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MEMORANDUM FOR: See Distribution

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SUBJECT: Continuity of Operations (COOP) Pandemic Influenza Guidance

This memorandum provides guidance to Federal Executive Branch departments and agencies for incorporating pandemic influenza considerations into Continuity of Operations (COOP) planning. The *Implementation Plan for the National Strategy for Pandemic Influenza* calls for department and agency plans to be completed by March 31, 2006. This guidance assists departments and agencies in identifying special considerations for protecting the health and safety of employees and maintaining essential functions and services during a pandemic outbreak. Departments and agencies are guided by the elements of this memorandum that apply to them.

Background

Pandemic influenza is a global outbreak of disease that occurs when a new influenza virus appears or "emerges" in the human population, causes serious illness, and spreads easily from person to person worldwide. History teaches us that the impact of a pandemic can be far-reaching. The 1918 "Spanish Flu" influenza epidemic killed approximately 500,000 people in the United States and as many as 50 million people worldwide. Furthermore, it led to widespread social disruption and economic loss.

Economists, epidemiologists, and other experts predict that the effects of a modern-day pandemic will be seen in every industry at local, regional, national, and international levels. A pandemic influenza will come in "waves," each lasting 6 to 8 weeks with several months between the waves. The CDC estimates that between 15% and 35% of the U.S. population could be affected by an influenza pandemic, and the economic impact could range between $71.3 and $166.5 billion. The impact to the workforce could be staggering as well. The *Implementation Plan for the National Strategy for Pandemic Influenza* recommends that organizations plan for a 40 percent absenteeism rate for periods of about two weeks at the height of a pandemic wave, with lower levels of staff absent for a few weeks on either side of the peak.

Federal Responsibilities

In November 2005, the President released *The National Strategy for Pandemic Influenza*, a national approach for addressing the threat of pandemic influenza—the threat resulting from both the highly

pathogenic strain currently in birds in Asia, Africa, and Europe or from another influenza virus. The federal responsibilities outlined in the strategy include ensuring that federal departments and agencies, including federal health care systems, have developed and exercised preparedness and response plans that take into account the potential impact of a pandemic on the federal workforce, as well as on the state and local governments and private sectors.

In support of the National Strategy, the Homeland Security Council released the *Implementation Plan for the National Strategy for Pandemic Influenza*, which directs actions across the U.S. Government. It provides guidance intended to facilitate department and agency planning for pandemic influenza, specifically calling on departments and agencies to develop plans that articulate the manner in which the department or agency will discharge its responsibilities as defined in the Implementation Plan, and address the operational approach to employee safety, continuity of essential functions, and communications with stakeholders.

The Federal Emergency Management Agency's (FEMA) 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. This COOP planning facilitates the performance of department and agency essential functions during an emergency or situation that may disrupt normal operations. Pandemic influenza, however, offers a new operating reality to COOP planning.

It is the responsibility of FEMA and the Office of National Security Coordination to provide planning assumptions and guidelines to Federal departments and agencies for pandemic planning. While preparing these guidelines and developing an understanding of the potential impact of a pandemic, FEMA has concluded that planning for a pandemic requires a state of preparedness that is beyond traditional Federal Government COOP planning.

Moving Beyond Traditional COOP

The term COOP evolved in the mid-1980s from a national security mission to ensure the survivability and sustainability of the United States against all-hazards threats from enemy nation states. In 1998, Presidential Decision Directive 67 (PDD 67) was released, and for the first time required Federal agencies to develop COOP plans for essential operations. In response to this directive, many Federal agencies formed task forces of representatives throughout the agency that were familiar with agency contingency plans. They developed COOP programs and plans as unifying concepts that did not replace existing plans but instead superimposed COOP functions that would be required if and when a problem threatened serious disruption to agency operations.

Today's FPC 65 is designed to help Federal departments and agencies withstand an all-hazards event and ensure the continuity of operations of essential government functions for up to 30 days from alternate facilities. However, the dynamic nature of a pandemic influenza requires that the scope of Federal government COOP planning takes a non-traditional approach to continuity planning and readiness. Although FPC 65 provides COOP planning guidance for use in developing Executive Branch contingency plans and programs for COOP, the *Implementation Plan for the National Strategy for Pandemic Influenza* acknowledges that a pandemic influenza requires specialized planning. The planning elements that FPC

65 describes are applicable across all levels of government as well as the private sector and can be used to develop pandemic-specific planning resources.

The table below captures the 11 FPC 65 COOP elements and corresponding continuity measures to help address pandemic influenza planning assumptions.

FPC-65 COOP Elements	National Strategy Implementation Guidance	Pandemic Influenza Continuity of Operations (COOP) Considerations
Plans and Procedures	To reduce the impacts of a pandemic threat on an organization, a portion of the COOP plan's objectives should be to minimize the health, social, and economic impact on the United States.	▪ Plans must be capable of sustaining operations until normal business activity can be reconstituted, which may be longer than 30 days. D/As will continue operations indefinitely until the situation returns to normal. ▪ Review and update plans to ensure essential services can be provided if employee absenteeism reaches 40 percent. ▪ Different activation phases will be based on pandemic alert levels, proximity of outbreak to organization's offices/facilities, and reoccurring outbreaks. ▪ Appoint a senior manager and identify essential stakeholders as part of an Influenza Team that addresses issues related to pandemic influenza planning. ▪ Health focus will be needed to minimize the effects of a pandemic on staff and operations.
Essential Functions	During a pandemic, or any other emergency, these essential functions must be continued to facilitate emergency management and overall national recovery. Particular attention must be given to Primary Mission Essential Functions of an organization.	▪ Continue to perform essential functions beyond the existing 30 day requirement. ▪ Consider additional business services critical to meeting an organization's missions. ▪ Review the effect of a pandemic on essential contract and support services and organizational operations, and develop mitigation strategies.
Delegations of Authority	Because absenteeism may reach a peak of 40 percent at the height of a pandemic wave, delegations of authority are critical.	▪ Plan for delegations of authority that are at least three deep per responsibility to take into account the expected rate of absenteeism. ▪ Plan for geographical dispersion of delegations of authority, taking into account the regional nature of an outbreak.
Orders of Succession	Because a pandemic influenza may affect regions of the United States differently in terms of timing, severity, and duration, organizations with geographically dispersed assets and personnel should consider dispersing their order of succession.	▪ Plan for orders of successions that are at least three deep per position to take into account the expected rate of absenteeism. ▪ 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.

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Alternate Operating Facilities	Because a pandemic presents essentially simultaneous risk everywhere, the use of alternate operating facilities must be considered in a non-traditional way. COOP planning for pandemic influenza will involve alternatives to staff relocation/co-location such as "social distancing" in the workplace through telecommuting or other means.	▪ Determine which essential functions and services can be conducted from a remote location (e.g., home) and those that need to be performed at a designated department or agency facility. ▪ Consider the need for reliable logistical support, services, and infrastructure systems at facilities that remain open, to include alternate operating facilities: - Prioritization/determination of accessible facilities/buildings (as alternative to relocating to remote facility) - Necessary support staff - Social distancing policies - Public health guidance for operation of facilities and safety of employees - Sanitation - Essential services - Food/water. ▪ Consider impact of local quarantines on open/accessible facilities and operating plans.
Interoperable Communications	Systems that facilitate communication in the absence of person-to-person contact can be used to minimize workplace risk for essential employees and can potentially be used to restrict workplace entry of people with influenza symptoms.	▪ Planning should carefully consider the use of laptops, high-speed telecommunications links, Personal Digital Assistants (PDAs), and other systems that enable employees to perform essential functions while teleworking. This includes the identification, availability, redundancy, and testing of critical communications systems that support connectivity to internal organizations, external partners, critical customers, and other key stakeholders. ▪ Test and exercise telework impact on internal networks.
Vital Records and Databases	Pandemic influenza COOP planning must identify and ensure the integrity of vital systems that require periodic maintenance or other direct physical intervention by employees.	▪ Identify records needed to sustain operations for longer than 30 days since vital records at alternate facilities may not be accessible. Determine whether files can be accessed electronically from a remote location (e.g., an employee's home). ▪ Identify and plan for maintenance of vital systems that rely on periodic physical intervention/servicing.

FPC-65 COOP Elements	National Strategy Implementation Guidance	Pandemic Influenza Continuity of Operations (COOP) Considerations
Human Capital	Each organization must develop, update, exercise, and be able to implement comprehensive plans to protect its workforce. Although an influenza pandemic 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 COOP during a pandemic.	▪ Coordinate directly with the D/A's human resources office and the Office of Personnel Management as appropriate to determine the impact of Pandemic Influenza on workforce capabilities, including: - Compensation policy for nonessential and essential employees - Sick leave policy - Fitness for Duty policy - Family medical leave policy - Grievance policy - Telework policy - Family Assistance Programs. ▪ Coordinate modifications to human capital policies and plans with labor relations. ▪ Review terms and conditions of contract work to ensure contractor responsibility for essential functions (where relevant) and to suspend non-essential work. ▪ In accordance with current guidance, evaluate need for hygiene supplies, medicines, and other medical necessities to promote the health and wellness of personnel. ▪ Develop and/or modify an employee accountability system. ▪ Promote guidance developed by public health and safety authorities, including - Occupational risk reduction strategies - Infection control - Personal hygiene - Social distancing techniques - Travel restrictions. ▪ Provide employees and families with relevant information and advisories about the pandemic, via - Hotlines - Web sites - Voice Messaging System Alerts. ▪ Consider the need for cross-training to ensure essential staff are available to perform functions and services.
Test, Training, and Exercises	Pandemic influenza COOP plans should test, train, and exercise sustainable social distancing techniques that reduce person-to-person interactions within the workplace.	▪ Testing, training, and exercising should include social distancing techniques, including telework capabilities and impacts of a reduced staff on facilities and essential functions and services.

FPC-65 COOP Elements	National Strategy Implementation Guidance	Pandemic Influenza Continuity of Operations (COOP) Considerations
Devolution of Control and Direction	Because local outbreaks will occur at different times, have variable durations, and may vary in their severity, devolution planning may need to consider rotating operations between regional/field offices as the pandemic wave moves throughout the United States.	▪ Take into account how an organization will conduct essential functions and services if pandemic influenza renders leadership and essential staff incapable or unavailable to execute those functions. Full or partial devolution of essential functions and services may be necessary to ensure continuation. ▪ Develop detailed guidance for devolution, including - Essential functions and services - Rotating operations geographically as applicable - Supporting tasks - Points of contacts - Resources and phone numbers.
Reconstitution	Because a pandemic will not harm the physical infrastructure or facilities of an organization, and because long-term contamination of facilities is not a concern, the primary challenge for organizations after a pandemic will be the return to normal and bringing their systems back to full capacity.	▪ Develop plans for replacement of employees unable to return to work and prioritize hiring efforts ▪ In conjunction with public health authorities, develop plans and procedures to ensure the facilities/buildings are safe for employees to return to normal operations.

Conclusion

It is impossible to predict the exact evolution or impact of pandemic influenza. Planning and preparing for a catastrophic event that is not geographically or temporally bounded calls for a creative and dynamic approach to ensuring the continuity of essential government functions. The Office of National Security Coordination, in conjunction with the Interagency Pandemic Influenza Working Group, developed this guidance to assist the Federal Executive Branch departments and agencies in identifying those considerations which may have a substantial impact on the continuity of their organizations during a pandemic.

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