Research Continuity Planning Worksheet

**Introduction**

Thank you for taking part in the Business Continuity Planning process. A Business Continuity Plan will work to ensure our campus community can continue to operate, and can recover more effectually, in the case of a serious emergency or disaster.

Your Laboratory Business Continuity Plan:

* Contains various information that will be needed during and after the disruptive event
* Identifies your Laboratory’s most essential tasks/functions
* Provides likely scenarios for you to anticipate how your Laboratory can prepare and carry out these tasks/functions under diminished resources

A Business Continuity Plan centers on each unit’s **Essential Functions**. An Essential Function (EF) is a task or service that either must be continued through a disruption, or restored as soon as possible in order to continue the critical functioning of the Laboratory and the University as a whole.

This worksheet is designed to establish a basic understanding of your Laboratory’s continuity-critical functions. Once you have completed the following questions to the best of your ability, please provide a copy of the document to your Laboratory head and the campus Business Continuity Specialist. It will serve as the basis of your Business Continuity Plan, and may be updated and added to as needed in the future.

Essential Functions

Helpful tips for identifying Essential Functions:

1. Essential functions are your unit’s ordinary, day-to-day, critical functions – **not** your unit’s extraordinary, emergency response functions
2. Typically, each functional area of a unit has between two and four essential functions
3. Consider combining functions that use similar resources, have similar outputs and objectives, or are discrete steps of a larger process

Questions to consider:

* Is the function necessary to achieve your unit’s mission?
* Are other functions or campus units dependent on this function for its successful completion?
* Are these services that your unit’s customers/clients depend on?
* Is there a potential for significant revenue loss if this function is not performed?
* Does the function fulfil a legal obligation?
* Does the function play a key role in maintaining the campus’s reputation?
* Does the function safeguard an irreplaceable asset?

**If you answered yes to three or more of these questions, then the function is likely one of your unit’s essential functions.**

**Briefly name and describe your Laboratory’s Essential Functions**:

|  |  |
| --- | --- |
| Essential Function | Brief Description |
|  |  |
| MTD: |
|  |  |
| MTD: |
|  |  |
| MTD: |
|  |  |
| MTD: |

\*The Maximum Tolerable Downtime **(MTD)** is the maximum length of time this function can be down without intolerable consequences to the Campus. Choose from: **<1 day, 1 day, 1 week, 2 weeks, 4 weeks,** or **> 4 weeks**.

Strategies for Continuing to Function

**Loss of IT Network:**

If for some reason your Laboratory experiences a loss of the IT Network, which of the following will the Laboratory do to maintain the Essential Functions? (Indicate all that apply; please elaborate below.)

Keep local backups of key records

A strategy needs to be developed

Not applicable

Other strategy: ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reduce or prioritize services

Defer operations until network restored

Work from home

Work from other remote site

Use manual or paper workarounds

Details of Loss of IT Network Plan:

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**Loss of Normal Workspace:**

If for some reason your Laboratory experiences a loss of your normal workspace, which of the following will the Laboratory do? (Indicate all that apply; please elaborate below.)

Backup lab materials in remote location

Request grantor to approve project delay

Defer operations until space restored

A strategy needs to be developed

Not applicable

Other strategy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reduce or prioritize services

Work at home

Work at alternate site (on-campus)

Work at alternate site (off-campus)

Make advance agreement to share space

Backup vital records in remote location

Details of Loss of Normal Workplace Plan\*:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Please also indicate if your Laboratory has any existing agreements with other facilities for use as alternate workspaces in the event of a disruption, and with which facilities.

**Loss of Utility:**

If for some reason your Laboratory experiences a loss of utility (power, HVAC, water, etc.), which of the following will the laboratory do? (Indicate all that apply; please elaborate below.)

Backup lab materials in remote location

Request grantor to approve project delay

Defer operations until space restored

A strategy needs to be developed

Not applicable

Other strategy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reduce or prioritize services

Work at home

Work at alternate site (on-campus)

Work at alternate site (off-campus)

Make advance agreement to share space

Backup vital records in remote location

List lab equipment that is dependent on utilities and describe your back up plan:

|  |  |  |
| --- | --- | --- |
| Utility | Equipment | Back Up Plan |
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**Loss of Key Personnel:**

If for some reason your Laboratory experiences a loss of key personnel, which of the following will the Laboratory do? (Indicate all that apply; please elaborate below.)

Reduce or prioritize services

Defer operations until staff available

Use overtime/comp time

Reassign staff

Borrow staff from other laboratories

Borrow staff from other UC locations

Use vendor personnel

Hire temporary staff

Standing contract with temp agency

Transfer workload to another facility

Cross-train staff in advance

Maintain good training materials

Ensure accessibility of files/systems

A strategy needs to be developed

Not applicable

Other strategy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Specialized skills/Certificates/Licenses/training requirements:

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Details of Loss of Key Personnel Plan:

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Emergency Contact Form

***Instructions:*** *List key emergency contacts on the worksheet below. Give a copy to everyone on your team.*

|  |  |
| --- | --- |
| **[RESEARCH UNIT OR LAB NAME]** | |
| Primary Location (Building & Room No.): | |
| Street Address: | |
| Information Current As Of: [DATE] | |
| **Principal Investigator:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **Laboratory Manager or Senior Researcher:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **Lead Administrator:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **Business Manager:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **Facilities Manager:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **EH&S Safety Advisor:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **IT Specialist:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **[Other Title]:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **[Other Title]:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **[Other Title]:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **[Other Title]:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **[Other Title]:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |
| **[Other Title]:**  Name:  Email: | Business Phone:  Cell Phone:  After Hours Phone: |

Specialized Supplies Worksheet

Part A

***Instructions:*** *List all of the* specialized supplies used by your department or unit. Create an Excel spreadsheet if your list is extensive.

|  |  |  |  |
| --- | --- | --- | --- |
| **Specialized Supplies Worksheet** | | | |
| **Item** | **Vendor / Supplier** | **Account Number** | **Special Instructions** |
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Specialized Supplies Worksheet

Part B

***Instructions:*** *List all of the essential vendors used by your department or unit. Create an Excel spreadsheet if your list is extensive.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Essential Vendors** | | | |
| **Company Name** | **Description** | **Contact Name** | **Contact Info** |
|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |
|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |
|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |
|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |
|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |
|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |
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|  |  |  | Business Phone:  Cell Phone:  Email:  After Hours #: |

Vital Documents Worksheet

Part A

***Instructions:*** *List Vital Documents and where they are backed up. If your list is extensive, create an Excel spreadsheet with the information.*

|  |  |  |
| --- | --- | --- |
| **Vital Documents Worksheet** | | |
| **Document** | **Primary Location** | **Backup Location** |
| Example: List of equipment vendors with after-hours emergency contact information | SharePoint – emergency procedures folder | Copy on USB drive kept by business manager |
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Vital Documents Worksheet

Part B

***Instructions:*** *Use to document how your computer drives, files, and folders are backed up.*

|  |  |  |
| --- | --- | --- |
| **Drives, Files, Folders** | | |
| **Drives, Files, and Folders** | **How backed up and how often** | **Who to contact to access backup copies** |
| **Shared files on department server**  (public files that all staff can access) |  |  |
| **Restricted department files and documents**  (only accessible to selected staff) |  |  |
| **Files and documents on individual staff computers** |  |  |
| **Department file server** |  |  |
| **Other files or documents** |  |  |
| **Other files and documents** |  |  |

Research Continuity Self-Assessment

Use the following questions to evaluate the effects a disruption would have on your lab or research space. Disruptions could range from a building fire, to a sprinkler leak, hard drive crash, or loss of regular workforce due to sickness. What steps would you take to protect and sustain your research?

|  |  |  |
| --- | --- | --- |
| **Topic** | **Question** | **Answer** |
| Communications | Do you have and distribute a contact list of all important people who might need to be in contact with each other after a disruption? | Yes  Partially/Somewhat  No  Don’t Know  Does not apply  Comments: |
| Backup of Research Data | Do you back up your important research and instructional documents & data in a different location so that they are retrievable in the event their primary location such as a server, office, or computer is destroyed? | Yes  Partially/Somewhat  No  Don’t Know  Does not apply  Comments: |
| Availability of resources used in research | Have you made arrangements to protect your research in the event normal service providers, materials, and/or utilities, are not available? For example, coping with the loss of refrigeration, loss of HVAC, etc. | Yes  Partially/Somewhat  No  Don’t Know  Does not apply  Comments: |
| Alternate Location | If a disaster forced your building to close for lengthy repairs, are you able to conduct at least part of your research from another remote location? This could include having a collaborator in a different region who can be a backup for you. | Yes  Partially/Somewhat  No  Don’t Know  Does not apply  Comments: |

Final Notes:

Use this space to indicate any additional information deemed important to your Laboratory’s Continuity Plan under limited planning time.

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For any questions regarding the continuity planning process, please contact the Campus Business Continuity Manager:

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