**Small Business Continuity Plan**

Workbook

Companion Document:   
*Small Business Continuity Preparedness Guide*

Business Name:

|  |
| --- |
| *[Insert Name Here]* |

Version (X) - Month Year



# Change Log

Record of all significant modifications made to the original document, including details like the date, nature of the change, who approved the change, and reasons for the change.

| Date | Version | Author | Status | Comment |
| --- | --- | --- | --- | --- |
| *6/1/25* | *1* | *John Doe* | *Draft* | *Create Initial Draft* |
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# Table of Contents

[Change Log 2](#_Toc206850958)

[Table of Contents 3](#_Toc206850959)

[Business Information: 5](#_Toc206850960)

[Business Description: 5](#_Toc206850961)

[Current Business Location: 5](#_Toc206850962)

[Type of Industry (mark one): 6](#_Toc206850963)

[II. EMERGENCY PLANNING TEAM 6](#_Toc206850964)

[Crisis Team Leader 6](#_Toc206850965)

[Planning Team Members 6](#_Toc206850966)

[III. HAZARD, RISK, AND THREATS 7](#_Toc206850967)

[Assessment Checklist 7](#_Toc206850968)

[Hazard, Risk, Threat Analysis 7](#_Toc206850969)

[IV. EMERGENCY ACTION PLAN 8](#_Toc206850970)

[Reporting an Emergency 8](#_Toc206850971)

[Emergency Contact Numbers: 8](#_Toc206850972)

[Procedures for Evacuation & Sheltering In-Place 9](#_Toc206850973)

[Evacuation 9](#_Toc206850974)

[Shelter In-Place 10](#_Toc206850975)

[Internal & External Communication Messaging 11](#_Toc206850976)

[Cybersecurity 12](#_Toc206850977)

[V. CONTINUITY OF OPERATIONS 13](#_Toc206850978)

[Business Continuity Policy Statement 13](#_Toc206850979)

[Business Essential Functions 13](#_Toc206850980)

[Mission Critical Business System 13](#_Toc206850981)

[Delegations of Authority & Line of Succession 14](#_Toc206850982)

[Alternate Site Location 14](#_Toc206850983)

[Safeguarding Vital Records 15](#_Toc206850984)

[Suppliers and Contractors 16](#_Toc206850985)

[Inventory of Equipment 16](#_Toc206850986)

[VI. RECOVERY RESOURCES 17](#_Toc206850987)

[Local 17](#_Toc206850988)

[State 17](#_Toc206850989)

[Federal 18](#_Toc206850990)

[VII. ANNUAL REVIEW 18](#_Toc206850991)

[VIII. APPENDIX 19](#_Toc206850992)

[Emergency Employee Contact Roster 19](#_Toc206850993)

[Maps 19](#_Toc206850994)

[Business Emergency Go Kit Contents 20](#_Toc206850995)

[Maryland Department of Commerce SCORE Representatives 20](#_Toc206850996)

[Maryland Business Regional (MBR) Growth and Retention Representatives 20](#_Toc206850997)

[Recovery Planning Worksheets 21](#_Toc206850998)

# I. Business Information

|  |  |
| --- | --- |
| Business Name |  |

|  |  |  |
| --- | --- | --- |
| Business Owner | Phone Number | E-Mail |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| Maryland Business License Number | Employer Identification Number | Total Number of Employees |
|  |  |  |

## Business Description:

|  |
| --- |
|  |

## Current Business Location:

|  |  |
| --- | --- |
| Address |  |
| City, State, Zip |  |
| County |  |
| Telephone |  |

## Type of Industry (mark one):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Agriculture & Forestry/ Wildlife |  | Food & Hospitality |  | Personal Services |
|  | Business & Information |  | Gaming |  | Real Estate & Housing |
|  | Construction/ Utilities/ Contracting |  | Health Services |  | Safety/ Security & Legal |
|  | Education |  | Motor Vehicle |  | Transportation |
|  | Finance & Insurance |  | Natural Resources |  | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# II. EMERGENCY PLANNING TEAM

## Crisis Team Leader

The following persons are our primary crisis leads and will serve as the company spokespersons in an emergency.  If the primary contact is unable to manage the crisis, the alternate will be their successor in management.

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Contact |  | Alternate Contact |  |
| Phone # |  | Phone # |  |
| Alternate Phone # |  | Alternate Phone # |  |
| E-Mail |  | E-Mail |  |

## Planning Team Members

The following people will participate in emergency planning and crisis management.

|  |  |  |  |
| --- | --- | --- | --- |
| **Role/ Function** | **Name** | **Phone** | **E-Mail** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

# III. HAZARD, RISK, AND THREATS

## Assessment Checklist

|  |  |
| --- | --- |
| **Action** | **Is It Completed?** |
| I have checked with my local emergency management agency and/or fire department for a list of hazards, risks, and/or threats that may impact my business |  |
| I have requested a copy of the local hazard mitigation plan for the area surrounding my business. |  |
| I have signed up to receive real-time information during an emergency event. See [Maryland Business Emergence Operation Center](https://mdem.maryland.gov/Pages/mbeoc.aspx). |  |
| I have considered industry-specific hazards. |  |
| I have considered the physical location and proximity of potential hazards nearby. |  |
| I have considered access and function needs of my employees and visitors |  |

## Hazard, Risk, Threat Analysis

The following are the most likely hazards, risks and/or threats that could impact our business:

|  |
| --- |
|  |
|  |
|  |
|  |
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|  |

# IV. EMERGENCY ACTION PLAN

## Reporting an Emergency

Our Employees understand that in an emergency that anyone can and should call 9-1-1.  With that in mind, below are additional steps for reporting an emergency:

|  |
| --- |
|  |

*Example:*

* *In the event of an emergency call 9-1-1.  Focus on life safety and securing the facility.*
* *Next the emergency should be reported, by way of mouth (ie. in-person or by phone), to the owner and/or crisis team lead as quickly as possible (no more than two hours).*
* *Once safe, begin outreach to the applicable external emergency contacts below.*
* *Next, notify any employees not aware of the event.*
* *Finally, notify constituents of the event.*

## Emergency Contact Numbers:

*See Appendix for the Employee Emergency Contact List.*

|  |  |  |  |
| --- | --- | --- | --- |
| Organization | Point of Contact | Phone # | E-Mail |
|  |  |  |  |
|  |  |  |  |
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## Procedures for Evacuation & Sheltering In-Place

### Evacuation

The following plan is for employees and customers.  We have developed these plans in collaboration with our neighboring businesses and building owners to avoid confusion or gridlock.  Additionally, we’ve taken in consideration employee and customer access and functional needs.  We have located, copied, and posted building and site maps.  Exits are clearly marked. We will practice evacuation procedures (X) times per year. See Appendix for maps.

If we must leave the workplace quickly (insert directions below):

|  |
| --- |
|  |

| Warning System | We will test the warning system and record the results (X) times a year |
| --- | --- |
|  |  |
|  |  |
|  |  |

Assembly Site Location

|  |
| --- |
|  |

| Assembly Site Manager | Alternate Assembly Site Manager | Responsibilities |
| --- | --- | --- |
|  |  |  |

| Shut Down Facilities Manager | Alternate Shut Down Facilities Manager | Responsibilities |
| --- | --- | --- |
|  |  |  |

Person(s) responsible for issuing the “All Clear”?

|  |
| --- |
|  |

### Shelter In-Place

The following plan is for employees and customers. We have talked to co-workers about which emergency supplies, if any, the company will provide in the shelter location and which supplies individuals might consider keeping in a portable kit personalized for individual needs.  We will practice shelter-in-place procedures (X) times a year. See Appendix for maps.

If we must take shelter quickly (insert directions below):

|  |
| --- |
|  |

| Warning System | We will test the warning system and record the results (X) times a year |
| --- | --- |
|  |  |
|  |  |
|  |  |

| Storm Shelter Location | “Seal the Room” Shelter Location |
| --- | --- |
|  |  |

| Shelter Manager | Alternate Shelter Manager | Responsibilities |
| --- | --- | --- |
|  |  |  |

| Shut Down Facilities Manager | Alternate Shut Down Facilities Manager | Responsibilities |
| --- | --- | --- |
|  |  |  |

Person(s) responsible for issuing the “All Clear”.

|  |
| --- |
|  |

## Internal & External Communication Messaging

We will communicate our emergency plans with employees in the following way:

|  |
| --- |
|  |

In the event of an emergency, we will communicate with employees in the following way:

|  |
| --- |
|  |

It’s important to keep our customers, partners, and stakeholders abreast of situations involving our business, especially during emergencies.  When communicating, it’s essential we align with our values and branding.  Please keep in mind the following best practices and/or pre-approved messaging:

|  |
| --- |
|  |

*Sample 1*

*Outreach to any company affiliate: please reach out to the appropriate team leaders to get approval. Please reach out to the appropriate person based on the following departments and their responsibilities.*

*Sample 2*

*General Company Mishap, Accident, or Mistake*

*We owe our customers an apology. On [date], [describe the incident that occurred]. As a result, [impact on customers]. We’re sorry for what happened—we take full responsibility for our actions and the impact this had on our customers. After reviewing the situation, we found the cause to be [cause of mistake here]. We are committed to ensuring our customers, employees, and stakeholders don’t have to deal with this again by [preventative measures here]. [Account managers/customer service/the company] have been communicating with our customers during this time and are still available to help address any continuing issues that resulted from this incident. Again, we apologize to our customers, and we pledge to be better.*

*Sample 3*

*Lawsuits | General*

*We cannot comment on ongoing litigation, but [company] is committed to [statement that does not divulge information or opinion about lawsuit].*

*Sample 4*

*Accusations*

*Active Shooter/Violence on Site*

*There is [suspicion/confirmation] of an [active shooter/bomb/threat] onsite at [company]. Our priority is the safety of everyone onsite and in the surrounding area. We*

*are communicating and working with authorities to contain and resolve the situation, and ask everyone to refrain from contacting or visiting our [address/specific] location until authorities confirm it is safe to do so.*

*Sample 5*

*Unexpected Loss of CEO/Executive/Employee (Death)*

*We are saddened to announce that [name] has passed away. Amidst this time of tragic loss, our focus right now is on supporting the people closest to [him/her], our employees, and all of those affected by [his/her] passing. [Insert name], who had the benefit of working closely with [name], will be serving as interim [Title of deceased].*

## Cybersecurity

To protect our computer hardware, we will:

|  |
| --- |
|  |

To protect our computer software, we will:

|  |
| --- |
|  |

If our computers are destroyed, we will back up computers at the following location:

|  |
| --- |
|  |

If we experience a cybersecurity breach, we will:

* *[In the space below, add your own to the listed items that follow]*
* *Immediately isolate the affected systems and initiate an investigation to understand the breach’s scope.*
* *Contact relevant authorities based on the type of data compromised (like State Attorney General if customer data is involved), credit reporting agencies if financial data is compromised, and Cybersecurity and Infrastructure Security Agency (CISA) if the breach involves critical infrastructure.*
* *Notify affected individuals*
* *Take steps to mitigate further damage and improve security measures*

# V. CONTINUITY OF OPERATIONS

The Continuity of Operations section is information that our business will use to ensure it can continue to operate during emergencies and on normal business days.  The plan documents what is needed to keep the business up and running.

## Business Continuity Policy Statement

|  |
| --- |
|  |

*Example:*

*In the event of an emergency our business’s primary objectives are to protect the health and safety of our employees and customers, continue to or restore quickly, provide services to customers, and fulfill our legal and regulatory obligations.*

## Business Essential Functions

The following are a list of  functions that enable our business to remain operational and provide services in times of an emergency.

|  |  |  |
| --- | --- | --- |
| *Example:*  *Key Staff* | *Example:*  *Physical Location* | *Example:*  *Technology* |
|  |  |  |
|  |  |  |
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## Mission Critical Business System

Our business’s mission critical systems (MCS) are those systems that are absolutely essential to our core operations, meaning if they fail, the business would experience significant disruption, potential financial loss and could even be forced to close.

| Mission Critical System | Function | Provider | Contact Information |
| --- | --- | --- | --- |
| *Example:*  *Online Banking System* |  |  |  |
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## Delegations of Authority & Line of Succession

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| --- |
|  |

*Example:*

*This plan identified two (2) persons as Crisis Team Leaders.  These individuals have knowledge of the business operations (e.g. business attorney, accountant, banking and suppliers) and have been designated by the business owner to make decisions on behalf of the registered business.*

*In the event that the owner is incapacitated or becomes otherwise unavailable during a disaster or emergency the Crisis Team Leaders will assume accountability.*

## 

## Alternate Site Location

In the event that the primary location is inaccessible, an alternate business site must be identified.  Below are alternate site considerations.

| Item | Notes |
| --- | --- |
| *Occupancy Requirements:* Number of Employees, Average Customers or Suppliers at Location |  |
| *Approximate Square Footage Needs:* Storefront, Office, Warehouse |  |
| *Office Equipment Needs:*   Desks, Chairs, Tables, Computers, Photocopiers, File Cabinets, Desk Phones |  |
| *Utility Requirements:* Phone Lines, Outlets, Temperature Control, Generator |  |
| *Available Equipment:*  loading dock, skid loader, kitchen |  |
| *Other:* Parking, Building Accessibility |  |

The following location has been identified as an alternate site that can be used for up to 30 days following an event.

|  |  |
| --- | --- |
| Address |  |
| City, State, Zip |  |
| County |  |
| Telephone |  |
| Point of Contract |  |

## Safeguarding Vital Records

Vital records are those electronic and hardcopy documents, references, and records needed to support the business’s essential functions during an emergency situation.

The following person in our business is responsible for backing up our critical records, including payroll and accounting Systems.

| Name | Title | Phone | Email |
| --- | --- | --- | --- |
|  |  |  |  |

Back-up records, including a copy of this plan, site maps, insurance policies, licenses, bank account records, financial statements, and computer back-ups are stored onsite here:

|  |
| --- |
|  |

If our accounting and payroll records are destroyed, we will provide for continuity in the following ways:

|  |
| --- |
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|  |
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## Suppliers and Contractors

Below is a list of current suppliers, including alternates, should the primary supplier be unable to provide service in the event of an emergency.

| Service and/or Product | Suppliers Name, Address, Phone | Account Number | Alternate Supplier Name, Address, Phone |
| --- | --- | --- | --- |
|  |  |  |  |
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|  |  |  |  |
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## Inventory of Equipment

Below is a list of all the equipment owned and operated by the business, including a maintenance schedule and the manufacturer’s service contact information.

| Equipment | Maintenance Schedule | Service Contact Information |
| --- | --- | --- |
|  |  |  |
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# VI. RECOVERY RESOURCES

We understand that collecting information used in recovery is important.  We have educated ourselves on the potential recovery resources below and understand what information that these resources may require as part of their application process.

## Local

Local emergency management office.  Find their contact information [here](https://mdem.maryland.gov/Pages/emmgrs.aspx).

## State

*Governor’s Executive Orders*

Find them [here](https://governor.maryland.gov/news/Pages/executive-orders.aspx). The Governor may post executive orders like a “state of emergency declaration,” which may enable state resources to assist private sector businesses.

*Maryland Department of Commerce*

See Appendix for Planning Recovery Worksheets. The [Maryland Department of Commerce](https://commerce.maryland.gov/) has assigned the following case number and representatives to my business:

|  |  |
| --- | --- |
| Case Number |  |

| SCORE Representative Name | Phone | E-Mail |
| --- | --- | --- |
|  |  |  |

| Maryland Business Retention (MBR) & Expansion Representative Name | Phone | E-Mail |
| --- | --- | --- |
|  |  |  |

*Maryland Department of Emergency Management*

[The Maryland Business Emergency Operation Center](https://mdem.maryland.gov/Pages/mbeoc.aspx) is a centralized hub to facilitate communication, resource sharing and collaboration to ensure that the private sector can make the best decisions for their employees and business operations.

*Maryland Insurance Administration*

The [Maryland Insurance Administration](https://insurance.maryland.gov/Pages/default.aspx) offers a variety of services and resources to help Maryland consumers and businesses with insurance needs.

*Maryland Department of Health: Behavioral Health Administration*

[Maryland Department of Health](https://health.maryland.gov/Pages/Home.aspx) and [Behavioral Health Administration](https://health.maryland.gov/bha/Pages/Index.aspx) offer a variety of services including Mental Health services which can be especially helpful after an emergency event.

## Federal

*Small Business Association (SBA)*

In the event of a declaration, businesses impacted by an emergency are eligible for SBA’s low-interest, long-term Economic Injury Disaster Loans (EIDLs) to help overcome temporary loss of revenue stemming from the emergency.  Eligibility applies to small businesses, small agricultural cooperatives, and private nonprofit organizations.  [Search for disaster declarations here](https://lending.sba.gov/search-disaster/).

*Federal Emergency Management Agency (FEMA)*

Hub for accessing FEMA resources for Maryland and surrounding areas (Region III). [Search for disaster declarations here](https://www.fema.gov/locations/maryland).

# VII. ANNUAL REVIEW

Every year the Crisis Team Leaders and Planning Team Members will assemble to review and update this business continuity plan.  Every year it will occur in/on (insert month or specific date below):

|  |
| --- |
|  |

# VIII. APPENDIX

## Emergency Employee Contact Roster

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Employee | Title/ Function | Email | Home Phone | Mobile | Emergency Contact | Emergency Contact # |
|  |  |  |  |  |  |  |
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## Maps

Building Map(s) can be found in the following location:

|  |
| --- |
|  |

Evacuation Site Map(s) can be found in the following location:

|  |
| --- |
|  |

Shelter In-Place Site Map(s) can be found in the following location:

|  |
| --- |
|  |

You may wish to print copies of these maps and append them to this workbook!

## Business Emergency Go Kit Contents

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*Examples:*

* *First Aid Kit*
* *Blankets*
* *Masks*
* *Gloves*
* *Water*
* *Flash Lights*
* *Hygiene Items*
* *Garbage Bags*
* *Non-Perishable Food*
* *Battery Powered Radio*
* *Duct Tape*
* *Phone Charger Power Bank*

## Maryland Department of Commerce SCORE Representatives

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |

## Maryland Business Regional (MBR) Growth and Retention Representatives

*Current as of 08.23.25*

|  |  |  |
| --- | --- | --- |
| **Andrew Sargent**  Business Retention & Expansion Rep  **Garrett, Allegany & Washington Counties** | **Tamar Osterman**  Business Retention & Expansion Rep  **Frederick & Carroll Counties** | **Carla Merritt**  Business Retention & Expansion Rep  **Montgomery County** |
| **Delterese George**  Business Retention & Expansion Rep  **Prince George’s County** | **Ivy Gales**  Business Retention & Expansion Rep  **Howard County** | **Steve Wall**  Business Retention & Expansion Rep  **Charles, Calvert, & St. Mary’s Counties** |
| **Carrie Long**  Business Retention & Expansion Rep  **Anne Arundel County** | **Melanie Koorey**  Business Retention & Expansion Rep  **Baltimore City** | **Tim Murphy**  Business Retention & Expansion Rep  **Baltimore County** |
| **Brigitte Layton Peters**  Business Retention & Expansion Rep  **Harford & Cecil Counties** | **Nancy LaJoice**  Business Retention & Expansion Rep  **Queen Anne’s, Caroline, Talbot & Kent Counties** | **Mindie Burgoyne**  Business Retention & Expansion Rep  **Wicomico, Worcester, Dorchester & Somerset Counties** |

## Recovery Planning Worksheets

The following planning information will help my business determine if and when my business must apply for assistance after an emergency.

*Question: How much elapsed time, post an emergency, will it take before the emergency impacts (insert impact item below)?*

| Impact Item | 1 week | 2 weeks | 3 weeks | 4 weeks |
| --- | --- | --- | --- | --- |
| Cash Flow |  |  |  |  |
| Current Inventory |  |  |  |  |
| Loss of Customers/ Sales |  |  |  |  |
| Financial Reporting |  |  |  |  |
| Increases in Liability |  |  |  |  |
| Loss of Public Image |  |  |  |  |
| Vendor or Supplier Liabilities |  |  |  |  |
| Vendor or Supplier Relations |  |  |  |  |
| Employees Retention |  |  |  |  |

Question: What is the projected amount of cash that my business may need to request?  Take the following into consideration.

| Cashflow Statement | 1 Month | 2 Months | Average of 1 & 2 |
| --- | --- | --- | --- |
| Cash Start of Month |  |  |  |
| Cash Coming In |  |  |  |
| Sales Paid 75% |  |  |  |
| Collections of Credit |  |  |  |
| Loans and Transfers |  |  |  |
| Cash In |  |  |  |
| Inventory |  |  |  |
| Rent |  |  |  |
| Utilities |  |  |  |
| Insurance |  |  |  |
| Wages |  |  |  |
| Loan Payments |  |  |  |
| Taxes |  |  |  |
| Cash Out |  |  |  |
| Total Cash at End of Month |  |  |  |
| Amount Needing to Request |  |  |  |