NIH Policy Manual

1428 - NIH Emergency Management Program

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Transmittal Notice

1. **Explanation of Material Transmitted:** This new Manual Chapter establishes guiding principles for the NIH Emergency Management Program and formally designates the NIH organizations that have roles and responsibilities in preparing for, responding to, and recovering from major emergencies that impact the NIH. Program-level responsibilities are included in this Manual Chapter, while more detailed guidance is provided in the NIH Emergency Operations Plan (EOP) and Continuity of Operations (COOP) Plan. Specific policies regarding emergency management programs for NIH Institutes and Centers and each NIH-occupied facility are provided in Manual Chapter 1429 and Manual Chapter 1430, respectively.
2. **Filing Instructions:**

   Insert: NIH Manual Chapter 1428, dated 07/31/2019

PLEASE NOTE: For information on:

- Content of this chapter, contact the issuing office listed above.
- NIH Policy Manual, contact the Division of Management Support, OMA on 301-496-4606, or enter this URL: https://oma.od.nih.gov/dms/pages/manual-chapters.aspx.

A. Purpose

The purpose of this Manual Chapter is to establish formal policy for the NIH Emergency Management Program and identify the NIH Institutes and Centers (IC), Offices, Branches, and Divisions that support emergency preparedness and incident response and recovery efforts. These organizations will provide subject matter expertise, communications management, situational assessments, and resources including equipment and personnel.

Note: In this Manual Chapter, the term *NIH Organizations* refers to entities at various organizational levels across NIH, and the term IC collectively refers to the NIH Institutes and Centers and the Office of the Director (OD).

B. Scope

This policy is effective immediately and applies to the organizations listed in Section E below. Typically, these are entities that provide critical trans-NIH programs, services, and oversight, or those that possess certain specialized knowledge or resources. The responsibilities in this document are related to the overarching program, and more detailed guidance is provided in other emergency plans and procedures, including the *NIH Emergency Operations Plan (EOP)* and the *NIH Continuity of Operations (COOP) Plan*.

While this Manual Chapter names specific groups, it is not all-inclusive. Certain situations may require the support and resources of other organizations. These additions may be requested on an ad-hoc basis or included in formal chapter updates.

The NIH Emergency Management Program incorporates the following two additional elements not specifically addressed in this chapter that apply to all ICs:

1. [Manual Chapter 1429, NIH Institute and Center Emergency Management Programs](#)mandates IC-level emergency management programs.
2. [Manual Chapter 1430, NIH Occupant Emergency Management Program](#) describes the requirements for occupant emergency plans for each NIH-occupied facility.

C. Policy

The NIH Emergency Management Program was developed in accordance with federal emergency management and continuity requirements and will accomplish the following objectives:

1. Adopt and use the principles of the National Incident Management System (NIMS) and Incident Command System (ICS) during all emergency response operations conducted by NIH emergency personnel.
2. Develop plans and procedures that effectively address how to respond to and recover from natural, technological, and/or man-made incidents.
3. Develop Test, Training, and Exercise (TT&E) Programs that support continual improvement of emergency management and continuity capabilities.

D. Roles and Responsibilities

1. The NIH Emergency Management Program relies on the active involvement of the Institutes, Centers, and Offices listed below to support the Emergency Management Cycle. The Emergency Management Cycle consists of preparing for, responding to, and recovering from incidents that impact NIH patients, staff, facilities, or resources.
2. The following organizations are identified as having a consistent role in the NIH Emergency Management Program according to existing plans and procedures and will fulfill the responsibilities included in this Manual Chapter.

Note: Additional organizations may be included on an ad-hoc basis.

a. NIH Clinical Center
b. NIH Center for Information Technology
c. NIH Office of the Director:

    1. NIH Branch of the Office of the General Counsel, Public Health Division
    2. Office of Communications and Public Liaison
    3. Office of Extramural Research
    4. Office of Intramural Research:

        a. Office of Animal Care and Use

    5. Office of Management:

        a. Office of Acquisition and Logistics Management
        b. Office of Budget
        c. Office of Financial Management
        d. Office of Human Resources
        e. Office of Management Assessment
        f. NIH Business System
        g. Office of Research Facilities Development and Operations:

            1. Office of Acquisitions
            2. Division of Environmental Protection
            3. Division of Facilities, Operations, and Maintenance
            4. Division of Technical Resources

        h. Office of Research Services:

            1. Communication Director
            2. Office of Security and Emergency Response:

                a. Division of Emergency Management
                b. Division of the Fire Marshal
                c. Division of Fire and Rescue Services
                d. Division of Personnel Security and Access Control
                e. Division of Physical Security Management
                f. Division of Police

            3. Office of Program and Employee Services:

                a. Division of Amenities and Transportation Services

            4. Division of Occupational Health and Safety
            5. Division of Radiation Safety
            6. Information Technology Branch

3. The Division of Emergency Management (DEM) will lead the NIH Emergency Management Program as well as perform the functions listed below:

    a. Publish and maintain the EOP.
    b. Publish and maintain the COOP Plan.
    c. Draft, publish, and maintain other essential NIH-wide policy and relevant hazard-specific plans and procedures.
    d. Perform the tasks outlined in the EOP, COOP Plan, and other related annexes, plans, and procedures.
    e. Provide procedural guidance and training to the NIH organizations named in this Manual Chapter.
    f. Develop and administer a Test, Training, and Exercise (TT&E) Program that supports continuous validation and improvement of existing plans, policies, and procedures, and incorporates progressive training, drills, and exercises, as well as regular testing of systems and equipment.

4. The organizations identified in this Manual Chapter will adhere to the program-level responsibilities below as well as those described in NIH emergency management plans, including the EOP and COOP Plan.

    a. Assist in the development and maintenance of NIH-level emergency management policies, plans, and procedures including the EOP, COOP Plan, and other relevant documents.
    b. Ensure NIH Emergency Management policies and plans comply with regulations and policy within the organization's purview.
    c. Develop and maintain internal policies, plans, and procedures that support the aforementioned documents.
    d. Designate individuals who have the authority to make decisions and commit resources on behalf of their organization, and who are able to perform the tasks outlined in the EOP, COOP Plan, and other related annexes, plans, and procedures. The individual(s) may be required to be physically present in the Emergency Operations Center (EOC) during an incident response.
    e. Participate in the NIH Test, Training, and Exercise Program.

E. References

1. HSPD-5, *Management of Domestic Incidents*, February 28, 2003.
2. PPD-8, *National Preparedness*, March 30, 2011.
3. PPD-40, *National Continuity Policy*, July 15, 2016.
4. FCD-1, *Federal Continuity Directive 1: Federal Executive Branch National Continuity Program and Requirements*, January 17, 2017.
5. Homeland Security document, *National Response Framework*, Third Edition, June 2016.

6. <u>Homeland Security document, *National Incident Management System*, Third Edition, October 2017</u>.
7. Department of Health and Human Services Continuity of Operations Program Policy, April 5, 2018
8. *NIH Emergency Operations Plan (EOP), February 28, 2018* (limited access)
9. *NIH Continuity of Operations (COOP) Plan, April 28, 2016* (limited access)
10. <u>NIH Delegations of Authority, General Administration #12,</u> *Emergency Readiness Programs and National Emergency Operations Plan*
11. <u>NIH Manual Chapter 1744,</u> *NIH Vital Records Program*

F. Definitions

1. **Continuity of Operations (COOP):** An effort within the Executive Office of the President and individual Departments and Agencies to ensure that essential functions continue to be performed during disruptions of normal operations.
2. **Emergency:** A sudden, unexpected, or impending situation that requires prompt action to protect life, property, and the environment.
3. **Emergency Management Cycle:** The continuous process by which NIH prepares for, responds to, and recovers from threatened or actual emergencies or disasters, regardless of cause.

    a. *Preparedness:* Activities conducted prior to an emergency in order to prevent their occurrence, protect against their consequences, or mitigate their damage.
    b. *Response:* Activities conducted to address the direct effects of an incident, including immediate actions to save lives, protect property, and mitigate damage.
    c. *Recovery:* Short-term (recovery) and long-term (reconstitution) activities conducted to mitigate damage and restore normalcy to the organization or community.

4. **Emergency Management Program:** A group of related initiatives meant to protect communities by coordinating and integrating all activities necessary to build, sustain, and improve the capability to mitigate against, prepare for, respond to, and recover from threatened or actual natural disasters, acts of terrorism, or other man-made disasters.
5. **Emergency Operations Center (EOC):** The physical location at which the coordination of information and resources to support incident management activities normally takes place. An EOC may be a temporary facility or may be located in a more central or permanently established facility.
6. **Emergency Operations Plan (EOP):** A document that identifies organizations responsible for performing response and recovery activities and assigns specific tasks they must accomplish. It outlines the direction, control, and communications procedures and systems that will be relied upon to alert, notify, recall, and dispatch emergency response personnel; warn and protect staff; and protect property.
7. **Incident:** An occurrence, natural or man-made, that requires action by emergency response personnel to prevent or minimize loss of life or damage to property and/or resources. Incidents include situations that require small-scale responses as well as

larger emergencies or disasters that may cause injuries or deaths, significant property damage, or harm to the environment.

8. **Test, Training, and Exercise (TT&E):** Activities designed to impart skills, improve operational capabilities, and ensure viability of existing plans.