



IDENTIFYING AND NOTIFYING MISSION-CRITICAL VENDORS

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IDENTIFYING AND NOTIFYING MISSION-CRITICAL VENDORS



Description: This tool shares resources to help your local health department (LHD):

1. Identify vendors necessary to delivering mission-critical services.
2. Communicate with those vendors your agency's expectations of them. This will improve the probability that these vendors will meet your needs during an emergency.

If done properly, completion of this tool should result in:

- Identification of your mission-critical vendors.
- A list of the good and services you need from those vendors in order to sustain critical functions.
- Modified contract and purchase agreements that reflect the emergency needs of your agency.
- A risk assessment of critical vendors to help you better understand vulnerabilities in your supply chain.

What You Need Before Starting This Work:

- Talk with your procurement officer to find out if important vendors have already been identified. If so, find out if language regarding emergency acquisitions is already in those purchase orders and contracts.
- A list of your agency's mission-critical services, which you created in the Prioritizing Services section.
- A list of all your agency contracts and purchase orders and an understanding of which services they support.

Steps to Completion:

1. Using the master list of contracts and purchase orders and the Mission Critical Vendor Worksheet , identify vendors and contractors who provide good or services that sustain your priority 1 and priority 2 services.
2. During this process, you may find gaps in your master list of contracts and purchase orders – discovering goods and services you don't currently contract for but will need to sustain critical services in an emergency. Make a note of these goods and services, and once your list is complete, work with your procurement department to seek emergency contract bids for these goods and services.
3. Determine what you need from your mission-critical vendors to sustain your critical services. For example, do you need to be able to contact and access the vendor 24/7? Consider how mission-critical vendor expectations differ from those that support lower priority services. See Public Health – Seattle & King County's purchase order language for critical vendors as an example.
4. Meet with your procurement department to share your mission-critical vendors list and to discuss what you need from these vendors and how to best communicate these issues to the vendors.
5. Draft letters to your mission-critical vendors that clearly describe your needs and the steps you will take to modify any existing agreements to reflect these new requirements.
Warning: modification to existing purchase orders and contracts may cause the price of some goods and services to increase.
6. After delivery of your letter, follow up with a phone call or meeting with those mission-critical vendors to help clarify expectations and confirm understanding.

7. Determine a system to permanently track mission-critical goods, services and vendors. This will ensure that any time bids for those items are requested, the new expectations are worked into the bidding process.

If You Have Just a Little Time to Spend: To save time, you can just incorporate new emergency requirements into new agreements as old ones expire – instead of modifying existing agreements to add the new expectations.

If You Have More Time to Spend:

Ensure your agency's expectations align with what is best for your community. For example, if your agency requires a specific emergency good or service, but the community is best served by hospitals receiving that good or service first, don't add a clause to the contract requiring vendor to prioritize filling your agency's order first.

- You will need to ensure your vendors can actually serve you during an emergency. Survey mission-critical vendors to find out the steps they have taken to increase their business resiliency. (See Mission Critical Vendors – Business Resiliency Survey for an example.) Analyze the results to determine weaknesses. Support existing vendors in improving their emergency preparedness or find new vendors who are better prepared.
- Talk with partners about how to tackle challenges surrounding supply-chain resiliency. You can even share your agency's approach and lessons learned. This is a complex, universal issue and all can benefit from sharing knowledge surrounding it.

Where This Leads You:

- Effective supply-chain management is imperative to sustaining critical services in an emergency, and this tool only represents the tip of the iceberg. For additional ways to make your supply chain more resilient, talk to an expert.
- If your vendor is unable to provide key items in the event of an emergency, you may need to borrow needed equipment or supplies from neighboring businesses or agencies. Consider setting up memoranda of understanding (MOUs) with these organizations to ensure your agency will have access to the supplies it needs. (See the attached MOU template for a resource.)
- Assign someone the task of maintaining the mission-critical vendor list and ensuring it is available during emergencies.
- See if there is anything that can be done to improve your ability to receive and distribute critical supplies during an emergency.
- Your agency may not be directly responsible for managing all of your contracts and purchase orders. If this is the case, say your county's procurement office handles this for you, you should work with the unit responsible to ensure your new emergency acquisition requirements make it into their bidding process.

Pitfalls to Avoid:

- Don't only rely on the vendor letter. Leverage existing relationships or build new ones by also talking to your vendors over the phone or in person. This way you can make sure your vendors understand your needs as an emergency response agency.
- Don't forget to consider your mission-critical vendor's location. There are both pros and cons to having critical vendors based outside your geographic area. Pro: non-local vendors may not be impacted by the same events and may be able to better serve you in emergencies. Con: in an emergency, transportation routes may be blocked, making it difficult to get items in from outside of the immediate area. Determine how these pros and cons impact your mission-critical functions when selecting critical vendors.

How You Know You Got it Right:

- You successfully contact and receive service from a mission-critical vendor outside business hours during an emergency.
- Your vendors ask you to support them in developing emergency response plans for their businesses.

Considerations for Rural Health Departments: For rural health departments, it is especially important to talk with both your public and private sector partners to learn who has the resources you will need during an emergency. Build relationships and draft any necessary MOUs with those who could come to your aid.

TOOLS SAMPLES AND RESOURCES:

- Mission Critical Vendor List – Template
- Mission Critical Vendor List – Sample
- Sample Purchase Order Clause
- Vendors Business Resiliency Survey –Sample
- MOU Template
- FEMA Continuity Evaluation Tool – Version 6, “Budgeting and Acquisition of Resources,” “Activity 2: Through the Acquisition process...,” page 11
www.fema.gov/pdf/government/coop/cet.pdf



Liberty County Health Department
Mission-Critical Vendor List

Updated August 09

Mission-Critical Function	Vendor	Good/Service Provided	PO #	EXP Date	Account #	Phone #	Comments
Human Resource Management	Seattle Times	Advertising Services	B2096B	6/30/2009	142165		County Wide PO
Medical Clinic Visits	Evergreen Answering Service	Answering service			D39028D		This is CHS vendor, EH division uses someone else.
Fleet Maintenance		Fuel - Unleaded and Diesel gasoline					
All	Keeney's Office Plus	Office Supplies & Furniture	B2059B	12/31/2008		426-556-1736	County Wide Bid
Facilities Management		Generator installation & servicing					
Facilities Management	McLendon	Hardware Store					
Medical Clinic Visits	Slencyde, Inc.	Hazardous Waste Disposal Services	B2000B	9/30/2008		426-291-9322	PH PO
Interpretation	Language Line	Interpretation			Multiple PO #s		
Medical Clinic Visits	Buenavista Services, Inc.	Janitorial Services					Various PH Sites
Medical Clinic Visits	Washington Archives Management	Medical Records Service			B18562B		
Facilities Management	Emerald City Moving & Storage	Moving Services	B1892B	2/22/2009			County Wide PO
Medical Clinic Visits	Evergreen Nurse Consulting Service	Nurse Consulting Service			D39028D		
Emergency Operations	McKeason	Pharmaceutical Distributor					
All	FedEx Kinross	Printing Services	DVS		0000074931	207-749-0206	Phone for the downtown office - but account will work at all FedEx Kinross
Emergency Operations	Siar Rentals	Rental - Heavy Equipment					
Emergency Operations	Northwest Cascade	Rental - Portable Bathroom				1-800-502-4412	Services all of KC (out of Payallup). Current PO with other KC Dept.
Medical Clinic Visits	ESI	Security Alarms					CHS currently contracts for this but doesn't remember the name of the vendor.
Emergency Operations	Multiple Vendors	Security Services - Armed					Stacy Linnardic has vendor info
Facilities Management	J&J Landscaping	Snowplowing, salting, sidewalk clearing					CHS currently contracts for this but doesn't remember the name of the vendor.
Medical Clinic Visits	Physician Sales & Services (PSS)	Supplies - Medical	B1820B	3/31/2009			County Wide PO
Emergency Operations	Angak, Inc.	Supplies - Oxygen	B1906B	3/31/2009		207-682-2880	
Human Resource Management	StaffMark	Temp Staffing					Stacy Linnardic has vendor/contract info
Distribution Center	EMA Couriers	Transportation - Courier Services	B1825B	8/31/2009		207-624-3200	County Wide PO
Distribution Center	Northwest Transport, Inc.	Transportation - Social Needs (wheel)	B2084B	3/31/2009		254-216-5000	PH PO
All	DS Waters dba Crystal Springs	Water Services (Bottled)	B1651B	5/31/2009		1-800-492-8376	County Wide PO

The Contractor shall be available to receive and respond to Public Health's requests for temporary medical staff personnel between the hours of 8:00 am and 5:00 pm Monday through Friday (excluding County holidays). The Contractor will also provide a 24 hour contact phone number for critical *staffing* issues that take place after normal working hours and on weekends *at sites that are staffed 24/7 and* for emergency events. During a declared emergency, Contractor will make filling requests from Public Health a priority.

Business Resiliency Questions for PHSKC Critical Vendors

Name of vendor:

Good/service provided:

Phone number:

Contact person:

Date of call:

Why We Are Calling:

Ask to speak to the person in charge of emergency planning for the facility.

“My name is _____ and I work for Public Health – Seattle & King County. Our agency has a contract with you to provide _____. We depend on continued access to _____ in order to deliver critical services, such as vaccinations, restaurant inspections, Emergency Medical Services, and others. Because of some hazards facing the region this Fall, we’re reaching out to our critical vendors to learn more about your emergency plans and resiliency in the event of a disaster. We’d like to ask you some questions. This may take about 15 minutes, do you have time now or should we schedule a call for later this week?”

General Questions:

1. Do you have an Emergency Operations or Business Continuity Plan that describes how your company will continue operating during and after an event like a power outage, snow storm, flood, etc.?

Flood Preparedness Questions:

2. Do you have operations in Kent, Auburn, Renton or Tukwila (or Green River Valley)?
3. Do your delivery routes or the routes your staff travel to come to work depend on using Highway 167 through Renton, Kent or Auburn?

If answers to questions 2 & 3 is no, skip to Flu section.

4. Are you aware of the threat of flooding in South King County this Fall & Winter due to structural issues with the Howard Hanson dam?

If not, give situation overview: *“The cities of Auburn, Kent, Renton and Tukwila are facing the strong potential for devastating floods this Fall .The US Army Corps of Engineers has discovered that the Howard Hanson Dam (on the Green River) has structural integrity issues that will limit the volume of*

water that can be stored behind it. If heavy and prolonged rain occurs this flood season --- roughly October through March - many homes and businesses in the Green River Valley that do not typically see flood water could be flooded. There is a real possibility of having anywhere from 3 to 10 feet of water in the Green River Valley. In addition, the water will remain in the Valley until it is pumped out - a process that could take up to 8 weeks. Highway 167 will be impassable during this time."

5. Are you confident that your pre-planning will enable you to continue providing _____ to PHSKC in the event of flooding in the Green River Valley? Can you give a high level overview of your contingency plans?

6. We recommend you review and update your Emergency Operations and Business Continuity Plans to make sure they can help sustain your operations in the event of flooding on the Green River.

Flu Preparedness Questions:

7. Do your Emergency Operations or Business Continuity Plans address how you will continue operating if a flu pandemic hits the region?

8. Are you familiar with the continued threat of H1N1 influenza virus or "swine flu" in the region?

If not, give situation overview: "The H1N1 or swine flu virus, which emerged during the spring, continues to circulate in the United States and globally. Health officials are monitoring disease spread and paying close attention to illness patterns to help inform planning for a second wave of novel H1N1 flu this fall. The novel H1N1 strain is expected to circulate more widely during the fall, possibly as early as September, and cause a larger number of illnesses than occurred during the Spring outbreak. Public and private organizations may have to implement business continuity plans."

9. Do you have (or does your plan cover) policies and procedures in place to send ill employees home from work so they won't infect others?

10. Have you thought about (or does your plan cover) how your business will continue operating if a large number of your staff get sick with flu, or need to stay home to take care of ill family members? Can you give a high level overview of your contingency plans?

Wrap Up / Resources

"Thank you. You're a critical vendor to us. We want you to know we're relying on you to continue serving us during either a flood or a flu outbreak. Thank you for taking the time to tell us about your plans. I'm going to share the information you provided today with others in my department and we will contact you if we have follow up questions.

If you would like more information about the flood situation, contact your local office of emergency management:

- City of Kent Emergency Management (253) 856-4440
- City of Renton Emergency Management (425) 430-6400
- City of Auburn Emergency Management (253) 876-1925
- City of Tukwila Emergency Management (206) 433-1800

If you would like more information about business continuity planning, visit the Washington State Emergency Management Division's Business Portal at

www.emd.wa.gov/preparedness/prep_business.shtml

If you would like more information about H1N1 influenza, visit Public Health – Seattle & King County's website, then do a keyword search on the words "swine flu" to get to the H1N1 homepage:

www.kingcounty.gov/healthservices/health.aspx

**Agreement between
[Health Department]
and
[Assisting Organization]**

This agreement is made and entered into between [Health Department] and [Assisting Organization] as Subscribing Organizations to the Regional Disaster Plan. Both [HEALTH DEPARTMENT] and [Assisting Organization] have signed the Omnibus Legal and Financial Agreement (“Omnibus Agreement”, incorporated herein as Attachment 1) for organizations participating in the Regional Disaster Plan. This agreement is governed by the terms of the Omnibus Agreement. It defines the responsibilities of [HEALTH DEPARTMENT] as a “Borrower” and [Assisting Organization] as a “Lender” in an incident requiring vaccination and/or dispensing of medication to people in King County.

I. Introduction

In a large to catastrophic disease outbreak, bioterrorist attack, or natural disaster, [HEALTH DEPARTMENT] would serve as a primary organization for the medical response in King County, as designated in Emergency Support Function (ESF) 8 of the Regional Disaster Plan. The response could include vaccinating and/or dispensing medication to large numbers of people. [HEALTH DEPARTMENT] may need to operate temporary sites where people can be served. [Assisting Organization] owns/leases facilities that would be appropriate temporary sites. The purpose of this agreement is to designate the facilities, define the expectation to document a Security Plan, define the terms for initiation of use of the facilities, and establish the responsibilities of each organization during an incident. Unless otherwise agreed, [HEALTH DEPARTMENT] will request use of the [Assisting Organization] facilities only during a large to catastrophic incident requiring a medical response. Use of the facilities will occur based on mutual agreement, as outlined in Section IV of this agreement.

Nothing in this plan should be construed as independent of or bypassing regular emergency management procedures or the provisions of county or state declarations of emergencies.

II. Designated Facilities

[Assisting Organization] will make available facilities for use as sites for mass vaccination and/or dispensing, as specified in the Security Plan, as may be amended from time to time.

The facilities once specified, will be available for use at any time of the year and could be used 24 hours/day, if necessary.

[HEALTH DEPARTMENT] and [Assisting Organization] will prepare a Site Plan for each facility. [Assisting Organization] will notify [HEALTH DEPARTMENT] if any information recorded in either Site Plan changes.

III. Security Plan

[HEALTH DEPARTMENT] and [Assisting Organization] will cooperate on preparation of a Security Plan. The Security Plan will specify the buildings [Assisting Organization] will make available the location of each such building. The Security Plan will be updated annually. The Security Plan will reflect the following assumptions about security during an incident:

The facilities are fenced and secured by a proprietary armed security force 24 hours a day, 7 days a week. Additional security support requests for [HEALTH DEPARTMENT] will be coordinated through the [Assisting Organization] Senior Site Security and Fire Protection Manager. Depending upon the

circumstances and situation, requested additional [Assisting Organization] Security resources may or may not be available. The Security Plan will describe measures to be taken in the event that [Assisting Organization] Security resources are not available.

IV. Initiation of Use of Facilities

Use of the facilities would be triggered by a large to catastrophic disease outbreak, bioterrorist attack, or natural disaster.

[HEALTH DEPARTMENT] will request use of the designated facilities at least 24 hours prior to the start of use. [Assisting Organization] will provide confirmation to proceed as soon as possible after receiving the request.

[HEALTH DEPARTMENT] will specify as soon as possible after making the request to use the facilities:

- the affected population groups
- the triage of types of persons to be served, if applicable
- the estimated number of persons to be served
- the anticipated duration of the response
- the anticipated hours of operation

V. Responsibilities of [HEALTH DEPARTMENT] During An Incident

The Regional Disaster Plan, ESF 8, outlines the responsibilities of [HEALTH DEPARTMENT] during a large scale disaster. The outlined responsibilities include coordination of mass immunization programs. Mass dispensing programs also may be necessary. The responsibilities in this section are specific to a mass vaccination and/or dispensing program operated by [HEALTH DEPARTMENT] at the [Assisting Organization] facilities designated in Section II of this agreement.

- Set up and operate Incident Command
- Manage public information activities
- Provide laptop computers
- Administer data management activities
- Coordinate communication with city, county, state, and federal agencies, as needed
- Provide instructions for set up of facilities
- Provide all vaccines and supplies needed for operations
- Provide staffing for delivery of vaccinations and/or dispensing of medication
- Arrange for food service for staffers
- Contract for and manage provision of janitorial services
- Dispose of biomedical waste
- Conduct post utilization decontamination

VI. Responsibilities of [Assisting Organization] During an Incident

- Cancel events scheduled for facilities
- Provide internet connectivity as identified in the Site Plans
- Set up facilities based on instructions from [HEALTH DEPARTMENT]
- Initiate security measures according to the Security Plan
- Ensure availability of parking identified in the Site Plans
- Ensure availability of equipment identified in the Site Plans
- Ensure availability of refrigeration identified in Site Plans
- Arrange for maintenance of equipment identified in the Site Plans during vaccination / dispensing incidents, if needed

VII. Cost and Payment

[Assisting Organization] shall provide the facilities without rental cost to [HEALTH DEPARTMENT] . Consistent with the Omnibus Agreement, [HEALTH DEPARTMENT] shall pay [Assisting Organization] for valid and invoiced “assistance costs,” defined as direct material costs, equipment rental fees, fuel, and labor costs incurred in providing the facilities. If applicable, [HEALTH DEPARTMENT] will provide instructions to [Assisting Organization] regarding cost-tracking required for federal emergency assistance, and [Assisting Organization] will track costs accordingly, but [Assisting Organization] shall not be required to contravene existing governmental cost accounting requirements or its internal cost accounting procedures.

VIII. Term and Termination

This agreement is effective upon signature by both parties and ends December 31, 2012, unless extended or terminated by either party prior to the termination date.

Either party may request an extension of the agreement prior to the termination date through an amendment process.

Either [HEALTH DEPARTMENT] or [Assisting Organization] may terminate this agreement with written notification to the other party no less than thirty (30) calendar days in advance of the termination date.

IX. Contacts

The contacts for [HEALTH DEPARTMENT] are:

Name / Title / Contact Info

Name / Title / Contact Info

The contacts for [Assisting Organization] are:

Name / Title / Contact Info

Name / Title / Contact Info

Signatures

Name

Title

Organization

Date:

Signatures

Name

Title

Organization

Date: