

WORKSHEETS

WORKSHEET 1: COOP LEADER SELECTION

The COOP team is led by an appointed COOP leader within the agency. Information on the current COOP leader is as follows.

COOP Leader Selection Documentation	
Name	
Date appointed as COOP leader	
Full-time or part-time position?	
If part-time, state normal position held and percentage of time to be devoted to COOP activities	
Person to whom COOP leader reports	
Brief professional background details	
Normal contact details (work phone, email)	
Emergency contact (home, cell, pager numbers)	
Completed by: Name	Date:
Reviewed by: Name	Date:

WORKSHEET 2: COOP TEAM MEMBERS

The COOP team has overall responsibility for the development and maintenance of the COOP Plan. Members of the COOP team are currently as follows.

COOP Team Members		
Name	Job Title and Department within Agency	Date of Appointment
Individual responsibilities within the COOP team:		
Name	Job Title and Department within Agency	Date of Appointment
Individual responsibilities within the COOP team:		
Name	Job Title and Department within Agency	Date of Appointment
Individual responsibilities within the COOP team:		
Name	Job Title and Department within Agency	Date of Appointment
Individual responsibilities within the COOP team:		
Name	Job Title and Department within Agency	Date of Appointment
Individual responsibilities within the COOP team:		
Name	Job Title and Department within Agency	Date of Appointment
Example: Sam Brooks	Maintenance Manager	5/5/55
Individual responsibilities within the COOP team: Example: Security and equipment of alternate facility.		
<i>Completed by:</i> Name		<i>Date:</i>
<i>Reviewed by:</i> Name		<i>Date:</i>

WORKSHEET 3: INITIAL COOP TEAM MEETING

The initial meeting of the COOP team will be held on <PLACE>, <DATE>, <TIME> to discuss the following:

Initial COOP Team Meeting Topics	
Topic	Check Off
COOP team organization	
Roles and responsibilities	
Project deliverables	
Project deadlines	
Reporting process	
Review and approval process	
Coordination with external response agencies	
<i>Completed by:</i> <i>Name</i>	<i>Date:</i>
<i>Reviewed by:</i> <i>Name</i>	<i>Date:</i>

WORKSHEET 4: COOP TEAM MISSION STATEMENT

Mission Statement	
<p>This COOP team has been assigned by the [<i>executive director/general manager</i>] to direct development of a comprehensive continuity of operations capability for [<i>insert name of transportation agency</i>]. Because of the importance of this planning effort, members of this team have been assigned from all major [<i>departments/divisions/units</i>] within the agency. The team is responsible for preparing a Continuity of Operations (COOP) plan, as well as for overseeing the process required to implement, validate and maintain a continuity capability.</p>	
<p><i>Completed by:</i> Name</p>	<p><i>Date:</i></p>
<p><i>Reviewed by:</i> Name</p>	<p><i>Date:</i></p>

WORKSHEET 5: COOP TEAM OBJECTIVES AND DELIVERABLES

To enable the COOP team to focus their efforts on the key issues, and to ensure that the work undertaken is relevant to the requirements of the project, the objectives and deliverables are clearly defined. The following list of objectives and deliverables has been approved by the senior management.

Objectives of COOP Team	
Main objective of COOP team:	
Sub-objectives of COOP team:	
Deliverables of COOP team:	
<i>Completed by:</i> <i>Name</i>	<i>Date :</i>
<i>Reviewed by:</i> <i>Name</i>	<i>Date :</i>

WORKSHEET 7: PROJECT REPORTING REQUIREMENTS AND FREQUENCY

The COOP leader issues a [weekly/monthly/quarterly] report to senior management. This report contains a brief executive summary, which is additionally distributed to the executive director/general manager and board members as appropriate.

COOP Leader	
Distribution for COOP leader’s monthly progress report is as follows.	
Name of Person	Name or department/unit for which responsible
Distribution for executive summary only:	
Name of Executive or Board Member	Department represented within agency
The contents of the report include: Activities accomplished during the previous month: <i>Activities completed</i> <i>Outstanding issues encountered</i> <i>Means of resolving these issues</i> Progress made against agreed milestones: <i>Milestone description</i> <i>Scheduled date</i> <i>Progress made</i> <i>Likelihood of meeting scheduled date</i>	
Completed by: Name	Date:
Reviewed by: Name	Date:

WORKSHEET 10: CAPABILITIES SURVEY TEMPLATE

Each potential disaster or emergency situation has been examined by the COOP team. The focus here is on the level of disruption that could arise from each type of event. Potential disasters resulting have been assessed as follows.

Potential Emergency	Probability Rating (See Table Below)	Impact Rating (See Table Below)	Agency Capabilities to Manage Emergency	Disruption Potential (See Table Below)

PROBABILITY RATING		IMPACT RATING		OVERALL DISRUPTION POTENTIAL	
Score	Level	Score	Level	Score	Level
5	Very High	5	Loss of Transportation System	5	Priority
4	High	4	Loss of Critical Systems	4	High
3	Medium	3	Loss of Non-Critical Systems	3	Medium
2	Low	2	Minimal Loss	2	Low
1	Very Low	1	No Loss	1	Very Low
<i>Completed by:</i> Name			<i>Date:</i>		
<i>Reviewed by:</i> Name			<i>Date:</i>		

WORKSHEET 11: AREAS OF RESPONSIBILITY

Use the transportation/transit agency’s mission statement, values, goals and objectives, the organization chart, and a brief review of agency operating procedures, rulebooks, and legal authorities, to identify the agency’s areas of responsibility generally.

Number	Areas of Responsibility
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
Example	Maintenance of highway and/or track

WORKSHEET 12: FUNCTIONS PERFORMED BY AREAS OF RESPONSIBILITY

Complete Worksheet 2 for each area of responsibility identified in Worksheet 1. List the functions performed and provide a brief description of the activities typically performed in the identified function.

Area of Responsibility: _____
 Example Responsibility: Maintenance of highway/track

Number	Functions Performed	Brief Description	Essential? Y/N
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
Example	Visual inspection of track	Personnel perform routine inspection of track weekly, walking 4 to 5 miles	Yes
Example	Schedule litter pickup	Maintenance crew reports litter issue for volunteer Adopt-A-Highway group attention or scheduled activity for crew	No

WORKSHEET 13: CRITERIA FOR SELECTING ESSENTIAL FUNCTIONS

Based on the review of emergency response plans, emergency operating procedures, and brainstorming sessions among COOP team members, transportation agency employees and supporting emergency responders, identify criteria for selecting essential functions.

Number	Criteria
1	
2	
3	
4	
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6	
7	
8	
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11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
Example	The function supports normal emergency response activities as planned by the local/regional emergency management agency.

WORKSHEET 14: ESSENTIAL FUNCTION QUESTIONNAIRE

Essential Function Questionnaire

Building on the results documented in Worksheet 12, the objective of this worksheet is to further evaluate essential agency functions and develop measures to minimize. If, at any point, the function is determined NOT to be essential, it is not necessary to complete the questionnaire for that function.

Area of Responsibility: _____

Function: _____

Services this function provides:

Other agency functions and other agencies that depend upon this function:

(Use reverse side if additional space is needed)

1. The loss of this function would have the following effect on the agency:

- Catastrophic effect on the agency or some divisions
- Catastrophic effect on one division
- Moderate effect on the agency
- Moderate effect on some divisions
- Minor effect on the agency or some divisions

2. How long can this agency function continue without its usual operation of information systems and telecommunications support? Assume that loss of support occurs during your busiest, or peak, period. Check one only.

Check	Period of Time	Check	Period of Time	Check	Period of Time
	Hours		Up to 3 days		Up to 3 weeks
	Up to 1 day		Up to 1 week		Up to 4 weeks
	Up to 2 days		Up to 2 weeks		Other (specify)

Indicate the peak time(s) of year and/or a peak day(s) of the week and/or peak time of the day, if any, for this function or its associated applications.

(Month)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
(Day)	Sun	Mon	Tue	Wed	Thu	Fri	Sat					
(Hour)	1	2	3	4	5	6	7	8	9	10	11	12
(Military time)	13	14	15	16	17	18	19	20	21	22	23	24

3. Are there any other peak load or stress considerations?

4. Have you developed/established any backup procedures (manual or otherwise) to be employed to continue agency functions in the event that the associated applications are not available? Consider how much data you can afford to lose. Consider data and/or applications on hard drives, CD-ROMs, floppy drives, Zip drives, as well as paper data.

If yes, how often have those procedures been tested?

5. The loss of this function would have the following legal ramifications due to regulatory statutes, contractual agreements, or law: (Specify the area of exposure)

6. The loss of this function would have the following negative impact on personnel in this agency:

7. The loss of this function would keep us from supplying the following services to the public and other entities:

8. Specify any other factors that are to be considered when evaluating the impact of the loss of the function:

9. Are there ANY other dependencies (partner, vendor, software, unique resources, etc.) not already identified above?

10. Does an analysis of the responses to the above questions indicate that this function is still to be considered "essential" to the agency? If yes, indicate below when such label is appropriate:

- Always: _____
- During the following period of the year: _____
- During the following time of the month: _____
- During the following time of the week: _____
- Other time period. Specify: _____

WORKSHEET 15: CRITICAL PROCESSES OR SERVICES, PERSONNEL, RECORDS, EQUIPMENT AND RESOURCES, AND SYSTEMS SUPPORTING EACH ESSENTIAL FUNCTION

Complete a separate worksheet for each essential function. First, list critical activities or tasks that support that function in the left-hand column. Next, determine the personnel needed to perform that service (not specific names, but number and abilities can be considered), and in the last columns list all records, equipment and resources, and systems needed to make that essential function operable. In all categories, ask yourself a variety of questions about such things as vendor and partner agency agreements or relationships, software and supplies/equipment issues, workstation needs, vital records and documents required, and communications with agency personnel and system customers.

Area of Responsibility: _____

Example Responsibility: Highway Maintenance

Essential Function: _____

Example: Field verification of detour signage in place when a little used route is needed due to some emergency and emergency repair/placement/replacement.

Activity/Task	Personnel	Records	Equipment and Resources	Systems
Example: Drive detour route ASAP to ascertain if signage in place is acceptable and clear.	Team of 2 preferred.	Map/drawing of sign placement that is in place or that should be put in place.	Sign repair, replacement, or sign erection materials. (Be sure to consider if a vendor or partner maintains sign inventory that could be borrowed or purchased.)	No special systems would be required beyond dependable field communications (radio, cell phone).

WORKSHEET 19: ALTERNATE WORK SITE OPTIONS

This worksheet serves several purposes. Not only will it help identify alternate work sites, it may also be used to track memoranda of understanding (MOU), leases, occupancy and cooperative agreements, and contracts with other entities for facility use.

Area of Responsibility: _____

Essential Function: _____

Facility	Agreement	Date Executed	Annual Cost	Special Notes
Example: Acme Fire Hall	MOU	5/5/55	\$1200	Fire Hall has access to radio as well as land line phone; 450 square feet with access for persons with disability. Tables and chairs to seat 120.

WORKSHEET 20: TRANSPORTATION, LODGING, AND FOOD

Complete the table while identifying the personnel needed for each essential function, arrangements for their work time, keeping in mind that not all personnel will need to be present at all times.

Area of Responsibility: _____

Essential Function: _____

No. of Personnel	Sleeping	Food	Transportation	Vendor Agreements	Support Services
Example: 10	5 at a time	30 meals/day	Van access for off-time errands	Acme Catering on contract	Offer MH/MR services as needed

WORKSHEET 21: SECURITY AND ACCESS

Each essential function may need a different level of security (e.g., locks, locks and guards, secure perimeter fence and guards, etc.) and secure storage needs and availability information. List the alternate facility for each essential function (could be the same for several essential functions) and determine security needs for each.

Area of Responsibility: _____

Essential Function: _____

Alternate Facility	Number of Personnel	Security Details	Secure Storage Needs and Availability
Example: Fire Hall, 555 Security Drive, Fifty-Five, PA 55555 Call 717-555-5555	25 at a time	Two locked doors; fenced yard; no need for guard unless civil unrest or perceived threat is expected	Lock down cage 15x50 feet fireproof, stores materials in advance, only keys at Acme Transit office, local police department – NO SECURE PARKING ON SITE.

WORKSHEET 23: COOP PERSONNEL/TEAM ROSTER

For each essential function, provide contact information for personnel who may support the function by serving on the executive team, advance team, operations team, and/or support team(s). All other personnel are automatically assigned to contingency team(s).

Area of Responsibility: _____

Essential Function: _____

Name/Title	Team Assignment?	Hours of Operation?	Contact Information
			Office Phone: Home Phone: Cell Phone: Pager: Email: Home Address:
			Office Phone: Home Phone: Cell Phone: Pager: Email: Home Address:
			Office Phone: Home Phone: Cell Phone: Pager: Email: Home Address:
			Office Phone: Home Phone: Cell Phone: Pager: Email: Home Address:
			Office Phone: Home Phone: Cell Phone: Pager: Email: Home Address:
			Office Phone: Home Phone: Cell Phone: Pager: Email: Home Address:

WORKSHEET 25: DELEGATION OF AUTHORITY – RULES, PROCEDURES, AND LIMITATIONS

Complete this worksheet for each position identified in the second column of Worksheet 24, *Matrix for Listing Delegation of Authority*. Indicate the position on the line below and then list any rules for the delegation that may exist, outline procedures for the delegation including notification of relevant staff of the transfer of power, and limitations on the duration, extent and scope of the delegation.

Position Holding Authority: _____

Rules	Procedures	Limitations
If General Manager is physically absent from the facility AND can't be reached by pager or cell phone within 30 minutes	Assistant GM is contacted for decision; In her absence, Operations Manager is contacted; In his absence, etc.	No service schedule changes may be announced without prior consultation with emergency management agency, and subsequent to the change, normal media contacts

WORKSHEET 26: ORDERS OF SUCCESSION

List orders of succession to key positions essential to the transportation agency’s COOP plan. Based on previous experience, whenever possible, transportation agencies may choose to investigate options that enable key successors to be geographically dispersed, to ensure that succession to office can occur during any type of emergency.

Officials (Title)	Designated Successor(s) (Title)	Limitations/ Conditions	Responsibilities
Example: Chief Executive Officer	Chief Information Officer	Absence of CEO and inability to contact	CEO overall responsibility and direction
Example: Chief Information Officer	1. Deputy CIO; 2. Chief tech	Automatic succession if CIO is unavailable or filling CEO role	Direction of IT support, telecommunications hardware/software issues
Example: DOT Equipment Maintenance Director	1. Assistant Maintenance Director; 2. Lead Mechanic; 3. Lead maintenance repairman; 4. Nearest county maintenance chief	As per mutual agreement with the bargaining unit, all overtime rules are suspended for the time that COOP plan is in effect. Successor should work with union steward when possible to make assignments.	Person in position is charged with making all necessary repairs, directing repairs be made, and providing adequate staff to make repairs and adequate parts and/or tools to make repairs

WORKSHEET 27: VITAL RECORDS

List vital records, regardless of media, essential to the continued functioning or reconstitution of an organization. Include consideration of securing as many records as possible off-site with regular backup or provision at alternate facility, or making data portable (i.e., memory sticks). Maintenance frequency refers to the schedule or timetable for checking and/or updating this vital record.

Vital File, Record, or Database	Forms of Record (electronic [including format], hard copy, etc.)	Accessible at Alternate Facility?	Available from original or alternate source?	Stored in original facility at?	Maintenance Frequency
Example: Lease for main facility	Hard copy AND .pdf file	No	Central office has copy on file; Office of Comptroller	Finance, 3 rd floor bottom left drawer of file cabinet facing windows	Annual

WORKSHEET 28: RESTORATION AND RECOVERY RESOURCES

Identify all record recovery and restoration resources, contact information and services available below. Include evening, holiday, and emergency/alternate contact information, as well as contact information for regular business hours.

Company Name	Contact Name	Address / Phone	Services
Example: Data Recovery Systems, Ltd.	Main contact: Bill Jones Alternate contact: Mary Smith	W: 12 South St., Fifty-Five, PA (555) 555-1212 Pager: 555-555-1111 Cell: 555-555-9999 On-call person carries the pager, Bill or Mary always has it.	Copying of backup tapes for distribution to multiple alternate sites; Troubleshooting assistance in-person promised 2-hour response.

WORKSHEET 29: COMMUNICATIONS SYSTEMS SUPPORTING ESSENTIAL FUNCTIONS

Complete a separate worksheet for each essential function. Review information already gathered on vital systems and equipment for clues on communication systems that support critical processes and services and in turn their associated essential functions. In this chart, list the current vendor and its contact information; the services the vendor is currently providing the agency; and any special emergency services the vendor has to offer.

Essential Function: _____

Communication Mode	Current Provider	Services Provided	Special Services Available	Alternate Provider?
Voice Lines				
Fax Lines				
Data Lines				
Cellular Phones				
Pagers				
Email				
Internet Access				
Instant Messenger Services				
Personal Digital Assistants (PDAs)				
Radio Communication Systems				
Other				

WORKSHEET 30: PREVENTIVE CONTROLS FOR COMMUNICATION SYSTEMS

Complete a worksheet for each facility and indicate whether the facility is a primary or alternate work site. Identify all the optimal preventive controls for each communication system and then list the preventive controls currently in place for that mode of communication. Examples of preventive controls might be uninterruptible power supplies, generator back-up, water sensors, etc.

Facility: _____ Primary Alternate

Communication System	Optimal Preventive Controls	Preventive Controls Currently In Place
Voice Lines		
Fax Lines		
Data Lines		
Cellular Phones		
Pagers		
Email		
Internet Access		
Instant Messenger Services		
Personal Digital Assistants (PDAs)		
Radio Systems		
Other		

WORKSHEET 31: ALTERNATIVE MODES OF COMMUNICATION

Copy the information gathered in Worksheet 29, Communications Systems Supporting Essential Functions, into this table and identify alternative providers and/or modes of communication. Communications systems already in place can be named as alternative modes for other modes of communication. For example, radios could be an alternative mode of communication for voice lines.

Communication Mode	Current Provider	Alternate Provider	Alternative Mode #1	Alternative Mode #2
Voice Lines				
Fax Lines				
Data Lines				
Cellular Phones				
Pagers				
Email				
Internet Access				
Instant Messenger Services				
Personal Digital Assistants (PDAs)				
Radio Communication Systems				
Other				

WORKSHEET 33: COOP PLANNING CHECKLIST

Transportation agencies may want to use the COOP planning checklist here to guide the COOP plan development process from the beginning, using the left-hand column to track actions and considerations, and/or using the right-hand column to list the page or pages within your plan that refer to that item.

Have I planned for?	Item/Description	Page#(s) in our plan
OVERARCHING ITEMS		
Y N	Plan objectives are clearly stated in the opening of the plan	
Y N	Provisions for the protection of critical equipment, records, and other assets are included in the overall planning process	
Y N	Provisions are included which maintain efforts to minimize human loss, damage and losses of resources	
Y N	Considerations for an orderly response and recovery from any emergency are incorporated into the planning process	
CAPABILITIES SURVEY		
Y N	Vulnerability to natural and human-caused emergencies is addressed	
IDENTIFYING ESSENTIAL FUNCTIONS		
Y N	Essential functions required by law are identified	
Y N	Essential functions that support public safety are identified	
Y N	Essential functions that support emergency responders are identified	
Y N	Essential functions that are required by contract are identified	
Y N	Essential functions that are time specific are identified	
Y N	Essential functions that are day-of-the-week specific are identified	
Y N	Essential functions that are monthly/seasonally specific are identified	
Y N	Essential functions are prioritized based on above criteria	
COOP PLAN DEVELOPMENT, REVIEW & APPROVAL/ SUPPORTING PROCEDURES		
Y N	Decision making conditions are clearly outlined for activation	
Y N	The plan can be activated during non-working hours	
Y N	The plan can be activated if no person can access or use the facility	
Y N	The plan can be activated if no person can access the surrounding area	
Y N	Communication process in times of advance threat warning established	
Y N	Communication process to notify all agency personnel is established	
Y N	Communication process is coordinated for all impacted decision makers	
Y N	Communication is coordinated with other agency offices/facilities	

Y N	Communication is coordinated with external emergency personnel	
Y N	Communication process is coordinated with key customers/users	
Y N	Communication process is coordinated with suppliers/partners	
Y N	Time-phased procedures facilitate response, relocation, restoration	
Y N	Personnel are assigned to functions based on skills and knowledge	
Y N	Authorities are identified which can and may be delegated	
Y N	Positions to which the authorities are delegated are listed	
Y N	The limitations of the delegations of authority are identified	
Y N	Plans are made for succession to key leadership positions	
Y N	Time or geographical limitations to succession are identified, addressed	
Y N	Succession order is described by position or titles rather than by person	
Y N	Orders of succession are revised and distributed as necessary	
Y N	Alternate facilities and the resources available at each facility identified	
Y N	Pre-positioning of assets and resources at alternate facilities considered	
COOP PLAN DEVELOPMENT, REVIEW & APPROVAL/ SUPPORTING PROCEDURES		
Y N	Reliable support services, infrastructure at alternate facility identified	
Y N	Alternate facilities will be available within 12 hours, up to 30 days	
Y N	Physical security and access at alternate facility considered	
Y N	Data/communications systems identified to support essential functions	
Y N	Interoperable communications plans for internal and external use	
Y N	Provisions for redundant communications are included in the COOP plan	
Y N	Planning includes potential off-site storage of duplicate records	
Y N	Regular and timely maintenance of alternate facility is scheduled	
Y N	Plan ensures back-up for legal and financial records	
Y N	Transportation, lodging, meals at alternate facility all addressed	
Y N	Relocation of personnel, receiving plan at alternate site addressed	
Y N	After-action review process identified for use after COOP activation	
Y N	Staff roster for each essential function by position, with contact information	
Y N	Reliable processes are in place to acquire additional resources to sustain operations for 30 days	
Y N	Documentation of all supporting procedures and/or checklists	
Y N	Procedures in place to notify customers, of new work location, phone numbers, re-route US mail, etc.	
Y N	The COOP plan contains updated appendices with detailed	

	information on specific procedures, contact names, numbers always up to date	
Y N	Provisions are included for the preparation and pre-positioning off-site of drive-away kits	
Y N	Measures are included in the planning which address pay status, administrative leave, and layoffs	
Y N	Information has been included which provide guidance to personnel on medical, special needs, and travel issues	
Y N	The physical security of the primary facility during the COOP activation and operations has been addressed within the COOP plan or procedures	
TRAINING PERSONNEL, TESTING THE PLAN, KEEPING PLAN UP TO DATE		
Y N	Training and orientation curriculum has been developed which creates awareness and enhances the skills of the agency's personnel	
Y N	Training is developed which ensures that the key leadership are prepared to perform their emergency duties	
Y N	Training plan addresses knowledge and skills sets	
Y N	The COOP plan contains a comprehensive test, drill, and exercise program	
Y N	Provisions are included for periodic test of the alert and notification procedures	
Y N	Periodic exercises of operational plans, alternate facilities, and interoperable communications are incorporated into the COOP plan	
Y N	Periodic validation and test are included for equipment at the alternate facility in the COOP plan	
Y N	A remedial action plan/process has been established which incorporates lessons from the test, training, and exercise program	
Y N	Procedures are included which ensure that this plan will be maintained at a high level of readiness	