Form Approved

OMB Control No. 0920-0576

Exp. Date 12/31/2018

Incident Response Plan Template

(6 May 2016)

Centers for Disease Control and Prevention (CDC) Division of Select Agents and Toxins

Animal and Plant Health Inspection Service (APHIS) Agriculture Select Agent Program

Entity Name

Incident Response Plan

RO: First Name Last Name

# Instructions for Using Incident Response Plan Template

Please note that the Incident Response Plan Template is not required by FSAP to be used by the entity. The purpose of this document is to facilitate creating an incident response plan that meets select agent regulations 11, 12, and 14 of [7 CFR Part 331](http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=b9126e9fba23e3e7933354a1d2630d72&ty=HTML&h=L&n=7y5.1.1.1.9&r=PART), [9 CFR Part 121](http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=b9126e9fba23e3e7933354a1d2630d72&ty=HTML&h=L&n=9y1.0.1.5.58&r=PART), and [42 CFR Part 73](http://www.ecfr.gov/cgi-bin/text-idx?SID=30e8073a163f0f74b1dfcfc1fc488399&mc=true&node=pt42.1.73&rgn=div5). This document template is made purposely customizable to fit the specific needs of the entity.

Public reporting burden: Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329; ATTN: PRA (0920-0576).

# Incident Response Emergency Contact Information

Fill in the following contact information lines as applicable to your organization. Feel free to add more lines as necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  | **Biosafety Officer** |  |  |
|  | **Principal Investigator(s)** |  |  |
|  | **Facility Operations/Manager** |  |  |
|  | **Security Officer** |  |  |
|  | **Veterinarian (if applicable)** |  |  |
|  | **Building owner/manager**  |  |  |
|  | **Tenant Offices (if applicable)** |  |  |
|  | **Police** |  |  |
|  | **Fire** |  |  |
|  | **Hazmat** |  |  |
|  | **FBI WMDD coordinator** |  |  |

# Incident: Workplace Violence

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Workplace Violence |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Bomb Threat

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Bomb Threat |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Sample Bomb Threat Checklist

**Following is information to be recorded by a bomb threat message recipient during or immediately after the threat is communicated.**

* Date/Time
* Time Caller Hung Up
* Phone Number Where Call Was Received Questions to ask Caller:
* Where is the bomb located? (Building, Floor, Room, etc.)
* When will it go off?
* What does it look like?
* What kind of bomb is it?
* What will make it explode?
* Did you place the bomb? (Yes, No)
* Why?
* What is your name?
* Where are you?

Record Exact Words of Threat:

Caller’s Voice

* Accent
* Angry
* Calm
* Clearing throat
* Coughing
* Cracking voice
* Crying
* Deep
* Deep breathing
* Disguised
* Distinct
* Excited
* Female
* Laughter
* Lisp
* Loud
* Male
* Nasal
* Normal
* Ragged
* Rapid
* Raspy
* Slow
* Slurred
* Soft
* Stutter

Background Sounds:

* Animal Noises
* House Noises
* Kitchen Noises
* Street Noises
* Booth
* PA System
* Conversation
* Music
* Motor
* Clear
* Static
* Office machinery
* Factory machinery
* Localng distance

Threat Language:

* Incoherent Message Read
* Taped
* Irrational
* Profane
* Well-spoken
* Machinery
* Local
* Long distance

# Incident: Suspicious Package

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Suspicious Packages |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Natural Disaster

List the incident type here. Note: It may be helpful to create more than one set of instructions to apply to different types of natural disasters as necessary for your organization.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Natural Disasters |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Fire

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Fire |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Gas Leak

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Gas Leak |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Explosion

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Explosion |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Information Systems Breach

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Information Systems Breach |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Power Outage

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Power Outage |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Security Breach/Suspicious Activity

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Security Breach |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Inventory Discrepancy

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Inventory Discrepancy |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Incident: Theft, Loss, Release

List the incident type here. Note: It may be helpful to copy this information from the Regulatory Requirements table.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
| Theft, Loss, Release |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# [Incident] Response Plan Title

List the incident type here. Feel free to copy and paste this template as many times as necessary to create plans for all incident types that may apply to your entity.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Definition of Incident** | **Examples** | **Incident Notice** |
|  |  |  |  |

## [Incident] Contact List

List all responsible parties here. Add more rows to the table if necessary. Add communication methods

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (first, last)** | **Title** | **Phone number** | **Location** |
|  | **Responsible Official** |  |  |
|  | **Alternate Responsible Official(s)** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Procedure:

List the incident response plan steps, including call outs for specific responsible parties. Add or remove steps as necessary.

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

## Decontamination Plan (If Applicable)

|  |  |  |
| --- | --- | --- |
| **Person Responsible** | **Step** | **Priority** |
| Ex. Responsible Official (RO) | Step 1: | Medium |
| Ex. All | Step 2: | High |
|  | Step 3: |  |
|  | Step 4: |  |
|  | Step 5: |  |

# Annual Training

List the incident type, a description of the training (e.g. class, online presentation, drill or exercise), how the individuals receiving the training are evaluated to ensure comprehension, and the date that the training was performed. Note that training should be performed at least annually.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident Type** | **Description of Training** | **Evaluation Method** | **Date Performed** |
| Ex. Fire | Fire Drill | Successful Role Call | 5/5/2015 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Incident Response Checklist

Ensure that the entity has an Incident Response SOP that applies to each of the following:

|  |  |  |
| --- | --- | --- |
| **SOP** | **Yes** | **No** |
| * Workplace Violence
* Bomb Threat
* Suspicious Packages
* Natural Disasters
* Fire
* Gas Leak
* Explosion
* Information Systems Breach
* Power Outage
* Security Breach/Suspicious Activity
* Inventory Discrepancy
* Theft, Loss, Release
* Annual Training
 |  |  |

Ensure that the Incident Response Plan contains the following information:

|  |  |  |
| --- | --- | --- |
| **Details** | **Yes** | **No** |
| * The name and contact information (e.g., home and work) for the individual or entity (e.g., responsible official, alternate responsible official(s), biosafety officer, etc.).
* The name and contact information for the building owner and/or manager, where applicable.
* The name and contact information for tenant offices, where applicable.
* The name and contact information for the physical security official for the building, where applicable.
* Personnel roles and lines of authority and communication.
* Planning and coordination with local emergency responders.
* Procedures to be followed by employees performing rescue or medical duties.
* Emergency medical treatment and first aid.
* A list of personal protective and emergency equipment, and their locations.
* Site security and control.
* Procedures for emergency evacuation, including type of evacuation, exit route assignments, safe distances, and places of refuge.
* Decontamination procedures.
 |  |  |