



AIDS and Cancer
Specimen Resource

AIDS and Cancer Specimen Resource (ACSR)	Effective Date: November 2020
Standard Operating Procedure SOP	Version 1.0
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Approved by ACSR Executive Committee	

1.0 PURPOSE

To provide guidance to AIDS and Cancer Specimen Resource (ACSR) Regional Biospecimen Repositories (RBRs) and the technical core on how to develop and implement an emergency response plan during an epidemic and /or pandemic and define the minimum necessary components of such a plan

2.0 SCOPE

This procedure defines the considerations to follow for risk assessment and risk mitigation in order to develop and implement emergency responses in the event of epidemics and/or pandemics. This SOP applies to all personnel that are responsible for risk assessment and risk mitigation. This SOP does not supercede the respective local, national and institutional regulations and guidelines.

3.0 REFERENCE TO OTHER ACSR SOPS OR POLICIES

ACSR Quality Management Plan

4.0 DEFINITIONS

Term/Acronym	Definition
Epidemic/Pandemic	A rapid spread or increase of a communicable disease where it is not commonly prevalent.

5.0 ROLES AND RESPONSIBILITIES

This SOP applies to all ACSR personnel.

Role	Responsibility
Site PI	Activate emergency response plan and notify ACSR EC of activation
Personnel	Follow emergency response plan
EC and OC	Functions as the hub of communication to all ACSR and related sites.



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6.0 MATERIALS, EQUIPMENT AND FORMS

NA

7.0 PROCEDURES

Enactment of these procedures by ACSR sites should be directed by local and national regulations. This document is meant as a guide.

7.1 General planning for emergencies

- 7.1.1 List tasks that can be done remotely such as repurposing biobank activities.
- 7.1.2 Confirm who will be permitted to come to the site location
- 7.1.3 Determine who has the skills to perform necessary tasks
- 7.1.4 Update rosters for freezer response and other emergencies.
- 7.1.5 Define scope of work during shutdown, such as data clean up activities.
- 7.1.6 Plan illness in team members (back up plan)
- 7.1.7 Test systems for remote access to secure servers.
- 7.1.8 Review these plans annually

7.2 Scaling down of activities

- 7.2.1 Follow local/national and institutional instructions for continuation of work.
- 7.2.2 Define the capacity of staff to work and the scope of work.
- 7.2.3 Identify all critical activities that can be ramped-down, curtailed, suspended or delayed.
- 7.2.4 Identify primary and backup personnel permitted to safely perform essential activities and confirm access to all areas.
- 7.2.5 Ensure the contact list of lab personnel, PI, and lab administrative director is up to date.
- 7.2.6 Cancels shipping of research materials that have not been sent. If shipping is permitted by local regulations, make arrangements for centralized receiving and temporary storage or redirect shipments



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to another site if possible.

- 7.2.7** Contact loading dock/mail services personnel to notify them of any expected incoming shipments.
- 7.2.8** Set up routine delivery of liquid nitrogen to prevent loss of frozen materials and follow up with suppliers to ensure delivery.
- 7.2.9** Confirm call lists for emergency alarms are current and in effect.
- 7.2.10** Dispose of biological waste, chemical waste and sharps. Properly store all chemicals. Remove clutter from benchtops and chemical hoods. Thoroughly, disinfect biosafety cabinets.
- 7.2.11** Notify the EC and OC of a shutdown (responsibility of RBR or technical core PI).
- 7.2.12** The EC chair should notify all site PIs of another site's closing or its specific situation.

7.3 Shutdown Plan

- 7.3.1** A Work Agreement for working remotely should include aspects of the following:
 - 7.3.1.1** Designation of useful tasks and responsibilities to work on from the offsite location.
 - 7.3.1.2** Determine work schedules
 - 7.3.1.3** Develop a communication plan between supervisor, team members, and other ACSR sites.
 - 7.3.1.4** Plan for alternative work should internet connectivity or hardware not be available.
 - 7.3.1.5** Support for staff (e.g. mental health support or ergonomic awareness).
 - 7.3.1.6** Ensure security of HIPAA-protected documents and access to institutional systems
 - 7.3.1.7** Ensure required hardware and software are installed and can be accessed remotely.
 - 7.3.1.8** Confirm that internet access is available at the remote location.
 - 7.3.1.9** Evaluate whether appropriate security is maintained while working remotely
 - 7.3.1.10** Ensure that IT support is accessible when working remotely.
 - 7.3.1.11** Ensure the ability to access databases and records on secure servers.



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7.4 Resumption of activities – return to work

- 7.4.1 Work resumes under direction from institution as aligned with local/national regulations.
- 7.4.2 Define systems and materials required to resume biobank activities.
- 7.4.3 Define any changes to Universal Precautions (PPE, sample handling, storage).
- 7.4.4 Comply with regulatory guidance for direct patient contact.
- 7.4.5 EC and OC are to be notified by PIs of the RBR or Technical Core when activities resume.

8.0 APPLICABLE REFERENCES, REGULATIONS AND GUIDELINES

9.0 APPENDICES

Not applicable.

10.0 REVISION HISTORY

SOP Number	Date revised	Author	Summary of Revisions