

Home Care Business Continuity Checklist

This checklist provided in Exhibit F is intended to provide home care providers with guidance on Home Care Business Continuity Program components. Home care providers may elect to integrate their Continuity Plan with their Emergency Operations Plan (EOP), or create and maintain a separate document. However, during an event, it is assumed that both will be activated and, ultimately, managed through a similar structure and process. The order of the components listed here is suggested, not mandated. It is recommended that supporting documentation be kept in computer files or within separate binders and can be referenced in the "Reference/Location" column

This document is not intended to cover all aspects of your business or every continuity standard.

Exhibit F: Home Care Business Continuity Checklist

Program Component	Reference/Location	Status
1. Governance		
A. Policy and Purpose: Consider augmenting existing Emergency Management Program (EMP) policies with Home care Continuity Program components		
B. Scope and Applicability: Align with organizational priorities		
C. Planning Assumptions		
D. Authority and Responsibility		
■ Home care continuity program organization chart		
■ Home care continuity program responsibilities		
E. Program Evaluation (See also Execution section of this checklist tool, below)		
2. Data: Identifying Essential Services and Applications		
A. Business Impact Analysis (BIA) Identify essential services and applications (both IT and non-IT supported) that must be continued to maintain essential operations (e.g., supply chain, payroll, research) and health care delivery (patient care) following a disaster.		
■ Design questionnaire		
■ Conduct business impact analysis		
■ Perform analysis and summarize findings		
■ Complete report		
3. Integration: Developing Business Continuity Strategies		
A. Analytics and Strategy: Review BIA and Hazard Vulnerability Analysis (HVA) findings to understand what risks pose the greatest threat to essential functions. Use data to make decisions to reduce risks that will have the greatest adverse patient care and financial impacts.		

Program Component	Reference/Location	Status
B. Develop Business Continuity Strategies		
<ul style="list-style-type: none"> ■ Clinical: Examine capabilities to provide care with a 96- hour disruption and identify and finalize strategies for ensuring continuity of essential clinical services. Identify essential personnel and duties. 		
<ul style="list-style-type: none"> ■ Research: Identify strategies for continuity during an interruption of essential services. Determine alternate locations for continuity of research operations in the event the primary location is unavailable 		
<ul style="list-style-type: none"> ■ Administrative: Identify strategies for continuity during an interruption of essential services. Determine alternate locations for continuity of business and finance operations in the event the primary location is unavailable 		
C. Develop format and approach to align and/or integrate emergency operations and home care continuity plans		
4. Planning: Developing and Integrating Business Continuity Plans		
A. Align initiation and termination procedures associated with business continuity with existing procedures in the EOP		
B. Incorporate home care Incident Command System reference materials for the business continuity branch director and associated unit leaders, such as:		
<ul style="list-style-type: none"> ■ Job action sheets 		
<ul style="list-style-type: none"> ■ Incident response guides 		
<ul style="list-style-type: none"> ■ Forms—Financial tracking and incident action plan documentation to ensure cost recovery and resumption of operations 		
C. Management of Clinical and Support Activities		
<ul style="list-style-type: none"> ■ Align plans for relocation and continuity of essential clinical services with home care surge/expansion plans. Include procedures for alternate site set up and operations. 		
<ul style="list-style-type: none"> ■ Departmental Plans <ul style="list-style-type: none"> ● Department Status Forms/Summary ● Identify/document infrastructure/other Interdependencies ● Criteria and steps for closing and relocating a branch/unit ● Resumption of operations of essential clinical functions ● Downtime procedures for an extended IT outage 		
D. Information Technology and Communications Systems		
<ul style="list-style-type: none"> ■ Plans for downtime/workaround procedures for long-term disruptions 		
<ul style="list-style-type: none"> ■ Alignment with disaster recovery planning for IT & communications 		
<ul style="list-style-type: none"> ■ Document IT interdependencies 		
E. Management of Resources and Assets		
<ul style="list-style-type: none"> ■ Augment procedures for the Management of Resources and Assets in EOP with plans for continuity of essential services during supply chain interruptions 		
<ul style="list-style-type: none"> ■ Establish plans and agreements for alternative modes of transportation 		
<ul style="list-style-type: none"> ■ Coordinate Just in Time or immediately on-hand inventories and protocol to preserve critical care capacity. Define procedures (e.g., triaging visits) to expand and extend capacity to provide essential services as needed 		
<ul style="list-style-type: none"> ■ Document vital records 		
<ul style="list-style-type: none"> ■ Document vital equipment 		

Program Component	Reference/Location	Status
F. Management of Workforce Roles and Responsibilities		
<ul style="list-style-type: none"> ■ Process for assessment of staff availability and address up to 30% reduction in staff availability, with considerations of an ongoing surge of patients 		
<ul style="list-style-type: none"> ■ Process for post-event staff rotation 		
<ul style="list-style-type: none"> ■ Process for assigning staff to essential functions and the management of spontaneous volunteers 		
<ul style="list-style-type: none"> ■ Process for telecommuting to maintain continuity of business functions 		
<ul style="list-style-type: none"> ■ Identification of requirements (e.g., space, equipment, technology) and the process for relocation and resumption of responsibilities if at an alternate worksite 		
G. Management of Utilities		
<ul style="list-style-type: none"> ■ Review plans for provision, sustainability, and alternate means of providing utilities when primary source of essential utilities are unavailable 		
<ul style="list-style-type: none"> ■ Process for continuity of essential services during the loss of utilities 		
H. Recovery and Resumption of Normal Operations		
<ul style="list-style-type: none"> ■ Process for assessing and evaluating the agency for recovery and resumption of operations 		
<ul style="list-style-type: none"> ■ Process for testing functionality of equipment and identifying remaining needs for recovery 		
<ul style="list-style-type: none"> ■ Identification and establishment of agreements (MOUs/MOAs) with vendors and suppliers for recovery and resumption activities (e.g., debris removal, vital record recovery) 		
<ul style="list-style-type: none"> ■ Process for return of employees to normal workspace and resumption of normal operations 		
5. Execution: Testing and Measuring Business Continuity Programs		
A. Testing and exercises		
<ul style="list-style-type: none"> ■ Expand current exercises to include scenarios with operational impacts (e.g., supply chain operations, critical infrastructure, technology) 		
<ul style="list-style-type: none"> ■ Conduct department specific exercises (intake, scheduling, billing) 		
B. Results monitoring: Data collection of gaps and results to drive future priorities		
<ul style="list-style-type: none"> ■ Track and monitor number continuity metrics (e.g., number of BIAs completed, number of departmental continuity plans completed, number of exercises completed) 		