OVERVIEW

Operational Entity   **Emergency Department**

Entity Function Summary

The Emergency Department (ED) provides immediate, life-saving medical care by integrating advanced systems, specialized equipment, and skilled personnel to stabilize patients and coordinate their seamless transition within the hospital.

Alternate Location

Alternate Location Available: ○ Yes ● No
Address: **N/A**
Contact Number(s): **N/A**

Total Number of Dept Employees: **40**
Minimum Employees for Critical Processes   **10**
Normal Hours of Operation: **24/7**

Entity Overall Entity Risk
Serious
3

BIA Contributors:

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separate names with commas

Approval Date: January 1, 2050
Approved By: Michael Scott

CRITICAL PROCESSES LIST

A critical business process is an essential activity that must continue or quickly resume during a disruption to: Ensure organizational survival, Maintain regulatory compliance, Meet key business objectives, and Deliver products/services to customers. **Note:** Limit your analysis to **six (6)** critical processes. If you identify more than six, consider creating separate business impact analyses by grouping related processes together.

Process Name/Title	MTD (hrs)	Est. RTO (hrs)	Risk Criticality
Example: Accounts Payable Processing			
Triage and Patient Prioritization	3	2	3
Emergency Medical Treatment	2	1	4
Patient Admission and Transfer	3	2	3

1 = None to Negligible 2 = Marginal 3 = Serious 4 = Severe 5 = Catastrophic // Est. = Estimated

CRITICAL PROCESSES AND ANALYSIS

Name of Critical Process:	**Triage and Patient Prioritization**

Brief Description:	Evaluates and categorizes incoming patients based on the severity of their conditions to ensure those in critical need receive immediate care.

Describe the function and purpose of the critical process in detail. Provide a clear and comprehensive explanation to ensure that individuals unfamiliar with the organizational entity and its responsibilities can fully understand the nature and significance of the critical process.

Process Impact Duration

Quantitative Loss	0-4 hrs	4-24 hrs	1-3 days	4-7 days	8-30 days	Business/Cost Justification
Clinical Revenue & Reimbursement Impact	None to Negligible	Marginal	Marginal	Serious	Severe	
Emergency Response & Recovery Costs	None to Negligible	Marginal	Serious	Serious	Severe	
Clinical Productivity Loss	Marginal	Serious	Severe	Severe	Catastrophic	
Healthcare Resource Waste	None to Negligible	Marginal	Marginal	Serious	Severe	
Quality & Compliance Penalties	None to Negligible	Marginal	Serious	Serious	Severe	

Process Impact Duration

Qualitative Loss	0-4 hrs	4-24 hrs	1-3 days	4-7 days	8-30 days	Business/Cost Justification
Quality of Care & Patient Experience	Marginal	Serious	Severe	Severe	Catastrophic	
Clinical Staff Effectiveness	Marginal	Marginal	Serious	Serious	Severe	
Healthcare Safety & Risk Management	Marginal	Serious	Severe	Severe	Severe	
Organizational Trust & Reputation	None to Negligible	Marginal	Marginal	Serious	Severe	
Regulatory & Accreditation Standing	None to Negligible	Marginal	Serious	Severe	Catastrophic	

Name of Critical Process:	**Emergency Medical Treatment**

Brief Description:	Provides life-saving interventions, diagnostic evaluations, and initial stabilization for patients with acute or life-threatening conditions.

Describe the function and purpose of the critical process in detail. Provide a clear and comprehensive explanation to ensure that individuals unfamiliar with the organizational entity and its responsibilities can fully understand the nature and significance of the critical process.

	Process Impact Duration					
Quantitative Loss	**0-4 hrs**	**4-24 hrs**	**1-3 days**	**4-7 days**	**8-30 days**	Business/Cost Justification
Clinical Revenue & Reimbursement Impact	Marginal	Serious	Severe	Severe	Catastrophic	
Emergency Response & Recovery Costs	Marginal	Serious	Severe	Severe	Catastrophic	
Clinical Productivity Loss	Serious	Severe	Catastrophic	Catastrophic	Catastrophic	
Healthcare Resource Waste	Marginal	Serious	Serious	Severe	Catastrophic	
Quality & Compliance Penalties	Marginal	Serious	Severe	Catastrophic	Catastrophic	

	Process Impact Duration					
Qualitative Loss	**0-4 hrs**	**4-24 hrs**	**1-3 days**	**4-7 days**	**8-30 days**	Business/Cost Justification
Quality of Care & Patient Experience	Serious	Severe	Catastrophic	Catastrophic	Catastrophic	
Clinical Staff Effectiveness	Marginal	Serious	Severe	Catastrophic	Catastrophic	
Healthcare Safety & Risk Management	Serious	Severe	Catastrophic	Catastrophic	Catastrophic	
Organizational Trust & Reputation	Marginal	Serious	Severe	Catastrophic	Catastrophic	
Regulatory & Accreditation Standing	Marginal	Serious	Severe	Catastrophic	Catastrophic	

Name of Critical Process:	**Patient Admission and Transfer**

Brief Description:	Coordinates the seamless movement of patients from the Emergency Department to appropriate hospital units or external facilities for continued care.

Describe the function and purpose of the critical process in detail. Provide a clear and comprehensive explanation to ensure that individuals unfamiliar with the organizational entity and its responsibilities can fully understand the nature and significance of the critical process.

Process Impact Duration

Quantitative Loss	0-4 hrs	4-24 hrs	1-3 days	4-7 days	8-30 days	Business/Cost Justification
Clinical Revenue & Reimbursement Impact	None to Negligible	Marginal	Serious	Serious	Severe	
Emergency Response & Recovery Costs	None to Negligible	Marginal	Marginal	Serious	Severe	
Clinical Productivity Loss	Marginal	Serious	Serious	Severe	Catastrophic	
Healthcare Resource Waste	None to Negligible	Marginal	Marginal	Serious	Severe	
Quality & Compliance Penalties	None to Negligible	Marginal	Serious	Serious	Severe	

Process Impact Duration

Qualitative Loss	0-4 hrs	4-24 hrs	1-3 days	4-7 days	8-30 days	Business/Cost Justification
Quality of Care & Patient Experience	Marginal	Marginal	Serious	Severe	Severe	
Clinical Staff Effectiveness	None to Negligible	Marginal	Marginal	Serious	Severe	
Healthcare Safety & Risk Management	Marginal	Marginal	Serious	Severe	Catastrophic	
Organizational Trust & Reputation	None to Negligible	Marginal	Marginal	Serious	Severe	
Regulatory & Accreditation Standing	None to Negligible	Marginal	Serious	Severe	Catastrophic	

IT SYSTEMS & APPLICATIONS AND SPECIAL EQUIPMENT

Name of Critical Process:	**Triage and Patient Prioritization**

Brief Description:	Evaluates and categorizes incoming patients based on the severity of their conditions to ensure those in critical need receive immediate care.

Computer Systems or Applications Used

Name	3rd Party	Reliance	Entity RTO	Entity RPO	Workaround Exists?	Work Around Documented?
Electronic Health Records (EHR)	✓	High	< 1 hour	< 1 hour	Yes	Yes
Patient Tracking System	✓	Medium	< 2 hours	< 4 hours	Yes	Yes
Decision Support Software	✓	Medium	< 4 hours	< 4 hours	Yes	Yes
	☐					
	☐					
	☐					
	☐					
	☐					
	☐					
	☐					

Specialized Equipment Used

Name	3rd Party	Equipment Category	Equip Reliance	Workaround Exists?	Alternate Equip Identified?
Triage Tags/Barcode Scanners	☐	Equipment	Medium	Yes	Yes
Portable Blood Analyzers	☐	Equipment	High	No	Yes
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				

Name of Critical Process:	**Emergency Medical Treatment**

Brief Description:	Provides life-saving interventions, diagnostic evaluations, and initial stabilization for patients with acute or life-threatening conditions.

Computer Systems or Applications Used

Name	3rd Party	Reliance	Entity RTO	Entity RPO	Workaround Exists?	Work Around Documented?
Pharmacy Management System	✓	High	<30 minutes	<1 hour	Yes	Yes
Radiology Information System	✓	High	<1 hour	<1 hour	No	N/A
Laboratory Information System	✓	High	<2 hours	<4 hours	Yes	Yes
Clinical Decision Support System	✓	Medium	<4 hours	<8 hours	Yes	Yes
	☐					
	☐					
	☐					
	☐					
	☐					
	☐					

Specialized Equipment Used

Name	3rd Party	Equipment Category	Equip Reliance	Workaround Exists?	Alternate Equip Identified?
Ventilators	☐	Equipment	High	No	Yes
Defibrillators	☐	Equipment	High	No	No
Point-of-Care Testing Devices	☐	Equipment	Medium	Yes	Yes
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				

Name of Critical Process:	**Patient Admission and Transfer**

Brief Description:	Coordinates the seamless movement of patients from the Emergency Department to appropriate hospital units or external facilities for continued care.

Computer Systems or Applications Used

Name	3rd Party	Reliance	Entity RTO	Entity RPO	Workaround Exists?	Work Around Documented?
Bed Management System	☑	High	< 1 hour	< 1 hour	Yes	Yes
Transport Coordination Software	☑	Medium	< 2 hours	< 4 hours	Yes	Yes
Admission, Discharge, and Transfer (ADT) System	☑	High	< 1 hour	< 1 hour	Yes	Yes
	☐					
	☐					
	☐					
	☐					
	☐					
	☐					
	☐					

Specialized Equipment Used

Name	3rd Party	Equipment Category	Equip Reliance	Workaround Exists?	Alternate Equip Identified?
Negative Pressure Isolation Units	☐	Facility	High	No	Yes
Patient Transport Ventilators	☐	Equipment	High	No	Yes
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				
	☐				

OVERALL PROCESS RECOVERY TIME OBJECTIVE & MAXIMUM TOLERABLE DOWNTIME

The **Work Recovery Time (WRT)** determines the maximum tolerable amount of time that is needed to verify the process or system and/or data integrity. This could be, for example, checking the databases and logs, making sure the tasks or services are running and are available. When all systems affected by the disaster are verified and/or recovered, the environment is ready to resume normal operations.

The **Recovery Time Objective (RTO)** defines the maximum amount of time that a system resource/process can remain unavailable before there is an unacceptable impact on other system resources and business processes. Determining the RTO is important for selecting appropriate technologies and strategies. When it is not feasible to meet an RTO, management should verify whether the RTO is realistic, initiate an action plan and milestone(s) to document the situation, and, when appropriate, plan for its mitigation.

Guidance to Determine Process RTO:

• **Ensure it's not shorter than the shortest System & Applications RTO** as this is the minimum time needed to recover essential system dependencies.

• **Set the Process RTO based on operational needs**, considering how long the process can be unavailable before causing unacceptable impact.

• **Use the average System & Applications RTO** as a guideline to account for realistic recovery times, but **avoid simply adopting the longest System & Applications RTO** as this may exceed what operations can tolerate.

Work Recovery Time (WRT) + Process Recovery Time Objective (RTO) = Maximum Tolerable Downtime (MTD)

Name of Critical Process:	Triage and Patient Prioritization
Brief Description:	Evaluates and categorizes incoming patients based on the severity of their conditions to ensure those in critical need receive immediate care.

	Hours		
Average System & Applications Recovery Time Objective (RTO):	2.33	Work Recovery Time (hrs)	1
Shortest System & Applications Recovery Time Objective (RTO):	1		
Longest System & Applications Recovery Time Objective (RTO):	4	Process RTO	< 2 hours

Name of Critical Process:	Emergency Medical Treatment
Brief Description:	Provides life-saving interventions, diagnostic evaluations, and initial stabilization for patients with acute or life-threatening conditions.

	Hours		
Average System & Applications Recovery Time Objective (RTO):	1.88	Work Recovery Time (hrs)	1
Shortest System & Applications Recovery Time Objective (RTO):	0.5		
Longest System & Applications Recovery Time Objective (RTO):	4	Process RTO	< 1 hour

Name of Critical Process:	**Patient Admission and Transfer**

Brief Description:	Coordinates the seamless movement of patients from the Emergency Department to appropriate hospital units or external facilities for continued care.

Hours

Average System & Applications Recovery Time Objective (RTO):	1.33	Work Recovery Time (hrs) **1**
Shortest System & Applications Recovery Time Objective (RTO):	1	
Longest System & Applications Recovery Time Objective (RTO):	2	Process RTO **< 2 hours**

Name of Critical Process:	**N/A**

Brief Description:	TBD

Hours

Average System & Applications Recovery Time Objective (RTO):	No Logged Data	Work Recovery Time (hrs)
Shortest System & Applications Recovery Time Objective (RTO):	No Logged Data	
Longest System & Applications Recovery Time Objective (RTO):	No Logged Data	Process RTO

Name of Critical Process:	**N/A**

Brief Description:	TBD

Hours

Average System & Applications Recovery Time Objective (RTO):	No Logged Data	Work Recovery Time (hrs)
Shortest System & Applications Recovery Time Objective (RTO):	No Logged Data	
Longest System & Applications Recovery Time Objective (RTO):	No Logged Data	Process RTO

Name of Critical Process:	**N/A**

Brief Description:	TBD

Hours

Average System & Applications Recovery Time Objective (RTO):	No Logged Data	Work Recovery Time (hrs)
Shortest System & Applications Recovery Time Objective (RTO):	No Logged Data	
Longest System & Applications Recovery Time Objective (RTO):	No Logged Data	Process RTO

DEPENDENCIES

Name of Critical Process:	**Triage and Patient Prioritization**
Brief Description:	Evaluates and categorizes incoming patients based on the severity of their conditions to ensure those in critical need receive immediate care.

Internal Dependencies *(if none, type "None" in first row)*

Name	Product or Service Provided	Reliance	Workaround Exists?	Workaround Documented?
IT Support Team	Ensures uptime for IT systems and applications	High	No	N/A
Facilities Management	Ensures functionality areas and utilities	Medium	Yes	Yes

External Dependencies *(if none, type "None" in first row)*

Name	Product or Service Provided	Reliance	Workaround Exists?	Workaround Documented?
ScanTag Solutions	Supplies barcode scanners for patient tracking	Medium	Yes	Yes
FastMed Diagnostics	Portable blood analyzers for rapid diagnostics.	High	No	N/A
PowerGrid Utilities	Electrical provider	High	Yes	Yes

Name of Critical Process:	**Emergency Medical Treatment**

Brief Description:	Provides life-saving interventions, diagnostic evaluations, and initial stabilization for patients with acute or life-threatening conditions.

Internal Dependencies *(if none, type "None" in first row)*

Name	Product or Service Provided	Reliance	Workaround Exists?	Workaround Documented?
Pharmacy Department	Dispenses medications and manages inventory.	High	Yes	Yes
Radiology Department	Provides imaging results for patient diagnostics.	High	No	N/A
Laboratory Services	Processes lab tests and provides results.	High	Yes	Yes

External Dependencies *(if none, type "None" in first row)*

Name	Product or Service Provided	Reliance	Workaround Exists?	Workaround Documented?
HealthEquip Rentals	Supplies rental ventilators for emergency use.	High	No	N/A
MedSupply Direct	Supplies infusion pumps and related consumables.	Medium	Yes	Yes
ImagingPro Services	Maintains Radiology Information System (RIS).	High	No	N/A

Name of Critical Process:	**Patient Admission and Transfer**

Brief Description:	Coordinates the seamless movement of patients from the Emergency Department to appropriate hospital units or external facilities for continued care.

Internal Dependencies *(if none, type "None" in first row)*

Name	Product or Service Provided	Reliance	Workaround Exists?	Workaround Documented?
Bed Management Team	Coordinates bed availability and patient placement.	High	Yes	Yes
Transport Services Team	Moves patients within the hospital.	Medium	Yes	Yes
Administration	Completes admission and discharge paperwork.	High	Yes	Yes

External Dependencies *(if none, type "None" in first row)*

Name	Product or Service Provided	Reliance	Workaround Exists?	Workaround Documented?
CarePath Logistics	Provides patient transport coordination software.	Medium	Yes	Yes
CleanAir Systems	Supplies negative pressure isolation units for infectious patients.	High	No	N/A
TeleConnect	Maintains hospital communication systems.	Medium	Yes	Yes

Name of Critical Process:	**Triage and Patient Prioritization**

Brief Description:	Evaluates and categorizes incoming patients based on the severity of their conditions to ensure those in

Computer System or Application	Procedure Name	Type	Exact Location of Data (Physical or Electronic)
Electronic Health Records (EHR)	Paper-Based Patient Charting	Paper	ED Downtime Charting Binder," stored in the ED Nurse Station, second drawer of the filing cabinet labeled Patient Records.
Patient Tracking System	Manual Patient Movement Log	Paper	"Tracking Logs Binder," located at the ED Reception Desk, on the lower shelf under the Triage Workarounds label.
Decision Support Software	Printed Clinical Decision Protocols	Paper	"Emergency Clinical Protocol Binder," located in the ED Staff Workroom, top shelf labeled Decision Support.

Dependencies (Internal & External)	Procedure Name	Type	Exact Location of Data (Physical or Electronic)
Facilities Management	Emergency Equipment Relocation Plan	Electronic & Paper	**Paper:** "Facilities Backup Procedures Binder," stored in the Facilities Manager's office, third drawer of the filing cabinet. **Electronic:** Shared folder on the Facilities network, under \FacilitiesShare\BackupPlans\EquipmentRelocation.
ScanTag Solutions	Manual Barcode Tagging	Paper	"Barcode Tagging Backup Binder," stored at the ED Supply Closet, labeled Patient ID Alternatives.
PowerGrid Utilities	Backup Power Generator Activation	Electronic & Paper	**Paper:** "Power Backup Plan Binder," located in the Facilities Office, filing cabinet labeled Emergency Plans. **Electronic:** Facilities shared folder, under \FacilitiesShare\BackupPlans\Generators.

| Name of Critical Process: | **Emergency Medical Treatment** |

| Brief Description: | Provides life-saving interventions, diagnostic evaluations, and initial stabilization for patients with acute |

Computer System or Application	Procedure Name	Type	Exact Location of Data (Physical or Electronic)
Pharmacy Management System	Manual Medication Log	Paper	"Pharmacy Manual Records Binder," stored in the Pharmacy Department, locked cabinet labeled Downtime Logs.
Laboratory Information System	Manual Lab Test Logging	Electronic & Paper	**Paper:** "Lab Downtime Binder," located in the Laboratory Office, filing cabinet labeled Workarounds. **Electronic:** Shared drive on the hospital network, under \NetworkShare\Lab\ManualLogs.
Clinical Decision Support System	Use of Printed Clinical Guidelines	Paper	"Clinical Guidelines Binder," stored in the ED Nurse Station, bookshelf labeled Decision Support.

Dependencies (Internal & External)	Procedure Name	Type	Exact Location of Data (Physical or Electronic)
Pharmacy Department	Manual Medication Dispensing	Paper	"Pharmacy Downtime Procedures Binder," stored in the Pharmacy Storage Room, top shelf labeled Workarounds.
Laboratory Services	Send Samples to Partner Facilities	Electronic	Shared folder on the hospital network, under \NetworkShare\Lab\BackupProcedures.
MedSupply Direct	Borrow Emergency Equipment	Electronic	Hospital cloud file storage, under \SharedDrive\MedSupply\EquipmentLending.

Name of Critical Process:	**Patient Admission and Transfer**

Brief Description:	Coordinates the seamless movement of patients from the Emergency Department to appropriate hospita

Computer System or Application	Procedure Name	Type	Exact Location of Data (Physical or Electronic)
Bed Management System	Manual Bed Availability Log	Paper	"Bed Management Downtime Binder," located at the Bed Management Team desk, labeled Manual Processes.
Transport Coordination Software	Manual Patient Transport Coordination	Electronic & Paper	**Paper:** "Transport Backup Binder," stored in the Transport Coordinator's office, on the top shelf. **Electronic:** Hospital shared drive, under \NetworkShare\Transport\BackupLogs.
Admission, Discharge, and Transfer (ADT) System	Paper-Based Admission and Discharge Logs	Paper	"Admission Logs Binder," stored in the Administration Office filing cabinet, second drawer labeled ADT Workarounds.

Dependencies (Internal & External)	Procedure Name	Type	Exact Location of Data (Physical or Electronic)
Bed Management Team	Manual Bed Tracking	Paper	"Bed Availability Binder," located at the Bed Management Desk, on the second shelf.
Transport Services Team	Use Phone and Email for Coordination.	Electronic & Paper	**Paper:** "Transport Backup Binder," stored in the Transport Team's workspace. **Electronic:** Shared folder on the hospital network, under \NetworkShare\Transport\Coordination.
Administration	Paper-Based Administrative Logs	Paper	"Administrative Workarounds Binder," stored in the Administration Office cabinet labeled Downtime Procedures.
CarePath Logistics	Manual Transport Coordination	Electronic & Paper	**Paper:** "CarePath Coordination Binder," stored in the Logistics Office, on the middle shelf. **Electronic:** Cloud storage under \SharedDrive\CarePath\BackupPlans.
TeleConnect	Use of Mobile Phones for Communication	Electronic	Documented in the "Communication Backup Plan," stored on the hospital shared drive under \SharedDrive\TeleConnect\BackupPlans.

VITAL RECORDS

Documents, files, and information (both physical and electronic) that are essential for maintaining business operations, protecting legal and financial rights, and ensuring continuity of care during and after a disruption. These records must be accessible during an emergency and are critical for business resumption. Examples include patient medical records, insurance information, contracts, licensing documentation, personnel files, and regulatory compliance records. Vital records require specific protection, backup procedures, and accessibility protocols as part of the business continuity strategy.

(if none, type "None" in first row)

Vital Record Description	Type	Physical/Electronic Location of Data	Reliance
Patient Medical Records	Electronic & Paper	**Electronic:** Stored in the hospital's Electronic Health Records (EHR) system, accessed via secure cloud storage under \CloudStorage\EHR\PatientRecords. **Paper:** Physical backup stored in the ED Supervisor's office, filing cabinet labeled Emergency Patient Records.	High
Pharmacy Inventory Logs	Electronic	Stored in the Pharmacy Management System, accessible via the hospital's secure server at \PharmacyNetwork\InventoryLogs.	High
Regulatory Compliance Records	Electronic & Paper	**Electronic:** Stored on the hospital's shared drive at \SharedDrive\Compliance\LicensingAndCertifications. **Paper:** Hard copies stored in the Compliance Office, in a locked cabinet labeled Regulatory Documentation.	Medium

Alternate Location

A designated facility or workspace separate from the primary business location that can be used to continue critical operations during a disruption. This location must have the necessary infrastructure, equipment, and resources to support essential business functions and can be activated according to predefined recovery time objectives.

Critical Process

A critical business process is an essential activity that must continue or quickly resume during a disruption to:
• Ensure organizational survival
• Maintain regulatory compliance
• Meet key business objectives
• Deliver products/services to customers

Dependencies

Resources required to perform critical processes, excluding IT systems (which are assumed). These are categorized as:
Internal Dependencies: Other departments, teams, or functions within your organization that your process relies on to operate effectively (e.g., Human Resources for staffing, Facilities for workspace, Legal for contract review).
External Dependencies: Third-party organizations, vendors, suppliers, or service providers outside your organization that your process needs to function (e.g., payment processors, shipping carriers, raw material suppliers, utility providers).

Manual Workaround

A **documented** alternate process or procedure that can be executed without normal technology or equipment to temporarily maintain critical business operations during a disruption. Workarounds may be less efficient but allow essential functions to continue while primary systems or equipment are being restored. Each workaround should include step-by-step instructions and identify any necessary low-tech tools, forms, or resources needed for implementation.

Maximum Tolerable Downtime (MTD)

The total amount of time an organization is willing to accept for a business process disruption, including all impact considerations.

Qualitative Loss - ADJUST TO YOUR ORGANIZATION'S NEEDS   Weighting

Quality of Care & Patient Experience	Disruption impacts the standard of care delivery, patient satisfaction, and overall healthcare experience. This includes delays in treatment decisions, reduced face-to-face time with providers, compromised continuity of care, and diminished patient comfort.
	18.00%

Clinical Staff Effectiveness	Disruption affects healthcare providers' ability to perform their duties effectively, impacting clinical decision-making, care coordination, and interdisciplinary collaboration. This includes increased stress on staff, reduced access to patient information, and compromised care team communication.	**10.00%**
Healthcare Safety & Risk Management	Disruption compromises patient and staff safety protocols, infection control measures, medication management, or other critical safety systems. This affects the organization's ability to maintain a safe healthcare environment and manage clinical risks effectively.	**15.00%**
Organizational Trust & Reputation	Disruption damages the healthcare organization's standing in the medical community, patient trust, referring physician relationships, and community confidence. This impacts the organization's reputation for reliable, high-quality healthcare delivery.	**6.00%**
Regulatory & Accreditation Standing	Disruption affects the organization's relationship with regulatory bodies, accreditation status, and compliance reputation. This includes non-quantifiable impacts on survey readiness, regulatory relationships, and quality reporting capabilities.	**5.00%**
Impact Ranking		**Score**
None to Negligible	Temporary disruption with negligible effect on care delivery and operations. Impact is contained within a single department or unit. Normal operations can continue with minor adjustments. Recovery is achievable within established contingency plans. No lasting effect on patient care, staff performance, or organizational reputation.	**1**
Marginal	Limited disruption affecting multiple departments but manageable through existing protocols. Some compromise to optimal care delivery but core services maintained. Staff can implement workarounds with minimal impact on patient outcomes. Temporary effect on organizational effectiveness with clear path to recovery.	**2**
Serious	Substantial disruption affecting major service lines or critical care areas. Notable compromise to care quality requiring activation of contingency plans. Staff functioning significantly impaired but essential services maintained. Extended recovery period needed with potential lasting effects on organizational performance.	**3**
Severe	Extensive disruption across multiple critical care areas. Serious compromise to patient care quality requiring diversion or transfer of patients. Staff unable to maintain normal standards of care. Major impact on organizational reputation and relationships with stakeholders. Long-term recovery effort required.	**4**
Catastrophic	Catastrophic disruption affecting entire organization's ability to deliver safe care. Severe compromise to patient safety requiring mass patient transfers or service suspension. Complete breakdown of normal operations. Permanent damage to organizational reputation and regulatory standing possible. May threaten organization's ability to survive.	**5**

Quantitative Loss - **ADJUST TO YOUR ORGANIZATION'S NEEDS**   **Weighting**

Clinical Revenue & Reimbursement Impact	Measurable financial losses from disrupted patient care activities and reimbursement processes, including canceled procedures, reduced visits, denied claims, missed filing deadlines, and impacts to value-based care metrics. Includes decreased bed occupancy, interrupted treatments, and penalties for quality measure non-compliance.	**15.00%**
Emergency Response & Recovery Costs	Additional expenses for maintaining patient care during disruption, including agency staffing, locum tenens providers, patient transfers, equipment rentals, and emergency supply procurement. Includes costs of temporary care areas and restoration of normal operations.	**12.00%**
Clinical Productivity Loss	Measurable decrease in patient care delivery capacity, calculated through metrics such as patient visits per hour, procedure completion rates, length of stay variations, and provider scheduling gaps. Includes impact on clinical documentation completion and care team efficiency.	**8.00%**
Healthcare Resource Waste	Quantifiable losses from expired medications, unused surgical supplies, wasted diagnostic materials, and spoiled laboratory specimens. Includes costs of re-ordering time-sensitive materials and maintaining temperature-sensitive healthcare items.	**5.00%**
Quality & Compliance Penalties	Measurable financial impact from reduced quality scores and regulatory compliance issues, including HCAHPS penalties, readmission rates, hospital-acquired condition penalties, and regulatory fines. Includes costs of mandatory corrective actions and impact on quality-based reimbursement.	**6.00%**
	Total (should equal 100%)	**100.00%**

Impact Ranking   **Score**

None to Negligible	$0 to $100,000 Single department impact, recoverable within operational budget	**1**
Marginal	$100,001 to $500,000 Multiple department impact, requires budget reallocation	**2**
Serious	$500,001 to $2,000,000 Service line impact, affects quarterly financial targets	**3**
Severe	$2,000,001 to $5,000,000 Organizational impact, affects annual financial performance	**4**
Catastrophic	Greater than $5,000,000 Enterprise-wide impact, threatens financial stability	**5**

Recovery Time Objective (RTO)

The targeted duration of time within which a business process must be restored after a disruption to avoid unacceptable consequences associated with a break in continuity. **NOTE:** RTO values can be adjusted on the Lookup Values Sheet.

Recovery Point Objective (RPO) Categories

The maximum acceptable amount of data loss measured in time after a disruption of service. It indicates the point in time to which data must be recovered to resume business operations, representing the organization's tolerance for data loss. For example, an RPO of 1 hour means systems must be restored using data that is no more than 1 hour old, indicating that up to 1 hour of data loss is acceptable in a disruption scenario. **NOTE:** RPO values can be adjusted on the Lookup Values Sheet.

Reliance - Dependencies

Indicates how critical an internal department/function or external vendor/service is to maintaining a process. High reliance means the process cannot function without the dependency and no alternative sources exist. Medium reliance indicates the process can continue with reduced efficiency using alternate departments/vendors for a limited time. Low reliance means readily available alternatives exist with minimal impact to operations. N/A indicates the dependency has no direct role in supporting the critical process.

Reliance - IT Systems & Applications

the process cannot continue without the system and no effective manual workarounds exist. Medium reliance indicates the process can continue with manual workarounds for a limited time at reduced efficiency. Low reliance means the system provides convenience but manual alternatives are readily available with minimal operational impact. N/A indicates the system has no direct role in supporting the critical process.

Reliance - Special Equipment

Indicates the degree to which a critical process depends on equipment that is difficult to replace or maintain due to unique characteristics. High reliance means the process cannot continue without the equipment and no alternative devices exist. Medium reliance indicates the process can continue with substitute equipment or modified procedures for a limited time. Low reliance means alternative equipment or methods are readily available with minimal operational impact. N/A indicates the specialized equipment has no direct role in supporting the critical process.

Reliance - Vital Records

Indicates how essential specific documents, files, or information are to maintaining a critical process. High reliance means the process cannot function without immediate access to these records and no workarounds exist. Medium reliance indicates the process can continue with limited or delayed access to records for a short period. Low reliance means temporary inaccessibility of records has minimal impact on process operations. N/A indicates the records have no direct role in supporting the critical process.

Special Equipment

Indicates the degree to which a critical process depends on equipment that is difficult to replace or maintain due to unique characteristics. High reliance means the process cannot continue without the equipment and no alternative devices exist. Medium reliance indicates the process can continue with substitute equipment or modified procedures for a limited time. Low reliance means alternative equipment or methods are readily available with minimal operational impact. N/A indicates the specialized equipment has no direct role in supporting

Systems/Applications

Technology components, including enterprise systems, productivity software, and specialized applications required to perform critical business processes. This includes both cloud-based and on-premises solutions, from common tools like Office 365 and Adobe Reader to specialized industry software and custom applications.

Vital Records

Documents, files, and information (both physical and electronic) that are essential for maintaining business operations, protecting legal and financial rights, and ensuring continuity of care during and after a disruption. These records must be accessible during an emergency and are critical for business resumption. Examples include patient medical records, insurance information, contracts, licensing documentation, personnel files, and regulatory compliance records. Vital records require specific protection, backup procedures, and accessibility protocols as part of the business continuity strategy.

Work Recovery Time

The maximum tolerable amount of time that is needed to verify the process or system and/or data integrity. This could be, for example, checking the databases and logs, making sure the tasks or services are running and are available. When all systems affected by the disaster are verified and/or recovered, the environment is ready to resume normal operations.