

Systemwide Emergency Management Status Report

December 2014

Prepared by

UCOP Risk Services (OPRS)

I. Introduction

This FY 2013-14 annual report is based on self-assessments completed by each of the ten campuses, and includes program executive summaries for all locations including medical centers, UCOP, Lawrence Berkeley National Lab, and Agriculture and Natural Resources Division (ANR). Campus self-assessments are benchmarked against the *National Standard on Disaster/Emergency Management and Business Continuity Programs* (National Fire Protection Association [NFPA] Standard 1600; 2013 edition). This collaboratively developed standard has been universally endorsed by the American National Standards Institute (ANSI), the 9/11 Commission, US Congress, and the federal Department of Homeland Security. The NFPA Standard represents a “total program approach” to the challenge of integrating disaster and emergency management with business continuity planning. The University remains one of only a few major higher education institutions nationwide that has voluntarily adopted this stringent standard, especially on a systemwide basis.

In conjunction with the National Standard, OPRS in coordination with the UC Emergency Management Council (EMC), has adapted ‘The Joint Commission’ (formerly JCAHO) healthcare accreditation quantitative ‘scoring framework’ methodology to evaluate program performance. The Joint Commission is a recognized international leader in standardized performance measurement, and the active participation and advice of our medical center colleagues led us to adopt this approach. In order to effectively adapt this performance measurement system, the Emergency Management Council developed a NFPA 1600 Standard benchmarking guide that defines specific measurable performance criteria for what constitutes varying levels (‘partial, substantial, or complete’) of conformance with each of the Standard’s seventy (70) programmatic criteria. The comprehensive revised benchmarking guide is included for reference in **Appendix I**.

Adoption of this quantitative methodology has produced a systemwide performance measurement system that is more accurate, credible, objective, consistent, and therefore more informative and useful to both senior administration and campus program staff. OPRS strives to collaboratively support long-term demonstrable continual improvement in our emergency management programs.

The 2013 NFPA Standard revisions incrementally affected several different programmatic elements including Hazard Vulnerability Assessment; Standard Operating Procedures; and Program Maintenance and Improvement. In addition, a new Business Impact Analysis (BIA) program element was added to the Standard. The BIA is a key continuity planning element that evaluates the potential operational and financial impacts resulting from interruption or disruption of essential or critical campus-wide functions, processes, infrastructure, systems, and applications and identifies capabilities that might be needed to manage those disruptions. The BIA is used to develop recovery strategies and plans.

II. Systemwide Summary of Conformity with NFPA Emergency Management Standard Criteria

Table 1 summarizes the self-assessments for all ten Campuses. The numerical scores reflecting conformance with each programmatic criterion are defined in the following range:

0 = Non-Conforming

1 = Partially Conforming

2 = Substantially Conforming

3 = Conforming

The outline below summarizes the degree of systemwide conformity with each of the NFPA National Standard's nineteen (19) basic program elements based on each campus' self-assessments of the various criteria comprising each corresponding program element:

1. Program Management.

All (10) of the Campuses continue to conform or substantially conform with the six criteria; two (2/10) campuses remain in complete conformity with all criteria since last year.

2. Program Coordinator/Manager.

All (10) of the Campuses continue to conform or substantially conform with a single criterion; nine (9/10) campuses remain in complete conformity with the criterion since last year.

3. Compliance with University Requirements and State/Federal Laws.

All (10) of the Campuses continue to conform or substantially conform with the two criteria; (8/10) campuses now completely conform with all criteria, an improvement of two (+20%) since last year.

4. Finance and Administration.

Most (7/10) of the Campuses continue to conform or substantially conform with the four criteria; two (2/10) campuses remain in complete conformity with all criteria since last year.

5. Planning and Design Process.

All (10) of the Campuses continue to conform or substantially conform with the five criteria; two (2/10) campuses remain in complete conformity with all criteria since last year.

6. Hazard Vulnerability Assessment.

Nearly all (9/10) of the Campuses continue to conform or substantially conform with the five criteria; two (2/10) campuses remain in complete conformity with all criteria.

7. Business Impact Analysis.

One (1/10) Campus now conforms with the four criteria, an improvement of one (+10%) campus since last year; six (6/10) campuses now partially conform with the criteria, an improvement of two (+20%) campuses since last year.

8. Resource Needs Assessment.

Most (8/10) of the Campuses now conform or substantially conform with the seven criteria, an improvement of one campus (+10%) since last year; one (1/10) campus now completely conforms with all criteria, an improvement of one (+10%) since last year.

9. *Incident Prevention and Hazard Mitigation.*

Nearly all (9/10) of the Campuses continue to conform or substantially conform with the four criteria; five (5/10) campuses now completely conform with all criteria, an improvement of two (+20%) campuses since last year.

10. *Crisis Communications and Public Information.*

All (10) of the Campuses continue to conform or substantially conform with the two criteria; eight (8/10) campuses remain in complete conformity with all criteria since last year.

11. *Warning, Notifications and Communications.*

All (10) of the Campuses remain in complete conformity with all three criteria.

12. *Standard Operating Procedures (SOPs).*

Most (8/10) of the Campuses continue to conform or substantially conform with the four criteria; one campus now completely conforms with all criteria, an increase of one (+10%) campus since last year.

13. *Incident Management.*

All (10) of the Campuses continue to conform or substantially conform with the eight criteria; two (2/10) campuses remain in complete conformity with all criteria since last year.

14. *Emergency Operations/Response Plan.*

All (10) of the Campuses continue to conform or substantially conform with the three criteria; four (4/10) campuses remain in complete conformity with all criteria since last year.

15. *Business Continuity and Recovery.*

Most (6/10) of the Campuses continue to conform or substantially conform with the two criteria; two (2/10) campuses remain in complete conformity with all criteria since last year.

16. *Employee Assistance and Support.*

Nearly all (9/10) of the Campuses now conform or substantially conform with the two criteria, an improvement of one (+10%) campus over last year; four (4/10) campuses now completely conform with all criteria, an improvement of one (+10%) campus since last year.

17. *Training and Education.*

Most (8/10) of the Campuses continue to conform or substantially conform with the four criteria; four (4/10) campuses remain in complete conformity with all criteria since last year.

18. *Exercises and Tests.*

All (10) of the Campuses continue to conform or substantially conform with the two criteria; seven (7/10) campuses remain in complete conformity with all criteria since last year.

19. *Program Maintenance and Improvement.*

All (10) of the Campuses continue to conform or substantially conform with the three criteria; six (6/10) campuses now completely conform with all criteria, an improvement of one (+10%) campus since last year.

NFPA Standard - Systemwide Programmatic Trends Analysis

All ten (10) campus locations reportedly conform or substantially conform with the following ten (of the nineteen total) NFPA Standard programmatic elements: program management; program coordinator/manager; compliance with University requirements and state/federal laws; planning and design process; crisis communications and public information; warning, notifications, and communications; incident management; emergency operations plan; exercises and tests; and program maintenance and improvement. In addition, nearly all (9 of 10) campus locations now reportedly conform or substantially conform with thirteen of the nineteen (68%) NFPA Standard program elements, whereas most (8 of 10) of the campuses now reportedly conform or substantially conform with sixteen of the nineteen (84%) NFPA program elements.

The greatest systemwide improvement over the last year was reported in the following three NFPA Standard program elements that showed modest increases in the number of campus locations that conform or substantially conform to the programmatic criteria: business impact analysis; resource needs assessment; and employee assistance and support. Also, a number of additional campuses reportedly achieved complete conformity over the last year with all corresponding programmatic criteria in the following six NFPA program elements: compliance with University requirements and state/federal laws; resource needs assessment; incident prevention and hazard mitigation; standard operating procedures; employee assistance and support; and program maintenance and improvement. More information on all of the NFPA Standard program elements and corresponding criteria can be found in the benchmarking guide contained in Appendix I.

**Table 1 - Campus Self-Assessments - NFPA Standard Conformity
Systemwide Emergency Management Status Report
December 2014**

	Berkeley	Davis	Irvine	UCLA	Merced	Riverside	San Diego	UCSF	Santa Barbara	Santa Cruz
Program Management										
Leadership commitment and resources	3	3	3	3	3	2	3	3	3	3
Program review/support committee	3	3	3	3	3	3	3	3	3	3
Executive policy and enabling authority	2	3	3	3	3	3	3	3	3	3
Program scope/goals/perf objectives/metrics	3	3	3	2	2	2	3	3	2	3
Prioritized budget and schedule/milestones	3	3	2	2	2	2	3	3	2	3
Establish program performance objectives	2	1	3	1	2	2	3	2	2	3
Program Coordinator/Manager										
Designated/authorized personnel	3	3	3	3	2	3	3	3	3	3
Compliance with Laws/Requirements										
UC policies/requirements	3	3	3	3	3	3	3	2	3	3
SEMS/NIMS requirements	3	3	3	3	3	3	3	3	3	2
Finance & Administration										
Develop financial/administrative procedures	1	3	3	1	2	2	3	2	3	3
Framework uniquely linked to emergency ops	1	3	2	2	2	1	3	2	3	2
Expedited fiscal decision-making procedures	1	3	2	2	2	3	3	2	3	3
Records management program	2	3	3	1	1	2	3	3	2	3
Planning & Design Process										
Planning process to develop plans/strategies	2	2	3	3	2	2	3	2	3	3
Common plan content requirements	3	2	3	1	2	3	3	3	3	3
Use 'all-hazards' approach and HVA	3	3	3	3	2	3	3	3	3	3
Strategic planning defines vision/mission/goals	3	2	3	2	2	3	3	3	2	2
Crisis management planning addresses issues	3	3	3	3	2	2	3	3	2	3
Hazard Vulnerability Assessment										
Identify/monitor hazards and probabilities	3	2	3	3	3	3	3	3	3	3
Evaluate 'all-hazards' applicable to campus	3	3	3	3	3	3	3	3	3	3
Assess campus vulnerability to all hazards	3	2	3	3	3	3	3	3	3	3
Conduct campus-wide impact analysis	3	1	2	2	1	3	3	2	2	2
Evaluate existing prevention/mitigation strategies	3	1	1	2	2	1	3	3	3	3
Business Impact Analysis										
Evaluate impacts campus functions/processes	1	0	1	3	1	2	2	2	2	0
Identify Recovery Time Objectives (RTOs)	1	0	0	3	1	2	1	2	1	0
Identify Recovery Point Objective (RPO)	1	0	0	3	1	2	1	2	1	0
Identify interdependencies and impacts	1	0	1	3	1	1	1	1	1	0
Resource Needs Assessment										
Conduct needs assessment based on HVA/BIA	1	1	1	1	1	2	3	2	2	2
Assessment considers multiple factors	1	1	1	1	2	2	3	2	2	2
Establish resource management procedures	2	3	2	1	2	2	3	2	2	3
Identify operational support facilities	3	3	3	2	2	3	3	2	3	3
Establish mutual aid/partnership agreements	3	3	3	1	2	2	3	2	3	3
Incident Prevention & Hazard Mitigation										
Develop/implement prevention strategy	3	2	3	3	3	3	3	3	3	3
Develop/implement mitigation strategy	2	2	2	3	2	3	3	3	3	3
Base strategies on HVA/experience/costs	2	1	2	2	2	3	3	3	3	3
Interim and long-term mitigation actions	3	1	2	2	2	3	3	3	3	3
Crisis Communications & Public Information										
Ability to disseminate/respond to information	3	3	3	3	3	3	3	3	3	3
Maintain crisis comm's/public info capability	3	3	3	2	3	3	3	3	3	2
Warning, Notifications & Communications										
Determine warning/notification/comm's needs	3	3	3	3	3	3	3	3	3	3
Systems are reliable/redundant/interoperable	3	3	3	3	3	3	3	3	3	3
Warning/notification/comm's protocol/procedures	3	3	3	3	3	3	3	3	3	3
Standard Operational Procedures (SOPs)										
Implement response/recovery procedures	2	2	1	1	3	2	3	3	2	2
SOPs for EH&S/property/stabilization/continuity	3	2	2	1	2	3	3	3	3	2

METRICS KEY: 0 = Non-conforming 1 = Partially Conforming 2 = Substantial Conforming 3 = Conforming

Table 1 (cont) - Campus Self-Assessments - NFPA Standard Conformity										
Systemwide Emergency Management Status Report										
December 2014										
	Berkeley	Davis	Irvine	UCLA	Merced	Riverside	San Diego	UCSF	Santa Barbara	Santa Cruz
Access controls/responder accountability/demob	2	2	2	0	2	3	3	2	3	3
Concurrent response/recovery/continuity	2	2	2	2	1	3	3	3	2	3
Incident Management										
Use ICS to manage response/recovery/continuity	3	3	3	2	3	3	3	3	3	3
Establish primary and alternate EOCs	3	3	3	3	3	3	3	3	3	3
Establish coordination procedures/policies	3	3	3	3	3	3	3	3	3	3
SOPs for damage/resource needs assessments	3	3	3	3	2	3	3	3	3	3
Incident action planning/mgmt by objectives	3	3	3	3	3	3	3	3	3	3
Establish resource management processes	1	2	3	3	3	3	3	3	2	2
Maintain current resource inventories	2	3	2	3	3	3	3	2	2	1
Manage donations/volunteers	1	2	2	0	2	3	3	1	2	3
Emergency Operations/Response Plan										
EOP defines operational responsibilities	3	3	3	3	3	3	3	3	3	3
EOP identifies protective/stabilization actions	3	3	3	3	1	3	3	2	3	3
EOP includes various required elements	2	2	3	2	2	3	3	2	3	2
Business Continuity & Recovery										
Continuity Plan has multiple required elements	2	1	2	3	2	2	1	3	2	2
Recovery Plan provides for campus restoration	1	0	1	3	2	2	2	3	2	2
Employee Assistance & Support										
Develop flexible comprehensive campus strategy	2	2	3	2	2	2	2	3	3	3
Promote family preparedness education	2	2	3	3	1	2	3	3	3	3
Training & Education										
Implement a competency-based curriculum	3	1	3	2	0	3	3	1	3	3
Identify scope and frequency of training	3	1	2	3	3	2	3	3	3	3
Train designated staff in SEMS/ICS roles	3	2	3	1	3	1	3	2	3	3
Implement campus public education program	3	2	3	2	0	2	3	3	3	3
Exercises & Tests										
Program evaluation through exercises and tests	3	3	3	3	3	2	3	3	3	3
Exercise/test design meets requirements	3	1	3	2	3	2	3	3	3	3
Program Maintenance & Improvement										
Program evaluation uses performance objectives	3	2	3	1	3	3	3	3	3	3
Reviews based on AARs/lessons learned	3	3	3	3	2	3	3	3	3	3
Establish corrective action for deficiencies	3	3	3	2	1	3	3	3	3	2
Continuous improvement process implemented	3	3	3	2	2	3	3	3	3	2

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III. ERMIS Emergency Management Key Performance Indicator (KPI)

As part of its strategic approach to managing risk, the University has created the Enterprise Risk Management Information System (ERMIS), a centralized data warehouse that serves as the data repository for risk and controls related information. ERMIS provides a high level perspective that helps systemwide stakeholders quantify and track pre-defined Key Performance Indicators (KPIs).

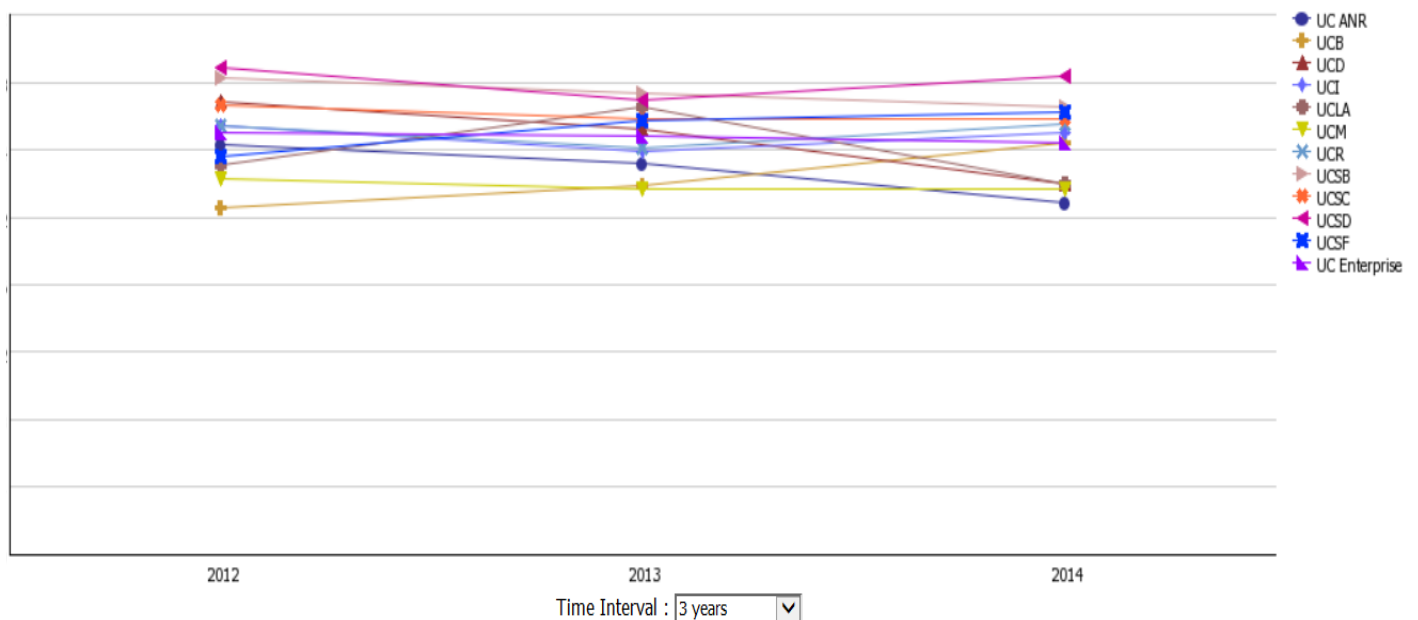
An 'Emergency Management' KPI has been developed as part of the Safety Index dashboard reporting tool. This KPI averages all of the NFPA Standard scoring metrics that campuses enter into the online NFPA survey portal to produce a single consolidated "NFPA score" for each campus. In addition to each campus KPI, there is also a University systemwide enterprise average NFPA Standard KPI based on the average scores reported at all campus locations.

As the graph below shows, the systemwide, or enterprise, KPI for conformity with all the NFPA Standard requirements has remained fairly static over the last two years, ranging from (2.44) to (2.47), a difference of only 1% over the last year. The lack of significant systemwide progress is mainly due to changes in the NFPA Standard business continuity planning requirements in 2013 that added a number of new continuity program elements that are being addressed on an enterprise level going forward.

KPI 08 - NFPA Emergency Management Standard Conformity

Location : UC ANR, UCB, UCD, UCI, UCLA, UCM, UCR, UCSB, UCSC, UCSD, UCSF,
Period 1 : FY 2012-13
Period 2 : FY 2013-14

NFPA Average Scores By Year



IV. Program Executive Summaries

The following Emergency Management program executive summaries describe the overall status of Campus and Medical Center programs as well as the Lawrence Berkeley National Lab, Office of the President (UCOP) and Agriculture and Natural Resources (ANR) Division programs. Each University location was requested to include information on significant programmatic progress, accomplishments, and developments over the last year; identification of program elements needing improvement; and major programmatic development goals or corrective actions planned for the coming year.

Berkeley

In 2013-2014, UC Berkeley facilitated a significant campus response and recovery operation in the aftermath of a campuswide electrical vault explosion and related power outage. The campus also continued to implement its five-year Emergency Management Strategic Plan (2012).

On September 30, 2013, UC Berkeley experienced a campuswide power outage that affected all buildings served by the campus electrical system. In response to the emergency, the UC Police Department (UCPD) established an Incident Command Post (ICP) at the base of UC Berkeley's campanile to coordinate response efforts. The City of Berkeley Fire Department responded to several campus incidents triggered by the loss of power, including multiple campus fire alarms and people trapped in elevators. The campus Crisis Management Team and Emergency Operations Center (EOC) were activated to support the response. During an attempt to restore power, an explosion occurred in an underground vault near California Hall, injuring three people. By midnight, power was restored to all but eleven campus buildings. Over the next eight days, Facilities Services staff worked to repair the damaged power system and were able to restore grid power to all remaining buildings within eleven days.

The Office of Emergency Management (OEM) led an After Action review of the outage/explosion by facilitating twelve debriefs across campus and preparing an After Action Report. The report, issued in February 2014, concluded with a list of corrective action items assigned to specific campus units. Within five months of the After Action Report's release, more than half of the corrective actions were completed.

In addition to the power outage response and recovery, several critical emergency preparedness initiatives were completed this year including the relocation and infrastructure development of the new campus EOC, a comprehensive update to the campus Emergency Operations Plan (EOP), enhancements to the Building Coordinator Program and key developments to the training and exercise program.

In April 2014, OEM held classroom-based Incident Command System (ICS) and EOC trainings and successfully trained 92% of EOC staff. Additionally, comprehensive standard operating procedures were developed and tested for EOC activation, set-up, and deactivation of the new campus EOC, which was relocated and enhanced in June 2013 to a seismically safer location that includes dedicated computers, phones lines, wireless access points, back-up emergency power, TVs and satellite system, and a completely restructured organizational chart and staff.

Planning developments at UC Berkeley this year also include a comprehensive update to the campus EOP, revisions to the campus Limited Emergency policy, and development of Emergency Support Function (ESF) annexes. The campus EOP was updated to align with the federal Guide for Developing High-Quality Emergency Operations Plan for Institutions of Higher Education and to reflect the campus transition to a new campus response structure and federally defined ESFs.

Emergency preparedness outreach continues to be a critical component of OEM's mission. This year, UC Berkeley launched the first-ever student-oriented preparedness plan as a mobile application using the vendor application "In Case of Crisis." This mobile app included Berkeley-specific emergency procedures, guidance, and tips.

Over the past year, considerable effort has also gone into providing better support for the campus' building coordinator program. An update to the building coordinator database was completed as well as finalization of a new building coordinator assignment process. Additionally, a real-time information sharing mechanism was developed and rolled out to building coordinators.

Enhancements to the training and exercise program include completion of a multi-year Training and Exercise Plan that sets out the purpose of the program, establishes training and exercise priorities, targets training opportunities, provides an exercise schedule and timeline, and addresses after action reporting and improvement planning. It provides a roadmap for an aggressive campus training and exercise program. During the year, OEM also conducted the campus' first continuity tabletop exercise with nine Business and Administrative units. OEM continues to lead continuity planning efforts for the campus including prepping the campus for the eventual transition to a new planning tool.

In March 2014, UC Berkeley participated in its third 'Readiness Month' and integrated the building coordinator program into the month's activities. UC Berkeley initiated 'Readiness Month' three years ago as a campus initiative to encourage units to complete a continuity plan annual review. The long-term goal was always to grow 'Readiness Month' into a UC systemwide initiative. Just three years later, with ten campuses participating, it is clear the 'Readiness Month' concept has spread across the University system with each participating campus reporting its own unique successes.

Lawrence Berkeley National Laboratory

The Lawrence Berkeley National Laboratory (LBNL) emergency management program experienced a productive year in 2013-14, with efforts aimed at solidifying its status as a comprehensive program with a commendable level of readiness. Staffing efforts for LBNL's program resulted in the hiring of an emergency manager and a hazards analyst, bringing the current dedicated emergency management program staffing to four FTE. The LBNL emergency management program is compliant with the requirements found in Department of Energy (DOE) Order (O) 151.1C, Comprehensive Emergency Management Program.

The LBNL Emergency Response Organization is comprised of the Incident Command Team (ICT), Emergency Management Team (EMT), and Emergency Oversight Team (EOT) and several Incident Command System (ICS) based support groups including Logistics, Planning, Operations, and Finance Sections. The EMT is currently being reviewed to identify necessary positions, review roles/responsibilities, and incorporate business continuity into the structure.

Several drills were conducted in 2013-14. A campuswide earthquake drill was conducted, allowing LBNL personnel the opportunity to practice both “drop, cover, and hold on” and building evacuation. Several drills and seminars were provided for Building Emergency Teams. Emergency Management staff facilitated a Federal Emergency Management Agency (FEMA) tabletop pandemic exercise with Health Services, and UCOP as well as City of Berkeley emergency management staff. Alternate Emergency Operations Center (EOC) set-up drills and EOC familiarization was conducted with the EMT prior to the annual exercise. In August 2014 (part of FY2013-14 for the federal government), LBNL conducted a full-scale exercise that included several on-site and off-site response elements. The scenario was a small radiological material release with a minor injury, later revealed to be an intentional and malicious exposure. The exercise was categorized as an ‘Operational Emergency’ and facilitated the activation of the EMT, ICT (Alameda County Fire and UCPD), the FBI, and Radiological Assistance Program (RAP) team. The exercise was rated as effective overall, identifying five strengths and three findings. The After Action Report was approved in September 2014, and subsequent corrective action planning meetings and lessons learned will be developed in 2014-15.

Training efforts for the Emergency Management Team in 2013-14 focused on *WebEOC* and Incident Action Planning. Select personnel received EOC Team training, with certain members also receiving National Incident Management System (NIMS) training. Basic Emergency Response Organization training and position-specific training has been developed for 2014-15.

In order to ensure timely emergency notifications and alerting and warning, LBNL purchased the *WARN* mass notification system. Guidance documentation for the system’s use and various emergency notification groups have already been developed, and a duty officer program has been developed and is currently being implemented.

The LBNL continuity program is being implemented using existing resources within the emergency management program. In 2013-14, a Continuity of Operations Plan (COOP) was developed and approved. The COOP also includes a pandemic planning appendix and supporting documents. Essential records were identified and evaluated in the annual full-scale exercise, and subsequently backed up in conjunction with information technology. Efforts in 2013-14 were impacted by the absence of a designated continuity manager, who was on extended leave for most of the year. The LBNL continuity program will continue to develop and improve through integration with the emergency management program.

Davis

UC Davis has continued to advance its emergency management and mission continuity program programs in 2013-14. Accomplishments during the year include an expanded event and crisis management team; enhanced training and exercises; successful management of several high profile events on campus; continued enhancement and use of the virtual Emergency Operations Center (EOC); initiation of an Emergency Operations Plan (EOP) update which led to enhanced support for the emergency management program; successful testing of the emergency alert system in spring and fall; and increased academic participation continuity planning. Nearly 100% of campus administrative units have completed *UC Ready* plans.

Additionally, a series of tabletop exercises to test *UC Ready* plans was completed. Participation in the annual exercise increased 10% over the prior year. UC Davis distinguishes itself by being the only UC campus to conduct campuswide and department-specific business continuity exercises on an annual basis.

In 2013-14 UC Davis emergency management enhanced its public website to engage all facets of the university community and developed a robust ham radio capability including the ability to directly connect to the Sacramento campus and surrounding community. Furthermore, the main UC Davis campus continued to coordinate with the Health System in Sacramento to ensure coordination of emergency management and mission continuity plans.

UC Davis' goals for 2014-15 include completing the EOP update currently underway; participating in at least one EOC exercise and engaging more units in mission continuity plan testing; enhancing the UC Davis EOC capabilities to connect all locations owned or operated by UC Davis; increasing outreach to the university community in the areas of emergency preparedness and mission continuity; continuing training of the Event and Crisis Management Team and EOC Team; and participating in the Texas A&M Engineering Extension Service (TEEX) Integrated Emergency Management Course in 2015 or 2016.

Davis Health System

The UC Davis Health System (UCDHS) emergency management program is overseen by the campus Emergency Preparedness Committee. The UCDHS emergency management program continues to excel through continuous improvement and achievements throughout the year.

This year UCDHS successfully complied with and completed all Joint Commission Emergency Management requirements. UCDHS continued to participate in the Federal Hospital Preparedness Program (HPP) and received grant funding administered through Sacramento County. UCDHS continued to provide leadership in the Sacramento County HPP Committee, the newly developed Sacramento County Healthcare Coalition, and the UC Medical Center/Stanford University emergency management cohort.

During 2013-14, UCDHS activated its Emergency Operations Plan (EOP) three times in response to actual events and twice in response to functional or full-scale exercises, including the loss of normal power, a high census event, management of a work stoppage event, mock foodborne illness, and a mock bombing event with a high number of casualties. UCDHS also conducted several tabletop exercises to test new or revised emergency plans. After Action Report findings identified successes and opportunities for improvement; planning and readiness efforts have been focused accordingly.

UCDHS emergency management sent, and will continue to send, staff to Federal Emergency Management Agency (FEMA) healthcare emergency management training courses at the Emergency Management Institute/Center for Domestic Preparedness in Anniston, Alabama. Consistent training of staff on emergency management has occurred throughout the year and will continue in order to empower staff with the necessary knowledge of emergency management and preparedness.

UCDHS achieved its goals for 2013-14. Goals for 2014-15 include continued participation in the Federal HPP grant program, development of an implementation plan and roll-out schedule for the new

business continuity planning software, and further rollout of Hospital Incident Command System training.

Irvine

In 2013-14, UC Irvine participated in the *Great ShakeOut* earthquake drill for the first time since 2008. A message was sent out a week prior to event in order to inform the campus community about earthquake preparedness and to encourage participation the day of the *ShakeOut*. On October 17, 2013 at 10:17 AM, a campuswide *zotALERT* was issued asking people to “drop, cover, and hold on” to practice earthquake safety. A follow up, “all-clear/thank you for participating”, message was sent a few minutes later. Additionally, the campus Emergency Operations Center (EOC) and the Environmental Health and Safety and Facilities Management Department Operations Centers (DOCs) activated and held tabletop exercises around the *ShakeOut* earthquake scenario. Section-specific training for EOC staff and *WebEOC* training for EOC and DOC staff was held in February and March 2014.

A DOC plan was finalized this year for the campus office of information technology. The rest of the DOCs (student affairs, housing, environmental health and safety, facilities management, and the police department) participated in various training and exercise opportunities throughout the year. The transportation and distribution services DOC is pending completion in the coming year.

The emergency services manager facilitated a workgroup that developed the campus damage assessment annex which includes a formalized process for post-earthquake building damage assessment. The workgroup created a building prioritization list for all academic, administrative, and housing buildings on campus and coordinated with the California Office of Emergency Services to provide ATC-20/Structural Assessment Program training for 45 staff members from various departments, such as design and construction services, environmental health and safety, facilities management, and housing – who will serve on the campus Rapid Building Assessment Team.

The emergency services manager also facilitated a workgroup that developed the campus care and shelter annex which includes a systematic process to establish a care and shelter site at UC Irvine. UCI renewed its care and shelter agreements with the American Red Cross to host a shelter at the Bren Events Center or the Anteater Recreation Center. The workgroup also coordinated with the American Red Cross to provide Shelter Fundamentals Training to 31 staff members from the Bren Events Center, Anteater Recreation Center, and Housing, who will serve on the campus Care and Shelter Team.

UCI continues to implement *UC Ready* among all campus departments. Over the last year, engagement in *UC Ready* improved from 87% to 98% and completion rates went from 70% to 84%. Additionally, the campus business continuity planner continues to conduct tabletop exercises with departments on campus to test their *UC Ready* plans.

Campus Search and Rescue (CSAR), UCI's version of a campus emergency response team, finished its sixteenth and seventeenth training series and continues to see strong support from the campus community. More than 300 people on campus have completed the training since its inception. Momentum continues to grow and with the increase in awareness of natural disasters, people are looking for ways to improve their level of preparedness. In the spring of 2014, four refresher training classes were offered to all past CSAR graduates. CSAR teams were activated twice in 2013 - once to

assist the UCI Police Department in searching for a missing student and once again to assist the UCI Police Department in locating an object related to an investigation.

In an effort to further increase awareness of emergency preparedness planning, UCI continues to utilize several social media sites including an emergency management blog, Facebook, Twitter, Google+ and Nixle to share both campus and personal preparedness information. Furthermore, the emergency services manager has partnered with a student group to develop an emergency mobile application for the campus.

In an effort to further enhance emergency management programs on campus, a strategic plan was developed outlining 50 key initiatives to be accomplished over the next five years (2014 – 2018). One key area of focus for UCI in the coming year will be to continue to establish the Rapid Building Assessment and CAST Teams, as well as develop new campus medical and mental health response teams to assist during a disaster. Additionally, UCI is working closely with the rest of the UC system on rolling out the new business continuity software tool. Finally, it is important to note that campus administration remains committed to developing and maintaining a thorough emergency management program and effective emergency response capabilities.

Irvine Medical Center

In 2013-14 UC Irvine Medical Center (UCIMC) conducted emergency response exercises to meet The Joint Commission requirements as well as additional tabletop and functional exercises to address internal objectives and those related to concerns of the Ebola Virus Disease outbreak in Africa. By the end of 2014 UCIMC will have participated in the National Disaster Medical System (NDMS) federal coordinating center exercise (June 12), an Infant Security exercise (July 9), CDPH Ebola tabletop exercise (October 13), *Great ShakeOut* drill (October 17), UCI Ebola tabletop exercise (October 30), a Statewide Middle East Respiratory Syndrome (MERS) and UCI Ebola functional exercise (November 20) and Orange County Health Care Agency (OCHCA) Ebola Transportation Exercise (December 9). In addition to these exercises, numerous mini exercises were conducted to test newly developed response plans related to Ebola. UCIMC also conducted meetings and demonstrations of our Ebola preparedness and processes to Orange County Leadership including Supervisor Todd Spitzer and staff on October 31 and CDC/CDPH/Cal-OSHA & OCHCA on December 2.

During the November Statewide exercise, opportunities for improvement were identified related to communication in the command center and the cascading results of those deficiencies. These are immediate areas of focused attention and will be an ongoing focus in the coming year to test the effectiveness of the changes that are already being made. Some of the improvements identified in 2013 were not utilized and gathering support to implement them as “hard wired” elements within Incident Command is in process.

We are currently working with OCHCA to repair the refrigerated Conex container the County provided for use as a mass fatality storage location and have moved our supply of evacuation stair chairs and paraslydes into our hospital building for in-close storage and immediate use if needed. Many missing County- owned emergency supplies and pieces of equipment have already been replaced and at this time only one emergency equipment item will be on the 2015-16 budget cycle. This year we worked with our Emergency Department to develop an inventory list of emergency response personal

protective equipment which the department has had in inventory and trained on but not budgeted for replacement. The equipment will now be overseen by emergency management and an ongoing line item will be included in our budget to replace the worn and expired items.

In the coming year UCIMC will be focusing on emergency management in the following areas: ensured Hospital Incident Command System (HICS)–5 Compliance, revised Emergency Management Plan; HICS command center activation and deployment; HICS communication systems and protocols; command staff training; revised Surge Plan (with biological emphasis); and related policies and procedures for each of these areas. Currently we are in the process of filling the vacant director of environmental health and safety position with a full time career staff member and will likely be onboarding the successful candidate for at least a quarter to “catch up” with all that is happening. Many of the sustainability items that were previously identified are still outstanding and still need to be acted upon. Also pending is the emergency power review to understand exactly what level of emergency power coverage is available in each of our on-site buildings.

Los Angeles

In 2013-14, UCLA Office of Emergency Management (OEM) assisted in managing several on and off campus events, both planned and unplanned. These events included labor protests and the Sunset Blvd. water main break and resulting flooding. The response to the flood presented an opportunity to exercise the emergency response system and the Emergency Operations Center (EOC) in a real world disaster lasting several days. The operation was successful and presented a plethora of lessons learned. In addition to actual events, OEM conducted a large-scale functional exercise in March for all members of the Campus Emergency Operations Group, the Emergency Management Policy Group and the Public Information Unit. As a result of lessons learned from this exercise, several improvements in technology were made for all units.

The *BruinAlert* campus mass notification system was tested quarterly. As a result of monitoring during these tests, the seventh and eighth outdoor sirens are planned to improve coverage in the northeast quadrant of campus. The campus contract for these services was renegotiated to include changing the system to a ‘software as a service’ model and adding a mobile application for download.

OEM engaged in a much more aggressive training campaign this year, conducting hazardous materials response training for first responders, observers, operations, hazardous material response technician and hazardous material incident commander. Additionally, we completed our Floor and Area Warden program and have conducted numerous external training presentations. We plan to roll this training out as an online course later this year.

Finally, OEM has engaged in an outreach campaign to ensure that all campus entities are aware of our availability as a resource for training and education. This year we conducted tabletop exercises and presentations across campus. These exercises included tabletop exercises for housing and hospitality services, events and transportation and student affairs. OEM also participated in the bi-annual tabletop exercise for high containment laboratories. Presentations were given to campus units including the Johnson Comprehensive Cancer Center, the Anderson School of Business, the College of Letters and Sciences and several smaller audiences.

Los Angeles Health System

In 2013-14 the UCLA Health System (UCLAHS) continued participation at both medical campuses in the Federal Hospital Preparedness Program (HPP), receiving grant funding administered through Los Angeles County. UCLAHS continued to provide leadership around hospital emergency management and business continuity with the Hospital Preparedness Program Advisory Committee and the Los Angeles County Healthcare Coalition. UCLAHS participated on the design team and co-sponsored the Healthcare Continuity & Recovery Workshop series for stakeholders in Los Angeles County. As Disaster Resource Center and designated Trauma Surge facility, Ronald Reagan Medical Center remains a regional resource in leading disaster planning, response and recovery efforts for the West End collaborative of hospitals and clinics in the County.

In 2014 UCLAHS received approval and began recruiting for a new grant-funded position for a disaster training specialist to focus on enhancing programs that provide disaster training and outreach to faculty, staff and the community. The Health System also continued offering its semi-annual Healthcare Community Emergency Response Team (H-CERT) training program, bringing the total number of CERT graduates to more than one hundred.

UCLAHS Emergency Management continued its focus on communication, resources and assets, safety and security, management of staff, utilities, and management of patients through the work of dedicated subcommittee members under the oversight of the Emergency Management Executive Steering Committee. Some of the many initiatives include rollout of the Desktop Alert notification system, expansion of disaster supply caches, continued evacuation training and plan development, revision of the Infectious Disease Response Plan, and Water Outage Mitigation planning. This year the Health System underwent successful Joint Commission Triennial Accreditation Surveys at both Santa Monica UCLA Medical Center and Resnick Neuropsychiatric Hospital with no negative findings under the Emergency Management Chapter.

UCLAHS responded to a number of major events in the last year including the Venice Boardwalk multi-casualty auto versus pedestrian incident as well as a significant information technology outage in August 2013; the LAX Active Shooter incident and the AFSCME labor action in November 2013; another planned AFSCME labor action in April 2014; a fire in an outlying Ophthalmology building in May 2014; several additional smaller scale information technology and utility outages; and planned events such as the Los Angeles Marathon and other mass gatherings.

Emergency/disaster exercises conducted during 2013-14 included multiple decontamination and surge drills, the 2013 Statewide Health and Medical Exercise (Infectious Disease Tabletop), the *Great ShakeOut* exercise, Disaster/Trauma Symposium and Exercise, and an inpatient evacuation drill series at both hospital campuses.

Goals for the coming year include continued participation in the Federal HPP grant program; continued rollout of the *UC Ready* program for business continuity planning; further rollout of Hospital Incident Command System training; and continued educational outreach for departmental/systemwide emergency preparedness. UCLAHS will also continue to develop and further integrate our School of Medicine and outpatient clinics, as well as continue redevelopment of the Emergency Operations Plan.

Merced

In 2013-14, UC Merced's emergency management program continues to work toward creating a culture of preparedness focused on prevention, protection, mitigation, response and recovery. UCM does this by providing training opportunities that teach personal, workplace, and classroom safety strategies.

In January 2014, UC Merced hosted a Federal Emergency Management Agency (FEMA) course - L363 Multi-Hazard Emergency Planning for Higher Education. This class was designed for teams of campus personnel who are responsible for creating, reviewing, implementing and exercising Emergency Operations Plans. The target audience for the course was people who have traditional response or strategic experience but minimal experience in emergency management planning. This three-day course included interactive presentations and class exercises coupled with numerous individual and small-group practice activities. Representatives from UC Santa Cruz, UC Santa Barbara, Cal State Stanislaus, and local allied agencies attended the course.

Training was also provided in January 2014 to UC Merced's Event Response Team. The training reinforced UCM's 'Peaceful Assembly or Protest Protocol' and the charter of the Event Response Team. Discussion centered on a simulated range of scenarios from peaceful to urgent crowd management situations. In UC Merced's short history, we have successfully exercised, planned for and participated collaboratively in crowd management situations including a capacity crowd for Michelle Obama, commencements, concerts, numerous VIP visits, student-constructed "tent cities," labor disputes, student protests in the City of Merced and peaceful gatherings exercising First Amendment rights.

In April 2014, UC Merced joined UC Irvine, UC Santa Barbara, and UC San Francisco in being *StormReady*. The UC Office of the President encourages all UC campuses to attain *StormReady* status – with this readiness campuses are better prepared to protect the campus community including property and campus assets from the onslaught of severe winter weather in California through advanced planning, education and awareness. *StormReady* mitigates liability, reduces risk, and assists the University in negotiating with underwriters.

In July 2014, Emergency Management, Risk Services and Merced City Fire partnered to host an impromptu emergency evacuation exercise for an off-campus building. The goal of the exercise was to identify the strengths/challenges of the building evacuation plan and increase the level of safety, security, and overall employee confidence during an actual event requiring an evacuation. The exercise was well received by staff and UCM will test evacuation plans of other off-site buildings in 2015.

In August 2014, Officer Brandon Thomas provided Violent Intruder Response Training to the Building Safety Coordinators and campus Emergency Operations Center team. This training is geared toward a civilian response to a violent intruder/active shooter. The program covered what civilians should be aware of prior to an incident occurring, options they can take during an incident, and what law enforcement's response will most likely be to this type of incident. The information provided was meant to be used on a daily basis, in any setting, including on campus, at work, or away from work.

In 2014-2015, UC Merced will continue to use innovative approaches to educate, train and instill emergency preparedness in alliance with planned campus growth.

Riverside

At the start of 2013-14, UC Riverside finalized its Executive Management Policy Group Crisis and Emergency Guide. This guide offers clarification on membership, policy group activation, the roles of the Chancellor, Executive Team, Policy Group, Executive Coordinator, and UC Police Department, and the meeting process during an emergency or crisis. All members of the executive level team received copies of the guide and appropriate training.

During the Fall of 2013, UC Riverside's emergency manager took a new position so an opportunity was available to re-evaluate the campus emergency program. A recruitment effort to replace the previous manager is currently underway. Several department emergency plans were completed this year as well as audit findings that departments received related to emergency issues. Still, there is more work to do in this area, and efforts in the next year will focus on evaluation of plan templates, development of critical areas and engaging the campus further in plan completion.

In 2013-14 UC Riverside continued to implement the *UC Ready* tool in developing continuity plans on campus while participating in the systemwide review of new software tools. In March 2014, UC Davis, UC Santa Cruz and UC Berkeley joined UCR in implementing UC 'Readiness Month' – a month dedicated to improving campus readiness and updating departmental continuity plans. As part of UC 'Readiness Month' efforts, 46% of campus continuity plans were updated.

Drills, training, and exercises remain a priority for the campus as evidenced by the completion of evacuation drills of state-funded buildings on campus, fire extinguisher training, smoking corridor training for all Resident Advisors and Resident Directors on campus, participation in the *Great ShakeOut* drill, and the development of online training for our Building Supervisor for Emergency Conditions (BSEC) and Building Emergency Staff (BES) program. Several disaster trainings were also completed with critical departments. Emergency staff attended training on the Cleary Act and Disaster Recovery Training through the Office of Emergency Services.

The emergency program developed Incident Action Plans and staffed the Incident Command Posts for several large campus events, including Bonfire, Block Party, HEAT music festival, Commencement, and Spring Splash festival/concert events with attendances of up to 15,000 people. Additionally, coordinated emergency response and recovery efforts were conducted for various incidents on campus, including a labor strike, Meningitis outbreak, electrical shutdown of dozens of buildings on campus and most notably a chemical explosion in a research lab. Emergency Management also responded to several campus emergencies including storms, flooding, and high-voltage power shut down on campus.

Goals for the next year include hiring an emergency manager; establishing an Emergency and Continuity Strategic Plan; developing a comprehensive training and exercise plan; solidifying the campus Building Supervisor for Emergency Conditions and Building Emergency Staff program; and rolling out the new *UC Ready* application on campus that will enable developing a campus Business Impact Analysis.

San Diego

The 2013-14 fiscal year resulted in a number of efforts to strengthen the Office of Emergency Management on the UC San Diego Campus. These efforts occurred despite the loss of the manager of this team during the first quarter of the calendar year. The completion of a recent recruitment effort has resulted in the retention of an experienced emergency manager from the San Diego County region (Operational Area) that is capable of utilizing his previous 27 years of emergency response experience. In addition, his familiarity with local emergency response resources will greatly assist the efforts of this team in the coming years.

The annual updates to the campus Emergency Operations & Incident Management Plan occurred on schedule and included briefing new personnel from the policy group and also replacing a number of retirements that occurred in July 2014. Retirements will continue to present challenges in maintaining contact information and will require the briefing of new policy group members as well as those serving in critical roles within the Emergency Operations Center. In addition, an annual review of the Campus Crisis Communication Plan resulted in significant edits that will assure that both the external and internal communications that occur during an emergency are accurate and effective.

Throughout the year a number of exercises were conducted to ensure familiarity among policy group members. In addition, a large multi-day wildland fire in the San Diego County region tested our communication methods which are customarily utilized to manage resources during such events. Tabletop exercises and functional exercises occurred on several occasions with the campus emergency response team, based within environmental health and safety, campus police, and facilities management. These included simulated responses to hazardous material spills, civil disobedience, active shooter, and building evacuations. These exercises had defined, pre-established program goals, and included tabletop exercises utilizing the elements of Standardized Emergency Management System (SEMS)/National Incident Management System (NIMS) and Incident Command System (ICS) and were concluded with post-exercise debriefings.

Each academic year, the campus welcomes thousands of new students, faculty, and staff. As such, all of them need to be oriented to the campus emergency plan, safety policies, and what to do in the event of natural or human-caused disasters. The Emergency Management Division takes great pride in speaking to every new student and their parents at a number of student orientation events. These discussions include the opportunity to register with the *Triton Alert* (MIR 3) mass notification system, which provides valuable information to our students during emergencies. Students and their family members are also offered the opportunity to register with "Alert San Diego", the local communication system which provides alerting and warning information about fires, floods, earthquakes, and other disasters that occur within the 400 square mile jurisdictional boundary of San Diego County.

The Campus Emergency Response Team (CERT) continued their efforts to recruit and train new personnel, becoming one of the largest CERT programs (315 members) in San Diego County. For the first time in the history of the UCSD CERT program, we conducted an in-service training program intended to reinforce existing CERT member skills related to triage and first aid, along with refreshing their knowledge on issues related to other less frequently utilized emergency job skills. These efforts will continue into the next year and we will build a team of trained campus volunteers, representing stakeholder interest from throughout the campus.

During the last year, emergency management staff worked with the National Weather Service and achieved the designation of *StormReady*. This is a three-year certification and one that we take great pride in accomplishing as it represents the ongoing commitment of our campus to be prepared against all hazards and threats. These efforts have enhanced the campus capabilities in our preparation, response, and recovery of weather-related events that test the infrastructure in response to such events. Following this designation, storm watch training was also provided to approximately 25 campus personnel by a meteorologist from the National Oceanic and Atmospheric Administration (NOAA).

Our business continuity planner continued to enhance our outreach activities by engaging more departments, labs, and research units in the planning process and increasing the number of completed plans. In regards to the Business Impact Analysis or Continuity and Recovery elements of the NFPA 1600 Standard, we do not believe that we are able to achieve more than partial conformity given the limitations of the current *UC Ready* tool. This tool does not allow for the integration and inclusion of a full scope Business Impact Analysis for individual departments, nor does its framework support a single campuswide plan. We have pulled out individual elements from the current tool that work towards achieving full compliance with the standards, but have taken a fairly strict and conservative approach in assessing our compliance. We have confidence that the new tool, which will be implemented by the end of the calendar year, will allow us to significantly improve our NFPA Standard compliance due to its focus on Business Impact Analysis and support for a campuswide plan.

The next year will provide the Emergency Management Team opportunities to advance additional initiatives and strengthen existing ones. In addition to the new emergency manager, the police department is being led by a new chief, and several new senior administrative positions have been filled. We continue to work closely with the Health System medical center team that also experienced the retirement of a long-term emergency manager. The campus continues to construct and add to the inventory of buildings of all types (research, housing, academic, and administrative), which will continue to highlight the importance of our Emergency Management Teams efforts.

San Diego Health System

In 2013-14, UC San Diego Health System emergency preparedness and response program met and exceeded its goals and performance standards. The performance standard to increase emergency preparedness knowledge and skill level of staff and faculty by including night and weekend shifts in 50 rounds and/or trainings was achieved. The goal to increase the number of Hospital Command Center (HCC) trained scribes to 24 persons was achieved. The goal to increase staff trained to set up and run Labor Pool was achieved at 24 persons trained. An additional goal to create and distribute 20 'Just-in-Time' cards that will support the set up and functionality of operations in the HCC was exceeded at 32 cards. These trainings and information were well received by diverse departments serving acute hospitals, clinics, and business areas. Some of these individuals ultimately served in the Command Center during one of the Hospital Command activations this year.

Ten Hospital Incident Command System (HICS) activations occurred during 2013-14. Two of these were full-scale exercises conducted with community partners. The November 2013 exercise focused on a foodborne contamination incident and the May 2014 scenario was a building collapse caused by an

earthquake that necessitated the evacuation of some departments including the neonatal intensive-care unit (NICU). Health System personnel participated in tabletop exercises in preparation for both of these events.

Actual activations occurred for floods in the hospital and clinic settings, a planned electrical outage, telephone outage and May 2014 wildfires. Communication testing continued throughout the year. A handbook was developed as an aid for administrators-on-call and house nursing supervisors to facilitate the management of the Emergency Operations Plan. Emergency preparedness and response program staff conducted over 56 training sessions and participated in an additional 29 community exercises and training classes. A Hospital Preparedness Program grant was completed that included a very broad and comprehensive statement of work.

Working with Health System subject matter experts, we have expanded the Emergency Operations Plan to include a Family Assistance Center plan and developed an operational process for suicide response including death by intentional or unintentional fall. With representation from maternal/child health, we participated in the development of the County-wide NICU Evacuation Standard including development of inventory lists to be shared among the NICU community. Four nurses from maternal/child health were sponsored to attend the California Hospital Association's 2014 Annual Disaster Conference. We also developed a business continuity improvement project which was accepted by the County of San Diego Emergency Medical Services as a Hospital Preparedness Program (HPP) project for 2014-15. This project establishes a command center location at the Center for Advanced Laboratory Medicine HCC/Department Operations Center (DOC) and includes augmented communication capability, storage and can provide support to other hospitals during crisis and recovery.

Effectiveness was achieved by exercising the Emergency Operations Plan in large-scale exercises and actual events including telephone outages, major paging dysfunction and management of a work stoppage labor event. Pre-planning for the work stoppage included involvement by emergency preparedness and response staff and contributed to the safe management of patient care as well as staff and visitor support during the work stoppage. A three-day activation of the HCC supported the Health System during the May 2014 wildfires. After Action Report items are contributing to future goals. Each of these events enabled us to identify successes and opportunities for improvement. The plan and readiness efforts have been focused accordingly.

Goals for 2014-15 include meeting the performance standard to increase knowledge and skill level of at least 200 staff and faculty in 400 and 800-MHz radio management and etiquette. The emergency preparedness reference chart will be reviewed and edited (12 cards/24 subjects). EP&R will also facilitate and conduct two trainings with the portable radiation portals through a partnership with Radiation Safety.

San Francisco

UCSF's director of homeland security and emergency management retired in October 2013. An interim director was appointed immediately in order to assure continuity of operations. Two unsuccessful recruitment efforts have been made to date; a third recruitment effort will be made. Current staff and

the interim director continue to maintain and improve the University's emergency management capability.

During 2013-14, the UCSF Police Department was re-accredited by Commission on Accreditation for Law Enforcement Agencies (CALEA) for the third time. This accreditation includes meeting both homeland security and emergency management standards.

An online Hazard Vulnerability Assessment (HVA) was created based on the current UC HVA model, enabling UCSF HVA workgroup members to participate remotely over a two week period rather than attending a group meeting. The online HVA included documentation on current risk, threats, trends and mitigation measures associated with the individual hazards for HVA workgroup members to review before submitting their assessment of the risk.

A new comprehensive campus administrative policy on Emergency Management (Policy # 550-23) was approved in 2013-14, replacing the Emergency Preparedness Policy # 550-18 revised in 1997. The new policy addresses such issues as designation of employees as Disaster Service Workers and the UC system campus designation by the State as a "Special Jurisdiction/Local Government."

A Public Safety and Emergency Management Advisory Group charter was finalized and approved by the end of 2013-14. It replaces the Chancellor's Emergency Management Steering Committee which was disbanded by the Chancellor in 2011. The Advisory Group will be convened in 2014-15 to fully comply with NFPA Standard criteria.

UCSF Homeland Security & Emergency Management developed and adopted a five-year strategic plan. Additionally, the division conducted an online customer service survey to identify UCSF student, faculty, staff and affiliate personal emergency preparedness information, training or resource needs; identify UCSF departmental emergency preparedness information, training or resource needs; and identify top-three personal and departmental preparedness needs that are within homeland security and emergency management resources to address. A plan/strategy will be formulated to meet these needs. Survey results were also tabulated and strategies developed to address the issue of the UCSF community being unaware of available resources and how to locate information about UCSF emergency management, services, and resources.

In 2013-14 UCSF began the process of inventory management of its emergency preparedness supplies by donating expiring care and shelter supplies to organizations supporting the homeless. The campus' bottled water supplier began replacing one-fourth of the water cache and this will be continued annually. UCSF secured a BullEx Fire Training system that will be used to train floor wardens, CERT team members, and interested campus faculty, staff, and students in the use of fire extinguishers for small fire suppression.

In regards to mission continuity planning, as of June 30, 2013 UCSF had identified 452 department or units with time-sensitive essential functions that may require a business continuity plan to be developed, with 451 plans (99%) entered into *UC Ready* and 446 of these plans (97%) being complete.

The following plans, forms or references were created or updated for the campus Emergency Operation Plan during 2013-14: Appendix AP - Emergency Operations Center (EOC) Activation Standard Operating Procedures, was created for Emergency Management Division staff to utilize; and Annex SC - Strike Contingency Planning. Emergency Credentials were created and distributed to approximately 500 UCSF personnel with emergency response functions.

The campus emergency training program continued in 2013-14 with trainings conducted in the following areas: Floor Warden Emergency Communication Team, First Aid/CPR/AED, CERT, Mission Continuity Planning Workshops, and EOC Incident Management Team. A *Be Smart About Safety* grant awarded to UCSF was used to fund CPR/First Aid/AED training of campus CERT members and Floor Wardens.

Extensive training of other departmental staff was conducted on the use of the *WarnMe* mass notification system for Departmental Operations Center or response team activations. Police Department dispatch staff were trained on newer features of *WarnMe* as well as ongoing proficiency training and practice sessions. Improvements to the campus mass notification system included installing 73 additional electronic display boards, bringing the UCSF total to 127 boards.

Exercises conducted in 2013-14 included the October 17 *Great ShakeOut*, the annual Select Agent tabletop exercise, and mission continuity plan tabletop exercises for multiple departments. Actual EOC activations in 2014 included ICP activations for labor actions in November 2013 and March 2014.

San Francisco Medical Center

UCSF Medical Center's (UCSFMC) emergency management has continued to excel through the implementation of consistent improvements and achievements in 2013-14.

This past year, the Hospital Incident Command System (HICS) was activated once to respond to an actual emergency incident/event that occurred at Mt. Zion involving a power outage that was resolved fairly quickly in coordination with City officials and PG&E. Due to the consistent efficacy of the HICS structure, it has been used for non-emergency planning purposes including labor action contingency planning and Ebola Virus preparedness planning. Various other medical center-wide emergencies that happened throughout the year were managed outside the auspices of HICS/Hospital Command Center (HCC) structure.

UCSFMC emergency management continues to successfully comply and complete all Joint Commission Emergency Management requirements. Emergency Management continues to work and collaborate with as well as serve as a resource to community partners such as UCSF Campus Emergency Management, City & County of San Francisco (CCSF) Department of Public Health (DPH), CCSF Department of Emergency Management (DEM), Hospital Preparedness Council (CCSF DPH), and the UC Medical Center/Stanford Emergency Management cohort. UCSFMC emergency management continues to actively participate with community partners headed by CCSF DPH and CCSF DEM in planning for Chempack, tsunami, mass casualty incidents, and Ebola response and recovery.

UCSFMC participated in various events, including Fleet Week Health & Medical Exchange with an emphasis on sharing best practices and future partnerships with the US Military in regards to mass casualty incidents and training demonstrations of the Osprey and Shock Trauma Platoon. The intent of this medical exchange is to raise awareness in our own community as well as be the champions in our organization to promote use of resources available and to understand military capabilities during a disaster and how this need can be applied. In addition, UCSFMC continued participating with our CCSF partners in various presentations and discussion-based exercises that included training of residents on emergency management.

Beyond the local/state community, emergency management has connected and collaborated with several international partners including the Government of Western Australia Department of Health – Public Health & Clinical Services Division and Sweden’s SOS delegation through the Swedish-American Chambers of Commerce of San Francisco & Silicon Valley.

UCSFMC emergency management participated in various exercises with our community partners including the Golden Guardian Exercise in Spring 2014 focusing on functional areas in an earthquake scenario, and the Statewide Medical Health Exercise in Fall 2014 focusing on Points of Dispensing (POD)/Distribution POD in the context of an Anthrax scenario. Two Ebola Virus tabletop exercises were conducted along with a functional drill to test the functions of communications, utilities, patient care, staff responsibilities, security and safety, and resources and assets during suspected/confirmed cases of Ebola.

UCSFMC emergency management also participated in a regional distance-based tabletop exercise coordinated by the Radiation Injury Treatment Network, and sponsored by the US National Marrow Donor Program, United States Navy, and the American Society for Blood and Marrow Transplantation focusing upon the coordination and treatment of a radiation mass causality incidents with an emphasis on pediatric care. UCSFMC also participated again in the annual *Great ShakeOut* statewide earthquake drill, with a coordinated “drop, cover, and hold on” drill along with related activities ranging from reviewing Department Emergency Action Plans, refreshing department emergency supplies including ‘go-bags,’ reviewing personal preparedness information and offering an online earthquake quiz for staff.

The Labor Pool/Internal Volunteer website portal was launched to enable pre-planning of roles that may be needed for the Labor Pool during an emergency incident/event. This will ensure that staff resources are filled by staff that fit the skill sets needed based upon this need before, during, and after an emergency incident/event.

In preparation of the opening of the Mission Bay Hospital in February 2015 a new HCC has been built. Trainings have been conducted for all staff on emergency preparedness not only within the UCSF community but specifically at Mission Bay. Equipment purchases have been duplicated to ensure continuity of response in any emergency incident/event that may include but not limited to activation of our First Receiver Program (decontamination) as well as any evacuation procedures spearheaded by our partners in the Fire Marshal’s office. Emergency management is working closely with CCSF DEM and Mission Bay leadership on ‘Operation Move’ which will ensure a comprehensive and coordinated effort through unified command designed to minimize patient risk and operational disruption during the planned patient move between Parnassus, Mt. Zion, and Mission Bay. It is the goal and

commitment of UCSF Medical Center to ensure the utmost safety and care of patients during 'Operation Move.'

Revisions to the Emergency Operations Plan are nearly complete including the new Mission Bay Hospital as well as lessons learned from past exercises and actual emergency incidents/events. Several key policies were finalized and initiated this year including department Emergency Action Plans, emergency exercises, department emergency supplies, emergency occupancy, HICS/HCCs, First Receiver Program, and disclosure of public health information in disasters.

UCSFMC emergency management will continue to send staff to Federal Emergency Management Agency (FEMA) healthcare emergency management training courses at the Emergency Management Institute/Center for Domestic Preparedness in Anniston, Alabama. Consistent training of staff on emergency management has occurred throughout the year and will continue in order to empower staff with the necessary knowledge of emergency management and preparedness. Despite all of the accomplishments this year, there are still many initiatives to be worked on in the coming year.

Santa Barbara

Prior UC Santa Barbara annual reports have included the statements "the UCSB emergency and continuity planning program continues to enjoy strong campus leadership support" and "UCSB is partnering with the Isla Vista community to provide members of the UCSB and Isla Vista communities with disaster awareness and emergency preparedness training and response resources." These past efforts helped prepare the campus community for its responses to three Emergency Operations Center (EOC) activations in the seven-month period beginning in November 2013.

In November 2013, UCSB experienced an outbreak of four confirmed cases of 'serogroup B' meningococcal disease. UCSB and the Federal Centers for Disaster Control and Prevention (CDC) moved forward with an Investigational New Drug (IND) application to the Food & Drug Administration to use an unlicensed serogroup B meningococcal vaccine. At that time, the vaccine was licensed for use only in Europe, Canada, and Australia. The IND allowed UCSB access to the serogroup B meningococcal vaccine for those identified as being at an increased risk. More than 17,000 shots were given to UCSB students in February-May 2014. Due to legal issues as well as approvals and medical oversight by the CDC, this was not a typical flu clinic or a typical locally managed emergency event. The outbreak emphasized the partnerships of campus departments and the teamwork of all involved.

On April 5, 2014 the EOC was activated for a civil unrest event in Isla Vista (an unincorporated County area adjacent to UCSB) in the aftermath of a local unpermitted event named "Deltopia." Both of these events were primers for the events of May 23, 2014 when our community was affected by an unprecedented act of violence when an active shooter killed six UCSB students and injured thirteen (nine UCSB students) off-campus in Isla Vista. Although the life safety portion of the incident was contained within minutes by first responders, UCSB mounted a robust crisis management operation following the incident including activation of the campus EOC, a call center (located in the EOC), and a student services operation in the Student Resources Building. Four days after the incident, UCSB planned and implemented a memorial service attended by more than 22,000 people.

While these events challenged the UCSB emergency management structure, our campus responded with “Gaucho pride.” The success of our response to these events was due in part to prior training and experiences. UCSB will continue to build upon these lessons as we strengthen our “culture of emergency management.”

Santa Cruz

UCSC had two full Policy Group/ Emergency Operations Center (EOC) activations in 2013-14: a two-day campus visit by UC President Napolitano in October 2013 and the systemwide AFSCME and UAW labor action in November 2013. There was also a partial activation for an additional UAW labor action in April 2014. Several other protests and incidents were also monitored by Emergency Management staff but did not require EOC activations. UCSC Emergency Management also assisted the UC Police Department and other campus units with planning for the campus’ first major music festival – the “Edge of Eden” event – held in May 2014.

The campus conducted a critical incident training session and tabletop exercise in December 2013 facilitated by Phillip Van Saun of UCOP Risk Services. This event included campus Policy Group members and other key administrators as well as campus Police Department and mutual aid fire service and law enforcement personnel from neighboring jurisdictions. UCSC Emergency Management and other campus staff participated in the L363 Multi-Hazard Emergency Planning for Higher Education course at UC Merced in January 2014 and a county-sponsored CSTI Introduction to Emergency Management/Earthquake class in May 2014.

The UCSC business continuity planner served as an observer for Stanford University’s major stadium evacuation exercise in August 2013 as well as a facilitator for a UC Berkeley Business and Administrative Services Division tabletop exercise in February 2014. The business continuity planner also participated in a Statewide Continuity Conference in April 2014 sponsored by the Governor’s Office. The campus emergency manager and the business continuity planner both successfully completed all requirements to earn the Emergency Management Specialist certificate from the California Office of Emergency Services in February 2014.

Emergency management staff members were heavily involved throughout Spring 2014 in transition planning relating to the campus decision to disband the campus Fire Department and contract with the City of Santa Cruz for staffing of campus fire services. Plans were initiated to reorganize the emergency management, business continuity, and campus fire marshal functions into a new Office of Emergency Services that went into effect in July 2014. Staff from these functions moved out of the campus fire station in June 2014 in advance of this change.

Progress continues on the UCSC business continuity planning effort. To date, 83 campus units have completed plans with an additional 66 plans in progress for a total engagement rate of 90%. The campus completed its second annual ‘Readiness Month’ campaign in March 2014 and saw increased interest in continuity planning, plans completed and reviews conducted as a result. UCSC partnered with UC Davis and UC Berkeley continuity planners along with UCSC student staff, and produced a Business Continuity marketing film that can be utilized systemwide; it can be viewed online at <https://www.youtube.com/watch?v=kqoclKcB3QY>.

UCSC hosted two public safety fairs: one at McHenry Library in December 2013 and one at Quarry Plaza in April 2014. Emergency Management also conducted an overview of *WebEOC* for EOC Planning Section staff from the City of Santa Cruz in August 2013 and participated in a regional tsunami planning workshop in September 2013.

Office of the President

UCOP Risk Services (OPRS) continues to provide strategic guidance, leadership, oversight, technical assistance/information, and systemwide coordination of personnel and resources in support of the University's emergency management programs. OPRS also staffs and leads the internal crisis/emergency management function for the UCOP organization.

In 2013-14 OPRS rolled out *UCOPAlert*, a new mass emergency notification system for use in notifying UCOP staff on their personal phones or by personal email outside normal business hours about emergencies or other critical situations that affect the UCOP work environment. UCOP staff work email addresses and phone numbers are also programmed into the system. The capacity of the system was expanded to include all staff working outside of Oakland, and to accommodate future expansion if needed. Standard operating procedures, initiator instructions, and message templates were developed for use of the system in coordination with UCOP Communications. The system was successfully used to notify staff of mass transit disruptions during off-hours in order to allow staff to make alternate commuting plans into Oakland.

Led by OPRS staff, the systemwide continuity planners workgroup collaboratively developed a RFP for a new software tool that supports a major strategic paradigm shift to campuswide continuity planning. In coordination with UCOP Procurement Services, the workgroup evaluated multiple vendor responses, conducted vendor presentations, and ultimately selected the 'Fusion Framework' continuity planning tool, a product of Fusion Risk Management. This software tool, built on the powerful Salesforce.com platform, is among the leaders in its genre.

The Fusion Framework software will not only incorporate all the functionality of *UC Ready* and *UC Resilient*, it will support campuswide planning by enabling continuity planners to conduct Business Impact Analyses; quantify dependencies across departments; knit existing departmental plans into a coherent campus plan; prioritize our allocation of resources; specify and track best practices; tailor modes of planning to suit different types of units; accommodate differences between campuses and hospitals; organize and track exercises; roll up data for reports at any level of the organization; provide IT disaster recovery staff with a specialized disaster recovery tool, and provide emergency managers with a means to create OSHA-required emergency evacuation plans. The new tool will enable continuity planning staff at each location to orchestrate a new level of campuswide preparedness. It should also enable campus leadership to exert better control over the factors that determine campus readiness. OPRS continued to fund campus continuity planner positions to implement the *UC Ready* program at every campus, and provided strategic direction and guidance to senior management regarding program implementation.

Following a systemwide gap analysis conducted by the Emergency Management Council, it was found that no campus had the capability to effectively or efficiently handle multiple incoming phone calls from the campus community or general public related to a major campus emergency or crisis.

Consequently, OPRS coordinated with UCOP Procurement Services to evaluate various commercial call center services with live operator capability to address this unmet need on a systemwide basis. Following evaluation of multiple vendors, a call center provider was selected and a cost-effective contract was negotiated to leverage emergency public information services efficiently on a systemwide basis. OPRS worked with the vendor to design and implement a systemwide format that includes all UC locations. Each campus and medical center is working to integrate this new service and develop campus protocols for coordinated emergency public information between campus media relations/public affairs, emergency management, and public safety/incident management personnel. The call center service provides all UC locations with a valuable tool and capability to assist them in providing emergency or crisis-related information and referrals to the greater campus community and general public. The call center vendor has also established a dedicated UC toll-free emergency hotline number that can be used to record emergency information with roll-over to live operators if needed.

OPRS has continued to play key roles in the implementation of the Robinson-Edley report recommendations under the University's Civil Disobedience Initiative. In response to the recommendation to create specialized response teams with additional training in crowd management, mediation and de-escalation techniques at the systemwide level, OPRS worked closely with the campus Police Chiefs and California Highway Patrol (CHP) Academy to implement this concept on a systemwide basis. OPRS contracted with the CHP to provide training to UCPD Special Response Teams deployed at every campus location. Consequently, UCPD now has a specially trained group of officers at each campus who can respond to major incidents, and each campus now has members who can share their training locally to heighten the skills and awareness of all University police officers. In addition, OPRS purchased new standardized supplies and equipment for each of the campus Special Response Teams to enable them to seamlessly perform their duties either individually or collectively in the event of major systemwide events.

OPRS has deployed and manages a systemwide Mobile Satellite Radio (MSAT) system at all locations to support both emergency operations and interoperable communications in the event of conventional telecommunications systems failure. This "failsafe" satellite-based system operates independently of any ground-based communications architectures and serves as the only functional systemwide inter-campus communications system. The system can be used to coordinate inter-campus mutual aid as well as University mutual aid coordination with statewide public safety agencies via the California Office of Emergency Services (Cal-OES) "SKYMARS" mutual aid talkgroup. It can also be deployed in the field at Incident Command Posts in direct support of campus emergency operations. OPRS coordinates monthly tests of the system with all campus and medical center locations.

OPRS develops and issues a systemwide Emergency Management Status Report to senior University management every year. OPRS collaborated with the Emergency Management Council to develop a NFPA 1600 Standard benchmarking guide that defines specific quantifiable performance criteria for each of the NFPA's 70+ programmatic criteria, producing a performance management system that is more accurate, credible, objective, and consistent across all UC locations. Campus programmatic benchmarking data is automatically entered into ERMIS as a Key Performance Indicator (KPI) dashboard. The annual status report is posted online at:

[http://www.ucop.edu/risk-services/files/emergency/em annual rpt.pdf](http://www.ucop.edu/risk-services/files/emergency/em%20annual%20rpt.pdf)

OPRS maintains UCOP's functional Emergency Operations Center (EOC) and dual-use conference facility that enables UCOP to effectively direct, control, and coordinate major systemwide and UCOP emergency response and recovery efforts and support operations. Detailed EOC standard operating procedures and setup instructions were developed this year to guide designated EOC staff in establishing and operating various telecommunications, audio-visual, radio, and dedicated computer equipment located within the EOC. In coordination with UCOP Financial Management, OPRS also maintains an emergency procurement card purchasing system to enhance UCOP's ability to quickly repair/replace critical infrastructure or purchase whatever supplies and equipment needed to maintain or restore UCOP operations and facilities.

OPRS coordinates and manages the UCOP Automated External Defibrillator (AED) program. The AED program was further expanded with additional AED and portable oxygen units installed at major UCOP facilities, and the staff volunteer training program was enhanced, so now over one hundred fifty (150+) staff are currently trained and certified in CPR/AED at all major UCOP office locations. Staff training was expanded to include certified First Aid classes offered with priority given to AED/CPR trained staff and floor wardens.

OPRS continues to act as the University's systemwide liaison to the Cal-OES Statewide Emergency Planning Committee (SWEPC), State Hazard Mitigation Planning Committee, and Standardized Emergency Management System (SEMS) Technical Advisory Group. OPRS also maintains an UC Emergency Management 'Special Interest Group' with 'Virtual Command Center' capability on the FBI Law Enforcement Online secure website. OPRS maintains emergency contact information for UCOP senior executives and also manages the federal Government Emergency Telecommunications Service (GETS) priority calling program for UCOP. UCOP also participated in the *Great ShakeOut* statewide earthquake response drill for the fifth straight year.

Agriculture & Natural Resources

ANR has two primary types of facilities that are managed differently for emergency planning and response purposes.

Cooperative Extension (CE) is ANR's outreach arm, a statewide system that brings the research and education power of the University of California to people in their local communities. CE offices are located in County-owned and operated facilities. Each County or multi-County partnership is responsible for emergency planning and response within County facilities with ANR serving as a resource for the UC staff. As such, the emergency planning for CE offices defers to individual County specific plans and response activities. Both an Injury & Illness Prevention Program and an Emergency Action and Fire Prevention Plan template have been created by ANR EH&S and distributed to CE offices for their use, among other risk and safety resources.

Research & Extension Centers (REC) are University-owned and operated facilities ranging in size from 100 to 5000+ acres located in nine relatively remote rural locations across the state, with staff/faculty ranging from five to over one hundred employees. Each REC has an Emergency Preparedness, Emergency Response, and Operational Recovery Plan specific to the research activity, potential hazards, and personnel at the facility. In accordance with these plans, an incident command structure is established and defines roles to manage small-to-moderate emergencies that can be dealt with by

REC staff. For larger scale emergency situations, local public safety agencies (police, fire, etc.) would assume incident command and REC staff would have a support role to provide site and project-specific information.

A plethora of risk and safety resources are available to all ANR personnel, volunteers, guests, and office locations. Templates, such as an Injury & Illness Prevention Program and an Emergency Action and Fire Prevention Plan, have been created and distributed to ANR offices for their use, among other resources. Safety Coordinators are appointed to represent each ANR location, and facilitate the flow of environmental, health, and safety information and programs from Risk and Safety Services to all ANR locations.

The following goals for the ANR Emergency Management Program have been identified: refine ANR's crisis communication plan and guidelines; establish an Emergency Management (or Risk & Safety) Advisory Committee; arrange NIMS/ICS/SEMS training (or refresher) for key personnel; refine a standardized schedule and parameters to test and evaluate the effectiveness of emergency and continuity plans; continue to incorporate elements of emergency management and continuity planning into the checklist used for annual assessment (audit) of EH&S programs at ANR locations; and continue to work with the UCCE locations on maintaining best management practices, to ensure they coordinate emergency plans and procedures with their local County authorities.

Appendix I: Self-Assessment Benchmarking Guide for Conformity with *NFPA 1600*, 2013 Edition

<i>NFPA 1600</i> Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
<p>Chapter 4. PROGRAM MANAGEMENT.</p> <p>4.1* Leadership and Commitment.</p> <p>4.1.1 Campus leadership shall demonstrate commitment to the program to prevent, mitigate the consequences of, prepare for, respond to, maintain continuity during, and recover from incidents.</p> <p>4.1.2 Leadership commitment shall include the following:</p> <p>(1) Policies, plans, and procedures to develop, implement and maintain the program</p> <p>(2) Resources to support the program</p> <p>(3) Reviews and evaluations to ensure program effectiveness</p> <p>(4) Correction of deficiencies</p> <p>4.1.3 Campus shall adhere to policies, execute plans, and follow procedures developed to support the program.</p>	+ resources to adequately support program and corrective actions pursuant to Section 9.2	<p>Policies, plans, and procedures are in place per 4.1.2(1).</p> <p>Reviews, evaluations, <i>and</i> many corrective actions are in place per 4.1.2(3)(4).</p> <p>Resources are available to maintain and support <i>many</i> program elements, but <i>not</i> all per 4.1.2(2).</p>	<p>Policies, plans, and procedures are in place per 4.1.2(1).</p> <p>Reviews and evaluations in place, but corrective actions are limited per 4.1.2(3)(4).</p> <p>Resources very limited; only able to maintain and support a basic program per 4.1.2(2).</p>
<p>4.3* Program Committee.</p> <p>4.3.1* A program committee shall be established by the campus in accordance with its policy.</p> <p>4.3.2 The program committee shall provide input for, and/or assist in, the coordination of the preparation, development, implementation, evaluation, and maintenance of the program.</p> <p>4.3.3 Committee includes EM coordinator and others with expertise/knowledge/capabilities</p>	Committee actively provides input and/or assistance with program	An EM program advisory committee exists but does <i>not</i> actively provide input, guidance, and/or assistance (particularly for program priorities and resources).	<p>Some other type of program advisory mechanism exists or a multi-purpose committee.</p> <p>(No dedicated EM program advisory committee).</p>
<p>4.4 Program Administration.</p> <p>4.4.1 (1) Executive policy including vision, mission statement, roles and responsibilities, and enabling authority.</p>	+ vision and mission	Policy sets forth roles and responsibilities <i>and</i> enabling authority.	Policy sets forth roles and responsibilities only. (No enabling authority).
<p>4.4.1 (2)* Program scope, goals, performance objectives, and metrics for program evaluation.</p> <p>4.4.1 (7) Change management process</p>	+ change management process	Program goals, performance objectives, <i>and</i> metrics.	Program goals and performance objectives only. (No metrics).
<p>4.4.1 (4) Program budget and schedule, including milestones.</p> <p>4.4.1 (5) Program plans and procedures include anticipated cost, priority, and resources required.</p>	Dedicated EM budget with milestones	Program budget and milestones developed but budget is ad hoc/not dedicated to EM program.	Costs, priorities, and resources required identified per (5). (No EM program budget or schedule per 4.4.1(5)).
<p>5.5 Performance Objectives.</p> <p>5.5.1* Campus shall establish performance objectives for the program.</p> <p>5.5.2 Performance objectives shall address the results of the HVA and BIA.</p> <p>5.5.3 Performance objectives shall address both short-term and long-term needs as defined (5.5.4).</p> <p>5.5.4* Campus shall define terms <i>short-term</i> and <i>long-term</i>.</p>	Objectives address <i>both</i> HVA and BIA <i>and</i> address both short-term and long-term needs.	Performance objectives exist for >50% of program elements and requirements. <i>and</i> Performance objectives address results of HVA (but not BIA).	Performance objectives exist for <50% of program elements and requirements
<p>4.2* PROGRAM COORDINATOR/MANAGER.</p> <p>The program coordinator shall be appointed by the campus and authorized to develop, implement, administer, evaluate, and maintain the program.</p>	FTE = 100% Dedicated EM	FTE with ≤20% other job responsibilities.	Partial FTE or FTE with ≥50% other job responsibilities.

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
<p>4.5 COMPLIANCE WITH LAWS & AUTHORITIES.</p> <p>4.5.1* Program shall comply with SEMS/NIMS and other regulatory requirements.</p>	Fully complies all regulatory req's	>75% compliance with SEMS/NIMS metrics	>50% compliance SEMS/NIMS metrics
<p>4.5.1 Program shall comply with UCOP and Campus policies/directives (SS&EM Policy; local campus policies).</p>	Fully complies all UC req's	Complies with SS&EM Policy. >75% compliance with local policies and directives	Complies with SS&EM Policy. >50% compliance with local policies and directives
<p>4.6 FINANCE & ADMINISTRATION.</p> <p>4.6.1 Campus shall develop financial and administrative procedures to support the program before, during, and after an incident.</p> <p>4.6.4 The procedures specified above shall include:</p> <p>(1) Responsibilities for program finance authority, including reporting relationships to the program coordinator</p> <p>(2)* Program procurement procedures</p> <p>(3) Payroll</p> <p>(4)* Accounting systems to track/document costs</p> <p>(5) Management of funding from external sources</p> <p>(6) Crisis management procedures that coordinate authorization levels and control measures</p> <p>(7) Documenting financial expenditures incurred as a result of an incident and for compiling claims for future cost recovery</p> <p>(8) Identifying and accessing alternative funding</p> <p>(9) Managing budgeted and specially appropriated \$</p>	+ procedures for <i>before</i> an incident. <i>and</i> All (9) procedures are in place	Both financial <i>and</i> administrative procedures in place to support EM during and after incident. <i>and</i> At least 6/9 procedures listed in 4.6.4 are in place.	Administrative procedures in place (but <i>not</i> financial procedures). <i>and</i> At least 3/9 procedures listed in 4.6.4 are in place.
<p>4.6.2* There shall be a responsive finance and administrative framework that does the following:</p> <p>(1) Complies with the campus' program requirements.</p> <p>(2) Is uniquely linked to response, continuity, and recovery operations.</p> <p>(3) Provides for maximum flexibility to expeditiously request, receive, manage, and apply funds in a non-emergency environment and in emergency situations to ensure the timely delivery of assistance.</p>	Framework uniquely linked EM per (2) <i>and</i> Framework funds both situations per (3)	Framework in place but not uniquely linked to EM operations per (2) <i>and</i> Funding framework in place for both emergency situations and non-emergency conditions per (3)	Framework in place but not uniquely linked to EM operations per (2) <i>or</i> Funding framework does not apply to emergency situations per (3)
<p>4.6.3 Procedures are created and maintained for expediting fiscal decisions in accord with established authorization levels and (financial control measures and fiscal policy).</p>	All financial controls in place.	General authorization levels and <i>some</i> financial controls in place.	General authorization levels in place (but <i>no</i> financial controls)

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
<p>4.7 RECORDS MANAGEMENT.</p> <p>4.7.1 Campus shall develop, implement, and manage a records management program to ensure that records are available to the campus following an incident.</p> <p>4.7.2 Records management program shall include:</p> <ul style="list-style-type: none"> (1) ID of records (hard copy or electronic) vital to continue campus operations (2) Backup of records on a frequency necessary to meet program goals and objectives (3) Validation of the integrity of records backup (4) Implementation of procedures to store, retrieve, and recover records onsite or offsite (5) Protection of records (6) Implementation of a record review process (7) Procedures coordinating records access 	All (7/7) program requiremnts listed in 4.7.2 are in place.	At least 5/7 of program requirements listed in 4.7.2 are in place.	At least 3/7 of program requirements listed in 4.7.2 are in place.
<p>Chapter 5. PLANNING.</p> <p>5.1 PLANNING & DESIGN PROCESS.</p> <p>5.1.1* The program shall follow a planning process that develops strategies, plans, and required capabilities to execute the program.</p>	+ Capabilities are in place	Plans and strategies are fully developed (but <i>not</i> required capabilities)	Plans are fully developed (but <i>not</i> strategies or capabilities)
<p>6.1 Common Plan Requirements.</p> <p>6.1.1* Plans shall address the health and safety of personnel.</p> <p>6.1.2 Plans shall identify and document:</p> <ul style="list-style-type: none"> (1) Assumptions made during the planning process (2) Functional roles and responsibilities of internal and external agencies, organizations, departments, and positions. (3) Lines of authority (4) Process for delegation of authority (5) Lines of succession for the campus (6) Liaisons to external entities (7) Logistics support and resource requirements <p>6.1.4* Campus shall make sections of the plans available to those assigned specific tasks and responsibilities therein and to key stakeholders</p>	All (7/7) Plan req's listed in 6.1.2 are in place	At least 5/7 of Plan requirements listed in 6.1.2 are in place.	At least 3/7 of Plan requirements listed in 6.1.2 are in place.
<p>4.4.2 Program scope shall be determined through an "all-hazards" approach and the risk assessment.</p> <p>4.4.3 Program requirements shall be applicable to prevention, mitigation, preparedness, response, continuity, and recovery.</p>	Program scope and requiremnts cover all areas listed in 4.4.3	Program scope based on <i>both</i> all-hazards approach and HVA.	Program scope based on all-hazards approach.
<p>5.1.2 Strategic planning shall define the campus program vision, mission, and goals.</p>	+ vision included	Strategic planning defines program goals <i>and</i> mission.	Strategic planning defines program goals only
<p>5.1.5 Crisis management planning shall address issues that threaten the strategic, reputational, and intangible elements of the campus.</p>	Addresses <i>all</i> three elements.	Crisis management planning addresses <i>two</i> issues or elements listed.	Crisis management planning addresses only <i>one</i> issue or element listed.

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
<p>5.2* RISK ASSESSMENT (HVA).</p> <p>5.2.1 Campus shall conduct a risk assessment to develop required strategies and plans.</p> <p>5.2.2 Campus shall identify hazards and monitor those hazards and the likelihood of their occurrence.</p>	+ campus monitors hazards per 5.2.2	Campus has conducted a full risk assessment (HVA) per 5.2.1	Campus has identified hazards and likelihood of occurrence per 5.2.2.
<p>5.2.2.1* Hazards to be evaluated shall include:</p> <p>(1) Natural hazards (geological, meteorological, and biological)</p> <p>(2) Human-caused events (accidental and intentional)</p> <p>(3) Technologically caused events (accidental and intentional)</p>	+ Human-caused events evaluated per (2)	Natural hazards <i>and</i> technologically-caused events have been evaluated per (1) and (3)	All natural hazards have been evaluated per (1)
<p>5.2.2.2 The vulnerability of people, property, operations, the environment, and the campus shall be identified, evaluated, and monitored.</p>	+ monitored	Vulnerabilities have been identified <i>and</i> evaluated.	Vulnerabilities have been identified (but not evaluated).
<p>5.2.3 Campus shall conduct an analysis of the impacts of the hazards identified in 5.2.2 on:</p> <p>(1) Health and safety of persons in the affected area</p> <p>(2) Health and safety of personnel responding to the incident</p> <p>(3)* Continuity of operations</p> <p>(4)* Property, facilities, assets, and critical infrastructure</p> <p>(5) Delivery of campus services</p> <p>(6) Supply chain</p> <p>(7) Environment</p> <p>(8)* Economic and financial conditions</p> <p>(9) Regulatory and contractual obligations</p> <p>(10) Reputation of or confidence in the campus</p>	Analysis of impacts have been conducted on all ten (10/10) areas listed in 5.2.3.	Analysis of impacts have been conducted on at least 7/10 areas listed in 5.2.3.	Analysis of impacts have been conducted on at least 5/10 areas listed in 5.2.3.
<p>5.2.5 Risk Assessment shall evaluate the adequacy of existing prevention and mitigation strategies.</p>	Evaluation is current/ updated	Adequacy of <i>both</i> prevention and mitigation strategies evaluated	Adequacy of prevention strategies evaluated (but <i>not</i> mitigation).
<p>5.3* BUSINESS IMPACT ANALYSIS (BIA).</p> <p>5.3.1 Campus shall conduct a Business Impact Analysis.</p> <p>5.3.2 BIA shall evaluate the potential impacts resulting from interruption or disruption of individual functions, processes, and applications.</p>	+ evaluates impacts of applications.	BIA evaluates impacts of campus functions <i>and</i> processes (but <i>not</i> applications).	BIA evaluates impacts of campus functions (but <i>not</i> processes or applications).
<p>5.3.3* BIA shall identify those functions, processes, infrastructure, systems, and applications that are critical to the campus and the point in time (RTO) when the impact of the interruption or disruption becomes unacceptable to the campus.</p>	RTOs developed for ALL critical functions (ID'd in BIA)	Recovery Time Objectives (RTOs) developed for >50% of critical campus functions, processes, infrastructure, systems, and applications (identified in BIA).	BIA identifies all critical campus functions, processes, infrastructure, systems, and applications (but <i>not</i> RTO).
<p>5.3.5* BIA shall evaluate the potential loss of information and the point in time (RPO) that defines the potential gap between the last backup of information and the time of the interruption or disruption.</p>	Recovery Point Objective (RPO) determined.	Potential loss of information and potential time gaps evaluated (but <i>no</i> RPO determined).	Potential loss of information has been evaluated (but <i>not</i> RPO).

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
5.3.4 BIA shall identify dependencies and interdependencies across functions, processes, and applications to determine potential for compounding impact.	All major campus inter-dependences identified	Interdependencies identified for campus functions and processes (but <i>not</i> applications).	Interdependencies identified for campus functions (but <i>not</i> processes or applications)
5.4* RESOURCE NEEDS ASSESSMENT. 5.4.1* Campus shall conduct a resource needs assessment based on the hazards identified in 5.2 (HVA) and 5.3 (BIA).	Based on hazards from <i>both</i> HVA and BIA	Needs assessment based on all HVA hazards but <i>not</i> BIA.	Needs assessment complete but <i>not</i> based on all hazards identified in HVA or BIA.
5.4.2 The resource needs assessment shall include: (1)* Human resources, equipment, training, facilities, funding, expert knowledge, materials, technology, information, intelligence, and the time frames within which they will be needed (2) Quantity, response time, capability, limitations, cost, and liabilities	Needs assessment includes <i>all</i> items listed in (1) and (2)	Needs assessment includes <i>all</i> items listed under (1) and some items listed under (2)	Needs assessment includes most items listed under (1).
5.4.3* Campus shall establish procedures to locate, acquire, store, distribute, maintain, test, and account for services, human resources, equipment, and materials procured or donated to support the program.	Procedures in place for <i>all</i> items listed.	Procedures to manage <i>most</i> of the items listed are in place.	Procedures in place to manage <i>some</i> of the items listed are in place.
5.4.4 Facilities capable of supporting response, continuity, and recovery operations shall be identified.	+ continuity facilities	Facilities capable of supporting response <i>and</i> recovery identified.	Facilities capable of supporting only response identified.
5.4.5* The need for mutual aid/assistance or partnership agreements shall be determined; if needed, agreements shall be established and documented.	+ partnership agreements as needed	Mutual aid/assistance agreements established; need for partnership agreements determined.	Mutual aid/assistance agreements established as needed.
6.2 INCIDENT PREVENTION. 6.3 HAZARD MITIGATION. 6.2.1* Campus shall develop a strategy to prevent an incident that threatens life, property, and the environment (see Annex A.6.2.1 for strategies). 6.2.2* Prevention strategy shall be kept current using information collection and intelligence techniques. 6.2.4 Campus shall have a process to monitor the identified hazards and adjust the level of preventive measures to be commensurate with the risk.	+ campus <i>also</i> adjusts preventive measures relative to risk per 6.2.4.	Campus prevention strategy includes <i>most</i> of the (10) measures listed in Annex A.6.2.1 <i>and</i> also a process to monitor identified hazards per 6.2.4.	Campus prevention and deterrence strategies include <i>some</i> of the (10) measures listed in Annex A.6.2.1
6.3.1* Campus shall develop and implement a mitigation strategy that includes measures to be taken to limit or control the consequences, extent, or severity of an incident that cannot be prevented (see Annex A.6.3.1 for list of mitigation strategies).	+ strategy <i>also</i> includes funding mechanism	Mitigation strategy includes <i>most</i> of the (13) measures listed in Annex A.6.3.1	Mitigation strategy includes <i>some</i> of the (13) measures listed in Annex A.6.3.1
6.2.3 The prevention strategy shall be based on the results of hazard identification and risk assessment, impact analysis, program constraints, operational experience, and cost benefit analysis. 6.3.2* The mitigation strategy shall be based on the results of hazard identification and risk assessment, impact analysis, program constraints, operational experience, and cost benefit analysis.	+ prevention strategy based on the criteria listed in 6.2.3	Mitigation strategy based on <i>most</i> of criteria in 6.3.2 <i>and</i> Some type of prevention strategy also in place.	Mitigation strategy based on <i>some</i> of criteria in 6.3.2 (No prevention strategy in place).

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
6.3.3 The mitigation strategy shall include interim and long-term actions to reduce vulnerabilities.	+ Long-term actions	Mitigation strategy includes <i>only</i> interim actions	Some type of mitigation strategy is in place.
6.4 CRISIS COMMUNICATIONS & PUBLIC INFORMATION. 6.4.1* The campus shall develop a plan and procedures to disseminate and respond to requests for information to and from the following audiences before, during, and after an incident: (1) Internal audiences including employees (2) External audiences including the media, functional needs population, and other stakeholders	+ Plan and procedures include functional needs populations	Plan and procedures in place for <i>both</i> external and internal audiences including campus employees.	Plan and procedures in place for external audiences including media (but <i>not</i> internal audiences).
6.4.2* Campus shall establish and maintain a crisis communication or public information capability that includes: (1)* Central contact facility or communications hub (2) Physical or virtual information center (3) System for gathering, monitoring, and disseminating information (4) Procedures for developing and delivering coordinated messages (5) Protocol to clear information for release	All (5) capabilities listed are in place.	Capability includes at least 4/5 of items listed in 6.4.2	Capability includes at least 2/5 items listed in 6.4.2
6.5 WARNING, NOTIFICATIONS & COMMUNICATIONS. 6.5.1* Campus shall determine warning, notification, and communications needs.	Needs determined for all (3) areas listed	Warning <i>and</i> notification needs determined (but <i>not</i> communications needs)	Warning needs determined (but <i>not</i> notification or communications needs)
6.5.2* Warning, notification, and communications systems shall be reliable, redundant, and interoperable.	C&WNS are <i>also</i> inter-operable.	Both warning <i>and</i> notification systems are reliable and redundant.	Warning systems are reliable and redundant.
6.5.3* Emergency warning, notification, and communications protocols and procedures shall be developed, tested, and used to alert stakeholders potentially at risk from an actual or impending incident. 6.5.4 Procedures shall include issuing warnings through authorized agencies if required by law as well as the use of pre-scripted information bulletins or templates.	+ use of pre-scripted bulletins or templates per 6.5.4	Compliant with 6.5.3 <i>and</i> procedures to issue warnings thru authorized agencies per 6.5.4	Compliant with 6.5.3 but <i>not</i> 6.5.4
6.6 OPERATIONAL PROCEDURES (SOPs). 6.6.1 Campus shall develop, coordinate, and implement operational procedures to support the program. 6.6.2* Procedures shall be established and implemented for response to and recovery from the impact of hazards identified in 5.2.2 (HVA).	SOPs in place for response <i>and</i> recovery from <i>all</i> hazards identified in HVA.	SOPs established and implemented for response to all hazards <i>and</i> recovery from <i>major</i> hazards only.	SOPs established and implemented <i>only</i> for response to all hazards (but <i>not</i> recovery)
6.6.3* Procedures shall provide for life safety, property conservation (minimizing damage), incident stabilization, continuity, and protection of the environment under campus jurisdiction.	+ SOPs for continuity.	SOPs in place for life safety, property conservation, <i>and</i> incident stabilization, <i>and</i> protection of environment.	SOPs in place <i>only</i> for life safety and property conservation.

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
6.6.4 Procedures shall include: (1) Control of access to area affected by incident (2) Identification of personnel engaged in activities at the incident (3) Accounting for personnel engaged in incident activities (4) Mobilization and demobilization of resources	+ mobilization and demobiliztn of resources (4)	SOPs in place for access control, ID of responders, <i>and</i> personnel accountability (3)	SOPs in place <i>only</i> for access control (1) and ID of responders (2)
6.6.5 Procedures shall allow for concurrent activities of response, continuity, recovery, and mitigation.	+ continuity activities.	SOPs allow concurrent response, recovery, <i>and</i> mitigation activities.	SOPs allow for concurrent response and recovery activities <i>only</i> .
6.7 INCIDENT MANAGEMENT. 6.7.1* Campus shall use [ICS] to direct, control, and coordinate response, continuity, and recovery operations. 6.7.2 [ICS] shall describe specific organizational roles, titles, and responsibilities for each incident management function.	ICS used to manage response, recovery, <i>and</i> continuity operations	Campus uses ICS to manage <i>both</i> response and recovery operations, but <i>not</i> continuity operations.	Campus uses ICS to manage response but <i>not</i> recovery or continuity operations.
6.7.1.1* Emergency Operations Centers (EOCs) 6.7.1.1.1* Campus shall establish primary and alternate EOCs capable of managing response, continuity, and recovery operations. 6.7.1.1.2* EOCs shall be permitted to be physical or virtual. 6.7.1.1.3 On activation of an EOC, communications and coordination shall be established between Incident Command and EOC.	Primary and alternate <i>physical</i> EOCs established	Primary physical EOC established <i>and</i> virtual alternate EOC established.	Primary physical EOC has been established but <i>no</i> alternate EOC.
6.7.3 Campus shall establish procedures and policies for coordinating mitigation, preparedness, response, continuity and recovery activities. 6.7.4 Campus shall coordinate the activities specified above with stakeholders.	+ coordinate with stakeholders per 6.7.4	Procedures/policies <i>also</i> in place to coordinate continuity and recovery activities per 6.7.3	Procedures/policies in place to coordinate mitigation, preparedness, and response activities per 6.7.3.
6.7.5 Procedures shall include a situation analysis that incorporates a damage assessment and a needs assessment to identify resources to support activities.	SOPs include needs assessment	SOPs include situation analysis that incorporates damage assessment.	SOPs include situation analysis but <i>not</i> damage assessment.
6.7.6* Emergency operations/response shall be guided by an Incident Action Plan (IAP) or management by objectives.	Also uses After Action Report	Emergency operations uses formal IAP process.	Emergency operations uses management by objectives.
6.7.7 Resource management shall include the following tasks: (1) Establishing processes for describing, taking inventory of, requesting, and tracking resources (2) Resource typing or categorizing resources by size, capacity, capability, and skill (3) Mobilizing and demobilizing resources in accordance with established [ICS] (4) Conducting contingency planning for resource deficiencies	+ resource typing or categorizng per (2)	Processes established for inventorying, requesting, tracking, mobilizing, and demobilizing resources per (1) and (3). <i>and</i> Contingency planning conducted for resource deficiencies per (4).	Processes established for inventorying, requesting, tracking, mobilizing, and demobilizing resources per (1) and (3)
6.7.8 A current inventory of internal and external resources shall be maintained.	Both inventories current	Inventory of internal <i>and</i> external resources but <i>not</i> current.	Inventory of internal resources maintained (but <i>not</i> external).
6.7.9 Donations of human resources, equipment, material, and facilities shall be managed.	+ equipment and facilities	Donations of human resources <i>and</i> materials managed (but <i>not</i> equipmnt)	Donations of only human resources managed (but <i>not</i> other types of resources)

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
<p>6.8 EMERGENCY OPERATIONS/RESPONSE PLAN.</p> <p>6.8.1* [EOP] shall define responsibilities for carrying out specific actions in an emergency.</p>	+ SOPs to notify/recall key EOC staff	ICS-based EOP <i>and</i> Job aids developed (SOPs, checklists, action lists) to assist roles/responsibilities.	ICS-based EOP.
<p>6.8.2* [EOP] shall identify actions to be taken to protect people including those with access and functional needs, property, operations, the environment, and the campus.</p> <p>6.8.3* [EOP] shall identify actions for incident stabilization.</p>	+ persons with special needs	EOP <i>also</i> identifies actions to protect operations and the environment.	EOP identifies actions to protect people, property, and provide incident stabilization (but <i>not</i> operations or the environment).
<p>6.8.4 [EOP] shall include:</p> <p>(1) Protective actions for life safety (per 6.8.2)</p> <p>(2) Warning, notifications, and communication (per Section 6.5)</p> <p>(3) Crisis communication and public information (per Section 6.4)</p> <p>(4) Resource management (per 6.7.7)</p> <p>(5) Donation management (per 6.7.9)</p>	EOP includes all five (5/5) elements listed	EOP includes at least 3/5 of elements listed in 6.8.4	EOP includes at least 2/5 of elements listed in 6.8.4
<p>6.9 BUSINESS CONTINUITY & RECOVERY.</p> <p>6.9.1* Continuity Plan shall include recovery strategies to maintain critical or time-sensitive functions and processes identified during the BIA.</p> <p>6.9.2* Continuity Plan shall identify stakeholders that need to be notified; critical and time-sensitive applications; alternative work sites; vital records, contact lists, functions, and processes that must be maintained; and personnel, procedures, and resources that are needed while the campus is recovering.</p>	All Plan elements in place per <i>and</i> Complies with all <i>UC Ready</i> UCOP performance objectives.	Continuity Plan identifies <i>most</i> of the elements listed in 6.9.1 and 6.9.2 <i>and</i> >75% compliance <i>UC Ready</i> UCOP performance objectives.	Continuity Plan identifies <i>some</i> of the elements listed in 6.9.1 and 6.9.2 <i>and</i> >50% compliance <i>UC Ready</i> UCOP performance objectives.
<p>6.9.3* Recovery Plan shall provide for restoration of functions, services, resources, facilities, programs, and infrastructure.</p> <p>Recovery Plan elements (per Annex A.6.9.3):</p> <p>(1) Facilities and equipment</p> <p>(2) Critical infrastructure</p> <p>(3) Telecommunications and cyber protection systems</p> <p>(4) Distribution systems for essential goods</p> <p>(5) Transportation systems, networks, infrastructure</p> <p>(6) Human resources</p> <p>(7) Psychosocial services</p> <p>(8) Health services</p>	All eight (8/8) Recovery Plan elements listed in Annex A.6.9.3 are in place.	At least 5/8 of Recovery Plan elements listed in Annex A.6.9.3 are in place.	At least 3/8 of Recovery Plan elements listed in Annex A.6.9.3 are in place.
<p>6.10* EMPLOYEE ASSISTANCE & SUPPORT.</p> <p>6.10.1* Campus shall develop a strategy for employee assistance and support that includes:</p> <p>(1) Communications procedures</p> <p>(2)* Contact information, including emergency contact outside anticipated hazard area</p> <p>(3) Accounting for persons affected, displaced, or injured by the incident</p> <p>(4) Temporary, short-term or long-term housing, feeding and care of those displaced by an incident</p> <p>(5) Mental health and physical well-being of individuals affected by the incident</p>	All six (6/6) elements listed in 6.10.1 are in place.	At least 4/6 of elements listed in 6.10.1 are in place.	At least 3/6 of elements listed in 6.10.1 are in place.

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
(6) Pre-incident and post-incident awareness 6.10.2 Strategy shall be flexible for use all incidents			
6.10.3* Campus shall promote family preparedness education and training for employees	All Annex I req's met	Campus implements a preparedness program (per Annex I)	Campus plans a family preparedness program (per Annex I).
Chapter 7. TRAINING & EDUCATION. 7.1* Curriculum. Campus shall develop and implement a competency-based training and education curriculum that supports all employees who have a role in the program (see Annex A.7.1). 7.2 Goal of Curriculum. The goal of the curriculum shall be to create awareness and enhance the knowledge, skills, and abilities required to implement, support and maintain the program.	Includes <i>both</i> skills training as well as education curriculum per Annex A.7.1.	Campus has developed and implemented a <i>performance-based</i> curriculum with specified goals and objectives used to measure and evaluate compliance per Annex A.7.1.	Campus has developed and implemented some type of training and education curriculum.
7.3 Scope and Frequency of Instruction. The scope of the curriculum and frequency of instruction shall be identified. 7.5 Recordkeeping. Records of training and education shall be maintained as specified in Section 4.7.	+ education records per 7.5	Campus <i>also</i> maintains training records per 7.5 (but <i>not</i> education records).	Campus has identified scope of curriculum and frequency of instruction per 7.3 (but <i>no</i> recordkeeping).
7.4 [ICS] Training. Personnel shall be trained in SEMS/ICS and other components of the program to the level of their involvement. 7.6 Regulatory and Program Requirements. The curriculum shall comply with applicable regulatory and program requirements.	Campus has trained >90% of staff requiring training.	Campus has trained at least 75% of personnel who require training.	Campus has trained at least 50% of personnel who require training.
7.7* Public Education. A public education program shall be implemented to communicate: (1) Potential impact of a hazard (2) Preparedness information (3) Info needed to develop a preparedness plan	+ preparedness plan info per (3).	Campus <i>also</i> provides info on campus-specific hazards and impacts per (1) and (2).	Campuswide preparedness information program per (2).
Chapter 8. EXERCISES & TESTS 8.1 Program Evaluation. Campus shall evaluate program plans, procedures, training, and capabilities and promote continuous improvement through periodic exercises and tests. 8.1.2 Campus shall evaluate the program based on post-incident analyses, lessons learned, and operational performance. 8.1.3 Exercises and tests shall be documented. 8.2* Exercise and Test Methodology. 8.2.1 Exercises shall provide a standardized methodology to practice procedures and interact with other entities (internal and external) in a controlled setting. 8.2.2 Exercises shall be designed to assess the maturity of program plans, procedures, and strategies. 8.2.3 Tests shall be designed to demonstrate capabilities. 8.4 Exercise and Test Evaluation. 8.4.1 Exercises shall evaluate program plans, procedures, training, and capabilities to identify	Campus evaluates program through <i>annual functional or full-scale</i> exercises, or actual EOC activation in last year with AAR.	Campus evaluates program through periodic <i>functional or full-scale</i> exercises, or actual EOC activation with AAR within last two years.	Campus evaluates program through periodic <i>tabletop</i> exercises, or actual EOC activation with AAR within last three years.

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
<p>opportunities for improvement</p> <p>8.4.2 Tests shall be evaluated as either pass or fail.</p> <p>8.5* Frequency. Exercises and tests shall be conducted on the frequency needed to establish and maintain required capabilities.</p>			
<p>8.3* Design of Exercises and Tests</p> <p>8.3.1 Exercises and tests shall be designed to do the following:</p> <ol style="list-style-type: none"> (1) Ensure the safety of people, property, operations, and the environment involved in the exercise or test (2) Evaluate the program (3) Identify planning and procedural deficiencies (4) Test or validate recently changed procedures or plans (5) Clarify roles and responsibilities (6) Obtain participant feedback and recommendations for program improvement (7) Measure improvement compared to performance objectives. (8) Improve coordination between internal and external teams, organizations, and entities (9) Validate training and education (10) Increase awareness and understanding of hazards and the potential impact of hazards on the campus (11) Identify additional resources and assess the capabilities of existing resources including personnel and equipment needed for effective response and recovery (12) Assess the ability of the team to identify, assess, and manage an incident (13) Practice the deployment of teams and resources to manage an incident (14) Improve individual performance 	<p>Exercise design includes all fourteen (14/14) elements listed in 8.3.1.</p>	<p>Exercise design includes at least 8/14 elements listed in 8.3.1.</p>	<p>Exercise design includes at least 5/14 elements listed in 8.3.1.</p>
<p>Chapter 9. PROGRAM MAINTENANCE & IMPROVEMENT</p> <p>9.1* Program Reviews. Campus shall maintain and improve program by evaluating its policies, program, procedures, and capabilities using performance objectives.</p> <p>9.1.1* Campus shall improve effectiveness of the program through evaluation of implementation of changes resulting from preventive and corrective action.</p> <p>9.1.2* Evaluations shall be conducted on a regularly scheduled basis, and when the situation changes to challenge the effectiveness of the existing program.</p> <p>9.1.3 The program shall be re-evaluated when a change in any of the following impacts the campus program:</p>	<p>+ program reevaluation when any of the listed changes impact program per 9.1.3</p>	<p>Campus conducts <i>regularly</i> scheduled program evaluations that <i>also</i> include review of performance objectives and changes resulting from preventive and corrective actions per 9.1.1 and 9.1.2.</p>	<p>Campus conducts periodic program evaluations of policies and evaluation of program implementation per 9.1.1.</p>

NFPA 1600 Program Elements	Conforming	SUBSTANTIALLY Conforming	PARTIALLY Conforming
(1) Regulations (2) Hazards and potential impacts (3) Resource availability or capability (4) Campus organization (5)*Funding changes (6) Infrastructure including technology environment (7) Economic and geopolitical stability (8) Campus operations			
9.1.4 Reviews shall include post-incident analyses, reviews of lessons learned, and reviews of program performance. 9.1.5 Campus shall maintain records of its reviews and evaluations in accordance with the records management practices developed under Sect 4.7. 9.1.6 Documentation, records, and reports shall be provided to management for review and follow-up.	+ documents and reports provided to executive management per 9.1.6.	Campus reviews are conducted based on post-incident analyses, lessons learned, and program performance per 9.1.4. <i>and</i> Records of reviews/evals maintained per 9.1.5.	Campus reviews are conducted based on post-incident analyses, lessons learned, and program performance per 9.1.4
9.2* Corrective Action. 9.2.1* Campus shall establish a corrective action process. 9.2.2* Campus shall take corrective action on deficiencies identified.	+ Funding long-term solutions or taking interim actions per 9.2.2	Campus has established a corrective action process per 9.2.1 <i>and</i> Campus is implementing <i>some</i> corrective actions per 9.2.2.	Campus has established a corrective action process per 9.2.1 but is <i>not</i> implementing any corrective actions.
9.3 Continuous Improvement. Campus shall effect continuous improvement of the program through the use of program reviews and the corrective action process.	+ Corrective action process	Campus uses program reviews to implement continuous improvement.	Campus has some type of continuous improvement process in place.

*See NFPA 1600 *Annex A – Explanatory Material* for more detailed info/explanations for this element.

Scoring: Non-conforming = 0; Partially Conforming = 1; Substantially Conforming = 2; Conforming = 3

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