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# LEADERSHIP

## PLANNING & ASSESSMENT TOOL

A Healthcare Guide for Pandemic Flu Planning



## PLANNING TODAY FOR A PANDEMIC TOMORROW

Leadership  
PLANNING & ASSESSMENT TOOL:  
A HEALTHCARE GUIDE FOR PANDEMIC FLU PLANNING  
PLANNING TODAY FOR A PANDEMIC TOMORROW  
PUBLICATION SERIES

Prepared by the New Jersey Hospital Association

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# INTRODUCTION

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Through the use of a detailed assessment and planning tool, hospitals can review existing policies and procedures, identify gaps, adopt new policies and procedures and generate a pandemic influenza plan that will facilitate a more effective response during a crisis. This tool will assist hospitals in developing and adopting new policies that will be required to protect employees, patients and the hospital itself. The planning and assessment tool identifies critical elements within each module related to hospital operations during an emergency situation. In addition, the tool provides a variety of sample policies and procedures that facilities may elect to use in their planning process.

Critical areas to address when planning for a pandemic include:

Clinical Care	Leadership
Communication	Legal/Regulatory
Ethics	Operations
Finance	Psycho-Social
Human Resources	Supplies/Logistics/Support Services

## How to Use This Module

Hospitals should form multi-disciplinary work teams to develop policies and procedures relating to each of the critical areas identified above. Diverse perspectives will help ensure that all issues or concerns that may be raised during a pandemic can be brought to the table while in the planning process.

The modules are to be used as a guide to facilitate discussion and to ensure that key points related to a topic such as human resources are identified and addressed in the planning process. Sample policies and/or procedures are provided; these policies and procedures are by no means all inclusive, and hospitals should not interpret the sample policies as what *must* be adopted. Sample policies are provided to assist a hospital in developing a policy that is consistent with the culture and values of the organization. Hospitals are not required to adopt any of the sample policies and procedures; they are intended simply to serve as a resource and guide in the planning process. *They are not reflective of a standard of care.*

Upon completion of the 10 modules reflected in *Planning Today for a Pandemic Tomorrow*, a "cross-walk" will be developed. This cross-walk will provide guidance for other module areas that should be referenced when developing policies and procedures. For example, when examining a Human Resources policy, the Legal and Regulatory module may need to be reviewed.

And finally, the information reflected in the planning and assessment tool modules is intended to be used as a fluid and flexible resource in dealing with the problems associated with a pandemic influenza outbreak. It is based on existing information, therefore hospitals should routinely review their plan to ensure new information is incorporated into policies and procedures as necessary.

## LEADERSHIP MODULE

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Under the conditions of a flu pandemic, health care facility leadership will be critical to sustaining operations and supporting staff, while serving patients in need. Without effective leadership, the chaos inherent to a pandemic may overwhelm health care staff and departments and could compromise successful continued operations of the facility. To define this “success” is difficult when it includes hundreds of deaths in your facility alone; however, the UPMC Center for Biosecurity defines success in a flu pandemic as follows: “U.S. hospitals, individually and jointly, will be able to provide medical care for flu victims while maintaining other essential medical services in the community during and after a pandemic.”

The abundance of problems will not subside during the pandemic, and health care facilities are not designed for such high rates of illness. Some of the difficulties that may be encountered are a loss of senior management; high rates of absenteeism; exceptional surge conditions; an unparalleled high stress environment; situations that challenge current ethics but require rapid response; a lack of financial wherewithal and daily operation supplies; and the grim reality of massive fatalities.

It is imperative that health care leaders create and execute a pandemic plan that will minimize risk to staff/patients, their families and the general public. To that end, leadership must ensure that staff are responsible for creating a safe environment by following a clear continuity of operations plan that maintains mission-critical clinical services. By planning for as many situations and tasks as possible in advance, an effective leader will be able to respond to issues as they arise without being overwhelmed. By having the proper information and resources required to make wise decisions, facility leaders can positively affect the overall operation of the facility and its surrounding community during a pandemic.

In the sections that follow, a series of planning/policy tasks are broken down by leadership areas. They are discretionary and are representative of the issues that *should* be considered. These tasks include:

- A. Creating a Culture of Preparedness
- B. Initial Planning
- C. External Collaboration
- D. Education and Training
- E. Communications
- F. Utilizing Incident Command System (ICS)
- G. Board of Trustees' Role
- H. Succession Planning and Authority Delegation
- I. Oversight and Authorization
- J. Leadership Development
- K. Post-Event Recovery

Associated with each section are appendices and/or suggestions to refer to other toolkit modules that offer additional details, tips and/or further explanation of important considerations for each task. Careful planning in these areas will assist leadership in ensuring operations run smoothly under the extreme conditions of a pandemic.



## A. CREATING A CULTURE OF PREPAREDNESS

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*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Establish disaster/pandemic planning as a priority for your facility (e.g., include updates/reports at every management meeting; present periodic updates to Board of Trustees). Ensure all leaders understand that disaster/pandemic planning is an ongoing process.					
2	Discuss benefits of pandemic flu planning with senior staff, including issues that need to be addressed during other disasters.					
3	Educate Board of Trustees about pandemic influenza and the need for effective planning. Ensure board's support prior to active planning.					

**A. CREATING A CULTURE OF PREPAREDNESS CONTINUED**

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
4	Create leadership pandemic planning subcommittee. Recommended members include: ✓ CEO ✓ CFO ✓ CMO ✓ COO ✓ Hospital administrator ✓ VP of nursing ✓ Hospital PIO or VP of marketing ✓ Community relations ✓ VP of administration ✓ VP of facilities ✓ Emergency preparedness coordinator ✓ IT/MIS representative ✓ Telephone system representative ✓ Emergency department director					
5	Assign specific pandemic planning issues to senior staff and appropriate department heads to ensure planning modules are completed and submitted for multiple levels of review.					
6	Ensure senior staff understand that accountability for completion of tasks will be a priority for the CEO.					

**A. CREATING A CULTURE OF PREPAREDNESS CONTINUED**

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
7	Ensure plan development includes a diverse and representative group of employees (e.g., employee representatives from unions; in-house legal counsel; dietary workers; etc.).					
8	Establish a policy for the distribution of antivirals and prophylaxis to staff and obtain Board of Trustees policy approval. (See HR module)					
9	Incorporate pandemic planning efforts into "all hazards" approach to facility disaster planning.					
10	Request quarterly pandemic planning progress updates from designated staff.					
11	Disseminate information to all employees to educate them about a pandemic, as well as what the facility is planning to do to protect its staff while continuing to meet community needs during a pandemic.					
12	Upon plan completion, ensure plan is reviewed at least every six months to update information, regulations and standards (e.g., OSHA, Joint Commission, CDC, etc.).					
13	Provide Board of Trustees with final pandemic plan. Provide detailed information/education regarding specific policies/procedures including or affecting members of the board.					

## B. INITIAL PLANNING

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Define roles and responsibilities for senior staff and Board of Trustees.					
2	Review Continuity of Operations plan to identify necessary changes when responding to a pandemic.					
3	Perform an impact analysis using the CDC's FluSurge 2.0 modeling software.					
4	Perform a financial impact analysis.					
5	Decide how emergency duties will be shared between the governing body, senior managers, and organized medical staff.					
6	Review and identify policies and contract provisions that must be addressed to prepare for and respond to a pandemic (e.g., subcontracted emergency room physicians). (See HR module)					
7	Review all insurance policies to identify availability of employee benefits (e.g., workers compensation, life insurance, etc.).					

**B. INITIAL PLANNING CONTINUED**

	<b>ASSIGNMENT</b>	<b>COMPLETED</b>	<b>IN PROGRESS</b>	<b>NOT STARTED</b>	<b>DATE TO BE COMPLETED</b>	<b>LEAD STAFF MEMBER</b>
8	Engage in proactive discussion and negotiation with external parties (e.g., non-staff physicians, payers, referring facilities, contracted physician groups or staff, suppliers, etc.) to define and agree upon responsibilities. Create second- and third-level plans in the event an external group, business or entity violates negotiated/contracted terms.					
9	Ensure providers with admitting privileges, attendings, paid staff, specialty consultants, hourly nurses, etc., understand the facility's pandemic plan and are committed to plan compliance.					
10	Understand and plan for the authority of federal, state or local government (e.g., commandeering of a facility, staff or supplies). (See Legal/Regulatory Module)					
11	In addition to Joint Commission standards and Healthcare Incident Command System (HICS) guidelines, consider the following definition of "essential functions" as provided by FEMA: <ul style="list-style-type: none"> <li>✓ Functions that must be continued in all circumstances.</li> <li>✓ Functions that cannot suffer an interruption of more than 12 hours.</li> </ul>					

**B. INITIAL PLANNING CONTINUED**

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
12	Review current Emergency Operation Plans (EOPs) with facility's emergency preparedness coordinator. Ensure availability of emergency contacts list to facilitate communication. Include: <ul style="list-style-type: none"> <li>✓ All senior management</li> <li>✓ State regulatory agencies</li> <li>✓ Local volunteer agencies</li> <li>✓ Emergency operations center (EOC)</li> <li>✓ Joint information center (JIC)</li> <li>✓ Information hotline(s)</li> <li>✓ Number to call if ill</li> </ul>					
13	Determine pandemic plan triggers.					
14	Identify how necessary and unexpected changes to policies and procedures can be made during the pandemic.					
15	Discuss how leadership will provide on-site housing and food for employees working long hours.					
16	Ensure a support system is established to address psychosocial issues and emotional distress experienced by staff, patients and their families. (See Psychosocial module)					

## C. EXTERNAL COLLABORATION

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Ensure collaboration with health care facilities and services in your region. Identify common issues of concern and develop strategies to address these concerns.					
2	Recognize that state public health agencies will serve as the lead agency in coordinating a response. Be aware of what your state department of health expects of your facility during a pandemic and how it will support your operations.					
3	Communicate plans with local, county and state agencies in an effort to integrate planning.					
4	Consider contacting community and local government leaders to discuss your facility's plan and to gather information on how community providers plan to prepare and respond. (See Communication module)					
5	Work in close coordination with local emergency officials, agencies and health care providers to ensure a community-wide coordinated response.					
6	Identify community constituents who wish to work collaboratively during pandemic response (e.g., senior citizens).					

**C. EXTERNAL COLLABORATION CONTINUED**

	<b>ASSIGNMENT</b>	<b>COMPLETED</b>	<b>IN PROGRESS</b>	<b>NOT STARTED</b>	<b>DATE TO BE COMPLETED</b>	<b>LEAD STAFF MEMBER</b>
7	Meet with local emergency health agencies, such as the Red Cross and Salvation Army, to share pandemic plans.					
8	Collaborate with public health organizations to provide community education programs (e.g., "Get Flu Ready New Jersey").					
9	Ensure meetings have taken place with all goods and services suppliers. (See Supplies, Logistics and Support Services module)					
10	Contact local clergy and faith-based organizations to encourage them to plan for their own response. Communicate facility's plan and identify opportunities for collaboration.					
11	Contact local EMS, police and fire departments to share the facility's pandemic plan and discuss areas of support and collaboration.					
12	Provide information and resources to local schools and share elements of the facility's pandemic plan with school districts.					



**C. EXTERNAL COLLABORATION CONTINUED**

	<b>ASSIGNMENT</b>	<b>COMPLETED</b>	<b>IN PROGRESS</b>	<b>NOT STARTED</b>	<b>DATE TO BE COMPLETED</b>	<b>LEAD STAFF MEMBER</b>
13	Become familiar with Medical Reserve Corps (MRC) or Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) if such a program has been established in your state.					
14	Create multiple copies of a contact list of leaders of local government, hospitals, community organizations and volunteer agencies. Ensure list is easily accessible to all facility leaders. Consider sharing list with other community leaders to facilitate joint planning.					
15	Educate elected officials about pandemic flu, including challenges facilities will face.					

## D. EDUCATION AND TRAINING

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Ensure personnel assigned to the command center and critical plan implementation staff are familiar with the Incident Command System (ICS).					
2	Ensure materials are developed to prepare/educate staff in advance of a pandemic.					
3	Ensure staff are fully aware of regulatory standards (e.g., OSHA or state licensing regulations). Staff should be informed of what will and will not be waived regarding federal and state regulations.					
4	Ensure supervisors educate their employees regarding their specific responsibilities during a pandemic and have written instructions, roles and protocols available at all times.					
5	Ensure policies and procedures related to ethical decision making and behavior have been communicated to physicians and staff. (See Ethics module)					
6	Conduct drills to educate staff about the facility's plan.					
7	Ensure employees are provided with resources and guidance as to how they can protect themselves and their families from direct exposure. (See Human Resources module)					

## E. COMMUNICATIONS

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Discuss how leadership will be utilized in external/internal communications and appearances. (See Communication Module)					
2	Provide a forum to discuss employee issues (including family issues) and concerns in advance of a pandemic (e.g., employees may be concerned that they will not be provided personal protective equipment, putting them at risk of exposure).					
3	When communicating about a pandemic, find methods to give a broader perspective to employees and community. Consider: <ul style="list-style-type: none"> <li>✓ Comparing national statistics to local statistics</li> <li>✓ Emphasize positive progress</li> <li>✓ Showing time horizon</li> </ul>					
4	Discuss how rumors will be addressed within the facility and greater community.					

**E. COMMUNICATIONS CONTINUED**

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*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
5	Review the different methods and frequency by which communications will occur. Ensure information is shared with medical staff, volunteers, trustees and members of the community. (See Communications module)					
6	Determine physically safe ways for leadership to be visible quickly to employees and community.					

**F. UTILIZING INCIDENT COMMAND SYSTEM (ICS)**

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Ensure proper coordination within the ICS. <a href="http://www.emsa.ca.gov/HICS/default.asp">http://www.emsa.ca.gov/HICS/default.asp</a>					
2	Designate individuals responsible for training and implementation of ICS.					
3	Review staff assigned to specific positions within the EOC (e.g., logistics chief). Have written protocols/duties available at all times.					
4	Participate in training for identified senior leaders that will have assigned responsibilities within the EOC.					
5	Empower ICS leadership with significant authority so they can complete all objectives with necessary speed.					

## G. BOARD OF TRUSTEES' ROLE

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Ensure the board is properly educated about pandemic flu and its potential impact on hospital operations.					
2	Discuss clearly delineated board leadership responsibilities prior to a pandemic. Ensure board members have been educated on and possibly trained in ICS.					
3	Share impact analysis, operational and financial projections with the board.					
4	Ensure board has an understanding of local, state and federal authority during a pandemic (e.g., the state commandeering the facility to be used for quarantine or isolation).					
5	Define what specific issues/problems the board may need to address (e.g., CEO's illness and reassignment of his/her responsibilities).					
6	Board should be educated on community impact policies (e.g., restricting or prohibiting visitors; distribution of scare resources).					
7	Discuss pandemic flu policies that may have legal or ethical implications, such as altered standards of care or withdrawal of care.					

**G. BOARD OF TRUSTEES’ ROLE CONTINUED**

	<b>ASSIGNMENT</b>	<b>COMPLETED</b>	<b>IN PROGRESS</b>	<b>NOT STARTED</b>	<b>DATE TO BE COMPLETED</b>	<b>LEAD STAFF MEMBER</b>
8	Review and approve succession plan.					
9	Identify board members that will be kept apprised of facility operations on a frequent basis and what information they will be given.					
10	Determine frequency of communication with full board (e.g., daily, every other day, etc.).					
11	Determine what issues can be addressed by senior staff and issues that must be brought to the board.					
12	Explore if board meetings can be conducted remotely or through telecommunications and what will determine the need for alternate methods.					
13	Describe prioritization for receipt of medical countermeasures. Explain why certain board members will not be prioritized to the top of the list.					

## H. CONTINUITY OF OPERATIONS

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
<b>SUCCESSION PLANNING/DELGATIONS OF AUTHORITY</b>						
1	Review facility's current leadership succession plan. <a href="#">See Appendix H</a>					
2	Inform, and seek approval from, the Board of Trustees of your succession plan and authority delegations.					
3	Identify three individuals who would be able to succeed the current leadership.					
4	During planning, develop and share expectations for each critical position in order to achieve smooth transitions.					
5	For safety reasons, decide whether possible successors could work remotely and have the resources available to do so (e.g., multiple phone lines, fax, Internet accessibility).					
6	Develop procedure for reinstatement of a former leader who is healthy enough to return to work.					
7	Consider compensation for the incapacitated as well as those stepping into higher positions of authority.					



## H. CONTINUITY OF OPERATIONS CONTINUED

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
8	<p>Review Orders of Succession and Delegations of Authority to ensure the following:</p> <ul style="list-style-type: none"> <li>✓ Management and direction of personnel</li> <li>✓ Access and safety of vital records</li> <li>✓ Access and distribution of supplies</li> <li>✓ Continued operation of equipment and systems and supplies delivery</li> </ul>					
9	<p>Review list of department heads and employees that will be critical in a pandemic and ensure that the succession plan includes three alternate individuals for each critical position. <a href="#">See Appendix H-1</a> for a listing of positions deemed necessary by HICS in an emergency situation.</p>					
10	<p>Ensure each member of the executive team identifies critical areas/services and creates a succession plan for those services.</p>					
11	<p>Ensure Orders of Succession have specific information regarding the conditions under which succession will take place (e.g., defining incapacitation).</p>					

## H. CONTINUITY OF OPERATIONS CONTINUED

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
12	Develop system to contact all affected parties, including: <ul style="list-style-type: none"> <li>✓ Board of Trustees</li> <li>✓ Medical staff</li> <li>✓ Management</li> <li>✓ Staff</li> <li>✓ Healthcare partners (e.g., home care agencies)</li> <li>✓ State regulators, if required</li> </ul>					
13	Ensure Delegations of Authority state the title of the person to whom authority is being assigned.					
14	Review Delegations of Authority and determine if they provide enough power to the appointed individual to successfully complete position objectives.					

## H. CONTINUITY OF OPERATIONS CONTINUED

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
<b>OVERSIGHT AND AUTHORIZATION</b>						
15	<p>Develop, implement and communicate oversight and authorization policies and procedures. Determine who will have authorization to:</p> <ul style="list-style-type: none"> <li>✓ Activate emergency plans</li> <li>✓ Communicate with staff, patients and community</li> <li>✓ Modify shift hours or rotations</li> <li>✓ Implement employee isolation and quarantine</li> <li>✓ Assess mental and physical fitness of employees, if necessary</li> <li>✓ Restrict visitation to patients, including facility lockdown if necessary</li> <li>✓ Implement changes in patient care protocols</li> <li>✓ Engage in discussions with local, county and state government officials</li> <li>✓ Etc.</li> </ul> <p>Decision making should be consistent with provisions in the facility's pandemic plan.</p>					
16	<p>Ensure an appropriately safeguarded authorization system is developed for an altered standard of care.</p>					
17	<p>Designation of individuals that will have oversight or authorization authority should be three-deep, consistent with other critical staff planning.</p>					

**H. CONTINUITY OF OPERATIONS CONTINUED**

	<b>ASSIGNMENT</b>	<b>COMPLETED</b>	<b>IN PROGRESS</b>	<b>NOT STARTED</b>	<b>DATE TO BE COMPLETED</b>	<b>LEAD STAFF MEMBER</b>
18	Establish an emergency credentialing system to be able to bring in outside medical personnel at any time deemed appropriate by senior hospital staff and/or Board of Trustees.					
19	Develop payment mechanisms and Memoranda of Understanding (MOU) for requested staff and supplies from outside sources.					

## I. LEADERSHIP DEVELOPMENT

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Ensure pandemic-specific training is given to all individuals who may be asked to take on leadership roles during a pandemic.					
2	Ensure specific responsibilities are delineated for staff that may assume leadership positions and that appropriate education and training is provided so they may carry out those responsibilities.					
3	Consider developing a relationship with a management coach or consultant to train staff that may assume leadership responsibilities during an outbreak.					
4	Determine how leadership stress will be minimized to increase effectiveness. Consider how a leader will be deemed ineffective. (See Psychosocial module)					
5	Consider how leadership will address negative reactions from employees during a pandemic (e.g., accepting e-mails from employees) and ensuring timely response (e.g., same day, messages over intercom, faxes to floors, Intranet/Internet etc.).					

**J. POST-EVENT RECOVERY**

*In your plan, consider the following:*

	ASSIGNMENT	COMPLETED	IN PROGRESS	NOT STARTED	DATE TO BE COMPLETED	LEAD STAFF MEMBER
1	Require an after-event review involving all departments and staff.					
2	Provide appropriate mental health support services to those employees who require assistance.					
3	Establish a system of returning the facility to normal daily operations, for example: <ul style="list-style-type: none"> <li>✓ Resume elective procedures and other clinical services that may have been suspended</li> <li>✓ Re-establish the supply cache</li> <li>✓ Address unresolved human resource issues</li> <li>✓ Process claims and comply with administrative protocols in place prior to pandemic</li> <li>✓ Etc.</li> </ul>					
4	Quantify expenses associated with pandemic response and explore avenues for recovering those costs.					
5	Meet with insurers to assess the impact on health, death and workers compensation benefits.					
6	Conduct a financial impact analysis.					
7	Develop an After Event Report and distribute to appropriate audiences. Consider if audiences include external organizations (e.g., government agencies, suppliers, etc.).					

## APPENDIX H

### CENTER FOR NON PROFIT ADVANCEMENT'S SAMPLE EMERGENCY SUCCESSION PLAN



center for nonprofit  
advancement

STRENGTHENING NONPROFITS IN GREATER WASHINGTON  
EDUCATION • NETWORKING • ADVOCACY • BUYING POWER


# Emergency Succession Plan For

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(Organization Name)

Leadership plays an essential role in the success of a nonprofit organization. And a change in Chief Executive leadership is as inevitable as the passing of time.

This document will help a nonprofit organization recognize that planning for unplanned or temporary leadership change is a best practice—in line with other plans nonprofits regularly complete (e.g., strategic plan, communications plan, fundraising plan). An Emergency Succession Plan can bring order in a time a time of turmoil, confusion and high-stress.

This is a template. Feel free to adapt to make it appropriate for your organization. Action items or areas for tailoring are noted with a line or a  symbol.

The term “Executive Director” is used throughout this document to address the Chief Paid Staff Member. Should your organization use a title other than Executive Director, feel free to use the title as directed by your organization’s bylaws or practice.

May this process bring your organization peace of mind in your day-to-day work.

*Disclaimer Statement: This document is provided as guidance for a nonprofit organization facing a change in leadership. It should not be regarded as a substitute for legal advice or counsel. The advice of a competent attorney should be sought any time a nonprofit is considering policy changes or activities that may affect the legal status or liability exposure of the organization.*

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The Board of Directors of \_\_\_\_\_ (Organization Name) \_\_\_\_\_ recognizes that this is a plan for contingencies due to the disability, death or departure of the Executive Director. If the organization is faced with the unlikely event of an untimely vacancy, \_\_\_\_\_ (Organization Name) \_\_\_\_\_ has in place the following emergency succession plan to facilitate the transition to both interim and longer-term leadership.

The Board of \_\_\_\_\_ (Organization Name) \_\_\_\_\_ has reviewed the job description of the executive director. The job description is attached. The board has a clear understanding of the Executive Director's role in organizational leadership, program development, program administration, operations, board of directors relationships, financial operations, resource development and community presence.



## **Succession Plan in Event of a Temporary, Unplanned Absence: Short-Term**

A temporary absence is one of less than three months in which it is expected that the Executive Director will return to his/her position once the events precipitating the absence are resolved. An unplanned absence is one that arises unexpectedly, in contrast to a planned leave, such as a vacation or a sabbatical. The Board of Directors is authorized (or authorizes the Executive Committee) of \_\_\_\_\_ (Organization Name) \_\_\_\_\_ to implement the terms of this emergency plan in the event of the unplanned absence of the Executive Director.

In the event of an unplanned absence of the Executive Director, the Deputy Director (or other highest ranking staff member) is to immediately inform the Board Chair (or highest ranking volunteer board member) of the absence. As soon as it is feasible, the Chair should convene a meeting of the Board or Executive Committee (☞ choose one) to affirm the procedures prescribed in this plan or to make modifications as the Committee deems appropriate.

At the time that this plan was approved, the position of Acting Executive Director would be:

\_\_\_\_\_ Name,  
\_\_\_\_\_ Title.

Should the standing appointee to the position of Acting Executive Director be unable to serve, the first and second back-up appointees for the position of Acting Executive Director will be:

- (1) \_\_\_\_\_ Name  
\_\_\_\_\_ Title and
- (2) \_\_\_\_\_ Name  
\_\_\_\_\_ Title.

If this Acting Executive Director is new to his/her position and fairly inexperienced with this organization (less than \_\_\_\_\_ months/years), the Executive Committee or Board of Directors (☞ circle one) may decide to appoint one of the back-up appointees to the acting executive position. The Executive Committee or Board of Directors (☞ circle one) may also consider the option of splitting executive duties among the designated appointees.

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### Authority and Compensation of the Acting Executive Director

The person appointed as Acting Executive Director shall have the full authority for decision-making and independent action as the regular Executive Director.

The Acting Executive Director may be offered:

(☞ check one)

- A temporary salary increase to the entry-level salary of the executive director position
- A bonus of \$\_\_\_\_\_ during the Acting Executive Director Period.
- No additional compensation.

### Board Oversight

The board member(s) or board committee (circle one) responsible for monitoring the work of the Acting Executive Director shall be \_\_\_\_\_ (list by name or office).

The above named people will be sensitive to the special support needs of the Acting Executive Director in this temporary leadership role.

### Communications Plan

Immediately upon transferring the responsibilities to the Acting Executive Director, the Board Chair (or highest ranking Board member) will notify staff members, members of the Board of Directors and key volunteers of the delegation of authority.

As soon as possible after the Acting Executive Director has begun covering the unplanned absence, Board members and the Acting Executive Director shall communicate the temporary leadership structure to the following key external supporters of \_\_\_\_\_ (Organization Name) \_\_\_\_\_. This may include (but not be limited to) government contract officers, foundation program officers, civic leaders, major donors

and others (please specify): \_\_\_\_\_

### Completion of Short-Term Emergency Succession Period

The decision about when the absent Executive Director returns to lead \_\_\_\_\_ (Organization Name) \_\_\_\_\_ should be determined by the Executive Director and the Board Chair. They will decide upon a mutually agreed upon schedule and start date. A reduced schedule for a set period of time can be allowed, by approval of the Board Chair, with the intention of working their way back up to a full-time commitment.



### Succession Plan in Event of a Temporary, Unplanned Absence: Long-Term

A long-term absence is one that is expected to last more than three months. The procedures and conditions to be followed should be the same as for a short-term absence with one addition:

The Executive Committee or Board of Directors (☞ circle one) will give immediate consideration, in consultation with the Acting Executive Director, to **temporarily** filling the management position left vacant by the Acting Executive Director. This is in recognition of the fact that for a term of more than three months, it may not be reasonable to expect the Acting Executive Director to carry the duties of both positions. The position description of a temporary manager would focus on covering the priority areas in which the Acting Executive Director needs assistance.

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### Completion of Long-Term Emergency Succession Period

The decision about when the absent Executive Director returns to lead \_\_\_\_\_ (Organization Name) \_\_\_\_\_ should be determined by the Executive Director and the Board Chair. They will decide upon a mutually agreed upon schedule and start date. A reduced schedule for a set period of time can be allowed, by approval of the Board Chair, with the intention of working the way up to a full-time commitment.



### Succession Plan in Event of a Permanent Change in Executive Director

A permanent change is one in which it is firmly determined that the Executive Director will not be returning to the position. The procedures and conditions should be the same as for a long-term temporary absence with one addition:

The Board of Directors will appoint a Transition and Search Committee within (✍ add number) \_\_\_\_\_ days to plan and carry out a transition to a new permanent executive director. The Board will also consider the need for outside consulting assistance depending on the circumstances of the transition and the board's capacity to plan and manage the transition and search. The Transition and Search Committee will also determine the need for an Interim Executive Director, and plan for the recruitment and selection of an Interim Executive Director and/or permanent Executive Director.

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## Checklist for Acceptance of All Types of Emergency Succession Plans

- Succession plan approval.** This succession plan will be approved by the Executive Committee and forwarded to the full Board of Directors for its vote and approval. This plan should be reviewed annually.
- Signatories.** The Board Chair, the Executive Director, the deputy director or human resources administrator and the Acting Executive Director shall sign this plan, and the appointees designated in this plan.
- Organizational Charts.** Two organizational charts need to be prepared and attached to this plan. Prepare and attach an organizational chart reflecting staffing positions and lines of authority/reporting throughout the organization. Prepare and attach a second organizational chart that reflects how that structure will change within the context of an emergency/unplanned absence of the Executive Director.
- Important Organizational Information.** Complete the attached *Information and Contact Inventory* and attach it to this document. Also attach a current list of the organization's board of directors.

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- **Copies.** Copies of this Emergency Succession Plan along with the corresponding documentation shall be maintained by The Board Chair, the Executive Director, the Acting Executive Director Appointee, the human resources department, and the organization's attorney.

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## Information and Contact Inventory for                     (Organization Name)

Knowing where your organization's key information is located is critical so that if an emergency succession should occur, your organization would be able to quickly continue work in the most efficient and effective way.

	Onsite Location	Offsite Location	Online URL
<b>Nonprofit Status</b>			
IRS Determination Letter	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
IRS Form 1023	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Bylaws	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Mission Statement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Board Minutes	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Corporate Seal	<input type="checkbox"/> _____		

### Financial Information

Employer Identification Number (EIN) #: \_\_\_\_\_

Current and previous Form 990s	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Current and previous audited financial statements	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Financial Statements (if not part of the computer system and regularly backed-up)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
State or District Sales-Tax Exemption Certificate	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Blank Checks	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Computer passwords	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Donor Records	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Client Records	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Vendor Records	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Volunteer Records*	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

*\*Note: Nonprofits that are heavily volunteer-based may need to know the following information about their volunteers who they are, how to contact them (home/work phone, email, cell, etc.), where they live/work, expertise, special skills, or any information related to their usefulness or willingness to help the agency (for example, volunteer Jane Doe can walk to our satellite office, lift heavy boxes and knows CPR).*

#### Auditor

Name: \_\_\_\_\_

Phone Number/Email: \_\_\_\_\_

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*Bank*

Name(s): \_\_\_\_\_

Account Numbers: \_\_\_\_\_

Branch Representative(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

*Investments*

Financial Planner / Broker Company \_\_\_\_\_

Representative Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Who is authorized to make transfers? Who is authorized to make wire transfers? Are there alternatives?

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

Who are the authorized check signers?

\_\_\_\_\_

Is there an office safe? Who has the combination/keys?

\_\_\_\_\_

**Legal Counsel**

*Attorney*

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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E-mail: \_\_\_\_\_

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**Human Resources Information**

	<b>Onsite Location</b>	<b>Offsite Location</b>	<b>Online URL</b>
Employee Records/ Personnel Info*	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<i>*Names, home addresses, phone numbers, email, emergency contacts, etc.</i>			
I-9s	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

*Payroll*

Company Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Payroll Rep: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Facilities Information**

Office Lease (for renters)     \_\_\_\_\_     \_\_\_\_\_

Building Deed (for owners)     \_\_\_\_\_     \_\_\_\_\_

*Building Management*

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number/Email: \_\_\_\_\_

*Office Security System*

Company Name: \_\_\_\_\_

Account Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

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**Insurance Information**

*General Liability / Commercial Umbrella*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Directors & Officers Liability*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Health Insurance*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Unemployment Insurance*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Workers' Compensation*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Disability Insurance (short-term)*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

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*Disability Insurance (long-term)*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Life Insurance*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Dental*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Long Term Care*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

*Retirement Plan*

Company/Underwriter: \_\_\_\_\_

Policy Number \_\_\_\_\_

Representative Phone Number/Email: \_\_\_\_\_

Broker Phone Number/Email: \_\_\_\_\_

**Date of Completion for Information and Contact Inventory:** \_\_\_\_\_

**Name of Person Completing Document:** \_\_\_\_\_

*The Emergency Succession Plan and the supporting documents (the information and contact inventory, job descriptions, and organizational charts) should be reviewed and updated annually.*



**Signatures of Approval**

\_\_\_\_\_  
Organization Name

\_\_\_\_\_  
Board Chair Date

\_\_\_\_\_  
Dep. Dir/HR Dir/Other staff member Date

\_\_\_\_\_  
Executive Director Date

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Individual Selected as Acting Executive Director

Acting Executive Director's Current Title    Date

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*We acknowledge the leadership of Transition Guides (notably Tom Adams and Don Tebbe, as well as plan guidance from Karen Gaskins Jones, and Victor Cheers) in guiding The Center for Nonprofit Advancement in grasping the impact of Succession Planning and Executive Transitions. Additional thanks to Troy Chapman of the Support Center for Nonprofit Management of New York City, Tim Wolfred of CompassPoint Nonprofit Services for their guidance on the development of this document. The Information and Contact Inventory document is adapted by permission from the Nonprofit Coordinating Committee of New York City.*

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# APPENDIX H-1

## HICS TEAM CHART

