



IMPERIAL COUNTY
Behavioral Health Services
MENTAL HEALTH & SUBSTANCE USE RECOVERY

Imperial County Behavioral Health Services Contingency Plan



Prepared By:
Imperial County Behavioral
Health Services
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CONTINGENCY PLAN

1. INTRODUCTION

The purpose of this plan is to define the recovery process developed to restore Imperial County Behavioral Health Services critical business functions.

1.1 PURPOSE

This ICBHS Contingency Plan establishes procedures to recover the systems noted in table 1.1, Systems to be recovered, following a disruption. The following objectives have been established for this plan:

- Maximize the effectiveness of contingency operations through an established plan that consists of the following phases:
 - Notification/Activation phase to detect and assess damage and to activate the plan
 - Recovery phase to restore temporary IT operations and recover damage done to the original system
 - Reconstitution phase to restore IT system-processing capabilities to normal operations.
- Identify the activities, resources, and procedures needed to carry out ICBHS's processing requirements during prolonged interruptions to normal operations.
- Assign responsibilities to designated ICBHS personnel and provide guidance for recovering systems during prolonged periods of interruption to normal operations.
- Ensure coordination with other ICBHS and County staff who will participate in the contingency planning strategies. Coordination with the Imperial County Emergency Operations Plan is required if the incident involves more than Behavioral Health Services.
- Ensure coordination with external points of contact and vendors who will participate in the contingency planning strategies.

Table 1.1 Systems to be recovered:

Application/ System	Responsible/ Maintained by	Priority Ranking	Required by
ICBHS Network	County IT	1	MyAvatar, Email
MyAvatar	NTST/BHS	2	Behavioral Health Services
Microsoft Office	County IT	3	Used for Client Tracking Logs and Data Reporting
Outlook	County IT	4	Communication
FoxPro	County IT	5	Buying Resources
KoFax	BHS/Vendor	6	Medical Records Imaging

1.2 APPLICABILITY

The Contingency Plan applies to the functions, operations, and resources necessary to restore and resume ICBHS’s operations as it is located at ICBHS Administrative office at 202 North 8th St, El Centro, CA 92243. The Contingency Plan applies to ICBHS and all other persons associated with the systems as identified under Section 2.3, Responsibilities.

1.3 SCOPE

1.3.1 Planning Principles

Various scenarios were considered to form a basis for the plan, and multiple assumptions were made. The applicability of the plan is predicated on three key principles:

- The ICBHS’s facilities and/or network/servers are inaccessible; therefore, ICBHS is unable to perform regular electronic business processes.
- A valid contract exists with Netsmart that designates the ICBHS’s alternate operating connection.
- A valid alternate site exists, that client services and electronic processing can be relocated to.
 - ICBHS will use the alternate sites, buildings, and IT resources to recover system functionality during an emergency that prevents access to the original facility.
 - The designated computer system at the alternate site has been configured to begin processing information.
 - The alternate site, if needed, will be used to continue system recovery and

processing throughout the period of disruption, until the return to normal operations.

1.3.2 Assumptions

Based on these principles, the following assumptions were used when developing the IT Contingency Plan:

- MyAvatar System is inoperable due to network inaccessibility, building is compromised and/or Netsmart connection is unavailable and cannot be recovered within 2 hours.
- Key personnel have been identified and trained in their emergency response and recovery roles; they are available to activate the Contingency Plan.
- Preventive controls (e.g., batteries, UPS, environmental controls, waterproof tarps, sprinkler systems, fire extinguishers, and fire department assistance) are operational at the time of the disaster. Current back up availability time is 30 minutes.
- Current backups of the application software and data are intact and available at the offsite storage facility. Tape backups for shared drives, medical records and Accounting System, FoxPro are stored in tapes located at 940 W. Main St., El Centro, CA 92243. MyAvatar is hosted by Netsmart and is backed up per their documentation. See Section 2.1 System Description and Architecture description below for details.
- The equipment, connections, and capabilities required to operate the systems are available at the alternate sites in:
 - Brawley, CA 92227
 - Calexico, CA 92231
 - El Centro, CA 92243
- Service agreements are maintained by the Purchasing Department with hardware, software, and communications' providers to support the emergency system recovery.

The Contingency Plan does not apply to the following situations:

- Overall recovery and continuity of business operations. The Imperial County Operational Area, Emergency Operations Plan (EOP) is referenced in this plan. (Copy is available in the ICBHS Intranet for your reference). The Imperial County Operational Area, Emergency Operations Plan (EOP) is responsible for overall recovery of business operations.
- Emergency evacuation of personnel. The Imperial County Behavioral Health Disaster/Crisis Response Plan is appended to the plan. Each floor manager is responsible for evacuation by floor/building. *(Please see attached appendices A & B for the procedures.)*

1.4 REFERENCES/REQUIREMENTS

This Contingency Plan complies with the ICBHS' IT Contingency Planning Policy as follows *(Please see attached appendices C & D for the policies):*

- 01-297- HIPAA Contingency Plan
- 01-231- HIPAA Access Management

The Contingency Plan also complies with the following Federal and Departmental policies:

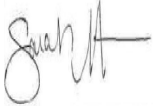

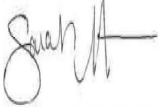

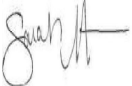



- 45 CFR, HIPAA Regulation.
- NIST-In February 2014, NIST released the Framework for Improving Critical Infrastructure Cybersecurity (Cybersecurity Framework) as directed in Executive Order 13636, Improving Critical Infrastructure Cybersecurity. The Cybersecurity Framework provides a voluntary, risk-based approach—based on existing standards, guidelines, and practices—to help organizations in any industry to understand, communicate, and manage cyber security risks. In the health care space, entities (covered entities and business associates) regulated by the Health Insurance Portability and Privacy Act (HIPAA) must comply with the HIPAA Security Rule to ensure the confidentiality, integrity, and availability of electronic protected health information (ePHI) that they create, receive, maintain, or transmit.
- ISO 27000 Guidelines- ISO has published 21799 International Standards and related documents, covering almost every industry, from technology, to food safety, to agriculture and healthcare.
- SSAE 16, also called Statement on Standards for Attestation Engagements 16, is a regulation created by the Auditing Standards Board (ASB) of the American Institute of Certified Public Accountants (AICPA) for redefining and updating how service companies report on compliance controls.

- OMB Circular A-130, Management of Federal Information Resources, Appendix III, November 2000. This Appendix establishes a minimum set of controls to be included in Federal automated information security programs; assigns Federal agency responsibilities for the security of automated information; and links agency automated information security programs and agency management control systems established in accordance with OMB Circular No. A- 123.
- Federal Preparedness Circular (FPC) 65, Federal Executive Branch Continuity of Operations, July 1999. This Federal Preparedness Circular (FPC) provides guidance to Federal Executive Branch departments and agencies for use in acquiring alternate facilities to support their COOP.
- “Information Security Reform,” October 30, 2000. Federal law that required U.S. government agencies to implement an information security program that includes planning, assessment and protection. It was enacted in 2000 and replaced by the Federal Information Security Management Act (FISMA) in 2002.

1.5 RECORD OF CHANGES

Table 1.2 Records of Changes

Modifications made to this plan since the last printing are as follows:

Page No.	Change Comment	Date of Change	Signature
9	Update contact information	09/08/2022	
9	Update IS Team Responsibilities. Updated from Ryan Taylor, AA to Arely Flores, PS.	09/08/2022	
10	Update contact information.	09/08/2022	
10	Updated ICBHS Contact for Netsmart. From Ryan Taylor, AA to Arely Flores, PS.	09/08/2022	
13	Add: “If staff is directed to work from home and clients do not have equipment to attend telehealth appointment, front line is to reschedule or coordinate accommodation.”	09/08/2022	
12	Add: “Share Drive access” to Recovery goal	09/13/2022	
13	Add: “Ensure staff has access to share drive” to Recovery Operations under Systems Technology	09/13/2022	
15-49	Update Attachments as needed	09/13/2022	

Refer to Appendix L: Record of Changes for a continuation of the record of changes.

2. CONCEPT OF OPERATIONS

2.1 SYSTEM DESCRIPTION AND ARCHITECTURE

Electronic Health Record Description-Netsmart' s Cloud

The Netsmart MyAvatar system is used at ICBHS for the Electronic Health Record. OrderConnect is used for ePrescribing.

The Electronic Health Record works through the Virtual (Cloud) operating environment. The secure environment can be accessed by authorized users (ICBHS Staff) from anywhere with an Internet connection. Servers are maintained through Plexus Cloud at Netsmart' s headquarters located at 4950 College Blvd Overland Park, KS 66211. Staff performs daily back-ups and install updates for the operating systems, database, and application software. Plexus Cord guarantees 99.9% uptime accessibility to data and uses two external data storage facilities. Backup tapes are encrypted and stored in a secured vault at Iron Mountain.

Shared Files

Server: BHS-FS

Operating Environment: VMWare Cluster

Physical Location: 940 W. Main St., El Centro, CA 92243

Users: Authorized ICBHS Network Users

Users General Location: Available upon manager's approval

External organizations/Systems partnership: N/A

Back-Up Schedule: Incremental-Mon thru Thurs Starts at 8:00PM/Full-Backup: Friday (15 Hours)

Medical Records-Imaging

Server: BHS-DOCMGT

Operating Environment: VMWare Cluster

Physical Location: 940 W. Main St., El Centro, CA 92243

Users: Medical Records Department Staff

Users General Location: 202 N. 8th St., El Centro, CA 92243

External organizations/Systems partnership: Konica Minolta

Back-Up Schedule: Incremental-Mon thru Thurs Starts at 8:00PM/Full-Backup: Friday (15 Hours)

2.2 LINE OF SUCCESSION

ICBHS sets forth an order of succession, to ensure that decision-making authority for the Contingency Plan is uninterrupted. The BHS Director is responsible for ensuring the safety of personnel and the execution of procedures documented within this Contingency Plan. If the BHS Director is unable to function as the overall authority or chooses to delegate this responsibility to a successor, its designee shall function as that authority.

Table 2.1 Line of Succession

ICBHS Disaster/Crisis: Line of Succession				
	Name	Title	Work #	24-Hour #
Primary	Leticia Plancarte-Garcia	Director	(442) 265-1604	(760) 996-3339
1 st Alternate	Nancy Del Real	Deputy Director	(442) 265-1585	(760) 604-1975
2 nd Alternate	Maria Ruiz	Deputy Director	(442) 265-1541	(760) 996-1132
3 rd Alternate	Gabriela Jimenez	Deputy Director	(442) 265-7910	(760) 427-3249
4 th Alternate	Brenda Sanchez	Deputy Director	(442) 265-1945	(760) 996-5751
5 th Alternate	Jose Lepe	Deputy Director	(442) 265-1699	(760) 996-3322

2.3 RESPONSIBILITIES

The following teams have been developed and trained to respond to a contingency event affecting ICBHS systems. The Contingency Plan establishes several teams assigned to participate in recovering operations. ICBHS IS and County ITS are responsible for recovery of the network, computer environment and all applications. Members of the Information Systems’ team include personnel who are also responsible for the daily operations and maintenance of MyAvatar. The Information Systems Deputy Director directs the IS team.

Table 2.2 Information Systems Team: Responsibilities

Information Systems Team: Responsibilities			
Name	Title	Contact Information	Responsibility
Nancy Del Real	Deputy Director Administration	(760) 604-1975	Oversees the processes followed to achieve the recovery of the network, computer environment and applications.
Adolfo Estrada	Behavioral Health Manager	(760) 482-8070	Oversees the processes followed to achieve the recovery of the network, computer environment and applications.
Arely Flores-Cruz	Program Supervisor	(442) 265-1589	Ensure the recovery of the network, computer environment and applications.

The Admin Response team will execute the plan and communicate with the clinics to activate the clinical procedures.

Table 2.3 Administration Response Team: Responsibilities

Name	Title	Contact Information	Responsibility
Leticia, Plancarte	ICBHS Director	(760) 996-3339	Facilitates Resources as requested
Nancy, Del Real	Deputy Director	(760) 604-1975	Facilitates Resources as requested
Jose Lepe	Deputy Director	(760) 996-3322	Activates the Contingency Plan for Children Services
Gabriela, Jimenez	Deputy Director	(760) 427-3249	Activates the Contingency Plan for Adult Services & SUD
Brenda Sanchez	Deputy Director	(760) 996-5751	Activates the Contingency Plan for Youth & Young Adult Services
Maria, Ruiz	Deputy Director	(760) 996-1132	Activates the Contingency Plan for Mental Health Triage & Engagement Services

Lead from Each Site:

Refer to the attachments below for the details of the hierarchy. If a disaster occurs, the program supervisors will initiate the Disaster Recovery Plan and call staff in to handle the emergency.

Table 2.4 Key Vendors Identified

Vendor	Main Contact & Phone	ICBHS Contact	Email
Netsmart	(888) 782-2615	Arely Flores, IS (442) 265-1589	Arely Flores: arelyflores@co.imperial.ca.us
Konica Minolta	Mike, Schaefer (858) 458-4222	Carlos Trujillo, ST (442) 265-1586	Mike Schaefer: mschaefer@kbms.konicaminolta.us
			Carlos Trujillo: carlostrujillo@co.imperial.ca.us

The responsibility of the ICBHS Contact is to communicate with the vendor and advise the need for their Contingency Plan Activation. If main contact is not available, please follow the order of succession list (Appendix F).

The relationships of the team leaders involved in system recovery and their member teams are illustrated in the organizational chart attached (Appendix H).

3. NOTIFICATION AND ACTIVATION PHASE

This phase addresses the initial actions taken to detect and assess damage inflicted by a disruption to the ICBHS systems. Based on the assessment of the event, the plan may be activated by the appropriate Deputy Director.

In an emergency, the ICBHS top priority is to preserve the health and safety of its staff and clients before proceeding to the Notification and Activation procedures.

Contact information for key personnel is located in Personnel Contact List (Appendix I). The notification sequence is listed below:

- The first responder is to notify the Program Supervisor. All known information must be relayed to the Program Supervisor or its designee.
- The Program Supervisor or designee is to contact the Manager and inform them of the event. The Manager is to instruct the Program Supervisor to begin assessment procedures. All known information must be relayed to the Deputy Director.
- The Manager is to notify the Program Supervisor and direct them to complete the assessment procedures outlined below to determine the extent of damage and estimated recovery time. If damage assessment cannot be performed locally because of unsafe conditions, the Facilities Manager is to follow the outline below.

Damage Assessment Procedures:

- Upon notification from the Deputy Director, the Manager is to notify the Facilities Manager to begin assessment of their site, as needed.
- The Program Supervisor is to evaluate their site for any staff injuries/status, physical damage, status of IT equipment, and an estimate of the amount of time it would take to be back in operation.
- Based on assessment results, notify police and/or fire department as appropriate.

The Contingency Plan is to be activated if one or more of the following criteria are met:

1. The Systems will be unavailable for more than 2 hours; or
 2. Facility is damaged and will be unavailable for more than 2 hours; or
 3. If County activates the Emergency Operations Plan
- If the plan is to be activated, the Deputy Director or designee is to discuss the details of the event with the Manager so that the information can be relayed to the Program Supervisor. The Program Supervisor will be informed of the details of the event and if relocation is required.
 - Upon notification from the Manager or designee, Program Supervisors are to notify their respective teams. Team members are to be informed of all applicable information and must be prepared to respond and relocate if necessary.
 - Alternate sites would require Manager to Manager communication for alternate site coordination. Transport staff will be notified of any relocation updates. The Manager is to contact Information Systems for computer hardware requests. This would include laptops, network connection, internet cards, and access points as necessary. Additional staff and/or equipment will be requested as needed.
 - The Manager is to notify the Alternate site that a contingency event has been declared and to prepare the facility for the other site's arrival.
 - The Program Supervisor is to notify designated personnel (via available method of communication) on the general status of the incident based on information relayed from the Manager.

4. RECOVERY OPERATIONS

This section provides procedures for recovering the application at the alternate site, whereas other efforts are directed to repair damage to the original system and capabilities.

The following procedures are for set up of computers and personnel at the alternate site. Procedures are outlined per team assignment. Each procedure should be executed in the sequence it is presented to maintain efficient operations.

Recovery Goal: Ensure that all staff and clients are safe and have access to a working network, share drive, and device to access MyAvatar remotely. Response would be based on the assessment by the division's Manager and Deputy Director of Administration.

Evaluate and consider other locations for servers in the event relocation is needed. Setting up Equipment – Systems Technology

- Ensure equipment access points and network is up and running
- Confirm network is active from County IT
- Ensure staff have access to share drive
- Assess if additional equipment is needed
- If Systems Technology is unavailable, Supervisor will delegate duties to Helpdesk staff and Administrative Analysts as needed.

Configure Staff Placement/Space – Program Supervisors

- Program Supervisors advise Managers to make arrangements
 - Notify the Deputy Director of Administration
 - Coordinate with Program Supervisor of Information Systems

Notify Clients of Alternate Site – Front Line Staff responsible for clients

- If possible, notify clients by phone
- Post sign for alternative site activation and include directions (sign can be made at alternative site)
- Assigned security guard will serve as a final notification of the relocation if no sign can be made.
- Transportation Unit will assist at transferring clients to the alternate site.
- If staff is directed to work from home and clients do not have equipment to attend telehealth appointment, front line is to reschedule or coordinate accommodation.

5. RETURN TO NORMAL OPERATIONS

This section discusses activities necessary for restoring ICBHS operations at the organizations' original or new site. When the computer center at the original or new site has been restored, ICBHS operations at the alternate site must be transitioned back to the original site.

Original or New Site Restoration
Facilities Manager

- Work with owners of building to confirm building is safe to return to business operations

Information Systems/Systems Technology

- Assess and evaluate the current state of electronic equipment and network
- Replace equipment (if necessary)
- Ensure site is up and running

5.1 CONCURRENT PROCESSING

Information Systems/System Technology

- Coordinate with County ITS to ensure ICBHS circuits are operational

5.2 PLAN DEACTIVATION

Clinical Team/ Systems Technology

- Materials, equipment, and backup media should be properly packaged, labeled, and returned to the appropriate location(s).
- Team members should be instructed to return to the original or new site.

**COUNTY OF IMPERIAL
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES
POLICY AND PROCEDURE MANUAL**

SUBJECT: Fire Evacuation	PROCEDURE: 01-03
SECTION: Administration	EFFECTIVE DATE: 10-19-20
	PAGE: 1 of 6
REFERENCE:	SUPERSEDES: 7-31-19
	APPROVED BY: Signature on File
AUTHORITY: Behavioral Health Director as the Local Mental Health Director and Alcohol and Drug Administrator	

PURPOSE: To establish a procedure to assure the safety of staff, clients, and visitors in the event of a fire.

NOTES: Fire drills, which shall be performed quarterly, will be scheduled at the discretion of the Compliance Officer or designee. It is not required that staff be notified in advance of the dates or times of the drills.

The roll of staff will be taken from a roster of the staff currently working at the site maintained by the manager or designee.

Roll of the clients present will be taken from the Staff Appointment Lists brought to the designated safe location by the team clerks.

Roll of training participants, if applicable, will be taken from the training roster of the staff currently working at the site maintained by the trainer.

DEFINITIONS: **Evacuation Plan:** The evacuation plan is a diagrammed plan of exit posted by the County Buildings and Grounds Department. It indicates the safest exit out of a building from any location within the facility.

The plan also indicates the location of the fire extinguishers available for use if necessary.

PROCEDURE:

PERSON RESPONSIBLE:

ACTION:

- | | |
|--------------------------|---|
| Staff Who Detects Fire | 1. Loudly announces "Fire". |
| Staff Near a Fire Alarm | 2. Alerts staff of evacuation by pulling fire alarm, and also contacts emergency personnel (911), if possible. |
| Staff with Two Way Radio | 3. Contacts emergency personnel (if fire alarm malfunctions) and contacts ICBHS Administrative Designee and informs them of Fire. |
| Staff | 4. Determine the approximate location of the fire and lead clients and visitors out the safest exit as indicated on the posted evacuation plan. |

Programs located at the following locations should proceed as follows:

- **120 North Eighth Street, El Centro:** Staff will proceed to the South parking lot.
- **202 North Eighth Street, El Centro:** Staff from 2nd and 3rd Floor will proceed to the West/East parking lot; 1st Floor, staff will proceed: to the East parking lot.
- **313 S. Waterman Avenue, El Centro:** Staff will proceed to the South of parking lot.

- **315 S. Waterman Avenue, El Centro:** Staff will proceed to the West or East of parking lot.
- **651 Wake Ave, El Centro:** Staff will proceed to East parking lot.
- **801 Broadway, El Centro:** Staff will proceed to the South parking lot.
- **1295 State Street, El Centro:** 1st and 2nd floor staff will use exit doors and proceed to the North parking area.
- **1699 West Main Street, Suite A, El Centro:** Staff will proceed to South parking lot.
- **2695 South Forth Street, El Centro:** Staff from Suites A, B, E, and F will proceed to the West parking lot; Suites C and D staff will proceed: to the East parking lot.
- **195 South Nine Street, Brawley:** Staff will proceed to the West parking lot.
- **205 Main Street, Brawley:** Staff will proceed to the North parking lot.
- **220 Main Street, Brawley:** Staff will proceed to the East parking lot.
- **229 Main Street, Brawley:**

Staff will proceed to the South parking lot

- **1535 Main Street, Brawley:**
Staff will use the exit doors located in the back of the building and proceed to the North facing parking lot located directly behind the building.
- **25 East Third Street, Calexico:**
Staff will proceed to the North parking lot.
- **101 Hacienda Dr., Suite A Calexico:** Staff will proceed to the South parking lot.
- **101 Hacienda Drive, Suite B Calexico:** Staff will proceed to the South parking lot.
- **101 Hacienda Drive, Suite C Calexico:** Staff will proceed to the South parking lot.
- **1501 West Imperial Avenue, Calexico:** Staff will evacuate to the West parking lot.
- **676 Baseline Rd. Winterhaven:**
Staff will evacuate to the West parking lot.

Team Clerk

5. Brings Staff Appointment Lists to the designated meeting place.
6. Once clients and visitors have reached the designated safe location, takes roll of the clients and visitors present at the time of the fire.

- Designated Section Leader
7. Brings the Fire/Earthquake Attendance Roster to the designated meeting place.
 8. Takes roll of the staff present at the time of fire.
 - a. If staff/client/visitor not unaccounted for, should be immediately notify to Staff with Two Way Radio.
- Designated Floor Leader
9. Checks each room at the facility to ensure that all staff, clients and visitors have evacuated the facility.
 - a. For evacuation of staff/clients/visitors with disabilities or limiting mobility, follow directives within Emergency Evacuation Plan procedure.
- ICBHS Administrative Staff
10. Notifies the Behavioral Health Director and the County Executive Office.
- Staff/Clients/Visitors
11. Re-enter the facility only if the Fire Department official in charge at the scene indicates that it is safe to do so.
- Staff with Two Way Radio
- a. If the Fire Department official indicates that the facility is not safe to enter, informs the Administration staff.
- Behavioral Health Director/Designee
- b. Authorizes employees to go home or assigns alternative work sites.

Behavioral Health
Director/Designee
(Cont.)

c. If necessary, arranges
transportation home for the
clients present.

Designated Outpatient
Staff

12. Completes the necessary
incident report(s) and forwards
it to the Behavioral Health
Director.

Forms used in this procedure:

Staff Attendance Roster
Staff Appointment List
Avatar Printout
Training Roster

**COUNTY OF IMPERIAL
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES
POLICY AND PROCEDURE MANUAL**

SUBJECT: Earthquake Drills	PROCEDURE: 01-04
SECTION: Administration	EFFECTIVE DATE: 10-19-20
REFERENCE:	PAGE: 1 of 9
	SUPERSEDES: 7-31-19
AUTHORITY: Behavioral Health Director as the Local Mental Health Director and Alcohol and Drug Administrator	APPROVED BY: Signature on File

PURPOSE: To establish a procedure to assure the safety of staff, clients, and visitors in the event of an earthquake.

NOTES: There are six (6) recognized component of an earthquake drill. These are:

1. The alarm phase
2. The response phase
3. The evacuation phase
4. The assembly phase
5. The roll call phase
6. The evaluation

The Federal Emergency Management Agency (FEMA) provides the following tips on what to do when you feel an earthquake:

If indoors:

- **DROP** to the ground; take **COVER** by getting under a sturdy table or other piece of furniture; and **HOLD ON** until the shaking stops. If there isn't a table or desk near you, cover your face and head with your arms and crouch in an inside corner of the building.

- Stay away from glass, windows, outside doors and walls, and anything that could fall, such as lighting fixtures or furniture.
- Use a doorway for shelter only if it is in close proximity to you and if you know it is a strongly supported loadbearing doorway.
- Stay inside until the shaking stops and it is safe to go outside. Research has shown that most injuries occur when people inside attempt to move to a different location inside the building or try to leave.
- Be aware that the electricity may go out or the sprinkler system or fire alarms may turn on.
- **DO NOT** use the elevator.

If Outdoors:

- Stay there.
- Move away from buildings, streetlights and utility wires.
- Ones in the open stay there until the shaking stops. The greatest danger exists directly outside buildings, at exits, and along the exterior walls. Ground movement during an earthquake is seldom the cause of death or injury. Most earthquake-related casualties result from collapsing walls, flying glass, and falling objects.

If in a moving vehicle:

- Stop as quickly as safety permits and stay in the vehicle. Avoid stopping near or under buildings, tress, overpasses, and utility wires.
- Proceed cautiously once the earthquake has stopped. Avoid roads, bridges, and ramps that might have been damaged by the earthquake.

DEFINITIONS: **Evacuation Plan:** The evacuation plan is a diagrammed plan of exit posted by the County Facilities Management. It indicates the safest exit out of a building from any location within the facility. The plan also indicates the location of the fire extinguishers available for use if necessary.

Line of Succession: The director is the designated Mental Health authority for the County of Imperial. In the event the Director is incapacitated or unable to respond the following line of succession will identify the director's designee in his absence:

Primary: Director

Alternate: Deputy Director of Clinical Services - Behavioral Health

2nd Alternate: Deputy Director of Clinical Services Children

3rd Alternate: Deputy Director of Clinical Services - Substance Use Disorder Treatment

4th Alternate: Deputy Director of Clinical Services - Adult Services

5th Alternate: Deputy Director of Clinical Services - Mental Health Triage

6th Alternate: Designated Behavioral Health Manager - Adult Services

7th Alternate: Designated Behavioral Health Manager - Children Services

8th Alternate: Designated Behavioral Health Manager - Substance Use Disorder Treatment

9th Alternate: Designated Behavioral Health Manager - Mental Health Triage

10th Alternate: Designated Behavioral Health Manager - Center for Clinical Training

PROCEDURE: During an earthquake drill/earthquake at an ICBHS facility:

PERSON RESPONSIBLE:

ACTION:

ALARM PHASE

Staff/Clients/Visitors

1. Alerted by a pre-arranged signal.

Floor Leader

2. Yell out for all co-workers to DROP-COVER-HOLD and stay in that position until the ground stops moving.

Staff/Clients/Visitors

3. **DUCK** under a sturdy desk or table. If there isn't a table or desk nearby, cover face and head with arms and crouch in an inside corner of the building. Stay under **COVER** until the shaking stops. **HOLD** onto the desk or table. If it moves, move with it.

4. Wait to hear instructions from an administrator, or designated floor leader.

NOTE: In circumstances in which you wait a long time without hearing anything, you will have to make decisions yourself.

Note: Evacuation should **NEVER** be automatic.

- There may be more danger outside your building than there is inside.
- There may be no safe assembly area outside.
- There may be no clear routes to get outside, and alternate routes may need to be cleared.
- The lighting in your building or room may be out and it may be dark.

EVACUATION PHASE

Manager/Supervisor

5. Assesses the situation - inside and outside of the building.
6. Calls 911 emergency services if necessary.
7. Decides whether to evacuate all or parts of the building
8. Chooses the evacuation route(s) and the assembly area. Depending on the immediate situation, the following areas have been designated as assembly places:

- **120 North Eighth Street, El Centro:** Staff will proceed to the South parking lot.
- **202 North Eighth Street, El Centro:** Staff from 2nd and 3rd Floor will proceed to the West/East parking lot; 1st Floor, staff will proceed: to the East parking lot.
- **313 S. Waterman Avenue, El Centro:** Staff will proceed to the West or East parking lot.
- **315 S. Waterman Avenue, El Centro:** Staff will proceed to the West or East parking lot.
- **651 Wake Ave, El Centro:** Staff will proceed to East parking lot.
- **801 Broadway, El Centro:** Staff will proceed to the South parking lot.

- **1295 State Street, El Centro:**
1st and 2nd floor staff will use exit doors and proceed to the North parking area.
- **1699 West Main Street, El Centro:** Staff will proceed to South parking lot.
- **2695 South Forth Street, El Centro:** Staff from Suites A, B E and F will proceed to the West parking lot; Suites C and D staff will proceed: to the East parking lot.
- **195 South Nine Street, Brawley:** Staff will proceed to the West parking lot.
- **205 Main Street, Brawley:** Staff will proceed to the North parking lot.
- **220 Main Street, Brawley:** Staff will proceed to the East parking lot.
- **229 Main Street, Brawley:** Staff will proceed to the South parking lot.
- **1535 Main Street, Brawley:**
Staff will use the exit doors located in the back of the building and proceed to the North facing parking lot located directly behind the building.
- **25 East Third Street, Calexico:**
Staff will proceed to the North parking lot.

- **101 Hacienda Dr., Suite A**
Calexico: Staff will proceed to the South parking lot.
- **101 Hacienda Drive, Suite B**
Calexico: Staff will proceed to the South parking lot.
- **101 Hacienda Drive, Suite C**
Calexico: Staff will proceed to the South parking lot.
- **1501 West Imperial Ave.**
Calexico: Staff will proceed to the West parking lot.
- **676 Baseline Road Winterhaven:**
Staff will proceed to the West parking lot.

Floor Leader

9. Communicates directions to floor leader(s)
10. Directs staff to evacuate.
11. Reminds staff, clients and visitors of possible after-shocks and to once again follow duck, cover, hold procedures if they occur.

Staff/Clients/Visitors

12. Gather personal items (purse and keys) and proceed as directed.

Floor Leader/Team Clerk

13. Check each room in the facility to ensure that all staff, clients and visitors have evacuated the facility.

<p>Note: Injured staff, clients and visitors will evacuate ONLY if moving them will not cause further injury. Make note of their location and report their location to the administrator at the assembly area.</p>
--

Floor Leader/Team Clerk
(cont.)

14. Bring staff roster/**Staff Appointment Lists** to the designated assembly area and account for all employees, clients and visitors.
15. Identify names and last known locations of anyone not accounted for and provide them to the administrator in charge.

Manager/Supervisor from
each building

16. Contacts the ICBHS Disaster/Crisis Coordinator via cell phone or 2-way radio to report status. Status report will consist of:
 - a. Evacuation status of the building
 - b. Injuries of any staff, clients, and/or visitors
 - c. Damages to structure(s)

ICBHS Disaster/Crisis
Coordinator or Reserve
Disaster/Crisis
Coordinator

17. Reports status of staff and structures to the Director/Designee and communicates with county, state and federal offices of emergency services as necessary.

Staff/Clients/Visitors

18. Remain at assembly area until directed to re-enter the building, or go home.

Director/Designee

19. In the event of facility is closed, notifies the County Executive Officer and the County Risk

Director/Designee
(cont.)

Management Safety Coordinator.

Note: The order to close ICBHS facilities will be given by the director or his designee according to the "Line of Succession", unless safety dictates the emergency personnel to initiate evacuation and building closure. All relevant sites will be notified.

If any incident occurs which results in compromising safety, security, or health of staff and/or clients during which time the director or any of his designees are not available, nor is there any communication between staff and ICBHS administration within two (2) hours of the incident, an on-site manager may exercise discretion to close the facility and release staff. Each facility will be vacated and secured by the supervisor or acting supervisor.

The manager will notify the Director's office and the Disaster/Safety Coordinator. The Director's office will notify the County Executive Officer and the County Risk Management Safety Officer of any facility closures.

EVALUATION

Administrators/Floor
Leader

20. Evaluation drill to identify problem areas or potential problems areas to rectify for a future earthquake drills.

**COUNTY OF IMPERIAL
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES**

POLICY AND PROCEDURE MANUAL

SUBJECT: HIPAA - Contingency Plan	POLICY NO: 01-297
SECTION: Administration	EFFECTIVE DATE: 11-01-21
REFERENCE: 45 C.F.R. Subtitle A, Subchapter C, Part 164	PAGE: 1 of 5
	SUPERSEDES: 6-8-16
AUTHORITY: Behavioral Health Director as the Local Mental Health Director and Alcohol and Drug Administrator	APPROVED BY:

PURPOSE: To identify the components of a Contingency Plan.

SCOPE: The information in this document applies to all members of the workforce which includes employees, contract employees, volunteers, trainees, etc., granted access to protected health information (PHI).

NOTES: The Security Officer or his/her designee must ensure that a Contingency Plan containing the components in Sections I through VII below is created, implemented, tested, and updated for each ICBHS facility. The ICBHS Facilities Plan and Disaster Plan, including the components identified below, must be provided to the Security Officer for review and approval to ensure that the minimum Contingency Plan requirements are met.

The ICBHS Contingency Plan is included as Attachment I. Any subsequent updates to the Plan will be included with this policy.

DEFINITIONS:

Contingency Plan:

A plan for emergency response, backup procedures, and post-disaster recovery, synonymous with disaster plan and emergency plan.

IT: Information Technology

Workforce: In Section 160.103 of the HIPAA Privacy Rule, the "workforce" is defined as "employees, volunteers, trainees, and other persons, whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity". For the purposes of this policy, workforce members also includes those assigned to Imperial County Information Technology and Systems.

POLICY: The Contingency Plan consists of the following seven components:

I. Application and Data Criticality Analysis.

1. The Application and Data Criticality Analysis must identify IT Contingency Plan priorities based on the criticality and sensitivity of the applications and data within the facility. The Applications and Data Criticality Analysis must include identification of the assets (e.g., hardware, software, and applications) utilized by the facility that receive, manipulate, store and/or transmit confidential and/or sensitive information, as well as information necessary to ongoing business operations.
2. Prioritization of applications and data to ensure crucial applications are installed and functional.

II. Data Backup Plan.

The Data Backup Plan must ensure that exact copies of critical data are retrievable. The Data Backup Plan must:

1. Identify the backup methods (e.g., full, incremental,

or differential backup) and materials (e.g., CD-ROM, magnetic tape, or floppy disks) to be used.

2. Identify the frequency of performing backups based on the criticality analysis.
3. Assign a responsible person(s) to catalog, store, and secure the backups in a suitable container and location or such purpose.

III. Disaster Recovery Plan.

The Disaster Recovery Plan must enable the restoration of lost data in the event of fire, vandalism, systems failure, or other disaster. The Disaster Recovery Plan must:

1. Identify the authorized person(s) for the retrieval, loading, and testing of data backups.
2. Identify processes to retrieve of the latest copy of the facilities' backed-up data from the secure location in the event of data loss. If the necessary data set(s) have not been archived, efforts will be made through formal channels (e.g., retransmission from original sources) to collect the data.
3. Identify the process to load and restore data in the order of predetermined criticality to appropriate components and test to ensure the data restoration was successful.

IV. Emergency Mode Operation Plan.

The Emergency Mode Operation Plan must enable ICBHS facilities to continue its operations and business processes in the event of fire, vandalism, systems failure, or other disaster, and safeguards the security of data. The Emergency Mode Operation Plan must be based on the emergency preparedness plan for each ICBHS division and must:

1. Identify the scope including the severity of the emergency (e.g., system only, facility-wide,

ICBHS-wide) and the duration of the emergency (e.g., until repair, day, week, month, undetermined).

2. Identify type of recovery (e.g., onsite assistance recovery, remote offsite, disk mirroring) that is required by the scope of the emergency.
3. Identify emergency continuity personnel, including either backup personnel or personnel cross-trained to assure adequate staffing in the event of an emergency.
4. Designate specific roles and responsibilities to initiate and maintain emergency mode operations, including information system and security personnel.
5. Implement the following emergency access control requirements:
 - a. Determine emergency access control requirements for emergency mode operations and ensure that the access control matrices reflect such requirements.
 - b. Give users additional privileges in the event of a crisis situation to access information as needed and in accordance with the above emergency mode operations procedures.

V. Command and Control Plan.

The Command and Control Plan must establish IT administrative procedures to follow in the event that an emergency occurs. The Command and Control Plan must:

1. Integrate the ICBHS Contingency Plan with existing ITS Contingency Plan to establish command and control in order to support ICBHS emergency management team members who can facilitate the flow of information technology as necessary to users.
2. Develop a telephone call tree to disseminate important information within ICBHS facilities, as necessary.


3. Establish a notification process to notify the appropriate persons within management roles and the ICBHS facilities in the event any part of the Contingency Plan is executed.

VI. Test and Revision of Contingency Plan.

The Contingency Plan must be tested periodically in order to assure the workability of the plan in the event of a disaster and/or emergency. If testing establishes the need for changes in existing Contingency Plan procedures, then those procedures must be revised.

COUNTY OF IMPERIAL
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES

POLICY AND PROCEDURE MANUAL

SUBJECT: HIPAA – User Access Management	POLICY NO: 01-231
SECTION: Administration	EFFECTIVE DATE: 6-12-16
	PAGE: 1 of 9
REFERENCE: 45 C.F.R. Subtitle A, Subchapter C, Part 164	SUPERSEDES: 10-14-15
	APPROVED BY: 
AUTHORITY: Behavioral Health Director as the Local Mental Health Director and Alcohol and Drug Administrator	

PURPOSE: To establish rules for authorizing access to the ICBHS network, applications, workstations, and to areas where electronic protected health information (EPHI) is accessible. ICBHS shall ensure that only workforce members who require access to EPHI for work related activities shall be granted access and when work activities no longer require access, authorization will be terminated.

NOTES: None

DEFINITIONS: **EPHI – Electronic Protected Health Information:** refers to any protected health information (PHI) that is covered under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) security regulation and is produced, saved, transferred or received in an electronic form.

Protected Health Information (PHI): PHI is health information that a covered entity creates or receives, that identifies an individual, and relates to:

- The individual’s past, present, or future physical or mental health or condition;
- The provision of health care to the individual; or

- The past, present, or future payment for the provision of health care to the individual.

PHI includes written, spoken and electronic forms. PHI is "individually identifiable information". PHI excludes individually identifiable information in education records, school health records covered by FERPA (Family Educational Rights and Privacy Act), employment records held by a covered entity in its role as employer, or records regarding a person who has been deceased for more than 50 years.

Facility: The physical premises and the interior and exterior of a building.

ICBHS: Imperial County Behavioral Health Services

IS: Information Systems

Access: The ability of the means necessary to read, write, modify, or communicate data/information or other wise use any system resource.

Workforce: In Section 160.103 of the HIPAA Privacy Rule, the "workforce" is defined as "employees, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity."

POLICY OWNER: Security Officer

POLICY: Only workforce members who require access to EPHI for work related activities shall be granted access and when work activities no longer require access, authorization shall be terminated.

1. **Management and Access Control** - Individual User Account only the workforce member's manager or appropriate designee can authorize access to EPHI information systems. Manager's or their designee are responsible for requesting the appropriate level of access for staff to perform their job function.

Access to the information system or application may be revoked or suspended if there is evidence that an individual is misusing information of resources. Any individual whose access is revoked or suspended may be subject to disciplinary actions or other appropriate corrective measures

2. **Management and Access Control** - Administrator Account
Only the workforce designated as "Administrator" can access EPHI residing in each module of the electronic health records (HER). Access is granted by the IS manager. Access will be reviewed by the IS manager periodically. If workforce member no longer requires access, it is the responsibility of the manager or appropriate designee to complete the necessary process to terminate access.

3. **Granting Access to EPHI**

Screen Prospective Workforce Member Prior to Hire

Prior to hire, the following background checks are conducted for each prospective workforce member:

- Department of Justice (DOJ)
 - Criminal Background Check
- Employee Relations, Inc.
 - Verify previous employment information
 - Check DMV Records
 - Verify academic degrees
- Licensing Boards
 - Verify professional licensure
- OIG's List of Excluded Individuals/Entities, United States General Service Administration's System for Award Management (SAM), California Department of Health Care Services Suspended and Ineligible Provider List
 - Verify applicant is not excluded from participation in federal or state funded program
- CalTest
 - Drug testing (clinical staff only)

Screen Workforce Members Prior to Access

The manager or designee shall ensure that information access is granted only after first verifying that the access of a workforce member to EPHI is appropriate.

Security Awareness Prior to Getting Access

Before access is granted to any of the various systems or applications that contact EPHI, the Information Systems staff shall ensure that workforce members are trained to a minimum standard including:

- Proper uses and disclosures of the EPHI stored in the systems or application
- How to properly log on and off the systems or application
- Protocols for correcting user errors
- Instructions on containing a designated person or help desk when EPHI may have been altered or destroyed in error.
- Reporting a potential or actual security breach

Security Acknowledgment

Prior to being issued a User ID or password to access any EPHI, each workforce member shall sign the Initial Security Awareness Training form.

Granting Access in an Emergency

Management has the authority to grant emergency access for workforce members who have not completed the normal HIPAA access requirements if:

1. Management declares an emergency or is responding to a natural disaster that makes client information security secondary to personal safety.
2. Management determines that granting immediate access is in the best interest of the client.

If emergency access is granted, the manager shall review the impact of emergency access and document that event within 24 hours of it being granted.

After the emergency is over, the user access shall be removed or the workforce member shall complete the normal requirements for being granted access.

Termination or Suspension of Access

A workforce member's access to EPHI and other sources of protected health information (PHI) including access to rooms or facilities where PHI is located will be terminated or suspended in these circumstances:

1. If management has evidence or reason to believe the individual is using information systems or resources in a manner inconsistent with HIPAA Security Rule policies
2. If the workforce member or management has reason to believe the user's password has been compromised
3. If the workforce member resigns, is terminated, suspended, retires, or is away on unapproved leave
4. If the workforce member's including business associate's work role changes and systems access is no longer justified

If the workforce member is on leave of absence and the user's system access will not be required for more than three weeks, management shall suspend the user's account until the workforce member returns from their leave of absence.

Modifications of Access

If a workforce member transfers to another program or changes their work role within the same program, the workforce member's new manager or supervisor is responsible for the evaluating the member's current access and for requesting new access to EPHI commensurate with the workforce member's new work role and responsibilities.

Ongoing Compliance for Access

In order to ensure that workforce members only have access to EPHI when it is required for their job function, the following actions shall be implemented:

1. Every new user ID or logon account that has not been used after 30 consecutive calendar days since creation shall be investigated to determine if the workforce member still requires access to EPHI.
2. At least annually, Information Systems staff shall send managers or designees a list of assigned workforce members for the Avatar application.
3. At least annually the Information Systems staff shall send managers or designees:
 - a. A list of workforce members and their access to shared folders containing EPHI.
 - b. A list of workforce members approved for access to Virtual Private Network (VPN)
4. The managers or their designees shall then notify Information Systems staff of any workforce member who no longer requires access.

4. **Policy Responsibilities**

Managers or Designee Responsibilities

1. Request access for new employees.
2. Ensure the access to EPHI granted to each of their workforce members is the minimum necessary access required for workforce member's work role and responsibilities.
3. Request termination of access if the workforce member no longer requires access (i.e., resignation or change of classification, etc.).
4. Notify Information Systems staff immediately if a workforce member is being suspended, or terminated with cause.
5. Validate new Users IDs or logon accounts that are not used within 30 days of creation via the report generated by IS.

6. Review annual folder access reports and VPN access reports prepared by IS staff and verify if the workforce members still require access to the EPHI.
7. Follow the appropriate security procedures when granting emergency access.

Information Systems Responsibilities

1. Ensure members of the workforce have signed the Initial Security Awareness Training form and are properly trained before providing access to EPHI.
2. At least annually, Information Systems staff shall managers or designees a list of all workforce members for send the Avatar application.
3. When required, provide management with the appropriate support for granting emergency access.
4. Immediately, upon written notification from a manager or Human Resources, remove or modify a workforce member's access to EPHI.
5. Notify manager/designee when a user ID or logon account has not been used within 30 days.
6. At least annually months provide managers or designee:
 - a. A list of workforce members and their access to shared folders containing EPHI.
 - b. A list of workforce members approved for access to Virtual Private Network (VPN).

Workforce Members Responsibilities

Each user of a system or application that contains EPHI shall:

1. Read and sign the Initial Security Awareness Training form and the Electronic Signature form,

2. Follow all County and departmental policies and requirements
3. Complete a HIPAA Privacy and Security training
4. Immediately report all security incidents to their supervisor.

Related Policies and Regulations

Policies:

1. 01-128 HIPAA - Audit Controls

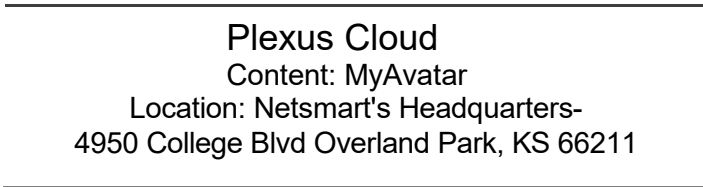
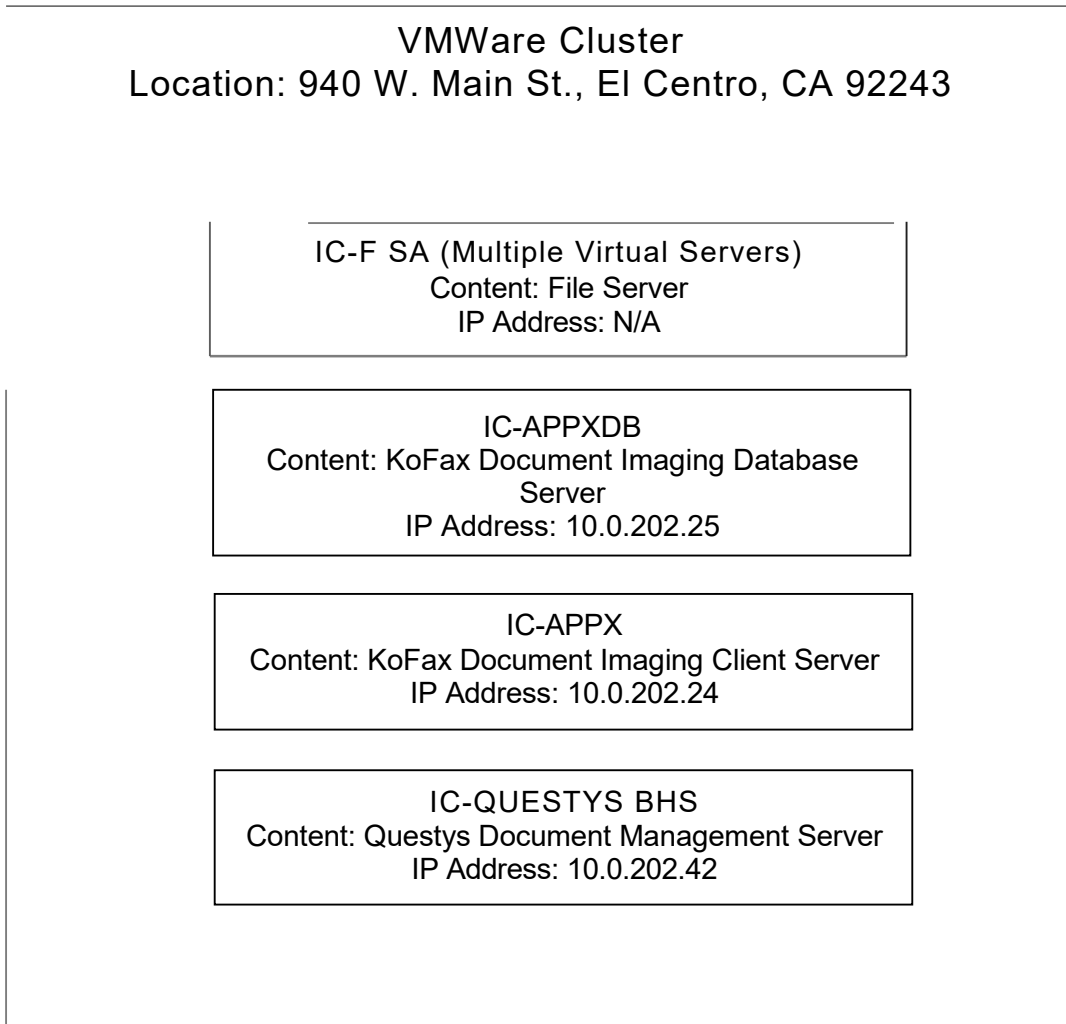
Regulations:

1. 45 C.R.R. Section 164.308 (a)(i): Standard: Workforce security. Implement policies and procedures to ensure that all members of its workforce have appropriate access to electronic protected information, as provided under paragraph (a)(4) of this section, and to prevent those workforce members who do not have access under paragraph (a)(4) of this section from obtaining access to electronic protected health information.
2. 45 C.F.R. Section 164.308 (a)(3)(ii)(A): Authorization and/or supervision (Addressable). Implement procedures for the authorization and/or supervision of workforce members who work with electronic protected health information.
3. 45 C.F.R. Section 164.308 (a)(3)(ii)(C): Termination procedures (Addressable) Implement procedures for terminating access to electronic protected health information when the employment of a workforce member ends or as required by determinations made as specified in paragraph (a)(3)(i)(B) of this section.
4. 45 C.F.R. Section 164.308 (a)(4)(i): Standard: Information access management. Implement policies and procedures for authorizing access to electronic protected health information that are consistent with the applicable requirements of subpart E of this part.
5. 45 C.F.R. Section 164.308 (a)(4)(ii)(B): Access authorization (Addressable). Implement policies and procedures for granting access to electronic protected health information,

for example through access to a workstation, transaction, program, process, of other mechanism.

6. 45 C.F.R. Section 164.308(a)(4)(ii)(C): Access establishment and modification (Addressable). Implement policies and procedures that, based upon the entity's access authorization policies, establish, document, review, and modify a user's right of access to a workstation, transaction, program, or process.
7. 45 C.F.R. Section 164.312(a)(1): Standard Access control. Implement technical policies and procedures for electronic information systems that maintain electronic protected health information to allow access only to those persons of software programs that have been granted access rights as specified in Section 164.308(a)(4).
8. 45 C.F.R. Section 164.312 (a)(2)(i): Unique user identification (Required). Assign a unique name and/or number for identifying and tracking user identity.

ICBHS Server Inventory Diagram



Appendix F: Emergency Response Teams

Administration			
Admin/Access/HR/Fiscal/Payroll/IS			
202 N 8th St., El Centro, CA 92243 (3rd Floor)			
Designee	Section/Floor	Lead/Backup	Contact #
Maria Garfias	Section	Lead (East Side)	442-265-1638
Norma Amavizca	Section	Backup (East Side)	442-265-1622
Melissa Mata	Floor	Lead (East Side)	442-265-1658
Julyssa Soto	Floor	Backup (East Side)	442-265-1591
Mary Hernandez	Section	Lead (West Side)	442-265-1601
Kristen Smith	Section	Backup (West Side)	442-265-1606
Marcy Sesma	Floor	Lead (West Side)	442-265-1605
Chris Pacheco	Floor	Backup (West Side)	442-265-1600
Medical Records/Contracts/PAU/QM/Patient Rights/Compliance (2nd Floor)			
Designees	Section/Floor	Lead/Backup	Contact #
Emily Rivera	Section	Lead (East Side)	442-265-1652
Guadalupe Gradillas	Section	Lead (East Side)	442-265-1553
Marlene Ortiz	Section	Backup	442-265-1551
Sonia Contreras	Floor	Lead	442-265-1567
Rosalva Aramburo	Floor	Backup	442-265-1651
Accounting/Purchasing			
313 S Waterman Ave., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Rafael Loo	Section	Lead (East Side)	442-265-7387
Melissa Valencia	Section	Backup (East Side)	442-265-7385
Armando Garcia	Floor	Lead (East Side)	442-265-7389
Christian Gonzalez	Floor	Backup (East Side)	442-265-7388

Mental Health Triage & Engagement Services			
Mental Health Triage Unit			
202 N 8th St., El Centro, CA 92243 (1st Floor- West Side)			
Designees	Section/Floor	Lead/Floor	Contact #
Jeannette Bayardo	Section	Lead	442-265-1522
Alejandro Pineda	Section	Backup	442-265-1523
Michelle Villarreal	Floor	Lead	442-265-1537
Blanca Cazares	Floor	Backup	442-265-1641
Casa Serena			
202 N 8th St., El Centro CA 92243 (1st Floor East Side)			
Designees	Section/Floor	Lead/Floor	Contact #
Suhey Castillo	Section	Lead	442-265-1533
Adriana Vega	Section	Backup	442-265-1579
Jessica Pineda	Floor	Lead	442-265-1535
Jose Alvarado	Floor	Backup	442-265-1640
MHTES Administration/CCMU			
801 Broadway Ave., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Herlinda Lopez	Section	Lead	442-265-7928
Connie Aguilar	Section	Backup	442-265-7922
Jose Alvarez	Floor	Lead	442-265-7932
Stephany Ramos	Floor	Backup	442-265-7924
TESS/CESS/Conservatorship/ MHSA-PIER			
1699 W Main St., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Maria Arias	Section	Lead	442-265-7221
Carlos Velasquez	Section	Backup	442-265-7203
Paola Beltran	Floor	Lead	442-265-7200
Norma Avila	Floor	Backup	442-265-7226

Children Services			
Admin/Team 5			
120 N 8th St., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Maribel Rodriguez	Section	Lead	442-265-1694
Carla Banda	Section	Backup	442-265-1687
William Murgia	Floor	Lead	442-265-1670
Alfonso Ruiz	Floor	Backup	442-265-1670
Team 12			
651 Wake Ave., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Marlena Derrick	Section	Lead	442-265-7405

Claudia Ramirez	Floor	Lead	442-265-6445
Belkys Cota	Floor	Backup	442-265-7418
Team 4			
101 Hacienda Dr., STE C, Calexico, CA 92231			
Designees	Section/Floor	Lead/Backup	Contact #
Valerie Balcemeda	Section	Lead	442-265-6445
Yahaira Rodriguez	Section	Backup	442-265-6449
Team 6			
195 S 9th St., Brawley, Ca 92227			
Designees	Section/Floor	Lead/Backup	Contact #
Lorena Valenzuela	Section	Lead	442-265-5083
Olivia Gutierrez	Section	Backup	442-265-5082
Amelia Lopez	Floor	Lead	442-265-5093
Viridiana Rocha	Floor	Backup	442-265-5090
Vista Sands Brawley			
1401 B St., Brawley, CA 92227			
Designees	Section/Floor	Lead/Backup	Contact #
Andrew Wells	Section/Floor	Lead/Backup	442-265-7240
Clerical Staff	Section/Floor	Lead/Backup	442-265-7240
Vista Sands Calexico			
2300 Rockwood Ave., CA 92231			
Designees	Section/Floor	Lead/Backup	Contact #
Alejandra Soto	Section/Floor	Lead/Backup	442-265-7240
Vista Sands El Centro			
1530 Waterman Ave., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Claudia Ramirez	Section/Floor	Lead	442-265-7235
Clerical Staff	Section/Floor	Backup	442-265-7235

Adult Services			
Adult Admin/Transportation/Adult EC MHA FSP/Wellness Center/Recovery/SUD and SUD Admin			
2695 S 4th St., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #

Richard Webster	STE A- Section 1 st Floor	Lead	442-265-7645
Aida Castro	STE A- Section 1 st Floor	Backup	442-265-7645
Jessica Mitchell	STE B- Section Clinic	Lead	442-265-7604
Fayanie Rabb	STE B-Section Clinic	Backup	442-265-7605

Claudia Castillo	STE C-Section 1 st Floor	Lead	442-265-7637
Maria Martinez	STE C-Section 1 st Floor	Backup	442-265-7634
Matthew Smith	STE A &B Floor 1 st Floor	Building Lead	442-265-7616
Arlene Morales	STE A &B Floor 1 st Floor	Building Backup	442-265-7891
Vicente Ramirez	STE C Section 2 nd Floor	Lead	442-265-7895
Olivia Delgado	STE C Section 2 nd Floor	Backup	442-265-7912
Marisol Osuna	STE D&E Section 2 nd Floor	Lead	442-265-7909
Gabriela Izaguirre	STE D&E Section 2 nd Floor	Backup	442-265-7885
Victor Torres	STE C, D, &E 2 nd Floor	Building Lead	442-265-7909
Victoria Mansfield	STE C, D, &E 2 nd Floor	Building Backup	442-265-7909
Adult El Centro Anxiety & Depression			
313 Waterman Ave., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Lizette Rodriguez	Section	Lead	442-265-6343
Denise Velasquez	Section	Backup	442-265-6362
Marie Arroyo	Floor	Lead	442-265-6361
Valerie Salgado	Floor	Backup	442-265-6345
Adult Brawley Anxiety & Depression/FSP			
229 Main St., Brawley, CA 92227			
Designees	Section/Floor	Lead/Backup	Contact #
Nadine Ortiz	Section	Lead	442-265-5114
Emmanuel Mejia	Section	Backup	442-265-5061
Elizabeth	Floor	Lead	442-265-5139
Adriana Benitez	Floor	Backup	442-265-5120
Adult Brawley Wellness Center			
205 Main St., Brawley, CA 92227			
Designees	Section/Floor	Lead/Backup	Contact #
Cindy Loreda	Section	Lead	442-265-5043
Leticia Lucatero	Section	Backup	442-265-5036
Adrian Celis	Floor	Lead	442-265-5043
Lizett Aguilar	Floor	Lead	442-265-5033
Designees	Section/Floor	Lead/Backup	Contact #

FRC San Pascual			
676 Baseline Rd., Winterhaven, CA 92283			
Designees	Section/Floor	Lead/Backup	Contact #
Nathan Miller	Section	Lead	442-265-6346
Marie Arroyo	Section	Backup	442-265-6361
Nathan Miller	Floor	Lead	442-265-6346
Marie Arroyo	Floor	Backup	442-265-6361
Adult Calexico SUD Treatment			
25 e 3rd St., Calexico, CA 92231			
Designees	Section/Floor	Lead/Backup	Contact #
Alejandra Hernandez	Section	Lead	442-265-6201
Liliana Niebla	Section	Backup	442-265-6203
Maribel Castro-Alba	Floor	Lead	442-265-6220
Alejandra Hernandez	Floor	Backup	442-265-6201
Adolescent Calexico SUD Treatment Program			
101 Hacienda Ave., STE B, Calexico, CA 92231			
Designees	Section/Floor	Lead/Backup	Contact #
Ana Coronado	Section	Lead	442-265-6413
Blanca Buckner	Section	Backup	442-265-6216
Christen Magana	Floor	Lead	442-265-6416
Adolescent El Centro SUD Treatment Program			
315 S Waterman Ave., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Patricia Bravo	Section	Lead	442-265-7274
Hazel Avalos	Section	Backup	442-265-7265
Ana Contreras	Floor	Lead	442-265-7265

Youth & Young Adults Services			
Admin/YAYA EC Anxiety & Depression/YAYA EC FSP/YAYA HOPE/Juvenile Services			
1295 W State St., El Centro, CA 92243			
Designees	Section/Floor	Lead/Backup	Contact #
Mia Dhillon	Section	Lead 1 st Floor	442-265-1920
Designees	Section/Floor	Lead/Backup	Contact #
Ana Fernandez	Section	Backup 1 st Floor	442-265-1917
Marcos Perea	Floor	Lead 1 st Floor	442-265-1950
Maricruz Bermudez	Floor	Backup 1 st Floor	442-265-1927
Lourdes Mendez	Section	Lead 2 nd Floor	442-265-1967
Angela Maya	Section	Backup 2 nd Floor	442-265-1941
Bianca Lopez	Floor	Lead 2 nd Floor	442-265-1947
Lupita De la Rosa	Floor	Backup 2 nd Floor	442-265-1955

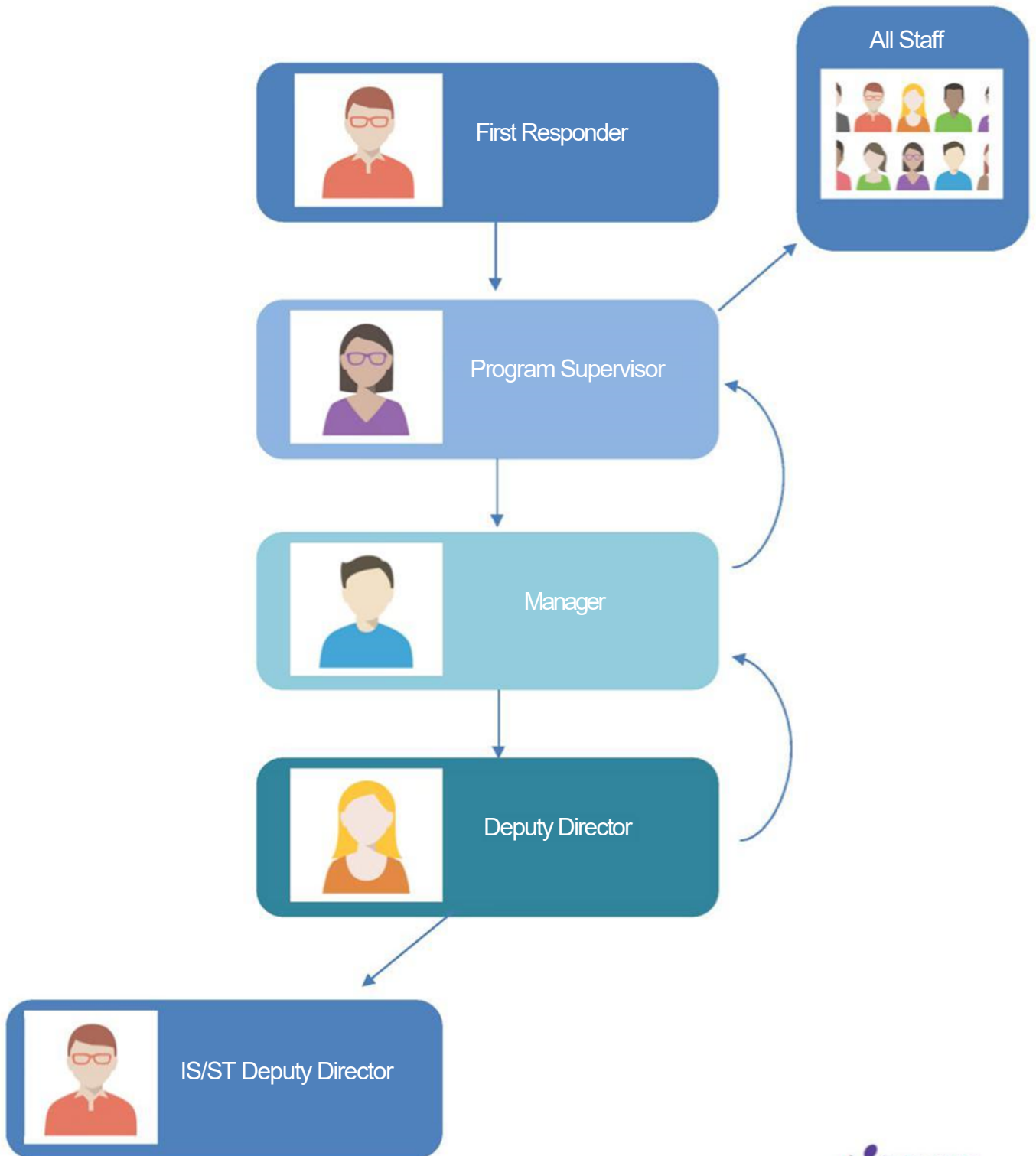
YAYA Brawley Anxiety & Depression/FSP			
1535 E Main St., Brawley, CA 92227			
Designees	Section/Floor	Lead/Backup	Contact #
Mercy Valenzuela	Section	Lead	442-265-5004
Anna Lopez	Section	Backup	442-265-5002
Elizabeth Van Zant	Floor	Lead	442-265-5023
Marie Cabrera	Floor	Backup	442-265-5022
YAYA Calexico Anxiety & Depression/FSP			
101 Hacienda Dr., STE A, Calexico, CA 92231			
Designees	Section/Floor	Lead/Backup	Contact #
Analilia Mendoza	Section	Lead	442-265-6397
Angelica Garcia	Section	Backup	442-265-6400
Jessica Aviles	Floor	Lead	442-265-6383
Roxanna Palacios	Floor	Backup	442-265-6394

Key Vendors Identified-ICBHS Order of Succession Contact List

Netsmart		
	ICBHS Contact	Contact Information
Primary	Ryan Taylor	(442) 265-1644
1 st Alternate	Cinthia Madrigal	(442) 265-1599
2 nd Alternate	Nancy Del Real	(442) 265-1585
3 rd Alternate	Adolfo Estrada	(442) 265-1612

Konica Minolta		
	ICBHS Contact	Contact Information
Primary	Carlos Trujillo	(442) 265-7197
1 st Alternate	Ramón Rodriguez	(442) 265-1046
2 nd Alternate	Mario Lopez	(442) 265-1042

Contingency Planning Organizational Chart



Imperial County Behavioral Health Services

Deputies/Managers Cellphone List

Administration

Name	Contact Information
Leticia Plancarte-Garcia -ICBHS Director	(760) 996-3339

Deputies

Division	Name	Contact Information
Administration	Nancy Del Real	(760) 604-1975
Adult Services & Substance Use Disorder	Gabriela Jimenez	(760) 427-3249
Children Services	Jose Lepe	(760) 996-3322
Mental Health Triage & Engagement Svcs.	Maria Ruiz	(760) 996-1132
Youth & Young Adults	Brenda Sanchez	(760) 427-1393

Managers

Division	Name	Contact Information
Administration	Adolfo Estrada	(760) 482-8070
	Sarah Moore	(760) 996-4439
	Kristen Smith	(760) 960-0966
	Victor Manriquez	(760) 996-9043
	Scott Dudley	(760) 455-9034
Adult Services	Mary Esquer-Madrigal	(760) 482-8040
	Victor Torres	(760) 996-6236
	Francisco Zarate	(760) 604-3696
Children Services	Alfonso Ruiz	(760) 996-9071
	Veronica Ortiz	(760) 996-7823
	Maria Wyatt	(760) 455-9318
Mental Health Triage & Engagement Svcs.	Sylvia Bazan	(442) 283-3672
	Jessica Pineda	(760) 791-5116
	Priscilla Patino	(760) 996-7822
Substance Use Disorder	Ana Contreras	(760) 604-3317
	Victoria Mansfield	(760) 791-9544
Youth & Young Adults	Anna Welzein	(760) 604-1735
	Dalia Pesqueira	(760) 996-0376
	Andrea Barker	(760) 604-3685

Appendix J: ICBHS Leased Building Owners Contact List

ICBHS Leased Building Owners Contact List

Building Address	Owner	Contact Name	Contact Number
1699 Main Street El Centro, CA 92243	Kirti Shah	Bea Campa	(760) 353-6540
195 South 9 th Street Brawley, CA 92227	Jack Hart	Sandra Cano	(442) 265-4956
25 E. 3 rd Street Calexico, CA 92231	Alexander Campillo	Tina Campillo	(916) 601-1141
2695 South 4 th Street El Centro, CA 92243	Jeff Lyons	Jeff Lyons	(760) 370-3000
1535 Main Street Brawley, CA 92227	José Lopez	Lupe Ponce	(760) 337-5129
205 Main Street Brawley CA, 92227	Ray D. Roben	Ray D. Roben	(760) 996-3469

Appendix K: Contingency Plan Tabletop Testing Log

Contingency Plan Tabletop Testing Log

Date	Participants	Division/Team	Scenario
04/17/18	Juan Flores Anna SanPedro Monica Armenta Carlos Trujillo Yanwen Braun- Liang Arely Flores Cinthia Madrigal Silveria Moliere Adam Bullian	Crisis	A magnitude 7.9 Earthquake occurred on Tuesday, April 17 at 7:00am. The main office clerical supervisor was the first to arrive on site at the admin office and found the offices to be damaged and not safe for anyone to enter. It is not possible to determine the condition of the servers on the 3rd floor, but the windows that can be seen on the 3rd floor are broken. The clerical supervisor tries to email her supervisor, but her email will not connect. It is assumed that the server room is damaged and off-line and the building is not safe for anyone to enter until Facilities comes and inspects the damage (this could take days). She decides to make a call to get help on what to do next.
07/26/18	Natalia Rodriguez- Flores Laura Logo Alexandra Esquivel Bianca S. Lopez Carlos Trujillo Nancy Del Real Cinthia Madrigal Adam Bullian	Adults	It is the end of July and the temperature is reaching into the 100s nearly every day. At 7am this morning the power was reported out in all of El Centro due to a transformer issue. There is neither power, nor air conditioning at the adult sites there, but the Calexico site has power and is fully operational. The most recent information indicates the power in El Centro is expected to remain out for 3-4 days. Clients with appointments over the next 3-4 days need to be instructed on what to do. Staff need to be informed where they are to report to work, if at all. Is the Contingency Plan going to be activated? What are the first steps?
11/07/18	Sylvia Bazan Jessica Aviles Maricruz Bermudez Mercy Valenzuela	YAYA	It is the end of August and the temperature is reaching the 100's nearly every day. At 7am this morning the power was reported out in all of El Centro due to a transformer issue. There is neither power, nor air conditioning at the El Centro sites, but

	Matthew Smith Cinthia Madrigal		the Brawley site has power and is fully operational. The most recent information indicates the power in El Centro is expected to remain out for 3-4 days. Clients with appointments over the next 3-4 days need to be instructed on what to do. Staff need to be informed where they are to report to work, if at all. Is the Contingency Plan going to be activated? What are the first steps?
02/06/19	Jose Lepe Guadalupe Garcia Lorena Godoy Matthew Smith Cinthia Madrigal	Children	It is the end of August and the temperature is reaching the 100's nearly every day. At 7am this morning the power was reported out in all of El Centro due to a transformer issue. There is neither power, nor air conditioning at the El Centro sites, but the Brawley site has power and is fully operational. The most recent information indicates the power in El Centro is expected to remain out for 3-4 days. Clients with appointments over the next 3-4 days need to be instructed on what to do. Staff need to be informed where they are to report to work, if at all. Is the Contingency Plan going to be activated? What are the first steps?
07/31/19	Sylvia Bazan Norma Avila Anna San Pedro Jessica DeChenne Cinthia Madrigal	MHTES	Today, ITS department became aware if an incident affecting County Systems. As a result, several services are offline and expected to remain off for several days. The following systems are completely down: Email, ManageEngine HelpDesk and Anything else hosted via other county building. Services hosted outside of the county should function as intended (e.g. MyAvatar, Zoom & Kronos). Is the Contingency Plan going to be activated? What are the first steps?
11/21/19	Victor Torres Adriana Velasquez Martha Nava Raquel Garcia	Adults	Today, ITS department became aware if an incident affecting County Systems. As a result, several services are offline and expected to remain off for several days. The following systems are completely down: Email, ManageEngine HelpDesk and Anything else hosted via other county

			building. Services hosted outside of the county should function as intended (e.g. MyAvatar, Zoom & Kronos). Is the Contingency Plan going to be activated? What are the first steps?
09/08/20	Alfonso Ruiz Biana S. Lopez Theresa Vogel Lorena Godoy	Children	<p>During the ongoing pandemic affecting the world, ICBHS faced challenges in an effort to reduce the spread of this virus. Various measures have been implemented to ensure the safety of employees and clients. As a result, staff have been performing under an adapted working environment. Staff at some point have been limited access to the below systems:</p> <ul style="list-style-type: none"> • Network (Avatar/Email) • Kronos • Phone System <p>How has your team approached this contingency situation?</p>
11/03/21	Francisco Zarate Andrea Barker Kati Lovel Kayla Romero Ryan Taylor Cinthia Madrigal Maria Garfias Bryan Masters Adolfo Estrada	Adults	<p>At the beginning of his work shift, Isidro Romo noticed he was unable to connect to myAvatar. As a first response he attempted to call Information Systems, but he was unable to call out. Unable to call, he attempted to send an email to Information Systems to assist but he was unable to successfully send the message and received an error that he was not connected to the internet. After this message, he attempted to test his internet connection and determined he was indeed without internet connectivity. After asking some of the other nearby staff about their connections he determined internet was out to the building. He walked down the hall to advise his supervisor Andrea Barker.</p>

Records of Changes

Page No.	Change Comment	Date of Change	Signature
9	Updated: Information Systems Team Responsibilities Table Updated	11/7/18	<i>Nancy Bel Ruel</i>
15-49	Updated: Attachments as needed	11/7/18	<i>Nancy Bel Ruel</i>
8 & 41	Updated: Server Inventory Appendix Updated: System Description and Architecture	2/6/19	<i>Nancy Bel Ruel</i>
41 42-45 48	Updated Server Inventory Diagram Updated Emergency Response Teams Updated Key Personnel Contact List	7/31/19	<i>Nancy Bel Ruel</i>
41 42-45 48	Updated Server Inventory Diagram Updated Emergency Response Teams Updated Key Personnel Contact List	9/8/20	<i>Nancy Bel Ruel</i>
41 42-45 48	Updated Server Inventory Diagram Updated Emergency Response Teams Updated Key Personnel Contact List	10/4/21	<i>Nancy Bel Ruel</i>
9-10 12 13	Update Contact information & IS team responsibilities Update Recovery goals	09/08/22	<i>Joseph H.</i>
15-49	Updated Emergency Response Teams Updated Key Personnel Contact List Updated Emergency Response Teams	10/04/22	<i>Joseph H.</i>