i. Outline

**LOSS OF COMMUNICATIONS**

Upon Discovery of a Loss of Communications

Switchboard
Make necessary Phase 1 announcement and notifications to Security and Information Services.

Maintenance & Plant Operations
Investigate whether the issue is facility based (flood, power loss, etc.).

Information Services
Investigate and attempt to rectify the Loss of Communications.

Security
Attend to assess severity and assist with set up of the Incident Command Centre, if necessary.

Check status of “Blue Dot” phones in designated areas

Issue Resolved

Information Services
Contact Switchboard to announce the All Clear.

Issue Unresolved

Information Services
Declare a Phase 2 Loss of Communications

Security
Establish the Incident Command Centre (Refer to page 11)

Upon Hearing a Loss of Communications Announced Overhead

All Staff
*Do not* call Switchboard unless it is urgent

February 2016
ii. “Blue Dot” Phone List – 1 of 2

The following is a list of areas with downtime (blue dot) phones and their 7-digit telephone number. Using a downtime phone is the same as using a phone in your home; you do not need to dial 9 first for an outside line. The hospital’s four-digit numbers will not work with these phones.

For Emergency Codes or Overhead Paging, DIAL 613-542-1515.

Do not call Switchboard during a Loss of Communications unless it is URGENT

<table>
<thead>
<tr>
<th>“Blue Dot” Phone List</th>
<th>For Emergency Codes or Overhead Paging, DIAL 613-542-1515.</th>
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<tbody>
<tr>
<td>Location</td>
<td>Number</td>
</tr>
<tr>
<td>SWITCHBOARD</td>
<td>613-542-1515</td>
</tr>
<tr>
<td>Admitting (Bed Board)</td>
<td>613-548-7934</td>
</tr>
<tr>
<td>Burr 0 (Radiation Therapy Reception)</td>
<td>613-544-1851</td>
</tr>
<tr>
<td>Burr 1 (located in Communication Room C)</td>
<td>613-544-8960</td>
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<tr>
<td>Burr 3 Renal Unit</td>
<td>613-544-6779</td>
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<td>Burr 4 (located in IOA)</td>
<td>613-544-6680</td>
</tr>
<tr>
<td>Burr 4 Adult Unit</td>
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</tr>
<tr>
<td>Burr 4 Child / Adolescent Unit</td>
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</tr>
<tr>
<td>CSU Cardiac Sciences Unit (CCU)</td>
<td>613-548-4568</td>
</tr>
<tr>
<td>PPU -Post Procedure Unit (formerly CCU Step-down)</td>
<td>613-548-7901</td>
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<tr>
<td>Central Dispatch (Portering)</td>
<td>613-548-0041</td>
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<tr>
<td>Computer Operations (Computer Room 24 x 7)</td>
<td>613-548-8721</td>
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<tr>
<td>Connell 3</td>
<td>613-548-0524</td>
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<td>Connell 4</td>
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<td>Connell 5</td>
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<td>Connell 9</td>
<td>613-548-0713</td>
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<td>613-548-0817</td>
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<td>Core Lab</td>
<td>613-548-8861</td>
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<td>CPD</td>
<td>613-548-8967</td>
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<td>Davies 3</td>
<td>613-548-0948</td>
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<td>ECU</td>
<td>613-548-7236</td>
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<td>Emergency</td>
<td>613-548-0433</td>
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<td>Executive Committee Room</td>
<td>613-548-7547</td>
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<td>Help Desk (Customer Support 24 x 7)</td>
<td>613-548-1248</td>
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<td>ICU</td>
<td>613-548-3986</td>
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iii. “Blue Dot” Phone List – 2 of 2

The following is a list of areas with downtime (blue dot) phones and their 7-digit telephone number. Using a downtime phone is the same as using a phone in your home; you do not need to dial 9 first for an outside line. The hospital’s four-digit numbers will not work with these phones.

For Emergency Codes or Overhead Paging, DIAL 613-542-1515.

Do not call Switchboard during a Loss of Communications unless it is URGENT

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<th>“Blue Dot” Phone List</th>
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<td>CSU Kidd 3</td>
<td>613-548-7124</td>
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<td>Kidd 4</td>
<td>613-548-3272</td>
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<td>Kidd/Davies 5</td>
<td>613-548-1587</td>
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<td>Kidd 6</td>
<td>613-548-3627</td>
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<td>Kidd 7</td>
<td>613-548-3803</td>
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<td>Kidd 9</td>
<td>613-548-0925</td>
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<td>Kidd 10</td>
<td>613-548-7168</td>
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<td>ASU - Acute Stroke Unit (formerly NCCU)</td>
<td>613-548-3873</td>
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<td>NICU</td>
<td>613-548-4305</td>
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<td>613-548-4793</td>
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<td>PAR</td>
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<td>Security</td>
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<td>Staffing Office</td>
<td>613-548-8638</td>
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1.0 General Overview

1.1 Plan to Be Used In Case of a Loss of Communications
This plan will be utilized if there is a loss of internal communications (telephone, overhead paging).

1.2 Definitions
Phase 1 – Loss of Communications Short Term
Loss of communications expected to last less than 2 hours. The decision to activate Phase 1 will rest with the Switchboard Operator.

Phase 2 – Loss of Communications Long Term
Loss of communications expected to last more than 2 hours. The decision to activate Phase 2 will rest with Chief Information Officer / Delegate.

Blue Dot Phones
“Blue Dot” phones are phones that work the same way as residential phones (they receive power from the phone line). “Blue Dot” phones are only available in designated areas. For “Blue Dot” phone locations and numbers, see Page iii - Blue Dot Phone List – “Blue Dot’ Phone List

1.3 Authority to Declare Loss of Communications
The authority to declare that there is a loss of communications is the responsibility of Chief Information Officer¹. Phase 1 – Loss of Communications will be announced by Switchboard as soon as it is known that the there is a communications loss. The Chief Information Officer / Delegate is responsible for notifying Switchboard of the level of response required during an extended loss of communications (Phase 2 – Loss of Communications).

1.4 Emergency Communications
If the internal communications system has failed, Vocera, cellular telephones and “Blue Dot” phones may be the only means of communication. Two way radios will be available from Protection Services for use by Incident Command.

1.5 Conservation Measures
During times of communications failure, any calls should be limited to emergencies only.

1.6 Resuming Normal Communications
In the event of a large-scale communications loss, precautionary steps may need to occur before transitioning back to 100% normal communications. In these cases, you may notice communication blips.

¹ Delegate refers to the next level of appointed authority. In this case, it would be the Administrator On-call
1.7 Notification
All areas will be notified whenever the Hospital must assume emergency communications. In case of non-emergency, or testing, this will be done in advance by e-mail or hard copy and by phone to identified critical areas. In emergency cases, notification will be made through the overhead public address system, if available.

Prior to and upon completion of non-emergency shut downs, or testing, Switchboard will notify the identified critical areas that are required to switch to emergency communications or to return to normal communications.

1.8 Incident Command Centre
In the event of a communications loss, the Incident Commander is the Chief Information Officer / Delegate. The Incident Command Centre will be set-up in the Security Office on Dietary 1. The Incident Commander is the direct contact for the Kingston General Hospital Emergency Operations Center (if active).

1.9 Overhead Paging
In the event the standard overhead paging system is not working, the Switchboard Operator may use the “All Call” feature on the main fire alarm system enunciator panel in the EVAC Room (22-1-306) on Davies 1 to make overhead pages.

In the event that the “All Call” feature does not work, the Switchboard Operator can use the “Blue Dot” phones (See Page iii - Blue Dot Phone List – “Blue Dot” Phone List) for communication and inform all areas of the loss of communications.

1.10 4444 Emergency Number
If the internal communication system fails, the 4444 number will be unavailable. If an emergency occurs you will need to dial 613-542-1515 to inform Switchboard.
2.0 Response & Recovery – All Staff

Response

2.1 Upon Receiving Notification of Communications Loss

Do Not Call Switchboard Unless It Is Urgent

Phase 1 – Loss of Communications Short Term
All Staff

☐ Advise patients and visitors that the communication system is temporarily unavailable.

☐ If available, utilize Vocera and cell phones for communication (only if necessary). “Blue Dot” phones (see Page iii - Blue Dot Phone List for locations) are available in the loss of power kits at each nursing unit / other identified locations. Kits are either in black backpacks. On Burr 4 the kits are in gold coloured courier pouches.

☐ For emergencies call Switchboard at 613-542-1515

Phase 2 – Loss of Communications Long Term
Charge Person

☐ Complete a Loss of Communications Assessment Form (Appendix B) to be delivered to Incident Command

☐ If there are concerns that require immediate action, it will be the responsibility of each department to ensure that Incident Command is aware

All Staff

☐ Return to your area of work to assist with the area response

☐ Advise patients and visitors that the Facility’s communication (telephone) system is temporarily unavailable

☐ If available, utilize your cell phone for communication (only if necessary).

☐ For emergencies, call Switchboard at 613-542-1515

☐ Await further instruction from the Incident Command Centre

☐ Refer any media inquiries to the Public Affairs office

Recovery

2.2 Upon Notification That the Crisis Has Concluded

☐ Resume normal duties

☐ Advise patients and visitors that the Facility’s communication (telephone) system is available

☐ Refer any media inquiries to the Public Affairs office
- This page left blank intentionally -
3.0 Response & Recovery – Switchboard

Response

3.1 Upon Receiving Notification of a Communications Loss

Phase 1 – Loss of Communications Short Term
Contact:
- Information Services (Help Desk)
- Chief Information Officer / Delegate, if not already aware
- Administrator On-Call (after hours only)
- Kingston Hospitals’ Security Operations Centre (613) 548-8819
- Announce overhead three times “Phase 1 Communications Loss – Refer To Loss Of Communications Plan”

Phase 2 – Loss of Communications Long Term
- If not already aware, contact:
  - Information Services (Help Desk)
  - Chief Information Officer / Delegate, if not already aware
  - Administrator On-Call (after hours only)
  - Kingston Hospitals’ Security Operations Centre (613) 548-8819
- Announce overhead three times “Phase 2 Communications Loss – Refer To Loss Of Communications Plan”
- When authorized by the Incident Commander contact the Kingston Hospitals’ Security Operations Centre (613)-548-8819
- Refer any media inquiries to Public Affairs office

Recovery

3.2 Upon Notification That the Crisis Has Concluded
- Announce over the public address system three times, “Communications Loss, All Clear”
- Refer any media inquiries to the Public Affairs office
- This page left blank intentionally -
4.0 Response & Recovery – Maintenance & Plant Operations

Response

4.1 Upon Notification of a Loss of Communications
Manager Maintenance & Plant Operations
☐ Upon notification that an area is without communications determine if it is due to a facility based issue (loss of power, flooding, etc.)

Phase 1 – Loss of Communications Short Term
Manager Maintenance & Plant Operations / Delegate
☐ Liaise with and provide status updates to the Incident Commander on the response to the incident

Maintenance & Plant Operations Staff
☐ Report to Maintenance & Plant Operations office for required response to communications loss
☐ Respond to affected areas based on priority need as designated by Manager Maintenance & Plant Operations / Delegate

Phase 2 – Loss of Communications Long Term
Manager Maintenance & Plant Operations / Delegate
☐ Assume role of Operations Officer in the Incident Command Centre – page 12
☐ Liaise with and provide status updates to the Incident Commander on the response to the incident

Maintenance & Plant Operations Staff
☐ Report to Maintenance & Plant Operations office for required response to communications loss
☐ Respond to affected areas based on priority need as designated by Manager Maintenance & Plant Operations / Delegate

Recovery

4.2 Upon Notification That the Crisis Has Concluded
Manager Maintenance & Plant Operations / Delegate
☐ Prepare for a debriefing with Maintenance & Plant Operations staff

Maintenance & Plant Operations Staff
☐ Participate in a debriefing session
☐ Resume normal duties
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5.0  Response & Recovery – Information Services

Response

5.1  Upon Notification of a Loss of Communications
Chief Information Officer / Delegate
☐ Upon notification that an area is without communications, ensure Maintenance & Plant Operations has investigated the cause of the communication loss and that it is not due to a facility based issue (i.e. power loss, flooding, etc.)

Phase 1 – Loss of Communications Short Term

Chief Information Officer / Delegate
Notify:
☐ Bell Canada (611)
☐ Take necessary steps to rectify the communications loss
☐ Provide communication to all staff via email updates, if possible

Phase 2 – Loss of Communications Long Term

If it has been determined that the loss of communications will be a long term event, notification must be made to ensure staff are aware. Authority to declare a Phase 2 Loss of Communications rests with Information Services

Chief Information Officer / Delegate
Notify:
☐ Bell Canada (611)
☐ Switchboard to announce Phase 2 Communications Loss.
☐ Take necessary steps to rectify the communications loss
☐ Provide communication to all staff via email updates, if possible
☐ Assume role of Incident Commander in the Incident Command Centre – refer to page 12

Recovery

5.2  Upon Notification That the Crisis Has Concluded
Director of Information Services / Delegate
☐ Notify Switchboard to announce an All Clear
☐ Ensure all areas have communications
☐ Arrange debrief session
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6.0 Response & Recovery – Protection Services

Response

Phase 1 – Loss of Communications Short Term

6.1 Upon Receiving Notification of A Phase 1 Communications Loss
Kingston Hospitals’ Security Operations Centre
If not already aware, notify:
□ Director of Protection Services / Delegate²
□ Maintenance / Maintenance On-Call (after hours)
□ Mobile Patrol Supervisor

Shift Supervisor
□ Collect extra radios for use by the site for the duration of the loss of communications
□ Have an Officer check Blue Dot phone status at the locations listed in Page iii - Blue Dot Phone List.
□ Report to the site to assess level of severity and assist with the set-up of the Incident Command Centre if required
□ Provide two-way radios, if available, to areas without other means of communication (cell phones, etc.)

Security Rounds Officer
□ When directed check status of Blue Dot phones listed in Page iii - Blue Dot Phone List.
□ If directed, collect Loss of Communication Assessment Forms from reporting areas

Mobile Patrol Supervisor
□ Attend the Incident Command Centre to provide assistance.

Phase 2 – Loss of Communications Long Term

6.2 Upon Receiving Notification of A Phase 2 Communications Loss
Kingston Hospitals’ Security Operations Centre
□ Complete Phase 1 job actions.

Shift Supervisor
□ Complete Phase 1 job actions.

² “Delegate” is the next level of appointed authority. In this case the Emergency Management On-call Person
Security Rounds Officers
☐ Complete Phase 1 job actions.

6.3 Incident Management System
Unless directed differently by the Director Strategic Alliance and Logistics, Incident Command will only be established during a Phase 2 – Loss of Communications Long Term. The location of incident command will be the Security Office on Dietary 1.

Incident Commander – Chief Information Officer / Delegate
☐ Establish the Incident Command Centre
☐ Notify Switchboard the location and contact information for Incident Command
☐ Authorize Switchboard to announce overhead “Phase 2 Communications Loss – Refer to Loss of Communications Plan”
☐ Be prepared to transfer command to a higher authority (e.g. President & CEO, Chief Operating Officer, etc.)
☐ Appoint the following positions, only if the regular assigned persons are not available

☐ Operations
☐ Planning
☐ Logistics

☐ Recording Secretary

☐ Regularly assess risk and make recommendations on length of communications loss and any special needs
☐ Ensure Loss of Communication Assessment Forms (Appendix B) have been collected from reporting areas
☐ Prepare to provide a situational report to the President & CEO / Chief Operating Officer / Delegate
☐ Liaise with President & CEO / Chief Operating Officer / Delegate and assess the need to activate the Emergency Operations Center (EOC) and call back of Program Directors
☐ Notify the Public Affairs office
☐ If required, notify the Kingston Hospital’s Dispatch Centre (613-549-6666 ext. 4142) to call EOC members and have them report to the EOC
☐ Notify Kingston Hospital’s Dispatch Centre to recall Program Directors, if required
☐ Authorize staff fan-out lists as required in consultation with Program Directors / Managers
☐ Ensure the EOC is appropriately informed of any identified risk issues, if active

Planning Officer – Representative Information Services
☐ Provide progress updates to the Incident Commander
☐ Provide liaising between Bell Canada and the Incident Command Centre

Operations Officer – Director Maintenance & Plant Operations / Delegate
☐ Take necessary steps to ensure the loss of communications is not due to a facility based issue (power loss, flooding, etc.)
☐ Provide assistance to Information Services by allocating and deploying staff as necessary to manage loss of communications and to assist with the resumption of normal communications

Logistics Officer – Representative of Protection Services
☐ Consider whether a search of the facility should be conducted to account for areas affected by the loss of communications
☐ Gather and prepare search team kits, if required
☐ Contact available staff to prepare to assist in the search of the facility, if required
☐ Be prepared to coordinate search teams, and security staff actions, if required
☐ Provide radio communication as necessary to Incident Command Centre
Prepare for the termination of the emergency and any debriefing requirements
Ensure the continuation of Security functions in the remainder of the facility

Recording Secretary
Document response actions and communication at the Incident Command Centre

Recovery

6.4 Upon Notification That the Crisis Has Concluded

Phase 1 – Loss of Communications Short Term
Kingston Hospitals’ Security Operations Centre
If not already aware, notify:
- Director of Protection Services / Delegate
- Mobile Patrol Supervisor

Shift Supervisor
- Ensure that all documentation is collected for debrief preparation
- Dismantle the Incident Command Centre if activated and update supplies as needed
- Ensure that a comprehensive occurrence report is filed immediately
- Participate in a debriefing session

Phase 2 – Loss of Communications Long Term
Incident Commander
- Upon notification that communications has been restored authorize Switchboard to announce an “All Clear”
- Prepare for a debriefing with Bell Canada and Communications staff
- Prepare for a debriefing with Incident Command Centre and Emergency Operations Centre, if activated
- Instruct staff to resume normal duties

Planning Officer
- Prepare for a debriefing with the Incident Command Centre
- Prepare for a debriefing with Plant Services staff

Operations Officer
- Debrief staff on lessons learned and procedural / equipment changes needed
- Instruct staff to resume normal duties

Logistics Officer
- Ensure replacement of search kit supplies if utilized
☐ Dismantle the Incident Command Centre if activated and update supplies as needed
☐ Compile any reports for debriefing

**Recording Secretary**
☐ Document recovery actions and communication within the Incident Command Centre
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7.0 **Appendix A – Loss of Communications Assessment Form**

This form is to be completed by each department to advise Incident Command the impact of a **Phase 2 - Loss of Communications Long Term** to their department. This will allow incident command to assess the severity of the incident and respond appropriately.

Security will make every effort to collect these forms from every department. If there is an urgent need to deliver this report to Incident Command, it will be the responsibility of the reporting department to ensure the timely delivery of the form.

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<tr>
<th>Date:</th>
<th>Department:</th>
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<table>
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<tr>
<th>Inspected by:</th>
<th>Signature:</th>
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<td>(Print)</td>
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Contact #: _______________________

**Forwarded to Incident Command for Review** □

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**Assessment Details:**

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Appendix A

Loss of Communications Assessment Form
Kingston General Hospital

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Appendix A
Loss of Communications Assessment Form