

Syracuse University
Continuity of Operations
Planning Template

For College, Division, and Departmental Use

School/College/Division Name:

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Department/Unit Name:

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Department ID:

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School/College/Division Continuity of Operations Planning Liaison (name and title)1:

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Date Completed:

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**Departmental Leadership Succession (Chain of Command):**

Name and title of primary, secondary, and tertiary leader for the unit/department.

Primary (Name and Title):

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Secondary (Name and Title):

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Tertiary (Name and Title):

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1. See APPEDIX 1 for duties of the Continuity of Operations Planning Liaison

**Unit Operational Function:**

Please indicate the principle nature of your department’s operations (Select all that apply):

\_\_\_ Academic/Instructional

\_\_\_ Research

\_\_\_ Administration

\_\_\_ Residential/Student Life

\_\_\_ Facilities

\_\_\_ Operational

\_\_\_ Other (Please indicate in box below:

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**Unit Objective 1:** Describe your top departmental objective.

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**Unit Objective 2:** Describe your second departmental objective.

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**Unit Objective 3:** Describe your third departmental objective.

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**Emergency Communications:**

Employees are required to make every effort to stay informed of Syracuse University emergency information. What methods will your department utilize to communicate with employees during an emergency? Select all that apply:

\_\_\_ Phone (Call Tree)

\_\_\_ Email

\_\_\_ Text Message

\_\_\_ MS Teams

\_\_\_ Radio Communication

\_\_\_ Social Media

\_\_\_ Other (Please indicate below)

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**Contact Information During an Emergency:**

**Unit Primary Contact (Name):**

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Primary Contact’s Office Phone Number:

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Primary Contact’s Cell Phone Number:

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Primary Contact’s Email Address:

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Primary Contact’s Campus Location:

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**Unit Secondary Contact (Name):**

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Secondary Contact’s Office Phone Number:

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Secondary Contact’s Cell Phone Number:

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Secondary Contact’s Email Address:

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Secondary Contact’s Campus Location:

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**Unit Tertiary Contact (Name):**

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Tertiary Contact’s Office Phone Number:

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Tertiary Contact’s Cell Phone Number:

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Tertiary Contact’s Email Address:

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Tertiary Contact’s Campus Location:

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**Syracuse University Essential Functions:**

Functions that are identified as essential are listed below. Please utilize this list when assessing and determining your department’s essential functions.

**University Leadership:** to provide support for the university and maintain leadership to manage an emergency or disaster impacting Syracuse University; leadership includes the Chancellor, the Vice Chancellor and Provost, Chancellor’s executive team, departmental directors, and college deans.

**Student Housing:** to provide safe housing for students living in university residential own and operated facilities.

**Public Safety:** to maintain the safety and security of all students, faculty, staff, visitors, facilities, research, intellectual property, research animals, public health and environmental hazardous components where feasible.

**Communications:** to maintain communication capabilities for Syracuse University’s Orange Alert Emergency Notification System, Department of Public Safety Dispatch System, executive leadership, and media relations.

**Basic Services:** to maintain and provide basic services with regard to food service, emergency maintenance needs, access control and transportation.

**Student Support Services:** to maintain and provide medical and mental health services with regards to Student and Staff wellbeing.

**Fiscal Operations and Functional Processes:** to provide continued service for financial operations (payroll, purchasing, contracts) and critical data.

**Academic Continuity:** to maintain and provide academic instruction, research and space when feasible during an emergency.

**Unit Essential Functions/Personnel:**

Essential functions are functions that must continue or resume rapidly after a disruption of normal activities. Review the above list of essential functions to determine if your department falls within an essential function of the university.

**Do you have essential functions within your unit?**

\_\_\_ Yes – If yes, complete the sections below relating to Essential Functions.

\_\_\_ No – Skip to the “Approval for Non-Essential Personnel” Section.

**Essential Functions:**

Essential Function – Number 1: List Essential Function and the Primary Contact information and Secondary Contact information for the function.

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Essential Function – Number 2: List Essential Function and the Primary Contact information and Secondary Contact information for the function.

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Essential Function – Number 3: List Essential Function and the Primary Contact information and Secondary Contact information for the function.

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Essential Function – Number 4: List Essential Function and the Primary Contact information and Secondary Contact information for the function.

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**Essential Personnel Performing Essential Functions:**

Essential functions require personnel to maintain those functions. Complete the Essential/Non-Essential Personnel Listing to list all essential personnel that are required to perform critical functions during a disruption of normal operations.

**Employee Shortage Planning:**

**Staffing reduced to 90% of current staff available**

Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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**Staffing reduced to 75% of current staff available**

Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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**Staffing reduced to 50% of current staff available**

Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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**Emergency Relocation Needs:**

Proper planning is required for the possibility that an emergency will cause a department to relocate to another location on or off campus. Because of this, it is recommended that employees who perform or support an essential function complete an Emergency Relocation Position Information Sheet. This sheet provides information on what staff will need at an alternate location to continue performing essential functions. Please indicate below if your department has assessed the needs of itself and its staff in the event that the department must perform essential functions at an alternate location.

\_\_\_ Yes

\_\_\_ No

\_\_\_ Other (Please indicate below).

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**External Dependencies:**

While reviewing the department’s essential functions, have key external business partners been identified and have necessary arrangements been made?

\_\_\_ Yes – If yes, complete a Dependency Form for each

\_\_\_ No

\_\_\_ Other (Please indicate below)

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**Internal Dependencies:**

While reviewing the unit’s essential functions, have key internal business partners been identified and have necessary arrangements been made?

\_\_\_ Yes – If yes, complete a Dependency Form for each

\_\_\_ No

\_\_\_ Other (Please indicate below)

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**Vulnerability/Risk Assessment and Mitigation Strategy:**

Consider your objectives, dependencies, and essential functions. Individually list your vulnerabilities, whether or not each vulnerability can be mitigated, and a brief mitigation strategy.

Vulnerability/Risk

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Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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Vulnerability/Risk

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Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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Vulnerability/Risk

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Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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Vulnerability/Risk

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Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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Vulnerability/Risk

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Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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Vulnerability/Risk

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Can you mitigate?

\_\_\_ Yes

\_\_\_ No

Mitigation Strategy

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**Approval for Non-Essential Personnel:**

Some functions and research are not considered as essential and in need of 24-hour monitoring and/or care, but do require some sort of attention and/or action after a 48 to 72-hour period of time. Units that require non-essential personnel must seek approval through the appropriate Dean or Director of their college/unit in order to gain access to campus and/or their facility during an emergency incident involving a closure of campus. A listing of non-essential personnel that require access to campus after all immediate life safety threats during a campus closure have passed must be listed on your Essential/Non-Essential Personnel Listing.

**Exercising Your Plan:**

All unit business continuity plans must be shared with all unit staff. In addition, all unit are required to complete an exercise of the plan annually and report the results to the Office of Emergency Management and Business Continuity and the Emergency Preparedness Committee. Indicate below the ways that the department will exercise the plan (Select all that apply).

\_\_\_ Call Tree Drill

\_\_\_ Seminar

\_\_\_ Tabletop Exercise

\_\_\_ Off Site Information Assessment Test

\_\_\_ Other (Please indicate below)

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**Resumption of Normal Operations:**

Briefly describe your plan to transition back to normal operations.

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**School/College/Division/Unit Continuity of Operations Plan Approval:**

Name:

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Title:

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Date:

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Signature:

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**School/College/Division/Unit Continuity of Operations Planning Liaison Acknowledgement:**

Name:

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Title:

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Date:

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Signature:

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**Final Steps:**

Attach, if necessary, the Emergency Relocation Position Information Sheet(s), Essential/Non-Essential Personnel Listing, Dependency Forms, Critical Interruption Worksheet, and any additional contact lists or resources that are needed for your department’s continuity of operations plan. Once this template is completed, your school/college/division/unit continuity of operations planning liaison will submit it to the Department of Emergency Management as well as assess whether the essential functions, personnel, and vulnerabilities listed will be incorporated into the school/college/division/unit continuity of operations plan.

**APPENDIX 1**

**Roles and responsibilities of the Business Continuity Liaison as it relates to COV-19:**

1. Communicate unit business continuity plans and any updates with the Director of Emergency Management and Business Continuity Planning. Collaborate with and support unit leaders on the development of unit business continuity plans.

1. In collaboration with the Director of Emergency Management and Business Continuity Planning, actively monitor development of the virus outbreak and work with University leadership to disseminate messages to faculty, staff and students with clear instructions when measures need to be activated.
2. Educate faculty, staff and students within their unit on the latest available information on the virus. Brief them on the need for infection control measures and the preventive procedures that have been set in place.
3. Organize and updated contact information of all faculty and staff, i.e. home address/home telephone number/ mobile phone number. Make sure all faculty and staff have contact numbers of Business Continuity Liaison. Faculty and staff are to contact the Business Continuity Liaison if they are admitted to hospital with suspected infections for contact tracing purposes.
4. Ensure that the School/College/Division/Unit has appointed at least one designated Point of Contact (POC) (may be the Business Continuity Liaison), who will be responsible for liaising with Campus Safety and Emergency Services during activation of contact tracing processes at the workplace.
5. Ensure that faculty, staff and/or students who have travelled to affected areas are quarantined for 14 days, as advised by the CDC and/or state county health officials. Check on faculty/staff condition by phone or email during their absence from work.

**Facilities/ building Coordinator Responsibilities:**

1. Ensure that the workplace has adequate supplies of tissue paper/hand towels and disinfectants. Brief employees on personal hygiene measures.
2. Post notices in restrooms on proper hand washing techniques.
3. Ensure common areas e.g. pantries, washrooms, meeting rooms are disinfected daily. Liaise with facilities services team members regarding this topic.