

CONTINUITY OF OPERATIONS PLAN

COOP

Wood County Health District

CONTINUITY OF OPERATIONS PLAN

Date of Change	Change	Changed By	Re-distributed Yes/No
1.2012	Altered Annexes, combined, streamlined. Updated contacts/ personnel. Reformatted, corrected typographical errors. Annex 4- Removed Multiyear Strategy & Program Management Plan Annex 5- Removed Exercise Schedule (Incorporated into HSEEP TEEX Plan)	T Factor	Yes
12.2012	Updated contacts/ personnel. Updated timeframes. Change Department to District.	T Factor	No
2.2013	Formatting, Typographical errors, updated essential services	T Factor	Yes
7.2013	JAS updated	T Factor	Yes
8.2013	IT added (in process)	T Factor	
3.2015 & 6.2015	Added Co-Health Commissioner. Update essential services. Added Wood Lane School as Alternate Facility Operation. Updated the Vital Files, Records and Databases. Updated order of succession.	W Bryant-Bey	Yes
4.2016	Eliminated unnecessary jargon in the plan. Fix spacing and grammar. Added the following Appendices: Checklist, JAS, DOC, Responsibilities, Initial Actions, Records Database, and Perrysburg MOU	W Bryant-Bey	Yes

Promulgation Statement

This document is designed to promote the coordination of public health services and the use of available resources to minimize the effects of a major disaster (natural or otherwise) on life and health of the citizens of Wood County. It also incorporates the principles and processes of the National Incident Management System (NIMS) and the Incident Command System (ICS).

This plan, when used properly and updated annually, can assist local health department officials in responding to and recovering from the effects of natural and man-made disasters. All staff must be properly trained in areas of emergency management to understand their role in a disaster.

Name and title

Date

TABLE OF CONTENTS

Executive Summary.....	6
Overview	8
Purpose	8
Objective-	8
Planning Considerations	8
Assumptions	8
Applicability and Scope.....	9
Hazard Vulnerability Analysis.....	10
Policy Statement	10
COOP Planning Responsibilities	10
Review/ Revision of Plan	10
Plan Distribution.....	10
Concept of Operations	11
Responsibilities.....	11
Departmental Operations Center (DOC)	12
Incident Command	12
Disaster Drills and Exercises.....	13
WCHD DOC Staff Reporting Process	14
WCHD DOC Security.....	14
Job Action Sheets.....	14
WCHD Departmental Operation Center Command Structure	14
Function, Activities, & Responsibilities	14
COOP Phases.....	14
Phase 1: Activation & Relocation.....	14
Phase 2: Alternate Facility Operation	18

Phase 3: Reconstitution.....	19
Essential services.....	20
Logistics	20
Alternate Facility	21
Interoperable Communications.....	21
Appendix	21

EXECUTIVE SUMMARY

In the event of a disaster or public health emergency. The Wood County Health District is responsible for the control of communicable diseases and outbreaks of disease (including foodborne outbreaks) existing originating or developing in Wood County. This responsibility includes:

- a. **Surveillance and Epidemiologic assessment.** The detection and epidemiologic assessment and analysis of disease occurrence and spread, along with compiling health statistics including morbidity and mortality. Risk factors associated with the acquisition of disease and identification of persons at risk for the disease are major goals of the assessment.
- b. **Mobilizing public health resources.** The Wood County Health District is responsible for mobilizing public health resources from within the district as appropriate and from other public health resources as necessary.
- c. **Making recommendations including isolation and quarantine and assuring prophylaxis.** The Wood County Health District is responsible for making public health recommendations to individuals and groups as warranted to treat the disease and/or prevent further spread of the disease. These actions include but are not limited to recommendations involving isolation, quarantine and/or assuring medication for prophylaxis. Prophylaxis assurance is provided by direct assistance from the department and identification of additional resources outside the department to administer prophylaxis when the need exceeds departmental capacity.

Operational interruptions may include routine business renovation or maintenance; mechanical failure of heating or other building systems; fire; inclement weather or other acts of nature; or a range of threatened or actual attacks. It is the policy of Wood County General Health District to respond quickly in the event of an emergency or threat resulting from human, technological, natural or other causes. As well as, to ensure the ability to perform essential functions under all circumstances. To meet these objectives, WCHD developed a COOP, which sets forth a Concept of Operations, three Phases of Operations, and identifies three Essential Functions.

- a. Concept of Operations
 1. Coordinate execution of the public health functions of this plan with the emergency activates of other (Jurisdiction) government agencies, private agencies and organizations, and the federal government.
 2. Maintain surveillance of potentially threatening conditions to and in Wood County and direct appropriate warning and preparedness actions.
 3. Encourage mutual aid agreements with private industry and relief organizations and between government agencies.
- b. Three Phases of Operations
 1. Activation & Relocation

- i. Orders of Succession/Delegation of Authority
 - In any public health emergency or disaster, the Health Commissioner of the WCHD has the authority to activate the COOP.
 - The Director of Nursing will serve as Acting Co-Health Commissioners if the Health Commissioner cannot fulfill the duties required.
 - The delegation shall be determined/approve by the Health Commissioner for all essential functions and will be effective immediately upon designation.
 - If the COOP cannot be implemented for any reason, the WCHD operations and responsibilities will revert to the Ohio Department of Ohio.
 - ii. Alternate Facility Operations
 - Perrysburg Schools will serve as WCHD primary location for Operations.
 - Staff will report to Perrysburg Schools unless directed to a secondary location.
 - iii. Reconstitution
 - Reconstitution procedures will commence when the Health Commissioner ascertains that the emergency situation has ended and is unlikely to recur.
- c. Essential Functions
1. Must resume as rapidly and efficiently as possible:
 - i. Environmental Health Services
 - ii. Vital Statistic
 - iii. Communicable Disease Tracking/Investigation

OVERVIEW

PURPOSE

This Continuity of Operations Plan (COOP) establishes policy and guidance to ensure the execution of the essential services for the Wood County Health District (WCHD) in the event that an emergency in Wood County threatens or incapacitates operations. As well as the relocation of selected personnel and functions of any health department facility in Wood County is required.

OBJECTIVE-

The objective of this COOP is to ensure that a viable capability exists to continue essential health district services across a wide range of potential emergencies, specifically when the primary facility is either threatened or inaccessible.

- a. Increase the awareness among staff members of the issues involved in disaster recovery.
- b. Provide explanations of roles and responsibilities.
- c. Provide guidelines for disaster recovery operations.

COOP planning is used to direct and guide appropriate actions to assure the capability exists to continue essential services. In addition to achieving an orderly recovery from emergency situations across a wide range of potential emergencies or threats.

PLANNING CONSIDERATIONS

- a. Must ensure all external agencies mentioned in this plan are aware and accept their agency's roles and responsibilities contained herein;
- b. Must be capable of implementation both with and without warning;
- c. Must be operational no later than twelve hours after activation;
- d. Should consider locating alternate operating facilities in areas where power, telecommunications, and internet grids would be distinct from those of the primary;
- e. Must consider the distance of alternate operating facilities from the primary facility and from the threat of any other facilities/locations (e.g., nuclear power plants or areas subject to frequent natural disasters);
- f. Must maintain sustained operations for up to 30 days; and
- g. Must include regularly scheduled testing, training, and exercising of WCHD personnel, equipment, systems, processes, and procedures used to support the agency during a COOP event.

ASSUMPTIONS

- a. A wide range of events could potentially disrupt the ability of the WCHD to deliver its services.

- b. These events could impact the facilities, technology, and staff of the WCHD. Such events may render the facility unusable or inaccessible, the technology incapable, and staff unavailability.
- c. The events may indirectly impact all of the facilities and staff of WCHD, or may impact only a portion of those facilities and staff.
- d. Wood County Health District and its agencies will be prepared to undertake their continuity plans.
- e. Emergencies or threatened emergencies may adversely impact WCHD's ability to continue to support essential services and to provide support to the operations of clients and external agencies.
- f. Personnel and other resources from WCHD and other organizations outside of the area affected by the emergency or threat will be made available if required to continue essential services.
- g. Emergencies and threatened emergencies differ in priority and impact.
- h. The vulnerability of the WCHD is based on an assessment of the probability of an event occurring and the impact that the event could have on operations.
- i. When a COOP event is declared, the WCHD will implement a predetermined plan using trained and equipped personnel.
- j. The WCHD will provide operational capability within 12 hours of the event and be able to continue essential operations for 30 days or until termination of the event.
- k. Appropriate resources and funding will be available for COOP planning and development and for supporting essential services during the event.
- l. Vendors and other support organizations will be prepared to undertake their continuity plans, including support of the WCHD.

APPLICABILITY AND SCOPE

- a. The provisions of this COOP apply to all WCHD personnel. This plan applies to the full spectrum of manmade, natural, and technological emergencies and threats.
- b. Support from other state agencies and local governments, as described herein, will be coordinated with the responsible office as applicable.
- c. The COOP provides guidance for and facilitates the preparation of site- or activity-specific plans and procedures that help ensure the safety of department personnel. As well as allow department organizational elements to continue essential operations in the event of an emergency or threat of an emergency. The planning guidance and the plans to be developed in accordance with it do not address day-to-day activities that enable an organization to conduct or safeguard routine operations.
- d. This document applies to situations determined by the Health Commissioner of the Wood County Health District that require relocation/re-establishment of essential services of the health district. The scope does not apply to temporary disruptions of day-to-day health district activities during short-term building evacuations or other situations where services are anticipated to be restored in the primary facility within a short term. The Health Commissioner will determine situations that require implementation of the

COOP. For example, equipment failure, personnel safety, habitability of the building, etc.

HAZARD VULNERABILITY ANALYSIS

- a. Refer to Hazard Vulnerability Assessment

POLICY STATEMENT

It is the policy of the Wood County Health District to respond quickly at all levels in the event of an emergency or threat. This includes human, natural, technological, and other emergencies or threats, in order to continue essential internal operations and to provide support to the operations of client and external agencies.

COOP PLANNING RESPONSIBILITIES

Responsibility	Position
Update COOP plan annual	Emergency Response Planner
Update telephone rosters quarterly	Communication Manager
Review status of vital files, records, and databases	Registrar
Develop and lead COOP Training	Emergency Response Planner
Plan COOP exercises	Emergency Response Planner
Conduct Alert and notification tests	Emergency Response Planner

REVIEW/ REVISION OF PLAN

This document will be reviewed and/or revised annually or as required by Mandate, Law, Policy, Directive, or Order. The annual review cycle will follow that which is outlined in the Base EOP *Development and Maintenance* section. Moreover, this document may be revised based on instances including but not limited to: best practices, changes in government structure, changes in equipment, changes in infrastructure, based on deficiencies revealed during federal and/or state SNS Program Technical Assistance Reviews, or as the result of After Action Reports (AAR), Improvement Plans (IP), Drills, Tabletops (TTX), Functional Exercises (FE), and Full Scale Exercises (FSE).

PLAN DISTRIBUTION

Distribution of the entire COOP will be restricted to staff with COOP responsibilities and a need-to-know. A limited version of the COOP may be distributed to other associates to inform them of the district's plans to continue operations in the event of an emergency.

To assure a high level of readiness by all employees, an unclassified version of the COOP is available. Distribution methods include a combination of instructional letters, employee bulletins, or other internal memoranda.

- a. Primary Distribution List
 - Health Commissioner
 - All Managers
 - Emergency Response Staff
 - All Designated Essential Personnel
 - Alternate Operation Facilities

CONCEPT OF OPERATIONS

RESPONSIBILITIES

- a. Wood County Health District:
 - Coordinate execution of the public health functions of this plan with the emergency activities of other (Jurisdiction) government agencies, private agencies and organizations, and the federal government.
 - Maintain surveillance of potentially threatening conditions to and in Wood County and direct appropriate warning and preparedness actions.
 - Encourage mutual aid agreements with private industry and relief organizations and between government agencies.
 - Provide public health-related technical and planning assistance to government agencies upon request.
 - Provide for periodic exercises to test and evaluate Wood County Health District Emergency Operations Plans to maintain a high standard of preparedness.
 - Establish appropriate level of operational readiness.
 - Initiate any and all other actions deemed necessary for effective implementation of this plan.
 - Advise the Governor and other government officials of the severity and magnitude of the public health aspects of the emergency/disaster situation.
 - Develop and maintain a list of public health Standard Operating Procedures (SOPs).
 - Maintain, update and distribute all changes to this plan, with annual review.
 - Appoint a WCHD "Emergency Response Planner " to prepare and maintain current assigned operational annexes of this plan. Including, assuring the development of operating procedures and manuals appropriate to the public health functions.
 - Support the Emergency Operations Center in accordance with requirements set forth by the designated National Emergency Management Agency.

- Deploy allocated and available resources to meet a public health emergency or disaster requirements.
 - Maintain the capability for the emergency procurement of public health supplies and equipment required and not otherwise available.
 - Provide training as appropriate to personnel assigned to execute respective essential services in this plan.
 - Maintain a 24-hour After-Hour Contact List for the Department and agency.
 - Coordinate public health essential services with private service organizations.
 - Assist federal representatives in providing an emergency response or disaster assistance within the affected areas.
 - Maintain current internal notification/recall rosters and communications systems.
 - Assign appropriate personnel to succeed the "decision-making authority".
 - Participate in tests and exercises to evaluate this plan.
- b. Perrysburg City Schools
- Determine with area or areas of the facility will be used.
 - After been notified that the MOU is activated; the designee will respond back to the Health Commissioner within 2 working days.
 - Allow access to telephone lines and computers, if available.
 - May bill the SCGHD for any costs above normal operating cost incurred in the provision of these support services.
- c. Wood County Emergency Management Agency
- Support WCHD by providing coordination during an emergency that require the transfer of personnel and equipment to an Alternate Operation Facility.
 - Support public information and rumor control effort through the Joint Information Center.
 - Provide situational assessment and coordination, including providing coordination of county resources to support COOP response.
 - Coordinate support from law enforcement agencies within the County for security at Alternate Operation Facility, if needed.

DEPARTMENTAL OPERATIONS CENTER (DOC)

INCIDENT COMMAND

- a. All emergency operations will be managed by an Incident Command System (ICS). Incident command is a method for dealing with disasters when the situation requires coordination of all public health activities through a command post.
- b. The principle for ICS is that public health activities are divided into five main functions: INCIDENT COMMAND, OPERATIONS, LOGISTICS,

- FINANCE/ADMINISTRATION and PLANNING (each function has a leader (or “Chief”) Assigned to the public health DOC).
- c. Each public health unit, area or department maintains the same leaders or directors as per their regular routines. Some departments will naturally be managed by the director, chief, or head of that department (SECTION COORDINATORS).
 - d. Whenever the public health units, areas or departments need to perform one of the above five main functions, they should do so through the ICS structure.

INCIDENT COMMANDER

1. To oversee the response to the entire public health incident, an Incident Commander is established who directs the DOC, all emergency activities and assigns key personnel to be in charge of certain areas as needed.
2. Personnel eligible as Incident Commander
 - Health Commissioner
 - Director of Nursing
 - Director of Environmental Health
 - Any other trained personnel may be designated as Incident Commander, dependent on incident type and scope
3. The Health Commissioner may elect to take charge of the public health disaster response himself/herself, in which case he/she supersedes any other Incident Commander.

EMERGENCY OPERATIONS COORDINATOR

1. To coordinate the response within the agency during an emergency. This person may have additional titles and/or positions.
2. The Emergency Response Planner/ Coordinator will typically fill this role; however, any trained staff member may be named.

DISASTER DRILLS AND EXERCISES

- a. Disaster Activation drills will be held annually, although they may be done as a tabletop exercise.
- b. When a disaster drill is staged, the drill coordinator will announce “This is a drill.”
- c. The public health will respond as if it were an actual disaster with two exceptions: no clinics will be closed, and no clients or visitors will be turned away.
- d. If you are uncertain whether there is an actual disaster in effect, call the health commissioner’s office to confirm.
- e. Establishing WCHD DOC
 - Designated personnel unlocks DOC
 - IT/staff transfers computers to DOC

- IT/staff sets up all computers.
- Staff that has been issued radios and chargers should bring them to the DOC
- Command Staff arrives
- Incident Commander (IC) assigns Incident Command System positions
- Command staff signs in and assumes positions
- IC reports activation of command post to the Health Commissioner

WCHD DOC STAFF REPORTING PROCESS

1. Unless advised otherwise, all WCHD DOC Staff will report directly to the WCHD DOC.
2. WCHD DOC Staff will sign in and out of the WCHD DOC

WCHD DOC SECURITY

1. Health Commissioner, or designee, contacts Wood County Sheriff's Office (WCSO)
2. WCSO reports to command center for assignment
3. WCSO provides security for the WCHD DOC

JOB ACTION SHEETS

1. Refer to Appendix B

WCHD DEPARTMENTAL OPERATION CENTER COMMAND STRUCTURE

- a. Refer to Appendix C

FUNCTION, ACTIVITIES, & RESPONSIBILITIES

- a. Refer to Appendix D

COOP PHASES

PHASE 1: ACTIVATION & RELOCATION

a. **DECISION PROCESS**

1. The purpose of a time-phased implementation is to maximize the preservation of life and property in the event of any natural or man-made disaster or threat. The extent to which this will be possible will depend on the emergency. The amount of warning received, whether personnel are on duty or off-duty at home or elsewhere, and possibly, the extent of damage to the primary health district facility and its occupants. The WCHD

Incident Complexities Classifications Matrix may be used to determine the execution level of the COOP plan.

b. WARNING CONDITIONS

1. **With Warning:** It is expected that, in most cases, the Wood County Health District will receive a warning of at least a few hours prior to an event. A warning will normally enable the full execution of the COOP with a complete and orderly alert, notification, and deployment of the Emergency Response Staff.
2. **Without Warning:** The ability to execute the COOP following an event that occurs with little or no warning will depend on the severity of the emergency and the number of personnel that survives. If the deployment of the essential staff is not feasible because of the loss of personnel, temporary leadership of the Wood County Health District could be passed to ODH.

c. ALERT, NOTIFICATION, IMPLEMENTATION PROCESS

1. The Wood County Health District notification process as related to COOP activation should allow for a smooth transition of the essential staff to an alternate facility to continue the execution of essential functions across a wide range of potential emergencies. Notification may be in the form of:
 - i. A COOP alert sent to the following:
 - Emergency Response Staff
 - Managers
 - Essential staff
 - Non-essential staff
 - ii. Refer to Appendix A; for Checklists 1 through 5 for roles and responsibilities of essential personnel.
 - iii. An announcement of COOP activation will direct the staff to report to an assembly site or a designated alternate facility, and provide instructions regarding movement, reporting, and transportation details.
 - iv. Upon receipt of a COOP alert from the Health Commissioner, or a designated successor, an Administrative Call Down will be initiated to notify essential and non-essential employees. The notification may be via personal contact, telephone, cell phone, radio and TV broadcasts, or a combination.
 - v. The Health Commissioner notifies the County EMA that an emergency relocation of the Wood County Health District is anticipated or is in progress. The Health Commissioner may request activation of the Emergency Operations Center if needed.
 - vi. The decision to implement the COOP should be based on the nature and severity of the event. A short duration event such as a building evacuation will not likely require implementation of the COOP. The COOP should be implemented in those situations requiring a systematic continuation of essential functions within the Wood County Health District.

d. **INITIAL ACTIONS**

1. Refer to Appendix E

e. **DEPLOYMENT AND DEPARTURE PROCEDURES – TIME-PHASE OPERATIONS**

1. Allowances for partial pre-deployment of any essential functions that are critical to operations will be determined by the Health Commissioner at the time the COOP is activated. This determination will be based on the event or the level of threat. The following actions establish general administrative procedures to allow for travel and transportation to the alternate facility. Specific instructions will be provided at the time a deployment is ordered.
2. The Health Commissioner directs designated staff to begin deployment of select staff members to the alternate facility.
3. The designated staff is directed by the Health Commissioner to either relocate to a designated assembly site or an alternate facility. Team members should ensure that they have their Emergency Response Go Kits and any other supplies necessary to begin operations of critical functions of the Health District. Specific instructions will be provided at the time of activation.
4. Essential staff personnel will immediately begin relocation, taking with them Go-kit.
Specific instructions will be provided at the time of activation.
5. Non-essential personnel present at the affected health district facility at the time of an emergency notification will be directed to return home to await further instructions. At the time of notification, any available information regarding routes that should be used to depart the health district facility or other appropriate safety precautions will be disseminated.

f. **TRANSITION TO ALTERNATE OPERATIONS**

1. Following the activation of the COOP and the establishment of communications links at the alternate facility the Health Commissioner or designee orders the cessation of operations at the affected health district facility.
2. The Health Commissioner or designee notifies the County Emergency Operations Center that an emergency relocation of the health district is complete and provides contact numbers.
3. As appropriate, press, news media, outside customers, vendors, and other service providers, are notified by the Public Information Officer that the health district has been temporarily relocated.

g. **LEADERSHIP**

1. Orders of Succession/Delegations of Authority:
 - i. In any public health emergency or disaster, the Health Commissioner of the Wood County Health District has primary authority and responsibility for the agency's response to the

incident or event including COOP activation. If the Health Commissioner is unavailable or unreachable for an extended period, responsibility shall pass to the next position in the line of succession. The designated individual retains all assigned obligations, duties, and responsibilities of the Health Commissioner until officially relieved by an individual higher on the list of succession or until the Health Commissioner re-assigns administrative responsibility.

- ii. The Board had determined that Amy Jones, Director of Nursing, will serve as WCHD Acting Health Commissioners. If neither the Health Commissioner, nor the assigned Acting Health Commissioners can fulfill the duties required, the Wood County Board of Health will hold a meeting to appoint an Acting Health Commissioner.
- iii. The delegation shall be determined and approved by the Health Commissioner for all essential services and will be effective immediately upon designation. The delegation will last for an indefinite period. The Health Commissioner will determine when delegations are no longer required.
 - If the Health Commissioner is unavailable in the event of a disaster or emergency, the Acting Health Commissioners (as defined above) are authorized to perform the duties regularly assigned to the Health Commissioner role; including, but not limited to:
 - All operational tasks normally performed by the Health Commissioner
 - Expenditure approval consistent with established procedures
 - Personnel task and work assignments
 - The Acting Health Commissioners may enter into agreements, contracts, or Memorandums of Agreement/ Understanding with any public or private entity with approval from the Board of Health or authorized body.
 - The designated staff member may be requested by the Health Commissioner to disseminate COOP guidance and direction during the activation and relocation phases. Pending the activation of the COOP, the team will monitor the situation and assist in the notification process as necessary.
 - When executed, the Wood County Emergency Operations Center (EOC) should be notified and requested to provide any previously agreed upon assistance to the Wood County Health District.

h. DEVOLUTION

1. If the COOP cannot be implemented for any reason, the Wood County Health District operations and responsibilities will revert to the Ohio Department of Health (ODH). The ODH will then:
 - i. Determine which health district or other organization will perform this public health mission for the county or
 - ii. Assume the responsibility for ensuring the continuous performance of the Wood County Health District mission essential services.

PHASE 2: ALTERNATE FACILITY OPERATION

a. **MISSION CRITICAL SYSTEMS GO KITS**

1. The Emergency Response Planner is responsible for providing guidance to management staff on the requirement for and the contents of the Emergency Response Go Kits. The Go Kits may contain such items as PPE, publications, laptop computers, ICS Forms, etc.

b. **VITAL FILES, RECORDS, AND DATABASES:**

1. Refer to Appendix F

c. **EXECUTION OF MISSION ESSENTIAL SERVICES**

1. Upon activation, the Information Technology Specialist or designee will begin providing support for the following functions:
 - i. Monitor and assess the situation that required the relocation;
 - ii. Monitor status of personnel and resources;
 - iii. Ensure that communication mechanisms are established and maintained with the County Emergency Operations Center and the State or other designated persons.
 - iv. Plan and prepare for the restoration of operations at the health department facility or alternate facility.

d. **EMERGENCY RESPONSE STAFF RESPONSIBILITIES**

1. As soon as possible following their arrival at the designated alternate facility, the emergency response staff will begin providing support for the following functions: See Checklist 5.
 - i. The designated health district manager will disseminate administrative and logistic information to the essential staff upon arrival. This information should cover the operational procedures for the next 30 days.
 - ii. The emergency response staff will receive continual briefings and updates.
 - iii. The emergency response staff will perform the essential services of the affected health district facility as necessary.

e. **WCHD STAFF**

1. If it becomes evident that the emergency response staff cannot ensure the continuous performance of mission essential functions. The Health Commissioner or designee will assign additional staff members as

necessary who have the requisite skills to perform the tasks through the coordination of Human Resources or other county agency.

F. METHODS OF EMPLOYEE COMMUNICATIONS

1. OPHCS Alerts;
2. Reverse 911/ 211/ Code Red/ One Call Now
3. Soliciting employee comments and suggestions;
4. Communicating plans and changes, including recurring distribution of emergency guides;
5. Maintaining current contact information for all staff;
6. Advising employees of support services available through agency Employee Assistance Programs (EAPs), if applicable.
7. Additional information to be added as they become available.

g. DEVELOPMENT OF PLANS AND SCHEDULES FOR RECONSTITUTION AND TERMINATION

1. The designated health district manager will develop Reconstitution and Termination Plans and Schedules. This will ensure an orderly transition of all health district functions, personnel, equipment, and records for the temporary alternate location to a new or restored health district facility.
2. The Health Commissioner will approve the plans and schedules prior to the cessation of operations at the alternate facility.
3. The designated health district manager will oversee the Reconstitution and Termination process.

PHASE 3: RECONSTITUTION

a. OVERVIEW

1. Within twenty-four (24) hours of an emergency relocation. The Health Commissioner will initiate operations to salvage, restore, and recover the affected health district facility after the approval of the local and Federal law enforcement and emergency services involved. Reconstitution procedures will commence when the Health Commissioner ascertains that the emergency situation has ended and is unlikely to recur. Once this determination has been made, one or a combination of the following options may be implemented, depending on the situation.
 - i. Continue to perform essential services at the alternate facility for up to thirty (30) days.
 - ii. Begin an orderly return to the affected health district facility and reconstitute full operations.
 - iii. Begin to establish a reconstituted health district facility in some other facility.

b. PROCEDURES

1. Upon a decision by the Health Commissioner, the health district facility can be reoccupied, or that a different facility will be established as a new county health district facility:

2. The designated health district manager will oversee the orderly transition of all health district functions, personnel, equipment, and records from the alternate facility to a new or restored county health district facility. The designated health district manager will institute a call down to inform staff of orders to return to work at a new health district facility or the restored health district facility. The information will also be distributed on hours of operations, work assignments and other pertinent information regarding reconstitution.
 3. Prior to relocating back to the primary health district facility or another building. The designated health district manager, in conjunction with the Environmental Health Division, Ohio OSHA, County Officials, and Wood County IT or designee and Information Technology Specialist or designee support staff, will conduct appropriate security, safety, and health assessments for suitability of both the building and surrounding areas for resumption of operations.
 4. When necessary equipment and documents are in place at the new or restored health district facility, the staff remaining at the alternate facility will transfer essential functions and resume normal operations.
- c. **AFTER-ACTION REPORT/IMPROVEMENT PLAN (AAR/IP)**
1. An AAR/IP information collection process will be initiated prior to the cessation of operations at the alternate facility. The information to be collected will, at a minimum, include information from any employee working during COOP activation and a review of the strengths and weaknesses at the conclusion of the operations.
 2. The information should be incorporated into an AAR/IP template. Recommendations for changes to the COOP and any accompanying documents will be developed and incorporated into the AAR/IP.

ESSENTIAL SERVICES

It is important to establish priorities before an emergency to ensure that the relocated staff can complete the essential services. All staff shall ensure that essential services can continue or resume as rapidly and efficiently as possible during an emergency relocation. Any task not deemed mission essential must be deferred until additional personnel and resources become available.

- a. Essential Services; must be restored within 12 hours
 1. Communicable Disease Tracking and Investigation
 2. Vital Statistics (Birth and/or death certificate issuance)
 3. Environmental Health Services

Note: Response within the first 12 hours may vary greatly depending on the type of incident. The number and type of resources and services will be determined based on the Incident Commander and/or EOC resource requests.

LOGISTICS

ALTERNATE FACILITY

- a. The WCHD has a signed Memorandum of Understanding (MOU) with Perrysburg Schools to use their facilities as an Alternate Facility Operation.
- b. If Perrysburg School's facility are unavailable; the Health Commissioner in consultation with the Wood County Board of Health and the Wood County Emergency Management Coordinator will determine a secondary location for operations at the time of activation. The secondary location for the operation will be based on the incident, threat, risk assessments, and execution timeframe.
 1. For MOU between WCHD and Perrysburg Schools; refer to Appendix F
- c. In order to ensure the adequacy of assigned space and other resources, a review of the alternate and secondary locations will be conducted annually. The Health Commissioner will be advised of the results of this review and any updates to the alternate facility information.
 1. Alternate facilities should provide:
 - i. Sufficient space and equipment
 - ii. Capability to perform essential services within 12 hours, up to 30 days.
 - iii. Reliable logistical support, services, and infrastructure systems
 - iv. Consideration for health, safety, and emotional well-being of personnel
 - v. Interoperable communications
 - vi. Computer equipment and software

INTEROPERABLE COMMUNICATIONS

- a. Interoperable communication tools available to maintain redundant critical communication in the event of COOP activation must be flexible and depend on the facilities capability and resources available. This will be used to establish communications to maintain essential functions, communicate with personnel and other agencies, as well as accessing databases and IT support:
 - Landline service with fax capability
 - 800 MHz radios
 - Cellular telephones
 - E-mail/internet capability
 - MARCS radio operations
 - Two-way radio capabilities

APPENDIX

- Appendix A: Checklist
- Appendix B: Job Action Sheets
- Appendix C: WCHD Departmental Operation Center

- Appendix D: Function, Activities, & Responsibilities
- Appendix E: Initial Actions
- Appendix F: MOU Between WCHD and Perrysburg Schools