

Pandemic Influenza Continuity of Operations (COOP) Annex Template Instructions

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FEMA

GUIDE INSTRUCTIONS

This guide provides instructions for developing a Pandemic Influenza Continuity of Operations (COOP) Annex based on the *Pandemic Influenza Continuity of Operations (COOP) Guidance Memorandum*, dated March 1, 2006. Although general guidance and sample information is provided in this guide for reference, organizations are encouraged to tailor Pandemic Influenza COOP Annex development to meet their own needs and requirements. Sample text has been provided throughout this guide and is italicized to aid in identification. These instructions accompany an electronic template that may be downloaded from the Federal Emergency Management Agency (FEMA) Office of National Security Coordination (ONSC) website at the following address: <http://www.fema.gov/government/coop/index.stm>

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I. INTRODUCTION

The introduction should briefly address COOP planning in general and the need for specialized planning to respond to an influenza pandemic.

(Sample text)

The Federal Government performs essential functions and services that may be adversely impacted in the event of a natural or man-made disaster. In such events, all government Departments and Agencies should have plans in continuity to operate their core missions. Maintaining essential functions and services is a vital element in an organization's ability to continue operations. Continuity of operations for various agencies, businesses, and governmental jurisdictions may be disrupted during a pandemic; therefore, it is important for these entities, in particular, the (insert D/A name), to ensure it can execute its essential missions in the event of a threat to its normal continuity of operations. Federal Preparedness Circular (FPC) 65, Federal Executive Branch Continuity of Operations (COOP), provides guidance to Federal Executive Branch Departments and Agencies for use in developing contingency plans and programs for COOP. COOP planning is intended to ensure the performance of Department and Agency essential functions across a wide range of all-hazards emergencies.

The Federal Implementation Plan for the National Strategy for Pandemic Influenza acknowledges that an influenza pandemic will require specialized planning beyond that addressed in FPC 65. To address this, FEMA issued a memorandum on March 1, 2006, "Continuity of Operations (COOP) Pandemic Influenza Guidance." The memorandum provides guidance to Federal Executive Branch Departments and Agencies for incorporating pandemic influenza considerations into their COOP planning.

II. PURPOSE

The purpose should briefly address the organization of the Pandemic Influenza COOP Annex and its relationship to the overall COOP plan. It should also discuss the key elements of Pandemic COOP planning.

(Sample text)

This Annex provides guidance to (insert D/A name) Components and serves as the (insert D/A name) Headquarters plan for maintaining essential functions and services during an influenza pandemic. This annex neither replaces nor supersedes the current approved (insert D/A name) Headquarters COOP Plan; rather it supplements it, bridging the gap between the traditional, all-hazards COOP planning of FPC 65 and the specialized COOP planning required for a pandemic by addressing those considerations, challenges, and elements specific to the dynamic nature of a pandemic.

This Annex emphasizes that maintaining essential functions in a pandemic environment may not

until an official "CCOP" declaration, that maintaining essential functions may be accomplished through contact interventions (social distancing) strategies, and may not require the relocation of the entire (insert D/A name) Headquarters Emergency Relocation Group. The annex recognizes that relocation may be necessary due to a separate or concurrent event. Since these requirements apply across all levels of the Department, the term "(insert D/A name)," for the purposes of this Annex, refers to the entire (insert D/A name) organization, including Headquarters personnel, all Components, and operating elements.

III. CONCEPT OF OPERATIONS

The Concept of Operations section should explain how the organization will implement its Pandemic Influenza COOP Plan and specifically its response to changes in the Federal Response Stages.

(Sample text)

This Annex is built upon the assumption that the Pandemic Influenza Federal Response Stages will serve as the Pandemic COOP Plan activation criteria or "triggers" for (insert D/A name) actions. As such, worksheets aligning specific responses in each of the 11 traditional areas of COOP for each Federal Response Stage are included in Appendix 2.

In addition, the (insert D/A name) Secretary may choose to add additional Pandemic COOP Plan activation criteria and responses to reflect the unique nature of the (insert D/A name). These may be pre-identified in Appendix 2 or may be communicated as needed during implementation of the (insert D/A name) Pandemic Influenza COOP plan.

IV. PANDEMIC PLANNING ASSUMPTIONS

The Assumptions section should address the overarching planning assumptions that were used for development of the Pandemic Influenza COOP Plan Annex *i.e.* those provided in the *National Strategy for Pandemic Influenza Implementation Plan*. It should also identify any (insert D/A name) specific planning assumptions.

A. GENERAL ASSUMPTIONS

(Sample text)

- *Susceptibility to the pandemic influenza virus will be universal.*
- *Efficient and sustained person-to-person transmission signals an imminent pandemic.*
- *The clinical disease attack rate will likely be 30 percent or higher in the overall population during the pandemic. Illness rates will be highest among school-aged children (about 40 percent) and decline with age. Among working adults, an average of*

20 percent will become ill during a community outbreak. Some persons will become infected but not develop clinically significant symptoms. Asymptomatic or minimally symptomatic individuals can transmit infection and develop immunity to subsequent infection.

- *Of those who become ill with influenza, 50 percent will seek outpatient medical care. With the availability of effective antiviral drugs for treatment, this proportion may be higher in the next pandemic.*
- *The number of hospitalizations and deaths will depend on the virulence of the pandemic virus. Estimates differ about 10-fold between more and less severe scenarios. Two scenarios are presented based on extrapolation of past pandemic experiences (Table 1). Planning should include the more severe scenario. Risk groups for severe and fatal infection cannot be predicted with certainty but are likely to include infants, the elderly, pregnant women, and persons with chronic medical conditions.*
- *Rates of absenteeism will depend on the severity of the pandemic. In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members, and fear of infection may reach 40 percent during the peak weeks of a community outbreak, with lower rates of absenteeism during the weeks before and after the peak. Certain public health measures (closing schools, quarantining household contacts of infected individuals, "snow days") are likely to increase rates of absenteeism.*
- *The typical incubation period (interval between infection and onset of symptoms) for influenza is approximately two days.*
- *Persons who become ill may shed virus and can transmit infection for up to one day before the onset of symptoms. Viral shedding and the risk of transmission will be greatest during the first two days of illness. Children usually shed the greatest amount of virus and therefore are likely to pose the greatest risk for transmission.*
- *On average, infected persons will transmit infection to approximately two other people.*
- *A pandemic outbreak in any given community will last about six to eight weeks for each wave of the pandemic.*
- *Multiple waves (periods during which community outbreaks occur across the country) of illness could occur with each wave lasting two-three months. Historically, the largest waves have occurred in the fall and winter, but the seasonality of a pandemic cannot be predicted with certainty.*
- *The stages of the pandemic should occur sequentially, though they may overlap or occur so rapidly as to appear to be occurring simultaneously or being skipped. For example, the pandemic could spread so rapidly that Federal Government Response Stages 3 and 4 may be activated simultaneously or a change from Stage 2 to 3 is ordered.*

Sample Table 1: Number of Episodes of Illness, Healthcare Utilization, and Death Associated with Moderate and Severe Pandemic Influenza Scenarios*

Characteristic	Moderate (1958-68-like)	Severe (1918-like)
Illness	90 million (100%)	90 million (100%)
Outpatient Medical Care	43 million (100%)	43 million (100%)
Hospitalization	363,000	2,900,000
ICU Care	128,730	1,433,000
Mechanical Ventilation	64,375	742,500
Deaths	209,000	1,903,000

*Estimates based on extrapolation from past pandemics in the United States. Note that these estimates do not include the potential impact of interventions not available during the 20th century pandemics.

E. DEPARTMENT/AGENCY ASSUMPTIONS

(Sample text)

- *D/A will be operational during a pandemic influenza outbreak.*
- *All D/A Components have actionable COOP plans and capabilities in accordance with FPC 63.*
- *Alternate facilities may be activated for use during a pandemic. (insert D/A name) may make its alternate facilities, along with other locations, available to be used as a precaution to separate staff (i.e., implement social distancing protocols). A pandemic influenza event does not necessarily require the use of alternate facilities.*
- *Essential functions: (insert D/A name) operations and support requirements will continue to be people-dependent. These activities require human interactions to be carried out, however many interactions may not require face-to-face contact or can be conducted with precautionary measures.*
- *Travel restrictions, such as limitations on mass transit, implemented at Federal, State, local and/or Tribal levels will affect the ability of staff to get to work.*

V. ELEMENTS OF A VIABLE COOP CAPABILITY

The Elements of a Viable COOP Capability section should address the 11 traditional elements of COOP in the context of a pandemic influenza.

(Sample text is included for all 11 elements.)

A. PLANS AND PROCEDURES

(insert D/A name) pandemic influenza COOP planning and response actions shall be appropriately linked to the Federal Government Response Phases (see Appendix I). A change from one Federal Government Response Phase to another automatically activates certain readiness measures and procedures:

1. Pandemic Coordinators and Pandemic Response Teams

The Secretary has designated (insert name) as the (insert D/A name) Pandemic Coordinator. The (insert D/A name) (insert name) will serve as the Alternate Pandemic Coordinator. (insert D/A name) will establish a Pandemic Response Team (PRT) to anticipate the impacts of a pandemic on (insert D/A name) and to assist with developing strategies to manage the effects of a pandemic outbreak. Each Component shall establish and designate a Pandemic Coordinator and identify and designate a Component-level PRT to support the Pandemic Coordinator, with representation of all relevant stakeholders. The Pandemic Coordinator should work closely with the Component's COOP Program Manager. The COOP Program Manager shall also serve as a member of the Component's PRT if he or she is not already designated as the Component's Pandemic Coordinator.

The (insert D/A name) Headquarters PRT is composed of the following members:

- (insert names and positions)*

2. Sustaining Operations

Sustaining operations will be performed until normal business activity can be reconstituted; this may take longer than 30 days. The principal focus in making this determination will be the minimization of the effects of a pandemic on staff and operations. (insert D/A name) Headquarters will emphasize and implement procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and telework in routine operations.

3. Risk Communications

(insert D/A name) shall develop a Risk Communications Plan for communicating with stakeholders (internal and external). A change from one Federal Government Response Phase to another automatically triggers certain readiness measures.

When conditions change from one Federal Response Stage to another, or as directed by the Secretary, (insert D/A name) Headquarters COOP Emergency Relocation Group (ERG) members receive pre-recorded or customized messages from (insert D/A name) leadership. In a pandemic influenza environment, (insert D/A name) pandemic COOP planning and response actions shall be appropriately linked to the Federal Government Response Phases (see Appendix I for a mapping of WHO Global Pandemic Phases to Federal Government Response Stages). A change from one Federal Government Response Phase to another automatically triggers certain readiness measures and procedures.

4. (Insert D/A Name) Response Phases

The Secretary of Homeland Security, in coordination with Department of Health and Human Services, the White House Homeland Security Council, and other Federal partners as required, shall set the Federal Government Response Stages as a pandemic evolves.

(insert D/A name) Headquarters and Components may also utilize their own internal customized phases to implement the Federal Government Response Phases in order to achieve a higher state of readiness. The D/A Head will need to implement the corresponding actions associated with each change in Federal Government Response Phase and then communicate that action to his/her organization.

R. ESSENTIAL FUNCTIONS

According to the Implementation Plan for the National Strategy for Pandemic Influenza, during a pandemic or any other emergency, essential functions must be continued to facilitate emergency management and overall national recovery. Given the expected duration and potential multiple waves of a pandemic, (insert D/A name) Components must review their essential functions and services to take into account the need to perform essential functions beyond the traditional 30-day COOP requirement.

I. Essential Functions

(insert D/A name) must include definitions and identification of essential functions and services needed to sustain agency mission and operations for several months. For pandemic planning purposes, essential services and functions are likely to be broader than the traditional COOP essential functions.

As part of the (insert D/A name) Headquarters plan, Table 2 is the prioritized list of the essential functions of the Office of the Secretary with supporting information for ERG Personnel, Vital Records and Databases, and Mission Critical Systems and Equipment required to perform each of the essential functions.

In order to minimize the effects of a pandemic on staff and operations and continue essential functions and services, (insert D/A name) will emphasize and implement procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and telework.

Sample Table 2: Office of Secretary Essential Functions and Supporting Information

Priority	Essential Functions	ERG Personnel	Final Records and Database	Mission Critical Systems and Equipment
1	Essential Function A	ERG Member A	Document ABC	Secure and Non-secure Phone and Fax
2	Essential Function Number B	ERG Members B & C	Document DEF	Secure and Non-secure Phone and Fax
3				
4				
5				
6				

2. Identification of Essential Positions and Skills

(insert D/A name) shall identify positions, skills, and personnel needed to continue essential functions and services. Components will also identify back-up personnel, in different geographic locations, by position, and ensure that all personnel needed to perform those essential functions shall also receive COOP and specific pandemic influenza training.

Annex (insert if applicable) of the (insert D/A name) Headquarters COOP Plan identifies those personnel needed to support continuity of operations in all-hazards scenarios.

3. Alternative Work Arrangements

(insert D/A name) shall assess which essential functions and services can be conducted through the use of alternative work arrangements (e.g., home, staggered work hours, flex time, etc.).

4. Essential Contract and Support Services and Other Interdependencies

Contractual Staff- *(insert D/A name) shall initiate pre-solicited, signed and standing agreements with contractors and other third parties to ensure fulfillment of mission requirements.*

Other Interdependencies- *(insert D/A name) shall identify the contractors, suppliers, shippers, resources and other businesses that it interacts with on a daily basis. (insert D/A name) shall develop relationships with more than one supplier should a primary contractor be unable to provide the required service. Table 3 is a sample chart used to depict the Contractual Staff and other interdependencies necessary to perform essential functions.*

Sample Table 3: Essential Contractual Arrangement and Interdependencies

Essential Service or Function	Primary Contractor	Backup Contractor	ERG Member/Manager
Security	ABC Company	DEF Company	ERG Member X
Cleaning	XYZ Company	123 Company	ERG Member Y

5. Impact Analysis on Operations

(insert D/A name) shall consider an impact analysis of an influenza outbreak on all operations, using multiple scenarios, including:

- *Workforce reductions (up to 40 percent absenteeism for 1 month, 2 months, 3 months)*
- *Limited access to facilities*
- *Impact of telework and social distancing policies*

C. DELEGATIONS OF AUTHORITY

At the height of a pandemic wave, absenteeism may reach a peak of 40 percent. As such, delegations of authority are critical.

The (insert D/A name) Delegations of Authority can be found in (insert location) of the (insert D/A name) Headquarters COOP Plan.

1. Three Deep per Responsibility

(insert D/A name) shall plan for delegations of authority that are at least three deep per responsibility to take into account the expected rate of absenteeism to help assure continuity of operations over an extended time period, i.e., 30-60-90 days.

2. Geographic Dispersion

(insert D/A name) shall plan for geographical dispersion of delegations of authority, taking into account the regional nature of an outbreak.

B. ORDERS OF SUCCESSION

Since an influenza pandemic may affect regions of the United States differently in terms of timing, severity, and duration, (insert D/A name), as a Department with geographically dispersed assets and personnel, should consider dispersing the order of succession.

The Orders of Succession for (insert D/A name) Headquarters can be found in (insert location).

1. Three Deep per Position

(insert D/A name) shall plan for orders of successions that are at least three deep per position to take into account the expected rate of absenteeism.

2. Geographic Dispersion

(insert D/A name) shall plan for geographical dispersion of orders of succession, taking into account the regional nature and possibility of different orders of succession depending on the spread of the pandemic as shown in Sample Table 4.

Sample Table 4: Order of Succession Chart

Position	Succession	Location
1. Position A		City W
	A. Position B	City X
	B. Position C	City Y
	C. Position D	City Z
2. Position B		City X
	A. Position C	City Y
	B. Position D	City Z
	C. Position E	City O

E. ALTERNATE OPERATING FACILITIES

The traditional use of alternate operating facilities to maintain essential functions and services may not be a viable option during a pandemic. Rather, safe work practices, which include contact interventions and transmission interventions, reduce the likelihood of contacts with other people that could lead to disease transmission. Strategies for maintaining essential functions and services will largely rely on social distancing and dispersion of the workforce including telework, preventative health practices, and other efforts to reduce the chance of infection.

(insert D/A name) may choose to make its alternate facilities, along with other locations, available to be used as a means of implementing social distancing.

A separate incident concurrent to a pandemic outbreak could necessitate the use of an alternate operating facility for the (insert D/A name) Headquarters ERG members. All planning requirements listed in FPC 43 referencing alternate operating facilities or existing field infrastructures should be understood to be viable only in the event of an incident concurrent with a pandemic in which their use is vital. If the ERG members must be brought together in our location, increased use of PPE and other infection control measures must be implemented.

1. Essential Function by Remote Location

(insert D/A name) shall determine which essential functions and services can be conducted from a remote location (e.g., employees' homes or other geographically dispersed work locations) and those that must be performed at a designated department or agency facility.

As part of the (insert D/A name) Headquarters plan, the list of the Mission Critical Systems and Equipment for the Office of the Secretary is shown in Table 5.

Sample Table 5: Mission Critical Systems and Equipment- Office of the Secretary

Mission Critical Systems and Equipment
Secure and Non-Secure Phone and Fax
LAN Network Access, desktop with standard software suite, email, Adobe Acrobat, internet access, and network printing
GPS cards, cell phones, Blackberry, and pager
etc

2. Facilities Support

(insert D/A name) shall consider the need for reliable logistical support, services, and infrastructure systems at facilities that remain open (for greater than 30 days), to include alternate operating facilities in the event of an incident concurrent with a pandemic influenza outbreak. This support includes:

- *Prioritization/determination of accessible facilities/buildings (as alternative to relocating to remote facility)*
- *Necessary support staff*
- *Social distancing techniques*
- *Medical screening of employees*
- *Health/medical units*
- *Sanitation*
- *Essential Services*
- *Food and water*

3. Restriction of Movement

(insert D/A name) Components shall consider the impact of restriction of movement (Federal, State, Local and Tribal) on open/accessible facilities and operating plans.

E. INTEROPERABLE COMMUNICATIONS

According to the National Strategy Implementation Guidance, workplace risk can be minimized through implementation of systems and technologies that facilitate communication without person-to-person contact.

1. Telework- Analysis and Development of Capability

(Insert D/A name) shall analyze its current telework capability and identify its personnel performing essential functions who anticipate a need to telework, and the IT requirements, tools, and resources necessary to support telework during a pandemic. The use of laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), flash drives, and other systems that enable employees performing mission essential functions and services to communicate and maintain connectivity with internal organizations, external partners, critical customers, and other key stakeholders shall be considered when performing analysis.

2. Telework- Plan

(Insert D/A name) shall develop a telework plan, which identifies personnel performing essential functions who anticipate a need to telework, a description of their responsibilities while teleworking, the infrastructure needed to support this work and how technological assistance will be provided to teleworkers.

(Insert, attach or reference Telework Plan here.)

3. Telework- Test, Training and Exercises

(Insert D/A name) shall evaluate telework plans, procedures, and capabilities through reviews, testing, post-incident reports, lessons learned, performance evaluations, and exercises. Procedures shall be established to assure that corrective action is taken on any deficiency identified in the evaluation process.

(Insert, attach or reference Telework TT&E Plan here.)

4. Communications to Stakeholders

(Insert D/A name) shall develop a Communications Plan and mechanisms to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.

(Insert, attach or reference Communications Plan here.)

G. VITAL RECORDS AND DATABASES

1. Identification, Protection and Availability

(insert D/A name) shall identify, protect, and ensure the ready availability of electronic and hardcopy documents, references, records, and information systems needed to support essential functions for up to several months.

The (insert D/A name) Headquarters COOP Plan identifies vital records and databases needed by the Secretary to sustain essential functions and services (see Table 6).

Sample Table 6: Bureau of Water Management- Vital Records and Databases

Vital Records and Databases	Form of Record (e.g., hardcopy, electronic)	Pre-positioned at Alternate Facility	Hand Carried to Alternate Facility	Backed up at Third Location	Maintenance Frequency

2. Access from Remote Locations

(insert D/A name) shall determine whether systems, databases, and files can be accessed electronically from a remote location (e.g., an employee’s home or alternate workplaces) and establish reliable access and security protocols for them.

3. Periodic Maintenance

(insert D/A name) shall identify and plan for the maintenance of those vital systems and databases that require periodic maintenance or other direct physical intervention by employees.

II. HUMAN CAPITAL

Although a pandemic influenza will not directly affect the physical infrastructure of an organization, a pandemic will ultimately threaten all operations by its impact on an organization’s human resources. The health threat to personnel is the primary threat to maintaining essential missions and services during a pandemic. To assist agencies in making sure they are able to fulfill their missions, while at the same time, preparing and protecting the Federal workforce should a pandemic influenza outbreak occur, OPM has updated and

developed policies on leave, pay, hiring, alternative work arrangements, and other critical human capital issues in relation to pandemic influenza. This information can be found in "Human Capital Planning for Pandemic Influenza" at <http://www.opm.gov/pandemicinfluenza/>

(insert D/A name) shall review this information and develop, update, exercise, and be able to implement comprehensive Human Capital plans to protect its workforce.

(insert, attach or reference Human Capital Plan here.)

1. Telework Policy

Telework is an integral part of plans and procedures to maintain essential functions and services in an influenza pandemic.

(insert, attach or reference Telework Plan here.)

1. TEST, TRAINING AND EXERCISES

Testing, training, and exercising are essential to assessing, demonstrating, and improving the ability of organizations to maintain their essential functions and services.

1. Social Distancing

(insert D/A name) shall conduct annual tests, training, and exercises to ensure sustainable social distancing techniques, including telework capabilities, and to assess the impacts of reduced staff on the performance of essential functions.

2. Tabletop, Functional, and Full-Scale Exercises

(insert D/A name) shall conduct annual pandemic exercises (tabletop, functional, or full scale) to examine the impacts of pandemic influenza on agency essential functions, to familiarize agency personnel with their responsibilities, and to validate the effectiveness of pandemic influenza COOP planning by senior leadership.

(insert, attach or reference TT&E Plan here.)

3. Annual Awareness Training

(insert D/A name) shall conduct annual awareness briefings specific to pandemic influenza.

(insert, attach or reference Annual Training Plan here.)

4. Cross-Training Successors and Back-up Personnel

(insert D/A name) shall identify and train personnel, by position, needed to perform essential functions, including backups in different geographic locations (see Section B- Essential Functions).

The Emergency Relocation Group (ERG) personnel roster listed in (insert location) of the (insert D/A name) Headquarters COOP Plan identifies the personnel required to support continuity of operations.

J. DEVOLUTION OF CONTROL AND DIRECTION

Pandemic outbreaks will occur at different times, have variable durations, and may vary in the severity; therefore, full or partial devolution of essential functions may be necessary to execute essential functions and services. Devolution planning may need to include rotating operations among regional/field offices as the pandemic wave moves throughout the United States.

1. Devolution and Essential Functions

(insert D/A name) shall take into account how an organization will conduct essential functions if pandemic influenza renders leadership and essential staff incapable or unavailable to execute those functions. Full or partial devolution of essential functions may be necessary to ensure continuation of these essential functions and services.

(insert D/A name) Headquarters will ensure that devolution plans and procedures are consistent with the three-deep rule and geographic dispersion (see Section C, Delegation of Authority, and Section D, Orders of Succession).

2. Devolution Guidance

(insert D/A name) shall develop guidance for those organization elements receiving the devolution of control and direction, including:

- Essential functions and services;*
- Rotating operations geographically as applicable;*
- Supporting tasks;*
- Points of Contacts; and*
- Resources and phone numbers.*

E. RECONSTITUTION

Reconstitution embodies the ability of an organization to recover from a catastrophic event and consolidate the necessary resources that allow it to return to a fully functional entity of the Federal government. The objective during the recovery and reconstitution phase during a pandemic is to expedite the return of normal services to the nation.

1. Replacement of Employees

(Insert D/A name) shall develop plans for replacement of employees unable to return to work and prioritize hiring efforts, including but not limited to retired federal employees and emergency use of contractor services.

2. Facility/Building Habitability

(Insert D/A name) shall develop plans and procedures, in conjunction with public health authorities, to ensure the facilities/buildings are safe for employees to return to normal operations.

VI. CONCLUSION

The Conclusion section should revisit the need to address the specialized planning required to respond to an influenza pandemic and summarize the overall purpose of the Pandemic Influenza COOP Annex.

(Sample text)

Maintaining essential functions and services in the event of pandemic influenza requires additional considerations beyond traditional COOP planning as outlined in FPC 65. Unlike other hazards that necessitate the relocation of staff performing essential functions to an organization's alternate operating facility, an influenza pandemic will not directly affect the physical infrastructure of an organization. As such, a traditional "COOP activation" may not be required under a pandemic influenza scenario. However, a pandemic threatens an organization's human resources by removing essential personnel from the workplace for extended periods of time. Accordingly, COOP plans should be modified or supplemented to achieve a pandemic influenza capability. Plans for maintaining essential functions and services in a pandemic influenza must emphasize and implement procedures such as social distancing techniques, infection control and personal hygiene, cross-training, and telework. Protecting the health and safety of employees must be the focus of planning in order to ensure the continuity of essential functions and continuity of government.

APPENDIX 1: FEDERAL GOVERNMENT RESPONSE PHASES AND WORLD HEALTH ORGANIZATION (WHO) PHASES CHART

Federal Government Response Phases						
Stage 0	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5	Stage 6
New Domestic Animal Diagnosis in At-Risk Country	Suspected Human Outbreak Overseas	Confirmed Human Outbreak Overseas	Widespread Human Outbreaks in Multiple Locations Overseas	First Human Case in North America	Human Outbreaks in United States	Recovery and Preparation for Subsequent Waves
WHO Phase 1 or 2 Inter-Pandemic Period	WHO Phase 3 Pandemic Alert Period	WHO Phase 4 or 5 Pandemic Alert Period	WHO Phase 6 Pandemic Period			

APPENDIX 2: PANDEMIC INFLUENZA COOP ELEMENTS CHECKLISTS FOR FEDERAL GOVERNMENT RESPONSE STAGES

Federal Response Stage 0: Pandemic Influenza COOP Checklist

Sample Response Stage	1
VAO Planning Stage	1.3

Sample Actions Provided for each Stage- (insert DVA name) should modify based on (insert DVA name) specific requirements and overall plan. DVAs may choose to consolidate some checklists e.g. Federal Response Stages 0-2.

COOP Element	Actions To Be Taken
1) Plans and Procedures	
	Review Headquarters plans and procedures for pandemic influenza.
2) Essential Functions	
	Assuming that the animal outbreak will lead to a human outbreak, ensure that Headquarters essential functions and services have been identified.
	Review contractors, suppliers, shippers, vendors, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegation of Authority	
	Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession	
	Review and update Order of Succession with respect to three-deep rule and geographic dispersion.
5) Alternate Operating Facility(ies)	
	Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.

	Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Interoperable Communications	
	Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), GETS cards) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.
	Update (insert D/A name) website with latest pandemic information.
7) Vital Records and Databases	
	Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.
8) Human Capital	
	Implement workplace guidelines (contact and transmission interventions) to include Personal Protective Equipment (PPE) to prevent or minimize workplace exposure to contagious disease for those employees in high-risk occupations that come in contact with potentially diseased animals. Review workplace guidelines for other employees.
	Discuss the effect of pandemic related human capital issues with the procurement and contract workforce (including contract workers who are co-located with or routinely work at the same worksite as Federal employees, as well as those who are not collocated with Federal employees).
	Develop an employee-labor relations plan for and conduct post-implementation bargaining that may be necessary as the result of management actions.
	Review and update pay and leave policies as necessary.
	Review and update hiring policies as necessary.
	Test telework capability for people, processes, and technology.
	Review and update technology support (i.e., help desk) sufficient to meet telework needs.
	In anticipation of a transition from an arrival to a human outbreak, review and continuously update safety and health policies (if), including but not limited to:

	<ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by animal or human disease; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cloths, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prophylaxis information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	Test, train, and exercise Headquarters capability to maintain essential functions and services.
10) Devolution of Control	
	Review plan against current conditions.
11) Reconstitution	
	Review plan against current conditions.

Federal Response Stage 1: Pandemic Influenza COOP Checklist

Federal Response Stage	1
2013 Pandemic Alert	1

COOP Element		Action To Be Taken
1) Plans and Procedures		
		Review Headquarters plans and procedures for pandemic influenza.
2) Essential Functions		
		Review and communicate Headquarters essential functions and services that will continue and non-essential functions that will be suspended temporarily for personnel assigned to overseas areas that are affected.
		In anticipation of a migration of the outbreak to U.S. citizens, assign essential functions and employees have been identified.
		Review contractors, suppliers, shippers, resellers, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority		
		Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession		
		Review and update Order of Succession with respect to three-deep rule and geographic dispersion.
5) Alternate Operating Facility(ies)		
		Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
		Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Interoperable Communications		
		Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), GETS cards) to provide relevant

	<p>information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational.</p>
	<p>Realign and re-issue communications resources as appropriate.</p>
	<p>Update website with latest pandemic information.</p>
<p>7) Vital Records and Databases</p>	
	<p>Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location</p>
<p>8) Human Capital</p>	
	<p>Review and incorporate OPM's Human Capital Planning guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.</p>
	<p>Implement workforce guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.</p>
	<p>Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.</p>
	<p>Implement infection control measures.</p>
	<p>Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer, which in turn consolidates and reports the Department's information to OPM.</p>
	<p>Discuss the effect of pandemic-related human capital issues with its procurement and contract workforce (including contract workers who are co-located with or routinely work at the same workplace as Federal employees, as well as those who are not co-located with Federal employees).</p>
	<p>Develop an employee-labor relations plan for and conduct post-implementation bargaining that may be necessary as the result of management actions.</p>
	<p>Administer and execute pay and leave policies as necessary.</p>
	<p>Administer and execute hiring policies as necessary.</p>
	<p>Test, and as necessary, implement telework capability.</p>

	<p>Review and update technology support (i.e., help desks) sufficient to meet telework needs.</p>
	<p>Review and continuously update safety and health policies (in, including but not limited to:</p> <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleaners, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and non-viral prevention information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Test, train, and exercise Headquarters capability to maintain essential functions and services, incorporating Lessons Learned from previous Response Phases and implementing corrective actions.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary with respect to three-deep rule and geographic dispersion.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 2: Pandemic Influenza COOP Checklist

Federal Response Stage	2
COOP Response Stage	4.1

COOP Element	Actions To Be Taken
1) Plans and Procedures	
	Review Headquarters plans and procedures for pandemic influenza. (insert DVA name) may begin implementing parts of the PI Plan.
2) Essential Functions	
	Review and communicate Headquarters essential functions and services that will continue and non-essential functions that will be suspended temporarily for personnel assigned to overseas areas that are affected.
	In anticipation of a migration of the outbreak to U.S. citizens, ensure essential functions and employees have been identified.
	Review contracts, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegation of Authority	
	Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession	
	Review and update Order of Succession with respect to three-deep rule and geographic dispersion.
5) Alternate Operating Facility(ies)	
	Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
	Ensure readiness of staff telework and/or deviation arrangements to include readiness of required communications equipment.
6) Interoperable Communications	
	Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), GPS cards) to provide relevant

	<p>information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational.</p>
	<p>Realign and re-issue communications resources as appropriate.</p>
	<p>Update website with latest pandemic information.</p>
<p>7) Vital Records and Databases</p>	
	<p>Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.</p>
<p>8) Human Capital</p>	
	<p>Review and incorporate OPM's Human Capital Planning guidance for a Pandemic Influence (http://www.opm.gov/pandemic/) as its pandemic influence planning to provide workplace flexibility, including telework, during a pandemic.</p>
	<p>Implement workforce guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.</p>
	<p>Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.</p>
	<p>Implement infection control measures.</p>
	<p>Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer, which in turn consolidates and reports the Department's information to OPM.</p>
	<p>Discuss the effect of pandemic-related human capital issues with its procurement and contract workforce (including contract workers who are co-located with or routinely work at the same worksite as Federal employees, as well as those who are not co-located with Federal employees).</p>
	<p>Develop an employee-labor relations plan for and conduct post-implementation bargaining that may be necessary as the result of management actions.</p>
	<p>Administer and execute pay and leave policies as necessary.</p>
	<p>Administer and execute hiring policies as necessary.</p>
	<p>Test, and as necessary, implement telework capability.</p>

	<p>Review and update technology support (i.e., help desk) sufficient to meet telework needs.</p>
	<p>Review and continuously update safety and health policies on, including but not limited to:</p> <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic- and workplace-related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
<p>9) Test, Training, and Exercises</p>	
	<p>Test, train, and exercise Headquarters capability to maintain essential functions and services, incorporating Lessons Learned from previous Response Phases and implementing corrective actions.</p>
<p>10) Devolution of Control</p>	
	<p>Implement full or partial devolution of control and direction as necessary with respect to three-deep rule and geographic dispersion.</p>
<p>11) Reconstitution</p>	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, suitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 3: Pandemic Influenza COOP Checklist



COOP Element	Action To Be Taken
1) Plans and Procedures	
	Review Headquarters plans and procedures for pandemic influenza.
2) Essential Functions	
	Review and communicate Headquarters essential functions and services that will continue and non-essential functions that will be suspended temporarily for personnel assigned to overseas areas that are affected.
	In anticipation of a migration of the outbreak to U.S. citizens, ensure essential functions and employees have been identified.
	Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority	
	Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession	
	Review and update Order of Succession with respect to three-deep rule and geographic dispersion.
5) Alternate Operating Facility(ies)	
	Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
	Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Interoperable Communications	
	Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), GETS cards) to provide relevant information to internal and external stakeholders, including

	<p>but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational.</p> <p>Realign and re-assign communications resources as appropriate.</p> <p>Update website with latest pandemic information.</p>
7) Vital Records and Databases	
	<p>Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.</p>
8) Human Capital	
	<p>Review and incorporate OPM's Human Capital Planning guidance for a Pandemic Influenza (http://www.opm.gov/pandemic) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.</p> <p>Implement workplace guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.</p> <p>Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected steps.</p> <p>Implement infection control measures.</p> <p>Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer, which in turn consolidates and reports the Department's information to OPM.</p> <p>Discuss the effect of pandemic related human capital issues with its procurement and contract workforce (including contract workers who are co-located with or routinely work at the same worksite as Federal employees, as well as those who are not co-located with Federal employees).</p> <p>Develop an employee-labor relations plan for and conduct good-implementation bargaining that may be necessary as the result of management actions.</p> <p>Administer and execute pay and leave policies as necessary.</p> <p>Administer and execute hiring policies as necessary.</p> <p>Test, and as necessary, implement telework capability.</p>

	<p>Review and update technology support (i.e., help desk) sufficient to meet telework needs.</p> <p>Review and continuously update safety and health policies on, including but not limited to:</p> <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleaners, and soaps); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prophylaxis information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Test, train, and exercise Headquarters capability to maintain essential functions and services, incorporating Lessons Learned from previous Response Phases and implementing corrective actions.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary with respect to three-deep rule and geographic dispersion.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, suitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 4: Pandemic Influenza COOP Checklist



COOP Element	✓ Action To Be Taken
1) Plans and Procedures	
	Review Headquarters plans and procedures for pandemic influenza and begin implementing based on direct impact to (status: I/A name) as directed by I/A head.
2) Essential Functions	
	Review and communicate Headquarters essential functions and services that will continue and non-essential functions that will be suspended temporarily.
	Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up personnel.
	Review contractors, suppliers, shippers, restaurants, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority	
	Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession	
	Review and update Order of Succession with respect to three-deep rule and geographic dispersion.
5) Alternate Operating Facility(ies)	
	Ensure readiness of traditional alternate operating facility(ies) in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
	Ensure readiness of staff telework and/or devolution arrangements to include readiness of required communications equipment.
6) Interoperable Communications	
	Review and test communications mechanisms (i.e., laptops, high-speed telecommunications links, Personal Digital

	<p>Assistants (PDAs), GETS units) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational.</p>
	<p>Realign and re-issue communications resources as appropriate.</p>
	<p>Update website with latest pandemic information.</p>
<p>7) Vital Records and Databases</p>	
	<p>Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.</p>
<p>8) Human Capital</p>	
	<p>Review and incorporate OPM's Human Capital Planning Guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.</p>
	<p>Implement workplace guidelines (contact and transmission interventions) to prevent or minimize workplace exposure to contagious disease for affected areas.</p>
	<p>Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary for affected areas.</p>
	<p>Implement infection control measures.</p>
	<p>Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer, which in turn consolidates and reports the Department's information to OPM.</p>
	<p>Discuss the effect of pandemic related human capital issues with its permanent and contract workforce (including contract workers who are co-located with or routinely work at the same worksite as Federal employees, as well as those who are not co-located with Federal employees).</p>
	<p>Implement the previously developed employee-labor relations plan.</p>
	<p>Administer and execute pay and leave policies as necessary.</p>
	<p>Administer and execute hiring policies as necessary.</p>
	<p>Test, and as necessary, implement telework capability.</p>

	<p>Review and update technology support (i.e., help desk) sufficient to meet telework needs.</p> <p>Review and continuously update safety and health policies on, including but not limited to:</p> <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic. • Employees who become ill or are suspected of becoming ill while at their normal work site. • Returning previously ill, non-infectious employees to work. • Social distancing. • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies). • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and linens). • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment. • Vaccine and anti-viral prophylaxis information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Note suggestions for improvements to T&E plans for future modification.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary with respect to three-deep rule and geographic dispersal.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 5: Pandemic Influenza COOP Checklist



COOP Element	Actions To Be Taken
1) Plans and Procedures:	
	Review Headquarters plans and procedures for pandemic influenza and fully implement.
2) Essential Functions:	
	Review and communicate Headquarters essential functions and services that will continue and non-essential functions that will be suspended temporarily.
	Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up personnel.
	Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority:	
	Review and update Delegations of Authority with respect to three-deep role and geographic dispersion.
4) Order of Succession:	
	Review and update Order of Succession with respect to three-deep role and geographic dispersion.
5) Alternate Operating Facilities:	
	Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
	Ensure readiness of staff telework and/or distribution arrangements to include readiness of required communications equipment.
6) Intraoperative Communications:	
	Review and test communications mechanisms (i.e., laptops, high-speed telecommunication links, Personal Digital

	<p>Assistants (PIAA) GETS cards) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes to working conditions and operational hours.</p>
	<p>Realign and revise communications resources as appropriate.</p>
	<p>Update website with latest pandemic information.</p>
<p>7) Vital Records and Databases</p>	
	<p>Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.</p>
<p>8) Human Capital</p>	
	<p>Review and incorporate OPM's Human Capital Planning Guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.</p>
	<p>Implement workforce guidelines to prevent or minimize workplace exposure to contagious diseases.</p>
	<p>Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary.</p>
	<p>Implement infection control measures.</p>
	<p>Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to the Office of the Chief Medical Officer. The Office of the Chief Medical Officer in turn consolidates and reports the Department's information to OPM.</p>
	<p>Discuss the effect of pandemic related human capital issues with its procurement and contract workforce (including contract workers who are co-located with or routinely work at the same work site as Federal employees, as well as those who are not co-located with Federal employees).</p>
	<p>Implement employee-labor relations plan.</p>
	<p>Administer and execute pay and leave policies as necessary.</p>
	<p>Administer and execute hiring policies as necessary.</p>
	<p>Test, and as necessary, implement telework capability.</p>
	<p>Review and update technology support (i.e., help desk).</p>

	<p>sufficient to meet telework needs.</p> <p>Review and continuously update safety and health policies on, including but not limited to:</p> <ul style="list-style-type: none"> • Restrictions of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic and workplace related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleaners, and hoses); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Note suggestions for improvements to TTE plans for future modification.</p>
10) Devolution of Control	
	<p>Implement full or partial devolution of control and direction as necessary with respect to cross-dept rule and geographic dispersion.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

Federal Response Stage 6: Pandemic Influenza COOP Checklist



COOP Element		Actions to Be Taken
1) Plans and Procedures		
		Review Headquarters plans and procedures for pandemic influenza for lessons learned and update in preparation for next wave.
2) Essential Functions		
		Review and communicate Headquarters essential functions and services that will continue and non-essential functions that will be suspended temporarily.
		Review essential positions, skills, and personnel and continue to train, identify, and as necessary, augment with back-up potential.
		Review contractors, suppliers, shippers, resources, and other businesses that support essential functions, and as necessary, implement standing agreements for back-up.
3) Delegations of Authority		
		Review and update Delegations of Authority with respect to three-deep rule and geographic dispersion.
4) Order of Succession		
		Review and update Order of Succession with respect to three-deep rule and geographic dispersion.
5) Alternate Operating Facility(ies)		
		Ensure readiness of primary and alternate operating facilities, telework locations, and other designated work sites in the event of an incident concurrent to a pandemic that would necessitate relocation of Emergency Relocation Groups.
		Ensure readiness of staff telework and/or development arrangements to include readiness of required communications equipment.
6) Interoperable Communications		
		Review and test communications mechanisms (i.e., laptops,

	<p>high-speed telecommunications (i.e., Personal Digital Assistants (PDAs) DHSInteractive, GITS cards) to provide relevant information to internal and external stakeholders, including but not limited to instructions for determining the status of agency operations and possible changes in working conditions and operational hours.</p>
	<p>Realign and reissue communications resources as appropriate.</p>
	<p>Update website with latest pandemic information.</p>
<p>7) Vital Records and Databases</p>	
	<p>Test, review, and update vital records, databases, and systems, in particular those that will need to be accessed electronically from a remote location.</p>
<p>8) Human Capital</p>	
	<p>Review and incorporate OPM's Human Capital Planning Guidance for a Pandemic Influenza (http://www.opm.gov/pandemic/) in its pandemic influenza planning to provide workplace flexibility, including telework, during a pandemic.</p>
	<p>Implement workforce guidelines to prevent or minimize workplace exposure to contagious disease.</p>
	<p>Implement alternative work arrangements (e.g., job sharing, flexible work schedules) available for use in the case of a pandemic health crisis as necessary.</p>
	<p>Implement infection control measures.</p>
	<p>Collect and report the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and reporting such information to OPM.</p>
	<p>Discuss the effect of pandemic-related human capital issues with its procurement and contract workforce (including contract workers who are co-located with or routinely work at the same worksite as Federal employees, as well as those who are not co-located with Federal employees).</p>
	<p>Review and update the employee-labor relations plan for and conduct post-implementation bargaining that may be necessary as the result of management actions.</p>
	<p>Administer and execute pay and leave policies as necessary.</p>
	<p>Administer and execute living policies as necessary.</p>
	<p>Test, and as necessary, implement telework capability.</p>
	<p>Review and update technology support (i.e., help desk).</p>

	<p>sufficient to meet telework needs.</p> <p>Review and continuously update safety and health policies on, including but not limited to:</p> <ul style="list-style-type: none"> • Restriction of travel to geographic areas affected by the pandemic; • Employees who become ill or are suspected of becoming ill while at their normal work site; • Returning previously ill, non-infectious, employees to work; • Social distancing; • The dissemination and posting of educational and training materials to raise awareness about pandemic- and workplace-related policies (i.e., cough etiquette, hand hygiene, and social distancing strategies); • The performance and regular updating of risk assessments based on occupational exposures and objective medical evidence, and procurement of appropriate types and quantities of infection control-related supplies (e.g., personal protective equipment (PPE), hand sanitizers, surface wipes, cleansers, and tissues); • The implementation of infection control measures, including (if applicable) the appropriate selection and use of personal protective equipment; • Vaccine and anti-viral prioritization information and distribution; and • Psychological and social needs of employees.
9) Test, Training, and Exercises	
	<p>Review and update TTE plan incorporating Lessons Learned from previous Response Phases and implementation of corrective actions.</p>
10) Deviation of Control	
	<p>Implement full or partial deviation of control and direction as necessary with respect to three-deep rule and geographic dispersion.</p>
11) Reconstitution	
	<p>Assess the sufficiency of resources to commence reconstitution efforts, including but not limited to replacement of employees unable to return to work, habitability of facilities and buildings, and availability of equipment.</p>

APPENDIX 3: ADDITIONAL POTENTIAL ANNEXES FOR PANDEMIC INFLUENZA PREPAREDNESS

In addition to the basic Pandemic Influenza COOP Plan, Departments/Agencies may wish to consider including some of the following types of annexes. These may be useful for larger or more complex Departments/Agencies. Additionally, a Department or Agency may choose to create a separate Pandemic Influenza Preparedness Plan and include an annex on COOP within that structure.

Annex A: Preparedness

The *Preparedness Annex* details a coordinated series of actions *(insert D/A name)* will undertake as part of the national strategy to build operational capability to prepare for and respond to a potential pandemic influenza. Implementation of these actions will enhance *(insert D/A name)* readiness to execute its operational options. The preparedness actions are tasks designed to facilitate *(insert D/A name)*'s efforts to inform, prevent, prepare for, respond to, recover, and maintain continuity of operations during various phases of a pandemic. The end state of this effort will be a robust, sustainable baseline of minimal preparedness across all phases of a pandemic and for all homeland security mission areas.

Annex B: Intelligence Support

The *Intelligence Support Annex* provides a description of intelligence gathering and analysis and information sharing activities in support of the *(insert D/A name)* *Pandemic Influenza Contingency Plan*. The Annex also describes the relationship between the major internal and external (e.g., Intelligence Community, law enforcement, inter-agency partners) components of the biosurveillance and intelligence infrastructure.

Annex C: *(insert D/A name)* Operations

The *(insert D/A name)* *Annex* provides operational guidance to accomplish the mission of *(insert D/A name)* during a pandemic influenza. In particular, the Annex identifies the desired operational results, identifies operational constraints, and sets forth Component guidance to develop/refine their own operational action items.

Annex D: Task Organization

The *Task Organization Annex* provides a framework for organizing the *(insert D/A name)* response to a pandemic influenza outbreak in accordance with NIMS and the NRP. *Task organizing is the process of identifying and allocating available assets in preparation for the response to an event.* The Task Organization Annex includes information on federal assets available for response to support pandemic influenza operations.

Annex E: Logistics

The *Logistics Annex* provides a strategic level description of coordinated activities for (insert D/A name) Components and various inter-agency partners in preparing for and responding to the logistical support requirements of a pandemic influenza. It includes information on the coordination and planning required, ensuring the smooth and uninterrupted delivery of critical support to meet the needs of affected populations. It highlights the fact that (insert D/A name) will coordinate appropriate logistics support to Federal, State, and local authorities conducting pandemic influenza operations in accordance with this Plan and consistent with the NIMS, the NRP, and other supporting plans.

Annex F: Protecting the Health of Employees

The *Protecting the Health of Employees Annex* notes that the protection of the (insert D/A name) workforce during an influenza pandemic is paramount to preserving the (insert D/A name) mission and will require dynamic awareness, prevention, and preparedness efforts from all Components. This Annex provides information on various strategies and interventions necessary to protect the health of (insert D/A name) employees during a pandemic influenza.

Annex G: Communications to Stakeholders

The *Communications to Stakeholders Annex* identifies key stakeholders and describes their communicable roles and responsibilities in preparing for, responding to, and recovering from a pandemic influenza. It also provides guidance to (insert D/A name) Components on incident management to ensure that timely, accurate, credible, and integrated information is provided at all times during a pandemic influenza. Additionally, it outlines stakeholder outreach strategies to include both internal and external communications.

Annex H: National Incident Management

The *National Incident Management Annex* describes the national incident management activities, concepts, and structure under which (insert D/A name) will operate during a pandemic influenza and the roles and responsibilities that apply to various incident management entities. In particular, Annex H delineates the roles and responsibilities of the National PFO and the principal Federal officials, and describes their established relationships with each other, as well as other entities at both the national and field levels. The roles and responsibilities of the pertinent (insert D/A name) Components are also addressed, as well as (insert D/A name)'s Federal partners; State, local, tribal, and territorial partners; private sector and infrastructure providers; non-governmental organizations (NGOs), and inter-agency entities. This Annex addresses national incident management activities from the national level to the field level, to include the regionally-based IFO areas of responsibility.

Annex J: Reporting

The *Reporting Annex* defines the reporting requirements and processes to be used by *(insert D/A name)* Components during a pandemic influenza outbreak.

Annex J: Secretary's Decision Guides

The *Secretary's Decision Guide Annex* is the Secretary's key critical decision point list. It identifies those internal (within *(insert D/A name)*) and external (primarily Federal) entities with which the Secretary will communicate, coordinate, or otherwise interact relative to each *(insert D/A name)* response phase. Appendices to this Annex contain background data on specific subjects which have a bearing on the Federal response.

Annex K: Component Execution Checklists

The *Component Execution Checklists Annex* provides guidance to Components for the development of operational checklists to ensure a consistent and coordinated execution of responsibilities during a pandemic influenza outbreak. To assist *(insert D/A name)* and Component leadership execute their responsibilities under this Plan, Components are instructed to develop structured step-by-step checklists and guides, including playbooks, quick reference cards, decision points, and flow charts.

Annex L: Legal Authorities

The *Legal Authorities Annex* provides the statutory legal foundation for an integrated Federal and local response to biological and agricultural incidents, including pandemic influenza.

Annex M: References

The *References Annex* provides a comprehensive summary of all documents referenced in the *(insert D/A name)* *Pandemic Influenza Contingency Plan* and its annexes and appendices.

Annex N: Abbreviations and Acronyms

The *Abbreviations and Acronyms Annex* provides a comprehensive list of all abbreviations and acronyms used in the *(insert D/A name)* *Pandemic Influenza Contingency Plan* and its annexes and appendices.

Annex O: Internal Dissemination and Integration

The *Internal Dissemination and Integration Annex* describes how the *(insert D/A name)* Office of Public Affairs (OPA) serves as the conduit of coordination for all internal and external messages regarding a pandemic influenza, and will work with White House and Communications Directors of other Federal agencies that cater to constituencies throughout the

nation to help manage outreach strategies for their specific audiences. Strategies include a basic awareness education module for pandemic influenza within six months of this Plan's release, pandemic influenza job aids that can be customized by *(insert DoD name)* Components within three months of this Plan's release, and Exercise and Evaluation Division-level Pandemic Influenza tabletop exercises for *(insert DoD name)* personnel within six months of this Plan's release.