

DISASTER CHECKLIST FOR NEWSPAPERS

The newspaper has a very unique and important responsibility to the community in times of disaster and must plan to operate in a crisis. Developing a checklist of items leads to the development of a disaster plan, which will provide the publisher and staff confidence that they are prepared to fulfill their obligation to their community, neighbors, family and friends. In times of crisis you are needed more than ever!

PREPLANNING

Preplanning is the most important step in avoiding or knowing what to do in case of a disaster. Setting a calendar date each year to update the plan, review the list, make a new inventory tape, talk to employees, have a disaster training exercise, and other related matters is the easiest way to ensure this important item doesn't slip through the cracks in the hectic schedule of a weekly newspaper.

CHECKLIST 1

Pick a disaster – any disaster

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a list of all possible disasters that might affect my paper. (Include <i>tornado, flood, bomb, fire, sabotage, lawsuit, computer system failure, key employee death or disability, other types.</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | I have ranked the list of disasters from most likely to least likely. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have evaluated what areas of my operation would need to be restored first if a disaster strikes my whole paper, or just a portion of my business. |

CHECKLIST 2

We're OK here – How about YOU?

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I have made decisions on what to do if the paper avoids a direct disaster, but the disaster involves my town, subscribers, advertisers, employees, a family member, independent contractors, or our key suppliers. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a list of steps to take (for all areas including news, advertising, legal notices, circulation, accounting, business operations, etc.) if one of these "contingent" disasters affects my newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a list of key employees we depend on for the basic newspaper function and what the key responsibilities of those employees are in order to get the newspaper published. |
| <input type="checkbox"/> | <input type="checkbox"/> | Employees know what to do if the newspaper is spared, but disaster strikes their own homes or families. |
| <input type="checkbox"/> | <input type="checkbox"/> | Employees know whether they can take vacation or sick leave for disaster-related absences. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have thought about what to do if any employee or a family member is killed or disabled by a disaster. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have set priorities on what additional lines of business (i.e. print shop, office supplies, book store, tag agency, etc.) the newspaper might operate, and how they will be affected by the disaster. |

CHECKLIST 3

I'll get by with a little help from my friends

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a list of which newspapers or businesses I will call on to help with critical newspaper functions. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a list of their names, numbers, and critical functions they are to perform. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have documented my newspaper's technical configurations. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a list of the software that is critical to publishing the paper. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a list of other "non-publishing" software, such as accounting and circulation, that would be necessary to complete other functions of the newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a list of the exact number and type of machines I need. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a list of alternate phone numbers to use in case of a disaster. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know where to get Internet access and email for me and my staff. |
| <input type="checkbox"/> | <input type="checkbox"/> | The staff knows where to assemble if the newspaper equipment or offices are unusable. |
| <input type="checkbox"/> | <input type="checkbox"/> | If I print other newspapers, I know where I would send my customers. |
| <input type="checkbox"/> | <input type="checkbox"/> | If I print other papers, I have a list of other printers and know what to tell them so they help my customers immediately. |
| <input type="checkbox"/> | <input type="checkbox"/> | If I am printed elsewhere and my printer has the disaster, we have discussed where to go and what to do. |
| <input type="checkbox"/> | <input type="checkbox"/> | We know what to tell carriers, post office workers, convenience store distributors and others in case there are changes in the method of delivery of the newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | The local police, fire and medical personnel know us, will vouch for us, and won't panic and shut us out when the TV stations and helicopters arrive on the scene. |

CHECKLIST 4

My insurance policy doesn't cover WHAT?!!

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | My insurance agent has been out to my paper in the last year to see my operation. |
| <input type="checkbox"/> | <input type="checkbox"/> | My policy is tailored to specific needs of my newspaper; not a general policy. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know where my insurance policies are located, and keep them in a safe place. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have reviewed my policies in the past year with my agent. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have reviewed the list of my equipment and clearly understand what is covered by insurance and what is not. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have replacement cost insurance, including incidental costs. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have business interruption coverage, and know the length and limits of that coverage. |
| <input type="checkbox"/> | <input type="checkbox"/> | I am certain my insurance policy covers all the risks that I listed above. |

CHECKLIST 5

But it's worth more than that to ME!

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I know the true value of each piece of property. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know the true business interruption costs if I could not publish as usual. |
| <input type="checkbox"/> | <input type="checkbox"/> | I can explain and justify these values to a claims adjuster. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have determined some items are minor and not worth covering. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have determined that some risks are unavoidable and not covered them with insurance. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have decided it is not economically feasible to cover some property/risks. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have determined there are other factors influencing my decision to cover or not cover some property/risks. |

CHECKLIST 6

Let me show you around

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Local fire personnel have toured my paper in the past year to familiarize their personnel with our building, hazards, exits, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | Local medical personnel have toured my paper in the past year to make sure they know how to get in and out of the building in case of a medical emergency. |
| <input type="checkbox"/> | <input type="checkbox"/> | Local police personnel have toured my paper in the past year to make sure they know about my property and can protect my paper in case of a disaster. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have made changes to my building, hazards, etc. since the last visit of my local fire, medical and police personnel. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a copy of the layout of my paper, and a listing of addresses and phone numbers of key personnel. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a listing of alternate addresses and phone numbers for key personnel. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have the paper layout and personnel lists in a secure, accessible place in case of a disaster. |

CHECKLIST 7

If I had to do it over again...

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have thought about what parts of my business I would change if I had to restart, from the ground up, the newspaper or any other businesses I operate. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have thought about what new offices and/or equipment would be required if my paper becomes damaged beyond repair. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a calculation about how much income I would need to keep the paper alive while waiting on insurance settlements. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know the state law on how many issues I can miss before I lose my status as a legal newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have thought about exactly how long it would take to restore my paper to normal operation after each type of disaster. |

CHECKLIST 8

Didn't we have something over there?

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a detailed, room-by-room inventory list of everything at the newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | My inventory also has descriptions and model numbers of all pieces of equipment and software. |
| <input type="checkbox"/> | <input type="checkbox"/> | In the past year, I have made a videotape of my entire operation. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have set a date each year to videotape everything in the operation. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know if there is any "third party property" at my newspaper office. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have included "third party property" in my inventory list. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know if "third party property" is included in my insurance coverage. |
| <input type="checkbox"/> | <input type="checkbox"/> | All employees understand whether their personal property would be covered by insurance. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have stored my paper's detailed inventory list and videotape in a safe and secure place. |
| <input type="checkbox"/> | <input type="checkbox"/> | We know the location of all racks and how we would distribute papers if they were destroyed. |

CHECKLIST 9

I thought you knew how important that stuff was!!!

- | YES | NO | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have a written list of all vital records pertaining to my newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have backed up all my computer information. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have a regularly scheduled plan to back up all computer information. |
| <input type="checkbox"/> | <input type="checkbox"/> | I store the back up information and copy of all vital records in a safe and secure place. |

CHECKLIST 10

What would we do without you?

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | If the publisher does not serve as the disaster manager, the staff knows who will be in charge. |
| <input type="checkbox"/> | <input type="checkbox"/> | I am emotionally and physically ready, willing and able to be the disaster manager for my newspaper. |
| <input type="checkbox"/> | <input type="checkbox"/> | Our paper is prepared to be the hub of information for townspeople, before, during and after the broadcast media have left the area. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have made a list of immediate actions to take and which staff people are responsible for what items in the event of a disaster. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have the list stored in an easily accessible and secure place, and staff knows where it is. |

CHECKLIST 11

Quiet on the set! And ... ACTION!

- | YES | NO | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Our newspaper staff knows the basics of our action plan in case of a disaster. |
| <input type="checkbox"/> | <input type="checkbox"/> | Our basic action plan includes important names and phone numbers. |
| <input type="checkbox"/> | <input type="checkbox"/> | In the past year, we have had a fire drill or other disaster training exercise. |
| <input type="checkbox"/> | <input type="checkbox"/> | We set a specific date each year to have a disaster training exercise. |
| <input type="checkbox"/> | <input type="checkbox"/> | Our staff knows what to do if the disaster happens during working hours. |
| <input type="checkbox"/> | <input type="checkbox"/> | Our staff knows what to do if the disaster happens when the office is closed. |
| <input type="checkbox"/> | <input type="checkbox"/> | A copy of basic staff actions are posted in the building as a quick employee guide. |
| <input type="checkbox"/> | <input type="checkbox"/> | Employees have a copy of the basic action plan and their responsibilities at their home. |
| <input type="checkbox"/> | <input type="checkbox"/> | The employees know what records to safeguard. |
| <input type="checkbox"/> | <input type="checkbox"/> | The employees know to minimize physical damage, such as location of fire extinguishers. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know which employees are trained for First Aid and CPR. |
| <input type="checkbox"/> | <input type="checkbox"/> | I know which employees will be called away if the National Guard is called upon, or if they are volunteer fire, ambulance, police personnel. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have made contingency plans for the absence of those employees. |



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DEVELOP AN ACTION AND RECOVERY PLAN

I can't believe this is happening!!!

In a disaster, one person should be in charge. That person will assess the situation, determine the priorities, gather available resources, initiate specific orders to staff, monitor follow-through on critical needs and make immediate changes to the plan as needed.

STEP 1 - Priorities in the event of a disaster are:

1. PERSONNEL SAFETY – Remove people from the disaster site and further danger. Administer first aid if needed.
2. SOS CALLS – Alert public safety authorities using the list you prepared.
3. PROPERTY DAMAGE MITIGATION – Turn off power, isolate or remove equipment, records, etc. Secure premises from unnecessary spectators or workers to eliminate danger and destruction of evidence.

STEP 2 - Follow the organization plan:

1. IMPLEMENT THE CHAIN OF COMMAND. The person in charge (disaster manager) will deal with emergency and insurance personnel, loss consultant, public relations, and internal/external communications.
2. IMPLEMENT THE EMPLOYEE RESPONSIBILITY ACTIONS AND LIST. Authorize and delegate to employees so they will implement subsequent phases of the plan – relocation, back-up resources, implementation of short term goals (i.e. we're not going to miss an issue), etc.

STEP 3 - Follow guidelines for short term survival and long-term recovery:

SHORT TERM SURVIVAL ACTIONS:

1. Gather the personnel needed to continue business – write, sell, publish, distribute.
2. Have them use appropriate backup facilities or alternate site as set up in preplan.
3. Maintain records of all transactions, rentals, purchases and other recovery items for insurance.
4. Begin updating latest inventory list immediately while property and equipment are fresh in your mind.
5. Call frequent staff meetings to boost morale, uncover staff needs. Encourage input from staff members.
6. Recognize and deal with post-disaster stress of all involved parties. It is there whether seen or not.

LONG TERM RECOVERY:

1. Re-evaluate your business strategy. You are under no obligation to replicate loss.
2. Determine the true need to replace items in every affected area. Approach each with an initial evaluation. You may want to change some areas, eliminate others. A change in an affected area could make an undamaged area no longer compatible or necessary.
3. Work to solidify master recovery plan as you would to build a new business – from construction, to new equipment, to furnishings, to personnel.
4. Do not overlook the positive aspects of recovery and renewal. Inform your staff and community.
5. Plan a Grand Opening.