	Determine what actions are required regarding samples to be received and samples to be sent out to alternative laboratories
Laboratory Support	Assure appropriate levels of clerical, purchasing, and materials preparation support for core laboratory functions
Information Technology	Assure availability of the Laboratory Information System to manage all necessary laboratory data, including accessioning and reporting



Job Action Sheet
<Staffing Position Title>

*****Read This Entire Position Checklist BEFORE Taking Action*****

Reports to:	
Who Reports to you:	
Responsibilities:	
Minimum Required Qualifications:	

Activation Phase: Steps taken to get your operations up and running

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Incident Phase: Response actions that are part of this position's responsibilities during an Incident (Operational Phase)

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Post-Incident Phase: Responsibilities of this position after the Activation Phase: Steps taken to get your operations up and running after occurrence of an Incident (Demobilization phase)

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Job Action Sheet Template Instructions

Authors must submit one completed Job Action Sheet (JAS) for each job role that will be needed in a response to accomplish the tasks of the annex.

Staffing Position Title: Erase the words, "Staffing Position Title." Enter the name of the job role for this position. Use ICS terminology.

Reports to: Provide the Staff Position Title that this position reports to.

Who Reports to you: Provide all Staff Position Titles that report to this position.

Responsibilities: Provide a very brief description of responsibilities. Begin each statement with an action verb.

Minimum Required Qualifications: Provide a bulleted list of the minimum qualifications to adequately perform this position. Please include specific experience, education, training, and licenses that are required only to complete the specific tasks that are included below.

Activation Phase: Steps taken to get your operations up and running: Please use action statements. Begin each statement with an action verb. You may add more rows, if necessary, by clicking on the end of a row and then clicking enter. Copy and paste as needed box for the new row.

Incident Phase: Response actions that are part of this position's responsibilities during an incident (Operational Phase): List the response actions that are part of this staff position's responsibilities during an incident. Please use action statements to detail specific tasks. Begin each statement with an action verb.

Post-Incident Phase: Responsibilities of this position after the occurrence of an incident (Demobilization phase): List the actions that are part of this staff position's responsibilities after an incident. Include actions to help return the community impacted by an incident to normal. Begin each statement with an action verb.

Identification of Essential Activities

- ❑ Fundamental part of COOP Planning
- ❑ Identify essential activities that must be continued
- ❑ Process may seem overwhelming
- ❑ May utilize lab's guide to service or test menus

Identification of Essential Activities

- ❑ Essential - must *continue*
- ❑ Essential - could *outsource*
- ❑ Non-essential - should *suspend*

Identification of Essential Activities

- ❑ Categorize activities into overarching categories
 - Infectious disease
 - Environmental health
 - Newborn screening
 - Food safety
 - Laboratory support
 - Information technology

Identification of Essential Activities

- ❑ Subdivide the overarching categories
- ❑ Subdivide activities as essential or nonessential
- ❑ Some overarching categories need no subdivide
- ❑ Some overarching categories need more division

Identification of Essential Activities

- ❑ Subdivide each category for prioritization
- ❑ Use multiple levels of subdivision¹ to achieve:
 - Comprehensive listing of all lab activities
 - Clustering of activities to facilitate prioritization

¹ *Assume different categories may require different subdivisions*

Identification of Essential Activities

- ❑ Essential activities must be prioritized
 - Public health importance
 - Time sensitivity
- ❑ Tier 1 – Highest priority = most time sensitive
- ❑ Tier 2 – Medium priority = less time sensitive
- ❑ Tier 3 – Lowest priority = least time sensitive

Identification of Essential Activities

- ❑ Activities must be defined in terms of:
 - Number of tests performed
 - Test methodology
 - Test volumes
 - Resource
 - Other characteristics

- ❑ Definition needed to identify alternate laboratory

Identification of Essential Activities

□ Infectious Disease Category

- Subdivide the category into the kinds of microbial agent
- Divide each kind of agent into specific pathogenic conditions
- Divide each condition into specific tests or general methods
- Evaluate the activities listed to identify essential and nonessential
- Prioritize each essential activity as tier 1, 2, or 3

Identification of Essential Activities

□ Example of Subdivisions (*Infectious Disease Category*)

- Program level – diagnostics, reference, surveillance, emergency, etc.
- Disease level – respiratory, CNS, STD, enteric, etc.
- Agent level – specific bacteria, viruses, fungi, parasites
- Method level – general or SOP-specific

Identification of Core Functions

Issues to Consider:

- What methods are used for testing?
- What equipment and supplies are needed for testing?
- What is the test volume?
- What is minimal number of staff needed to provide testing?
- What are regulatory requirements?
- Does testing require certification, security clearance, etc.
- Are there Biosafety requirements?

Identification of Core Functions

Issues to Consider:

- What is the acceptable turn around time for the test?
- What are the reporting requirements?
- Will the SPHL need the sample returned for storage?
- How are samples transported to lab?
- Is there a cost associated with the test?
- Other?

Identification of Alternate Labs

- ❑ Use the pre-arranged plan to ensure continuation of lab's highest priorities
- ❑ Must pre-identify laboratories to perform these essential activities
 - Labs within PHL system
 - Clinical Labs
- ❑ Determine if PHL lab staff can re-locate

Identification of Alternate Labs

- ❑ Other issues to consider:
 - What essential tests need to be outsourced?
 - ❖ Local reference lab for essential diagnostic testing
 - ❖ Local public health labs for essential activities
 - What methods of testing will the alternative lab use?
 - How will the results be reported by the alternative lab?
 - What will be the expected turn-around times for results?

Identification of Alternate Labs

- ❑ Other issues to consider:
 - Is the alternative lab's capacity for the testing sufficient?
 - Does the alternative lab have the required certifications?
 - Does the alternative lab have necessary security?
 - Is the alternative lab LRN and Select Agent approved?
 - Will the alternative lab retain or return tested samples?
 - How will the specimens or samples be transported?

Identification of Alternate Labs

- ❑ Other issues to consider:
 - What will be the financial arrangement?
 - Will there be liability issues to address?
 - What advantages/disadvantages is a particular lab?
 - What are the risks in using a particular lab?

Identification of Alternate Labs

- ❑ Create database for each alternate lab
 - Contact information
 - Capabilities
 - Capacities

Arrangements for Assistance

- ❑ Address legal and policy issues
 - Memorandum of Understanding
 - Memorandum of Agreement
 - Purchase Orders
 - Contracts
 - Emergency Management Assistance Compact

Arrangements for Assistance

MEMORANDUM OF AGREEMENT Cooperative Services Agreement during Emergency Situations

BETWEEN

State A Public Health Laboratory

AND

State B Public Health Laboratory

Subject:

Cooperative Laboratory Services Agreement during Emergency or Critical Situations related to testing of clinical and environmental samples of suspect organisms and/or scientific expertise as capabilities and capacities allow.

Purpose:

To establish guidance and outline the respective functions of the parties to the Memorandum of Agreement (MOA) with respect to providing laboratory testing capacity during emergency situations related to clinical and environmental samples. Develop a laboratory partnership focused on preparing for and responding to public health emergencies.

Background:

State public health laboratories have multi-functional roles in providing analytical support to a variety of environmental and clinical programs, and sharing a common mission, a working relationship and mutual support in times of need between other public health laboratories is crucial.

The intent of this agreement is to provide a framework for sharing resources to laboratory testing capability and capacity during emergency situations which exceed or disrupts the ability of one facility to meet emergency response needs or maintain essential core laboratory functions.

Demand for response services during emergency situations can exceed the routine capacity of a laboratory. This agreement documents the willingness of the states public laboratories as parties to this agreement to provide readily available human and technical resources requested during an emergency.

Pre-Positioned Supplies and Workstations

- ❑ Determine off-site location for command center
 - ❑ Determine number of workstations needed
 - General office
 - Accessioning
 - Packaging and shipping
-
- ❑ Develop Workstation Inventory Document

Pre-Positioned Supplies and Workstations



Workstation Inventory

Description	Quantity	Type	Time Needed
SUPPLIES FOR COMPLETE PHL RECOVERY TEAM MEMBERS			
Desktop computer			
Laserjet printer			
8-1/2" x 11" paper			
Fax machine			
Photocopier			
CLINICAL ACCESSIONING (SAMPLE RECEIVING)			
Desktop computer			
Internet / Mayo-Link computer program			
Barcode reader			
Laserjet printer			
8-1/2" x 11" paper			
Large "zip-lock" biohazard bags with separate pockets for paperwork and specimens			
Plastic container (approx 36"x24"x18") with lid			
Plastic container (approx 36"x24"x18") with lid			
Laboratory forms (for each type of specimen)			
Rolls of numbered specimen labels			
Laboratory cart			

Pre-Positioned Supplies and Workstations



Workstation Inventory

Description	Quantity	Type	Time Needed
SUPPLIES FOR COMPLETE PHL RECOVERY TEAM MEMBERS			
Desktop computer			
Laserjet printer			
8-1/2" x 11" paper			
Fax machine			
Photocopier			
CLINICAL ACCESSIONING (SAMPLE RECEIVING)			
Desktop computer			
Internet / Mayo-Link computer program			
Barcode reader			
Laserjet printer			
8-1/2" x 11" paper			
Large "zip-lock" biohazard bags with separate pockets for paperwork and specimens			
Plastic container (approx 36"x24"x18") with lid			
Plastic container (approx 36"x24"x18") with lid			
Laboratory forms (for each type of specimen)			
Rolls of numbered specimen labels			
Laboratory cart			

Preparation and Storage of “Go-Pack”

- ❑ Create electronic and hard copies of documents
 - Must be easily accessible
 - Must be stored at off-site location
 - May use external website

- ❑ Keep all copies up to date

Training and Exercises

- ❑ Essential part of COOP development
- ❑ Staff must know roles and responsibilities
- ❑ Training should be at least annually
- ❑ Should be integrated into agency training

Training and Exercises

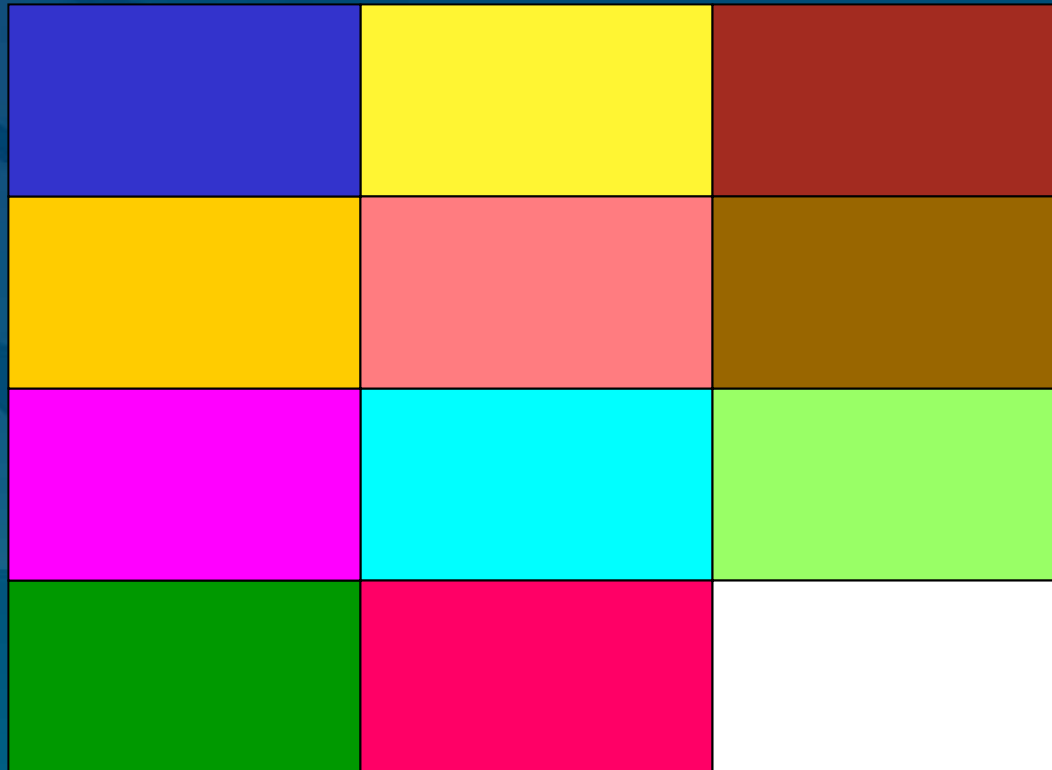
- ❑ Exercising should focus on specific aspects of plan
 - Assessment
 - Notification
 - Activation

- ❑ Prepare After-Action Report and Improvement Plan

Annual Updates Review

- ❑ COOP is a living document
- ❑ Develop schedule for updates
- ❑ Update all copies (including “Go Packs”)
- ❑ Update after exercises or events
- ❑ Update contact database more frequently

The Complete COOP



Emergency Preparedness and Response Committee

Norman Crouch, Chair

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Sanjib Bhattacharyya

Andrew Cannons

Kevin Cavanaugh

Nick Cirino

Rich Harris

Susan Neill

Chris Peter

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