

Business Continuity Planning **Workshops** March 9 & June 10, 2016

Summary Report

This publication was supported by Cooperative Agreement Number 5U90TP000546-04 from the Centers for Disease Control and Prevention and/or Assistant Secretary for Preparedness and Response. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention and/or the Assistant Secretary for Preparedness and Response.

Table of Contents

Background	3
Introduction	3
Objectives / Goals	3
Results	4
Recruitment:	4
Attendance:.....	4
Workshop Structure:.....	5
Assessment:	6
Evaluation:	7
Discussion	8
Successes:	8
Challenges:.....	8
Recommendations	9
Conclusion	9
Materials Provided to Participants for the Workshop	10
Attachments	11

Background

The Primary Care Emergency Preparedness Network (PCEPN), is a coalition of primary care providers in New York City (NYC), which supports primary care emergency preparedness and response activities. PCEPN's mission is to increase the ability of the NYC primary care community (using its members as proxy for the larger sector) to prepare for, respond to, and recover from a disaster, and to ensure that primary care is represented in citywide planning and response. With representatives from Federally Qualified Health Centers (FQHC), including mobile and school-based clinics; hospital based sites, and specialty care centers, PCEPN's main focus is to increase the level of emergency preparedness capacity across the primary care sector in NYC.

Introduction

Business continuity planning (BCP) is one of the most critical components of any recovery strategy. It includes the development of policies, protocols, and documents to help an organization maintain health care delivery operations during an emergency or disaster. Additionally, BCP aligns with federal, state, and accreditation standards and regulations (e.g., HRSA PIN 2007-15¹, Joint Commission, NYC Mayor's report on Special Initiative for Rebuilding and Resiliency²). PCEPN's Business Continuity Planning (BCP) Workshops were designed to provide primary care centers with sector-specific BCP information and resources to bridge the gap. The workshops took place on March 8, 2016 and June 10, 2016. This report provides findings from these events.

Objectives / Goals

The overarching goal of the workshops was to increase knowledge of BCP elements among participating organizations, which would allow them to be able to re-open their doors quickly to continue to provide care to NYC's most vulnerable/ underserved populations during and post disasters. PCEPN had the following objectives for this BCP Workshop series:

- Introduce participants to BCP concepts, key aspects and elements of the Business Continuity Plan.
- Describe the importance of BCP.
- Help participating organizations with the BCP process.
- Develop and introduce a BCP Toolkit for the primary care sector.
- Incorporate any relevant participant feedback after the workshop to make necessary changes to the BCP Toolkit.

¹ <http://bphc.hrsa.gov/about/pdf/pin200715.pdf>

² <http://www.nyc.gov/html/sirr/html/report/report.shtml>

Results

Recruitment:

Participants of the BCP Workshop were recruited by PCEPN. The Workshops were targeted towards primary care center leadership, Information Technology (IT) and emergency management staff, although all levels of staff were encouraged to participate. The recruitment process included email blasts both via PCEPN’s own email system (Constant Contact), as well as Community Health Care Association of New York State (CHCANYS) broadcast email system through “*Yours CHCANYS*” newsletter. Information about the workshops was posted on PCEPN’s website and enabled visitors to register by clicking the link to the registration page. Targeted phone calls were also utilized to invite participants that PCEPN felt would benefit most from attending.

Attendance:

The two sessions were attended by 26 participants, representing 13 primary care networks (10 FQHCs, 3 non-FQHCs) and 4 partner organizations. The 26 participants included administrators, emergency management staff, information technology, operations, quality/ compliance, finance, and facilities managers. The 4 partner organizations included staff from CHCANYS, NYC Department of Health and Mental Hygiene (DOHMH), Federal Emergency Management Agency (FEMA) and a non-profit organization supporting migrant population. Of the 13 primary care networks, 2 organizations were not current PCEPN members (i.e. VIP Community Services and Gotham Health Network). 1 FQHC is based in Long Island and is not eligible to become PCEPN member. PCEPN membership also includes a tier designation for each member. The tier is assigned by PCEPN after a capabilities-focused assessment process. There are currently 3 tier levels, with Tier I PCN’s being “most capable” and Tier III being “least capable”. 10 participating PCEPN members represented all three PCEPN Preparedness Tiers (Tier I – 3, Tier II – 3, Tier III – 2)³. Table 1: BCP Workshop Attendance gives an overview of the BCP Workshop Participation:

Organization	Type	PCEPN Member?	PCEPN Tier	Number of Attendees	Sites in Network
Care for the Homeless	FQHC	Yes	2	1	28
Charles B. Wang Community Health Center	FQHC	No	-	3	4
CHCANYS	Partner	n/a	-	1	n/a
Community Health Center of Richmond	FQHC	Yes	3	2	2
Community Healthcare Network	FQHC	Yes	1	2	14
DOHMH	Partner	n/a	-	1	n/a
FEMA	Partner	n/a	-	2	n/a

³ 2 participating organizations were newly accepted members of PCEPN (as of Budget Period 4) and do not yet have a Tier designation.

Organization	Type	PCEPN Member?	PCEPN Tier	Number of Attendees	Sites in Network
Health Care Choices	FQHC	Yes	3	2	2
Heartshare Wellness	Non-FQHC	No	-	1	1
Joseph P Addabbo Family Health Center	FQHC	Yes	2	1	6
Long Island FQHC, Inc.	FQHC	n/a	-	1	9
MediSys	Non-FQHC	Yes	1	1	10
Metro Community Health Center	FQHC	Yes	2	3	3
Migrant Support NGO	Partner	n/a	-	1	n/a
Montefiore Medical Group	Non-FQHC	Yes	1	1	30
NYC Health + Hospitals (Gotham)	FQHC	Yes	pending	2	40
VIP Community Services	FQHC	Yes	pending	1	1
TOTAL				26	150

Table 1: BCP Workshop Attendance

Workshop Structure:

The workshop consisted of the main presentation (overview of the workshop and the learning objectives, review of the key aspects of BCP, overview of the Business Continuity Plan elements, the process of identifying and prioritizing essential services and building of the Plan). The main presentation also included an introduction video from FEMA, general overview of the concepts, as well as the introduction of the BCP Toolkit, which consisted of the following elements:

- Identification of Essential Services Form
- Prioritization of Essential Services Form
- Business Continuity Plan Worksheets

In addition to the general presentation, attendees were invited to participate in group activities involving the BCP Toolkit described above. There were two breakout sessions:

Session I – working with the forms for Identification and Prioritization of Essential Services. Participants, grouped by the organization they represent, were required to meet and discuss for 20 minutes each form and start completing their own forms based on examples provided.

Session II – building the plan utilizing the Business Continuity Plan worksheets. Participants, grouped by the organization they represent, were asked to meet and discuss for 20 minutes the materials provided as well as start to building their own Business Continuity Plans.

If the participant was the only organizational representative, they were encouraged to join partners from other organizations. During the group activity, PCEPN staff facilitated and answered questions. Due to time constraints, participants were unable to completely finish their BCP Worksheets and were encouraged to take their sheets back to their organization to finish. Brochures on Business Continuity Planning published both by NYC Emergency Management and FEMA were available at the registration table for workshop participants.

Assessment:

A pre-test, post-test, and evaluation were administered. A total of 22 (84%) participants submitted the pre- and post- assessment materials from the total of 26 participants. One participant turned in only post-test and two participants turned in only pre-tests. 19 participants (76%) completed both tests. (See *Chart 1. BCP Participants Completion of Pre- and Post-Test Evaluation*).

Of the 19 participants who submitted both tests, 14 (or ~74%) achieved higher test scores at the end of the training as compared to their initial test. An additional 5 (or ~26%) respondents saw no change in their scores⁴, with no participants (0%) showing a decrease in knowledge. Target score for increase in knowledge based on the post-test was 75%. (See *Chart 2: Pre- and Post-Test Results based on completed tests*).

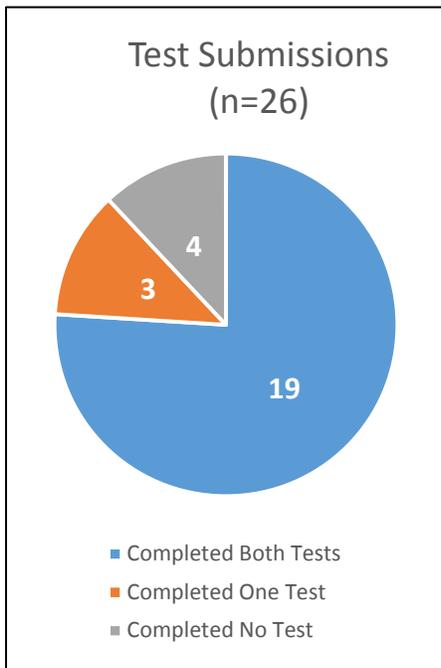


Chart 1: BCP Participants Completion of Pre- and Post-Test Evaluation

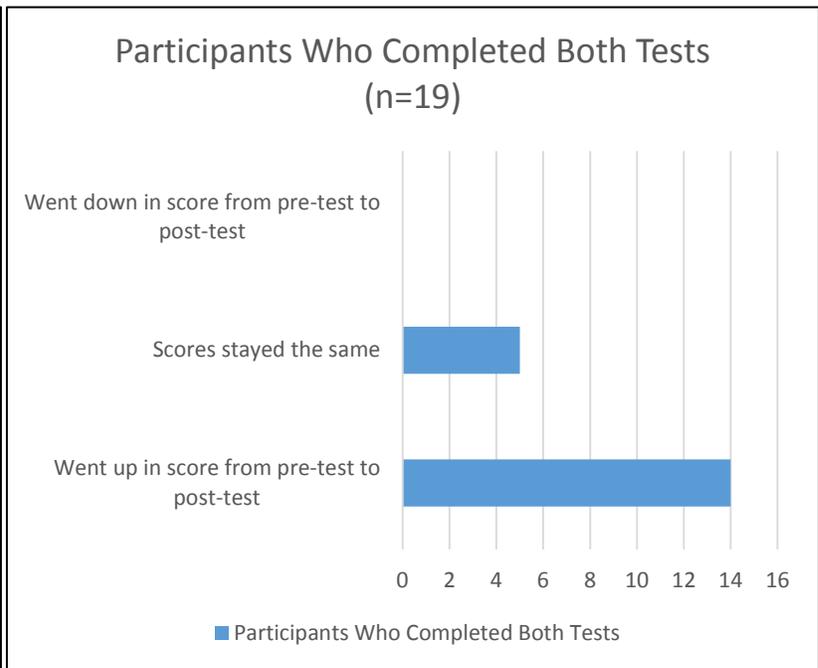


Chart 2: Pre- and Post-Test Results based on completed tests

⁴ One of these participants scored 100% on both tests.

Evaluation:

Participants gave generally high marks for the content of the BCP Workshop. A total of 23 evaluation forms were collected at the end of the workshop. *Table 2: Number of responses by Question Number* gives further details of the response number breakdown.

Business Continuity Planning Workshop Evaluation #	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
1. The course described the importance of business continuity planning to PCEPN members.	-	-	-	11	12
2. The course defined the key aspects of business continuity planning.	-	-	-	10	13
3. Participants were provided with instruction in how to identify and prioritize essential services for their organization.	-	-	-	13	10
4. The course reviewed critical business continuity plan elements.	-	-	1	11	11
5. Participants were provided with instructions for building their Business Continuity Plans utilizing the tools provided.	-	-	1	15	7
6. The course followed a logical sequence and was easy to follow.	-	1	-	16	6
7. The length of the course was appropriate.	-	2	2	13	6
8. The presenters were knowledgeable and actively engaged participants in discussion.	-	-	1	13	9

Table 2: Number of responses by Question Number

These results can be further summarized by percentage points. (See *Chart 3: Percentage of responses as per Business Continuity Planning Workshop Evaluation*).

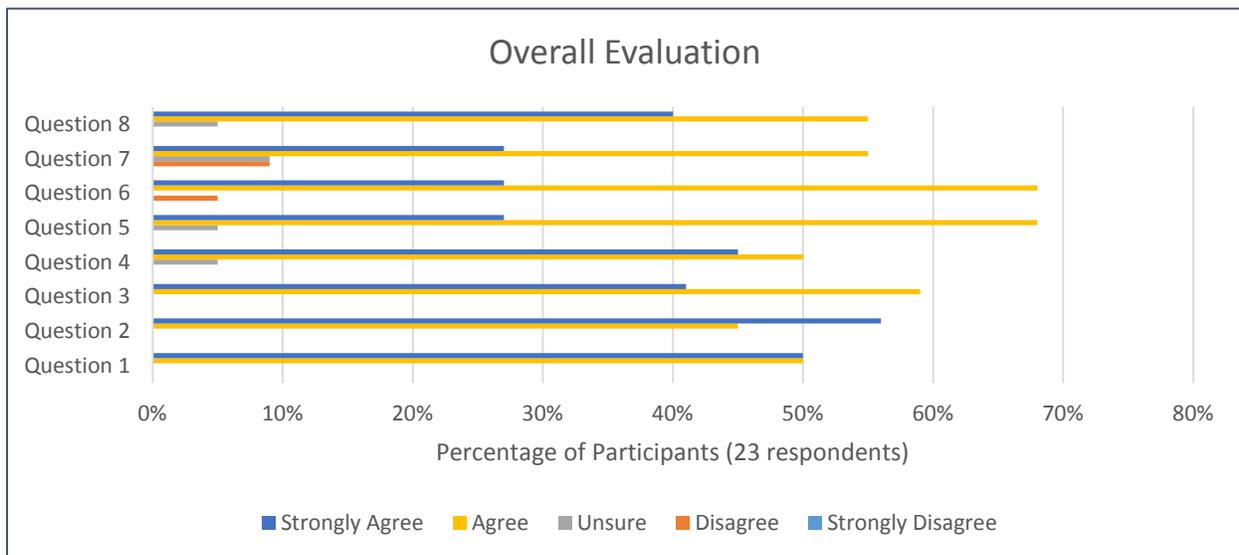


Chart 3: Percentage of responses as per Business Continuity Planning Workshop Evaluation

In addition to the main questions, participants were asked to provide additional feedback about the overall value of the Workshop and any additional elements that needed to be added to the content. 22 participants rated the overall value as “Excellent”, “Very Good” or “Good”. One participant wrote “Not Applicable”. Majority of the attendees also either wanted to see additional content included into future workshops or were not sure what that would entail. (See *Chart 4: Additional feedback - Workshop Evaluation*).

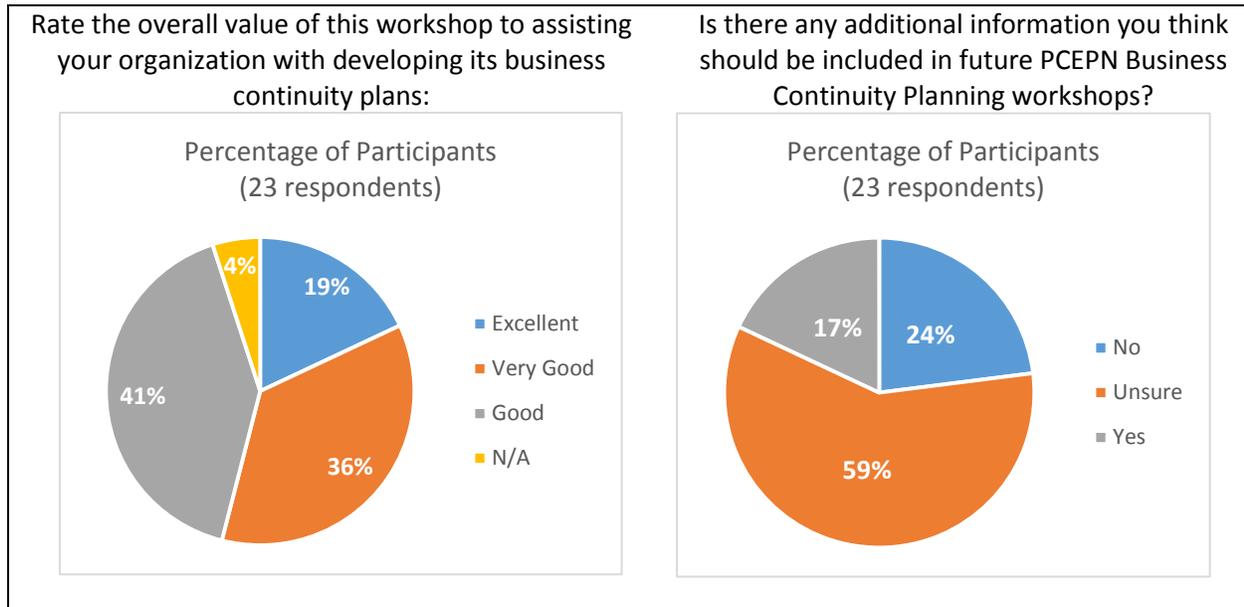


Chart 4: Additional feedback - Workshop Evaluation.

Several additional comments free-form were also provided on the Evaluation Forms by participants.

Discussion

Successes:

Overall, the Business Continuity Planning Workshops were well received with most participants rating them very favorably. The objectives were met. The majority of participants showed an increase in knowledge based on the results of the post-test. 95% of the attendees rated the overall value as “Excellent”, “Very Good” or “Good”. Additionally, both formal and informal feedback received during and after the event allowed for further adjustment of the BCP Toolkit documents to make them easier to use by the organizations. For example, forms were turned into fillable PDF files for the ease of use, examples were added to the Identification of Essential Services Form, and a Fact Sheet on Basic Concepts for Business Continuity Planning was added to the toolkit.

Challenges:

Some participants felt that more examples specific to primary care were needed to fully understand how to utilize provided BCP Toolkit worksheets and forms. Additionally, as the

concepts of BCP are abstract and in some cases new to the participating organizations, the workshop would benefit from an enhanced group work session. Possibly pre-assigning participants to a group would be one way to increase interaction and participation. Future consideration should be given to allowing more time for the tests and stressing the importance of their completion. Moreover, 59% of the participants were not sure if there was any additional information needed to be included into future workshops, which may speak to the need for educating the primary care sector further on the business continuity processes as well as what specifically organizations may need.

Recommendations

Based on the Business Continuity Planning Workshops that PCEPN conducted on March 9, 2016 and June 10, 2016, as well as the feedback collected from the workshop participants, the following recommendations are made:

1. Further options should be explored to make this workshop more interactive for participants, including, but not limited to following:
 - a. Introducing various interactive components to workshop content, e.g. additional videos, mechanisms of reporting out to the group after individual work etc.;
 - b. Pre-assigning participants to groups to ensure all participants have a partner to interact with;
 - c. Arrange seating in a way that would allow for more interactions, e.g. limit seats available so the room is not very dispersed.
2. Provide BCP Toolkit forms that are pre-filled with examples or fill out each form together as a group so that participants understand better what is expected.
3. Include a discussion of best practices from organizations with more mature BCP processes.

Conclusion

The Business Continuity Planning Workshop series was a success all around as evidenced by participants' feedback. The audience was well-rounded, with representation from a variety of titles and roles attendees played in their organizations. All set objectives were met. The BCP Toolkit was further enhanced based on the feedback received, including addition of the summary BCP Fact Sheet. The BCP Toolkit will be provided to all Workshop participants in an electronic form, including PDF fillable forms. The documents will also be posted on PCEPN website for the use by the primary care sector.

Materials Provided to Participants for the Workshop

- Agenda
- Presentation Slides
- Evaluation Materials Pack
 - o Pre-Test
 - o Post-Test
 - o Evaluation
- Participant Materials Pack
 - o Identification of Essential Services Form
 - o Prioritization of Essential Services Form
 - o PCEPN Business Continuity Planning Worksheets
- List of BCP Resources and Additional Information

Attachments

- Memo on February 17, 2016 on BCP Workshop Planning
- Sign-in Sheet (scan)
- Sign-in Sheet Template
- Agenda
- Pre-/Post-Test
- Pre-/Post-Test Answer Key
- Evaluation Form
- Presentation Slides
- Link for the video used in the Workshop
 - o <https://www.fema.gov/media-library/assets/videos/94388>
- Cover Sheets for Participant Packs
- BCP Toolkit:
 - o Fact Sheet
 - o Identification of Essential Services Form
 - o Prioritization of Essential Services Form
 - o PCEPN Business Continuity Planning Worksheets
 - o BCP Resources and Additional Information
- Identification of Essential Services Form (PDF Fillable Form)
- Prioritization of Essential Services Form (PDF Fillable Form)
- PCEPN Business Continuity Planning Worksheets (PDF Fillable Form)