

**New Mexico State University**  
**All Hazards - Continuity of Operations Plan (COOP)**  
 (Template available at <http://safety.nmsu.edu> )

**Instructions:** To be better prepared, all NMSU departments and units may use this form to complete a Continuity of Operations Plan (COOP) - to describe how your department will operate during an emergency and recover afterwards to be fully operational. This is your Plan; feel free to augment this template to meet your needs. For guidance and more information, see the NMSU Emergency Management Planning website at <http://www.nmsu.edu/~safety/emergency.htm> or contact Katrina Doolittle, Environmental Health & Safety Director at 646-3327, [kadoolit@nmsu.edu](mailto:kadoolit@nmsu.edu) .

<b>Department/Unit</b>			
	<b>Developer</b>		<b>Date Plan Updated</b>
<b>Plan Development</b>			
<b>Head of Operations</b>	<b>Name</b>	<b>Phone Number</b>	<b>Alt Phone Number</b>
<b>Email address</b>			

**A: Background Information for Emergency Planning**

No one can predict when an emergency might happen or how severe it will be. It is prudent to plan for one, especially since these plans can be applied to any major emergency that could threaten the health and safety of the campus community or disrupt University programs and essential operations. This plan should address any kind of emergency that is severe enough to impact the NMSU community including an infectious disease epidemic, severe weather events, fires or explosions, hazardous materials releases, extended utility outages, floods, terrorism or mass casualty events.

In the event of an emergency, NMSU will have four objectives:

- Protect life and health
- Safeguard our critical infrastructure (support, facilities and operations)
- Continue functions essential to university operations
- Resume normal teaching, research and service operations as soon as possible

**B: Your Department's Objectives**

Considering your department's unique mission, describe your teaching, research and service objectives:

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**C: More Information Regarding Your Department**

Please note below information for your department's contact.

	Name	Phone Number	email
<b>COOP Contact</b>			
<b>Email address</b>			
<b>Dept. locations</b>			

Please indicate below the principle nature of your department's operations (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Instruction         | <input type="checkbox"/> Student life support    |
| <input type="checkbox"/> Laboratory research | <input type="checkbox"/> Research support        |
| <input type="checkbox"/> Other research      | <input type="checkbox"/> Facilities support      |
| <input type="checkbox"/> Administration      | <input type="checkbox"/> Other (describe): _____ |

**D: Emergency Communication Systems**

All NMSU employees are responsible for keeping informed of emergencies by monitoring news media reports, NMSU's web home page, by calling the NMSU Emergency Hotline (505-646-1000), email and phone alert messages. To rapidly communicate with your employees in an emergency, we encourage all departments to prepare and maintain a call tree.

Note below the system(s) you will use to contact your employees in an emergency. Departments should identify multiple communication systems that can be used for backup, after hours, when not on campus, or for other contingencies.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Phone             | <input type="checkbox"/> Email                   | <input type="checkbox"/> Text messaging |
| <input type="checkbox"/> Call tree         | <input type="checkbox"/> Departmental web site   | <input type="checkbox"/> Pager          |
| <input type="checkbox"/> Instant messaging | <input type="checkbox"/> Other (describe): _____ |   |

**E: Emergency Access to Information and Systems**

If access to your department's information and systems is essential in an emergency, describe your emergency access plan below. This may include remote access (or authorization to allow remote access), contacting IT support, Blackboard, off-site data backup, backup files on flash drives, hard copies, Blackberry/Treo or use of alternate email systems (e.g., Yahoo). Identify what critical data and records are backed up, whether the back up is stored on-site or off-site. Simulate a failure scenario that tests the ability to recover "lost" critical data. Describe how your department will respond to the destruction of critical data. List essential functions that will need to have remote access to systems and individual's authorized to perform temporary but critical "work from home".

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**F: Your Department's Essential Functions**

Below list your department's functions that are essential to operational continuity and/or recovery. Identify the position title which is responsible for each essential function.

Identify primary personnel and alternate personnel and make sure that alternates are sufficiently cross-trained to assume responsibilities.

<b>Essential Function:</b>			
<b>Essential Position Title:</b>			
	<b>Primary</b>	<b>Alternate</b>	<b>Second Alternate</b>
<b>People Responsible</b>			
<b>Phone Numbers</b>			
<b>Essential Function:</b>			
<b>Essential Position Title:</b>			
	<b>Primary</b>	<b>Alternate</b>	<b>Second Alternate</b>
<b>People Responsible</b>			
<b>Phone Numbers</b>			
<b>Essential Function:</b>			
<b>Essential Position Title:</b>			
	<b>Primary</b>	<b>Alternate</b>	<b>Second Alternate</b>
<b>People Responsible</b>			
<b>Phone Numbers</b>			
<b>Essential Function:</b>			
<b>Essential Position Title:</b>			
	<b>Primary</b>	<b>Alternate</b>	<b>Second Alternate</b>
<b>People Responsible</b>			
<b>Phone Numbers</b>			

Sections F and G contain the list of your department's key personnel and leaders - those responsible for the above essential functions. The Head of Operations and each primary person listed in an essential position are your department's primary **Essential Personnel**. In an emergency, essential personnel are expected to report to work unless directed by supervisor or public safety authorities not to report for health and safety reasons.

## G: Your Department's Leadership Succession

List the people who can make operational decisions if the head of your department or unit is absent.

	Name	Phone Number	Alt Phone Number
Head of Operations			
First Successor			
Second Successor			
Third Successor			

## H: Key Internal (Within NMSU) Dependencies

All NMSU departments rely on ICT, Payroll, Purchasing, Business & Finance, Fire and Police, Human Resources and Office of Facilities & Services. List below the other products and services upon which your department depends and the internal NMSU departments or units that provide them.

Dependency (product or service) :	
Provider (NMSU department):	
Dependency (product or service) :	
Provider (NMSU department):	
Dependency (product or service) :	
Provider (NMSU department):	
Dependency (product or service) :	
Provider (NMSU department):	
Dependency (product or service) :	
Provider (NMSU department):	

## I: Key External Dependencies

List below the products, services, suppliers and providers upon which your department depends. We recommend that you encourage them to prepare continuity of operations plan.

Dependency (product or service) :		
	<b>Primary</b>	<b>Alternate</b>
Supplier/Provider		
Phone Numbers		
Dependency (product or service) :		
	<b>Primary</b>	<b>Alternate</b>
Supplier/Provider		
Phone Numbers		

<b>Dependency</b> (product or service) :		
	<b>Primary</b>	<b>Alternate</b>
<b>Supplier/Provider</b>		
<b>Phone Numbers</b>		
<b>Dependency</b> (product or service) :		
	<b>Primary</b>	<b>Alternate</b>
<b>Supplier/Provider</b>		
<b>Phone Numbers</b>		

### J: Mitigation Strategies

Considering your objectives, dependencies and essential functions, describe below the steps you can take now to minimize the impact of various types of crises on your operations. For example, you may wish to **stock up on your critical supplies and develop contingency work-at-home procedures**. This may be the most important step of your emergency planning process. Formulation of your mitigation strategies may require reevaluation of your objectives and functions.

### K: Exercising Your Plan & Informing Your Staff

Share your completed Plan with your staff. Hold exercises to test the Plan and maintain awareness. Note below the type of exercises you will use and their scheduled dates.

- |  |   |
|--|---|
| <input type="checkbox"/> Staff orientation meeting     | <input type="checkbox"/> Emergency communication test     |
| <input type="checkbox"/> Call tree drill               | <input type="checkbox"/> Off site information access test |
| <input type="checkbox"/> Tabletop exercise             | <input type="checkbox"/> Unscheduled work at home day     |
| <input type="checkbox"/> Interdepartmental exercise    | <input type="checkbox"/> Emergency assembly drill         |
| <input type="checkbox"/> Other drill (describe): _____ |   |

<b>Exercise Dates</b>
<b>Staff Distribution Date</b>

### L: Recovery

Describe your plan to fully resume operations as soon as possible after the crisis has passed. Identify and address resumption/scheduling of normal activities and services, work backlog, resupply of inventories, absenteeism, the use of earned time off, and emotional needs.

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**M: Special Considerations for Your Department**

Describe here any additional or unique considerations that your department may face in an emergency.

**N: For Events Impacting the Region consider Home Emergency Planning for Individuals and Families**

Employees, students and their families should plan for any type of emergency that could impact them in their home, apartment or residence hall. Don't wait—an emergency can occur at any time. Past experience has taught us that employees may not show up for work if they are concerned for the safety and security of their families. We recommend that your employees receive the following information, available on the HHS Pandemic website at [http://www.pandemicflu.gov/health and the Ready.gov](http://www.pandemicflu.gov/health_and_the_Ready.gov) web link.

- Guide for Individuals and Families
- Family Health Information Sheet
- Planning Checklist for Individuals and Families
- Emergency Contacts Form

**O: COOP Submission**

Thank you for completing your department's All Hazards Continuity of Operations Plan (COOP). Please submit this Plan to your Dean or Vice President for approval and identification of essential positions within your department/unit.

Dean/VP name:	Title:
Dean/VP signature:	Date submitted:

Send an electronic copy of this CoOP to [kadoolit@nmsu.edu](mailto:kadoolit@nmsu.edu)