Physician Business Continuity Plan for Name of practice
<Insert date>

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Contents

1. INTRODUCTION

Overview

A business continuity plan (BCP) is a living document that is comprised of resources, policies, and procedures to be used in the event of a disaster or major disruption of operations.

The Joint Commission for the Accreditation of Healthcare Organizations (JCACHO) has recognized this need for organizations to plan and manage the consequences of emergencies. The BCP is one way to enable practices to ensure that disruption to crucial patient care services is limited, where applicable, and minimize adverse economic impact by resuming normal operations as quickly as possible.

The BCP is broken down into several elements and intended to be used by practices of all sizes. However, not all documents in the BCP will be applicable to every practice. The main elements of a BCP are seen in table below.

BCP Elements	Description	When to Use
Practice Profile	Contains practice information, emergency contact information, and team responsibilities in case of an emergency.	This tool is for clear communication during an emergency. Update it regularly and distribute to all team members in organization.
Procedure for Event Notification	In the event of an impending disaster or disaster, this provides the steps a practice would take to notify and prepare the team.	This workflow will streamline communication to appropriate members of the team.
BCP Checklist	Provides recommendations to use when building a BCP.	This checklist will help the practice to prepare for an emergency or pandemic and keep clear communication with all staff.
Vendor Supplier Contact List	Provides a comprehensive contact list for all vendors and suppliers.	This contact list gives easy access to staff, vendors, and suppliers to follow up and ensure essential supplies are delivered in a timely manner and provides access to vendor support in case of outage or emergency.
Essential Functions	These include day-to-day activities, programs, or processes that if delayed could negatively impact patient care. Examples of essential functions are providing clinical services (telehealth vs. office visits), managing staff checking in patients, ordering diagnostic tests/performing Clinical Laboratory Improvement Amendments (CLIA)-waived testing in-house, documenting patient information, and ordering supplies.	Use the BIA to help prioritize essential functions.
Business Impact Analysis (BIA) Worksheet	The BIA is a formal process to set the priority for each function and is included as part of the Essential Function and BIA Worksheet.	Select 5–7 essential functions and use the BIA to help prioritize.
Pandemic Protective Actions	This plan, during a flu outbreak or pandemic, includes a set of actions that a practice can take to ensure patient safety as well as what equipment might need to be worn.	When planning for a pandemic, the equipment needed should be stocked in advance, if applicable, and the pandemic checklist can be incorporated into the office workflows.

Coronavirus 2019 (COVID-19) Certification: Lack of Exposure Form	A document that asks patients and/or employees questions about their exposure to COVID-19.	Use the form each day when employees come to work or each time a patient is checked into the clinic.
Back Up Important Data Checklist	This checklist gives recommendations for a risk assessment required by the Health Insurance Portability and Accountability Act (HIPAA). A risk assessment helps reveal areas where your organization's protected health information (PHI) could be at risk.	Use this when there is an emergency or pandemic—a best practice in emergency preparedness.
Restoration and Recovery Process	This process includes creating a contact list with the company name and relevant information that the practice will need for data restoration and recovery as well as an emergency health record checklist.	Update and distribute to staff at least annually should data recovery and restoration services be required.

Purpose

The purpose of this BCP is to prepare <Practice Name> in the event of extended service outages caused by factors beyond its control (e.g., natural disasters, man-made events, etc.) and to restore services to the widest extent possible in a minimum time frame. All staff are expected to implement preventive measures, whenever possible, to minimize business failure. The plan identifies and makes recommendations necessary to prevent extended service outages.

Scope

The scope of this plan is limited to address any business failures.

Practice Information		
Practice name:		
Street address:		
Mailing address *(if different)*:		
Phone:		
Emergency contact:		
Number of staff:		
Emergency plan?	☐ No ☐ Yes	**Last revision date:**
BCP plan?	☐ No ☐ Yes	**Last revision date:**
Backup generator?	☐ No ☐ Yes	

BCP vs. Emergency Plan

BCP	Emergency Plan
Manages your ability to maintain operations.	Indicates what to do before/during an emergency.
Allows you to continue to care for patients.	Outlines what you should do in case of an emergency.
Limits economic impact.	
Allows you to return to normal operations quickly.	

2. PLANS, FUNCTIONS, AND BUSINESS IMPACT

2.1 Emergency Notification Contacts & Staff

List individuals in the order they should be contacted in the event of an emergency. Each team member will designate an alternate backup. If the first designee is not available, then contact the alternate.

	Name	Job Title	Email Address	Office Phone	Cell Phone
Primary					
Alternate					
Primary					
Alternate					
Primary					
Alternate					
Primary					
Alternate					

2.2 Team Member Responsibilities

Each team member will designate an alternate backup

	Name	Job Title	Responsibilities
Primary			
Alternate			
Primary			
Alternate			
Primary			
Alternate			
Primary			
Alternate			

- **All team members should keep an updated list of their staffs' work, home, and cell phone numbers.**
- All staff should keep this document accessible in case of power outage for reference at home in case the disaster happens during or after normal work hours. All staff should familiarize themselves with the contents of this plan and keep this document readily accessible at all times.

2.3 Assumptions

- Key people (Team Leaders or Alternates) will be available following a disaster.
- **A national disaster such as nuclear war is beyond the scope of this plan.**
- This document and all vital records are stored in a secure off-site location and are accessible immediately following the disaster.
- <Practice Name> is responsible to have its own BCP consisting of unique recovery procedures and critical resource information per its practice policy.

2.4 Essential Functions for Continued Operations

      a. Services
      b. Programs
      c. Ongoing business activities that may impact patient care

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    d. Ongoing business activities that may impact the success of your practice due to work stoppage (i.e., not pandemic)

    e. Security of electronic protected health information during the emergency/access control

☐	Identify functions that define your operations.
☐	Identify how to restart operations following work stoppage.
☐	Prioritize essential functions to minimize recovery time following work stoppage.
☐	Define new workflows for essential functions if needed.
☐	Communicate/disseminate new workflows to staff.
☐	Perform test, train, exercise and after-action review.
☐	Conduct a business impact analysis (refer to page 5).

<u>Prioritizing Essential Functions</u>

It is important to realize that not all functions of normal everyday operations are essential, as some activities may be delayed while others may adversely impact patient care and business continuity. Understanding the priorities of these functions will assist you in developing a foundational recovery plan that addresses the most important essentials. A BIA allows you to prioritize the essential functions. For more information about the BIA, refer to page 5.

Examples of essential functions are:

- Providing clinical services (telehealth vs. office visits)
- Managing staff
- Checking in patients
- Ordering diagnostic tests/performing CLIA-waived testing in-house
- Documenting patient information
- Ordering supplies

2.5 Disaster Definition

Any loss of utility service (power, water), connectivity (system sites), or catastrophic event (weather, natural disaster, vandalism) that causes an interruption in the service provided by staff operations.

2.5.1 Invoking the plan
This plan becomes effective when a disaster occurs. Normal problem management procedures will initiate the plan and remain in effect until operations are resumed at the original location, or an alternate control is returned to the appropriate functional management.

2.5.2 Disaster declaration
If a disaster is declared, the plan should be invoked and the outlined processes followed.

2.5.3 In the event of a natural disaster, catastrophic event, or interruption in service

In the event of a major catastrophe or of a network service provider outage affecting your facility, immediately notify [insert appropriate person to contact with job title]. **In the event you are not able to reach contact name, please follow instructions in section 2.1 in the order listed.**

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Procedure

STEP	ACTION
1	Notify [insert appropriate person to contact with job title] of pending event.
2	If impending natural disaster can be tracked, begin preparation of the site within 72 hours, as follows: • Notify [insert appropriate person to contact with job title].
3	24 hours prior to the event: • Notify senior management via email and phone.
4	**If a disaster is not declared,** the location response team will continue to address and manage the situation through its resolution and provide periodic status updates to senior management at **<Practice Name>**. **If a disaster is declared,** the location manager will notify senior management at **<Practice Name>** immediately. **Declare a disaster.** The person who is authorized to declare a disaster must also have at least one (1) backup/alternate who is also authorized to declare a disaster in the event the primary person is unavailable. Please make sure that individual is identified in the contact chart on page 2.

5	• Provide the following information to the Technical Assistance Contractor in the event of an outage:
	   a. Type of event
	   b. Location of occurrence
	   c. Time of occurrence
	   d. Estimated time of recovery, if known
	   e. Projected impact to operations

2.6 Business Continuity Planning

☐	Identify vendors/suppliers by completing the vendors/suppliers contact list, available on page 8.
☐	Identify where you may obtain necessary resources or a backup/alternate when in limited supply (i.e., medical societies, associations, organizations, local/state governments, and quality improvement organizations).
☐	Increase inventory, where possible.
☐	Update contact lists regularly.
☐	Maintain copies of contact lists.
☐	Discuss with suppliers their ability to make regular deliveries.

2.7 Vendor/Supplier Contacts

Maintain a list of all vendors & suppliers. Include after-hours contact information if available.

Vendor/Supplier	Contact Person	Phone	After-Hours Phone	Email

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Vendor/Supplier	Contact Person	Phone	After-Hours Phone	Email

2.8 Essential Functions and BIA

Identify and list essential functions and activities for the practice. With senior management, assess and document potential impacts and negative consequences of a disaster or major disruption on the function. Completing the BIA will also help determine the priority for each function. The BIA is a formal process to set the priority for each function and is included as part of the Essential Function and BIA Worksheet.

General Criticality and Priority Ratings

Priority	Impact	Recovery Time
Critical	Function directly impacts the life, health, safety, or security of the practice.	< 4 hours
Major	Pausing the function may cause significant consequences or serious harm to business operations, revenue and finances, reputation, or other core mission services.	24–48 hours
Moderate	Stopping the function may cause major disruption to business operations, revenue and finances, or other core mission services.	Up to 1 week
Minor	Function could be postponed for up to one month without causing significant disruption to business operations, dependent organizations, revenue and finances, or other core mission services.	Up to 1 month
No Impact	Function may pause and resume when conditions permit. Deferring this function for more than one month may cause slight disruption to business operations, revenue and finances, or other core mission services.	More than a month

Complete an Essential Function and BIA Worksheet for each function you identify.

Essential Function (Example) Clinical Documentation	
Brief Description	Clinical documentation is the creation of a digital or paper record that provides a full analysis of a patient's health including clinical severity and services rendered to a patient. Documentation is used for evaluation, care-coordination, reimbursement, measuring and reporting.
Key Personnel	Clinician
Support Staff	Medical Assistant and/or coding specialist
Priority Rating	Critical
Roles Required to Perform the Function	Clinicians who provide patient care.

Business Impact

Duration	Operation Impact (Costs that the practice might incur if the function is not restored)	Financial Impact (Loss of revenue)	Legal Impact	Customer Service	Reputation
First 24 Hours	For small businesses IT downtime could cost $137 to $427 per minute. (https://www.carbonite.com/blog/article/2015/10/downtime-costs-small-businesses-up-to-$427-per-minute/)	$488 per hour per physician – Mark Anderson, The Costs and Implications of EHR System Downtime on Physician Practices 2/11/2011	State regulation requires facility maintains clinical records.	Create anxiety and frustration if clinical documentation is not available in a timely manner.	N/A
24–48 Hours					
Up to 1 Week					
Up to 2 Weeks					
Up to 1 Month					
More Than a Month					

Requirements for Recovery

Recovery Time	People	Locations	IT applications (EHR, email, telecom, website, others)	Information	Suppliers & Partners
Less 30 minutes	Office manager, support staff, EHR vendor, IT helpdesk	Practice site	EHR	Communication explaining what is happening and when it would be restored, pre-approved paper forms,	EHR vendor, Health Information Exchange, hospital, labs, radiology.

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2.9 Plan Review and Maintenance

This plan is intended to be a living document and as such must be reviewed on a regular basis, recommended annually. The plan will be reviewed and exercised on an annual basis.

3. BUSINESS RECOVERY PHASE (VARIES BY EVENT—FULL RECOVERY)

Business recovery plans should be identified and communicated with senior management at **Name of practice** - [insert appropriate person to contact with job title] within 24 hours. Once operations are recovered and fully restored, please notify [insert appropriate person to contact with job title] immediately of full recovery to then notify all staff.

Name of practice

_____
Print (Name of practice) Representative

_____
Signature (Name of practice) Representative

_____
Date

_____
Date

4. APPENDIX

<p align="center"><u>**Pandemic Protective Actions Checklist**</u></p>

Pandemics & Influenza
A pandemic is an outbreak caused by a new virus that spreads around the world. The virus will spread easily from person to person, mostly through coughing and sneezing. Because the virus is new to people, everyone will be at risk of getting it.

During a pandemic, you can use simple actions to help protect yourself and others from becoming sick. No single action protects completely. If used together, the steps below can help reduce the chances of becoming infected.

Prevention Actions

☐	Wash your hands often with soap and water.
☐	Use an alcohol-based cleaner if soap and water are not available.
☐	Cover your mouth and nose with a tissue or your arm when you cough and sneeze.
☐	Stay away from other people if you are ill.
☐	Avoid crowded places and large gatherings as much as possible.

There may be times during a pandemic when you must be in a crowded setting or in close contact (within 6 feet) with people who might be ill. During such times, the use of a face mask or a respirator might help prevent the spread of pandemic.

<u>Wearing a Face mask or a Respirator</u>

What is a face mask?		Face masks are loose-fitting, disposable masks that cover the nose and mouth. These include products labeled as surgical, dental, medical procedure, isolation, and laser masks. Face masks help stop droplets from being spread by the person wearing them. They also keep splashes or sprays from reaching the mouth and nose of the person wearing the face mask. They are not designed to protect you against breathing in very small particles. Face masks should be used according to the manufacturer's instructions.
Consider wearing a face mask if:	☐	You are sick and think you might have close contact with other people.
	☐	You live with someone who is ill (you; therefore, might be in the early stages of infection) and need to be in a crowded place. Limit the amount of time you spend in these crowded places and wear a face mask while you are there.
	☐	You are well and do not expect to be in close contact with a sick person but need to be in a crowded place. Limit the amount of time you spend in these crowded places and wear a facemask while you are there.
What is a respirator?		A respirator (for example, an N95 or higher-filtering face piece respirator) is designed to protect you from breathing in very small particles, which might contain viruses. These types of respirators fit tightly to the face so that most air is inhaled through the filter material. To work the best way, N95 respirators must be specially fitted for each person who wears one (this is called "fit-testing" and is usually done in a workplace where respirators are used). Most of the time, N95 respirators are used in construction and other jobs that involve dust and small particles. Some healthcare workers, such as nurses and doctors, use these types of respirators when taking care of patients with diseases that can be spread through the air. If you have a heart or lung disease or other health condition, you may have trouble breathing through respirators and you should talk with your doctor before using a respirator. Like surgical masks, N95 respirators should be worn according to the manufacturer's instructions.

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Consider wearing a respirator if:	☐	You are well and you expect to be in close contact with people who are known or thought to be sick. Limit the amount of time you are in close contact with these people and wear a respirator during this time. These recommendations apply if you must take care of a sick person at home.

Very little is known about the benefits of wearing face masks and respirators to help control the spread of pandemic. In the absence of clear science, the steps provided offer a "best estimate" to help guide decisions. They will be revised as new information becomes available.

NOTE: Neither a face mask nor a respirator will give complete protection from the virus. That is why it is important to wash your hands often, cover your coughs and sneezes with a handkerchief or your arm, and avoid crowds and gatherings during a pandemic.

For the most up-to-date information on pandemic preparedness and the use of face masks and respirators during a pandemic, please visit the Centers for Disease Control and Prevention (CDC) Pandemic Resources and the Medical Offices and Clinics Pandemic Influenza Planning Checklist.

SOURCE: All information above is from the CDC's website under pandemic preparedness.

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COVID-19 Certification: Lack of Exposure Form

Name:	Date:

In an effort to determine if there is a heightened risk of exposing patients or staff to the novel coronavirus/COVID-19, we require that you complete this form on each visit/work day.

Employees: This information will be used to determine whether you might pose a heightened risk of transmitting COVID-19, such that staff cannot currently interact with patients.

Patients: Staff will use the information to determine whether you might pose a heightened risk of transmitting COVID-19, such that we cannot provide you with services at this time.

Patient ☐	Office Staff ☐

1. Have you, a member or visitor to your household, or someone you are in close contact with (within 3–6 ft. for over 10–15 minutes) experienced the following symptom in the last 24 hours?

Fever (100.3 or higher)	☐ Yes	☐ No

2. Have you, a member or visitor to your household, or someone you are in close contact with (within 3–6 ft. for over 10–15 minutes) experienced any new respiratory symptoms such as a cough or shortness of breath in the last 24 hours?

Cough	☐ Yes	☐ No
Shortness of Breath	☐ Yes	☐ No
Other	☐ Yes	☐ No If Yes, describe symptom:

3. Have you or any member of your household travelled to any areas with widespread sustained transmission of COVID-19 (see CDC Travel Notices: https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notices.html#travel-1), including any "hot spot" or high-risk area outside of your normal commuting area in the past 14 days?

☐ Yes	☐ No

4. Have you, a member or visitor to your household, or someone you are in close contact with been in close contact (within 3–6 ft. for over 10–15 minutes) with a person diagnosed with COVID-19 in the past 14 days?

☐ Yes	☐ No

5. Have you, a member or visitor to your household, or any close contacts been diagnosed with COVID-19, tested for COVID-19, or been told by a healthcare provider that you might have or have COVID-19?

☐ Yes	☐ No

Initial Certification Attestation

Signature:	Date:

Note: **Certification is an ongoing requirement. If there are any changes, you must contact the office prior to any visit. Should you develop symptoms during a visit, you must call the office immediately, as the visit will not be able to be completed.**

Certification Attestation

Signature:	Date:
Signature:	Date:

Signature:	Date:
Signature:	Date:
Signature:	Date:

Back Up Important Data Checklist

Required by HIPAA

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) required the Secretary of the U.S. Department of Health and Human Services (HHS) to develop regulations protecting the privacy and security of certain health information. The HIPAA Security Rule requires that covered entities and its business associates conduct a risk assessment of their healthcare organization. A risk assessment helps your organization ensure it is compliant with HIPAA's administrative, physical, and technical safeguards. A risk assessment also helps reveal areas where your organization's protected health information (PHI) could be at risk. To comply with the HIPAA Security Rule, all covered entities must do the following:

- Ensure the confidentiality, integrity, and availability of all electronic protected health information.

- Detect and safeguard against anticipated threats to the security of the information.

- Protect against anticipated impermissible uses or disclosures.

- Certify compliance by their workforce.

Covered entities should rely on professional ethics and best judgment when considering requests for these permissive uses and disclosures. Information drawn from https://www.cdc.gov/phlp/publications/topic/hipaa.html.

Some potential impacts include:
- Natural and environmental threats (e.g., fire, water, loss of power, temperature extremes) can compromise the function and integrity of your practice's information systems.
- Accurate ePHI might not be available, which can adversely impact the practitioner's ability to diagnose and treat the patient.

Backup Implementation Specifications

☐	Data Backup Plan
☐	Disaster Recovery Plan
☐	Emergency Mode Operation Plan
☐	Testing and Revision Procedures
☐	Applications and Data Impact Analysis

HIPAA-Compliant Data Backups

Data	Media Format	Location	Responsible Staff	Backup Frequency	Recovery Point Objective	Current Protection Method
Patient records						
Patient insurance						

Patient billing					
Accounts payable					
Payroll					
Computer programs					

Add additional rows if you have other data to back up.

Recommendations:

Practices must ensure that patient medical records are maintained in a secure manner during day-to-day operations, protected from fire, damage, theft, virus attacks, and unauthorized intrusion that would lead to public exposure of PHI. Approximately 87 percent of today's healthcare providers use an EHR. It is important to create an emergency plan that addresses what to do if your EHR is destroyed or hacked, your vendor has major issues that prevent you from accessing your patient's medical information, or the internet goes down for a long period of time.

Steps to ensure protection include:

- Complete a Security Risk Assessment (SRA) at no cost, using the SRA tool from the Office of the National Coordinator (ONC), available at https://www.healthit.gov/topic/privacy-security-and-hipaa/security-risk-assessment-tool.
- Use security devices, including firewalls, malware, and surge protectors on all computers.
- Secure equipment to floors and walls, if possible.
- Place fire extinguishers near critical equipment, train staff in use, and inspect routinely.
- Compile list of equipment serial numbers and store a copy of this information and other important documents in a secure off-site location or on an encrypted USB storage device.
- Maintain a list of vital documents, files, and folders and include how they are backed up.
- Ensure automatic daily back up of data is scheduled and performed on all network computers and routinely back up laptops and tablets, either to a network server or an encrypted USB storage device.
- Maintain paper medical records in a secure file room that can be locked and is fireproof.
- Retain redundant information systems, with the same operating system environment and real-time data replication, in order to transfer and continue operations during an emergency.
- Participate in the Health Information Exchange (HIE). Some or all patient information, contingent on practice participation in HIE, will be available through an HIE in case the data is compromised or lost.

Store important data on an off-site server with the necessary agreements to permit the storage and retrieval of an exact copy of your practice's ePHI.

Restoration and Recovery Process

List the company name and relevant information the practice will need for data restoration and recovery.

Company Name	Contact Information	Essential Function Supported	Services Provided	Recovery Point Objective	Alternative Providers or Strategy

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EMERGENCY HEALTH RECORD CHECKLIST

Health Record Information

Practices that use paper charts also need a plan in place in case medical records are physically destroyed, stolen, or compromised. During an emergency when paper or electronic medical records cannot be retrieved, recovered, or are inaccessible, clinicians and office staff will need to document information using a temporary health record. **At a minimum**, the following information should be collected:

Emergency Health Record

Temporary Health Record for Use During an Emergency	
Date of service:	
Clinician name:	
Patient Information	
Name:	
Address:	
City:	
State: ZIP code:	
Phone (home):	
Phone (cell):	
Date of birth:	
In Case of Emergency	
Contact name:	
Contact phone(s):	
Relationship:	
Health Insurance	
Does the patient have health insurance?	
Name of insurance company:	
Address of insurance company:	
Phone number insurance company:	
Policy #:	
Effective date:	
Does the patient have secondary coverage?	
Name of secondary insurance:	
Address of secondary insurance:	
Phone of secondary insurance:	
Allergies	
Does the patient have any known allergies?	
List allergies:	
Medications	
Does the patient take any medications?	
List medications:	
Medical History	
Does the patient have any health conditions or previous surgical history?	

List diagnoses:	
List procedures:	
Social History	
Marital status:	
Smoking history:	
Alcohol status:	
Substance Use Disorder:	
Medication-Assisted Treatment (MAT):	
Chief Complaint	
Reason seeking medical care:	
Physical Examination	
Physical findings:	
Clinical Notes	
Clinician comments:	
Treatment	
Treatment plan:	
Follow Up?	
Schedule follow-up appointment or referral, if necessary	

Extra Worksheets Are Provided Below for You

Complete an Essential Function and BIA Worksheet for each function you identify.

Essential Function	
Brief Description	
Key Personnel	
Support Staff	
Priority Rating	
Roles Required to Perform the Function	

Business Impact

Duration	Operation Impact (Costs that the practice might incur if the function is not restored)	Financial Impact (Loss of revenue)	Legal Impact	Customer Service	Reputation
First 24 Hours					
24–48 Hours					
Up to 1 Week					
Up to 2 Weeks					
Up to 1 Month					
More Than a Month					
Requirements for Recovery					

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Recovery Time	People	Locations	IT applications (EHR, email, telecom, website, others)	Information	Suppliers & Partners

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