Contingency & Downtime Planning Companion Pack

A Strategic Guide for Long-Term Care Organizations Committed to Care Continuity, No Matter the Crisis

INSURICA®
HEALTHCARE

An Assurex Global Partner

Executive Summary: Why This Matters

What's at Stake

Today's long-term care operations rely heavily on interconnected digital systems, EHRs, MARs, pharmacy platforms, communication tools, and more. When those systems fail, whether from cyberattacks, vendor outages, or internal disruptions, care quality, regulatory compliance, and leadership control are all immediately at risk.

This toolkit was created to help you answer a critical question:

"What actually happens when the systems go down, and are we truly ready?"

Strategic Outcomes This Supports

- Protect resident safety and staff confidence during digital disruptions
- Avoid regulatory, legal or reputational fallout due to unpreparedness
- Coordinate response across departments, vendors, and leadership
- Document governance and planning efforts for surveyors and insurers
- Shift from a compliance mindset to an operational readiness culture

Who This Is For

- **Executives & Boards**: Oversight, risk governance, reputational defense
- **Operations & Clinical Leaders**: Continuity of care, staffing, and workflow clarity
- **IT & Compliance Teams**: Execution, monitoring, and documentation

How to Use This as a Leader

1. **Use the Readiness Scorecard**: Quickly assess your organization's current preparedness across 5–7 core domains. Calculate you score, then assign next steps.
2. **Assign Accountability Across Departments**: Contingency planning is not solely an IT function. This toolkit includes role based response guidance, templates, and communication flows for every department.
3. **Lead the Culture Shift**: Signal to your team that downtime planning matters. Ask questions. Join a drill debrief. Support operational readiness as an enterprise priority, not just a checkbox.

Final Word

Whether you're in skilled nursing and answer to CMS, or assisted living and governed by your state's Department of Health, the bare minimum is not enough. Your residents, staff, and board expect more than a policy. They need a plan that works.

Self Evaluation Matrix

Domain	Description	Score (0-3)	Notes / Next Steps
Clinical Continuity	Can essential resident care (e.g., meds, assessments, charting) continue if systems are down? Are backups clear, available, and practiced?		
Communication During Downtime	Are internal and external communication processes (calls, alerts, family updates) defined and accessible without digital tools?		
Role Clarity & Response Leadership	Do staff know who leads during system failures, and what their roles are? Are responsibilities documented and understood?		
Manual Workflows & Paper Readiness	Are paper based processes available and ready to deploy for medication, charting, scheduling, and documentation?		
Vendor & Technology Dependencies	Have critical vendors been reviewed for downtime protocols, contact plans, and backup systems? Are recovery expectations clear?		
Staff Training & Confidence	Have staff been trained on downtime protocols? Have drills occurred in the last 12 months? Do staff feel confident responding?		
After Action & Improvement Planning	Are drills followed by debriefs, documented AARs, and updates to protocols or training based on lessons learned?		

Readiness Scorecard

Scoring Key (0–3 Scale)

- 0 – Not Addressed: No plan, documentation, or awareness exists
- 1 – Partially Aware: Some awareness or informal efforts, but incomplete or inconsistent
- 2 – Documented: Plan/process exists and is known by relevant staff, but not recently tested
- 3 – Practiced & Proven: Plan/process exists, is documented, regularly tested, and updated

Total Your Score

Add the totals from each domain above:
Total Readiness Score: ____ / 21

Range	Tier	Suggested Action
0–7	🔴 Red	High vulnerability – Start foundational planning immediately
8–14	🟡 Yellow	Moderate readiness – Focus on gaps and start testing plans
15–21	🟢 Green	Strong foundation – Maintain momentum, expand training, and track improvements

How to Use This Over Time

- Use your score as a baseline. Revisit every 12–18 months, after real downtime events, or during CMS/state emergency preparedness reviews.
- Track improvement over time by dating each version.
- Reflect on trends:
  - Are gaps shrinking?
  - Are drills uncovering new blind spots?
  - Is staff confidence improving?

Optional Reflection Prompts

- Which domain scored lowest, and why?
- Were any surprises revealed during evaluation or drill simulations?
- What are 3 actions you can take in the next 30 days to improve readiness?
- Who needs to be involved to sustain progress?

Response Planning Toolkit

A practical framework for maintaining operations during digital system disruptions.

Key Point:

Strong contingency planning doesn't stop at identifying what might go wrong, it ensures that your people know exactly what to do when it does.

Why It Matters:

When digital systems fail, whether from a cyberattack, software issue, or vendor outage, confusion, delays, and safety risks escalate quickly if roles, backups, and response triggers aren't clearly defined.
Too often, long-term care organizations:

- Focus only on IT or compliance, leaving operational leaders unprepared.
- Assume vendors will respond quickly, but haven't defined expectations.
- Default to "figure it out in the moment" rather than structured fallback steps.

This toolkit helps your leadership team build real-world response plans that are actionable, team-specific, and ready to use.

How to Use This Section:

You'll find three planning tools:

1. **Downtime Scenario Mapping**
    - Diagnose the impact of key system failures and surface operational blind spots.
2. **Manual Workflow Trigger Plan**
    - Clarify which manual or paper based processes exist, when to activate them, and who's responsible.
3. **External Contact & Escalation Map**
    - Identify critical vendors, their expected response times, and your fallback plan if they're unavailable.

💡 Each of these templates is designed to be copied into Excel or Google Sheets for ongoing use, updates, and integration into your emergency operations plan.

Downtime Scenario Mapping

Scenario	How Would It Be Detected?	Who Would Be Impacted First?	What's the Immediate Risk?	What's the Workaround?	Who's Responsible for Leading the Response?
EHR system inaccessible	Nurses report they can't chart; error messages on login	Clinical staff, especially nursing	Inability to access med orders, MARs, and patient history	Switch to paper MARs and manual documentation process	Director of Nursing and IT Manager jointly coordinate response
Internet outage					
Nurse call system failure					
Pharmacy platform or MAR down					
Phone or VoIP system disruption					
Access control / badge system fail					
Vendor-hosted system breach					

Use This Template To:

- Identify critical systems and map their failure points.
- Start meaningful conversations across departments.
- Build the foundation for realistic contingency planning.

💡 Tip: Start with one system and one team. Don't aim for perfection, aim for clarity. The best scenario maps grow over time, not in one sitting.

Manual Workflow & Trigger Plan

Function / Workflow	Primary System	Is a Manual or Paper Backup Available?	Trigger Point	Response Lead
Medication Administration	eMAR	Yes – Paper MARs	eMAR down >15 minutes	Charge Nurse
Resident Documentation				
Family Communication				
Dietary Orders				
Payroll Processing				
Admissions & Transfers				

Use This Template To:

- Assign contingency responsibilities before an emergency occurs
- Define clear thresholds for shifting to manual or paper-based workflows
- Uncover gaps where no fallback process exists, these become your next priorities

🔄 Tip: Make this a standing agenda item during emergency preparedness planning or department leader meetings.

External Contact & Escalation Map

Vendor / Partner	Service or System	Primary Contact Info	Expected Response Time	If No Response Within X Time...
EHR Provider	Resident Documentation	support@ehrco.com / 800-555-1212	30 minutes	Switch to paper MARs and begin AAR log
Pharmacy				
IT Provider / MSP				
Phone / VoIP				
Badge Access Vendor				

Use This Template To:

- Define vendor recovery expectations before a crisis
- Identify weak points in vendor responsiveness or backup support
- Ensure staff know who to call and what to do if that call goes unanswered

✅ Leadership Tip: Ask each department to fill out one row during your next preparedness meeting. Then consolidate into your master downtime plan.

Using the Response Planning Toolkit Effectively

These tools aren't just forms, they're a catalyst for insight, communication, and leadership alignment. Use the guidance below to transform them from a worksheet into a strategic asset:

1. **Start With What You Know**
   - Begin with past events or known vulnerabilities, no need to guess.
   - Ask staff across roles and shifts: *"What went down recently that made things harder?"*
2. **Involve the Right People**
   - Invite nursing, IT, admin, dietary, front desk, and facilities.
   - Each team sees different failure points, use that diversity.
3. **Identify Gaps and Assign Owners**
   - Look for blank fields, "not documented" backups, or vague leadership roles.
   - These are priority risks, not just planning oversights.
4. **Customize and Copy to Excel or Sheets**
   - Use the included tables as editable templates.
   - Add columns for last reviewed, owner, and completion target if tracking progress over time.
5. **Integrate Into Emergency Operations Planning**
   - Add this toolkit to your EOP binder or CMS compliance folder.
   - Review annually or after major vendor/system changes.
6. **Use in Drills or Simulations**
   - These tables can double as scenario prompts or debrief tools.
   - Refer back to them when running downtime simulations, especially when assigning roles or stress testing communication.
7. **Share During Onboarding**
   - Give new department heads or critical role staff access to past exercises.
   - It sets a clear tone: preparedness is part of leadership, not an afterthought.

🔁 Tip: These are living documents, not one-time forms. Build versioning into your planning process and encourage staff to update them collaboratively.

Scenario Simulation Guide

Running a Downtime Simulation That Actually Improves Readiness

Simulation isn’t about testing perfection, it’s about surfacing confusion, clarifying roles, and improving your response before a real crisis forces your hand.

Why It Matters

When systems fail, even the most well written plan can break down if staff aren’t familiar with their roles, manual workarounds, or communication expectations. Simulations help leadership:

- Validate their current contingency plans
- Build staff confidence and cross-department coordination
- Fulfill regulatory and survey expectations (CMS or state level)

Yet many long-term care organizations avoid simulations, fearing time burden or uncertainty about how to run one. This framework keeps it simple and effective.

How to Use This Section

Choose a realistic scenario and walk your team through it step by step.
No actors or elaborate roleplay required, just focused discussion.

Who Should Be Involved

- Department heads (Nursing, IT, HR, Admin)
- Clinical leads (Charge nurses, med pass coordinators)
- Front desk or communications staff
- Facilities or maintenance
- Pharmacy or key vendors (optional)
- Executive leader or emergency preparedness coordinator

Simulation Timeframe

- 20–45 minutes is ideal
- Can be part of a monthly leadership meeting or annual preparedness session
- Document the session to satisfy CMS/state requirements (see AAR Template in Action Builder)

Example Downtime Scenarios for Simulation

Use one of the following to guide your tabletop discussion or create your own based on real events or known vulnerabilities.

Scenario 1: EHR Down During Med Pass

Trigger: Nurses report login errors during morning med rounds.
Immediate Risks: Delayed or duplicate medications, gaps in documentation.
Prompt Questions:

- Who notices first, and what do they do?
- How is the medication schedule accessed?
- What's the documentation method during downtime?
- How is this communicated to leadership and pharmacy?

Scenario 2: Internet and VoIP Failure

Trigger: Facility wide internet outage disables VoIP phones and call systems.
Immediate Risks: Internal communication breakdown, delayed alerts, vendor contact failure.
Prompt Questions:

- How do departments communicate without internet or phones? Has everyone exchanged cell numbers?
- What's the backup method for reaching pharmacy or 911?
- How are families contacted during the outage?

Scenario 3: Pharmacy System Breach

Trigger: Your pharmacy partner halts service due to a ransomware attack.
Immediate Risks: No med order processing, refill delays, care disruptions.
Prompt Questions:

- What alternative med coordination options exist?
- Who notifies residents, staff, and families?
- Are there regulatory or legal steps required?

Scenario 4: Facility Access System Failure

Trigger: Badge access system fails after an internal IT update.
Immediate Risks: Locked out staff, delayed resident support, safety issues.
Prompt Questions:

- What is the manual override process?
- Who controls facility access during the outage?
- How is staff coverage maintained across shifts?

✏️ These examples can be customized based on your systems and risks. Run one scenario per quarter, or combine them for a more complex drill.

Simulation Flow – 5 Simple Steps

Step	What to Do	Example Prompts
1. Introduce the Scenario	Select a likely system failure event (EHR, internet, pharmacy outage, etc.)	"Let's say the EHR goes down at 6:30 AM during med pass."
2. Identify the Detection Point	Who would notice first? How?	"Who realizes the system is down and what do they do first?"
3. Walk Through the First 15 Minutes	What happens, who gets notified, what workaround is triggered?	"How are MARs accessed? Who takes charge of response?"
4. Explore Secondary Consequences	What downstream issues arise in the first 1–2 hours?	"How does this affect admissions, charting, family calls?"
5. Debrief & Assign Follow-Ups	What worked, what didn't, what needs to change?	"Was everyone clear on their role? Where was there confusion?"

Don't Forget to Document

Use the After Action Report (AAR) template in the Action Builder section to:

- Capture what was learned
- Track improvement opportunities
- Provide documentation for regulators, insurers or if needed in litigation

✅ Tip: Even if you don't run a full simulation, structured discussion of a scenario can meet CMS expectations if documented with reflection and action steps.

Action Builder: Turning Planning into Progress

Key Point

Insight without action is just information. This section helps your leadership team move from awareness to accountability, transforming gaps and ideas into targeted steps that build real readiness.

Why It Matters

- You've assessed your downtime vulnerabilities. You've mapped out fallback processes. You may have even tested a scenario. But unless that work leads to follow through, the risk remains.
- Action planning doesn't need to be complex. What matters is that:
  - The right people own the right tasks
  - Priorities are based on risk and urgency
  - Progress is tracked and revisited, not shelved

How to Use This Resource

Choose 3–5 focus areas uncovered through your downtime mapping, manual planning, or simulation. Assign owners and set realistic timelines, this becomes your continuity improvement plan for the next quarter.

Priority Area	Gap or Improvement Needed	Assigned Owner	Target Completion Date	Dependencies / Notes
Communication	No internal comms plan for VoIP failure	Admin Lead	August 15	Add to downtime binder
Clinical Workflow	No paper MARs for night shift staff	Director of Nursing	July 31	Coordinate with pharmacy for template
Vendor Readiness	No response expectation from pharmacy	IT Coordinator	August 5	Add to vendor escalation plan
Staff Training	No downtime drills conducted this year	HR Manager	September 1	Use Scenario Simulation Guide
Documentation	Emergency access policy not updated	Compliance Officer	July 20	Review after Action Builder complete

Use this page as a standing agenda item in leadership meetings, risk reviews, or emergency preparedness committees.

After Action Report (AAR) Template

Item	Details
Date of Simulation / Review	
Scenario or Focus Area	
Departments Involved	
Strengths Observed	
Gaps or Failures Identified	
Improvement Actions Agreed Upon	
Assigned Owners	
Target Dates for Follow-Up	
Notes / Survey Readiness Status	

✅ Keep a copy of this form in your Emergency Preparedness file. Surveyors may request to review it during audits or site visits. Even if they don't, documentation can create defensibility in litigation.

Closing the Loop: Planning Is Just the Beginning

Summary

Digital disruption is no longer a distant threat, it's a daily operational risk. Whether caused by a cyberattack, a vendor failure, or a simple outage, downtime disrupts every part of your organization: care delivery, compliance, communication, and leadership.
This Companion Pack was designed to help long-term care organizations move beyond box checking policies and toward real, coordinated response plans, the kind that protect residents, empower staff, and give leadership confidence when systems fail.
Throughout this guide, you've:

- Assessed your current readiness
- Mapped system vulnerabilities and critical roles
- Built fallback workflows and escalation paths
- Practiced simulation and debriefing
- Translated insight into action

But the most important step is the next one: **keeping the momentum going.**

A Final Word

You don't need a perfect plan, you need a practiced one.
The organizations that manage disruption best aren't necessarily the ones with the most expensive systems, they're the ones who align leadership, staff, and vendors around practical, tested responses.

That kind of alignment takes time. It also takes support.

✅ **This Companion Pack is yours to use, adapt, and build on. If you'd like help scaling it across your organization, or if you're ready to go deeper, we're here when you're ready.**

Assurex® GLOBAL
Strength through independence.®

INSURICA®
HEALTHCARE

How We Can Help

As part of INSURICA's healthcare practice, I work with long-term care organizations to move beyond insurance policies, and into real, proactive risk leadership.

We help organizations:

- Translate planning into measurable outcomes
- Align cyber coverage with actual exposure and explore alternative risk financing
- Strengthen vendor oversight and business continuity
- Run scenario based tabletop drills with clinical and operational staff
- Build readiness strategies that support CMS, state, and insurer expectations

Whether you're looking for a second set of eyes on your plans, help coordinating your next tabletop drill, or a long term partner to improve outcomes and reduce volatility, I'd be glad to talk.

Let's Connect

Drew Colwell
Healthcare Risk Advisor | INSURICA
Drew.Colwell@INSURICA.com
406-333-6309
LinkedIn.com/in/drewcolwell

INSURICA®
HEALTHCARE
An Assurex Global Partner