

Healthcare and Public Health Risk Identification and Site Criticality Toolkit

Frequently Asked Questions (FAQ)

Updated March 2019

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HEALTHCARE AND PUBLIC HEALTH SECTOR



**Critical Infrastructure Security
and Resilience Partnership**

Frequently Asked Questions (FAQ)

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1 General Topics and Questions

1.1 How do I install the HPH RISC Toolkit?

The HPH Risk Identification and Site Criticality Toolkit can be downloaded as a compressed (.zip) package. After downloading the folder, you must extract (unzip) the compressed files before using the Toolkit. Some operating systems permit users to open and use compressed files but doing so will NOT allow users to complete the full HPH RISC Toolkit. It is imperative to extract the compressed files before using the Toolkit.

General steps for extracting/unzipping compressed files can be found on the [Microsoft help page on zipped files](#). In summary, files can be unzipped by going to the location of the downloaded zipped folder, opening it and clicking “Extract all files.”

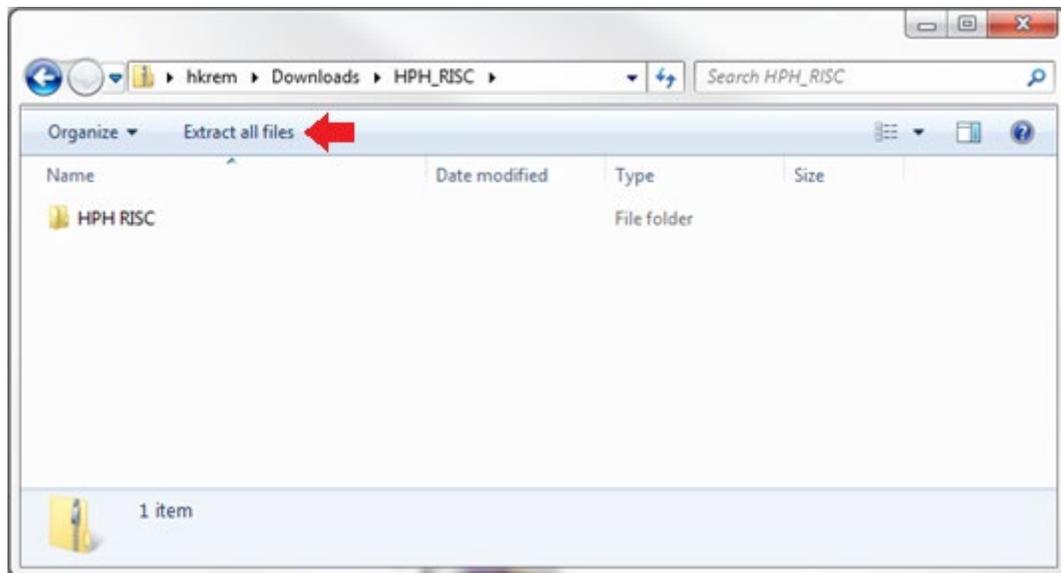


Figure 1. Opening the HPH_RISC installation file.

After clicking “Extract all files”, select a location on your hard drive to save the toolkit to by clicking the “Browse” button. Select a location that you will be able to find easily, such as My Documents. If the installer opens with a default location provided, we recommend you not use it, as the toolkit may be difficult to find once installed.

Screenshot prompting selection of destination for extracted files, highlighting the Browse and Extract.

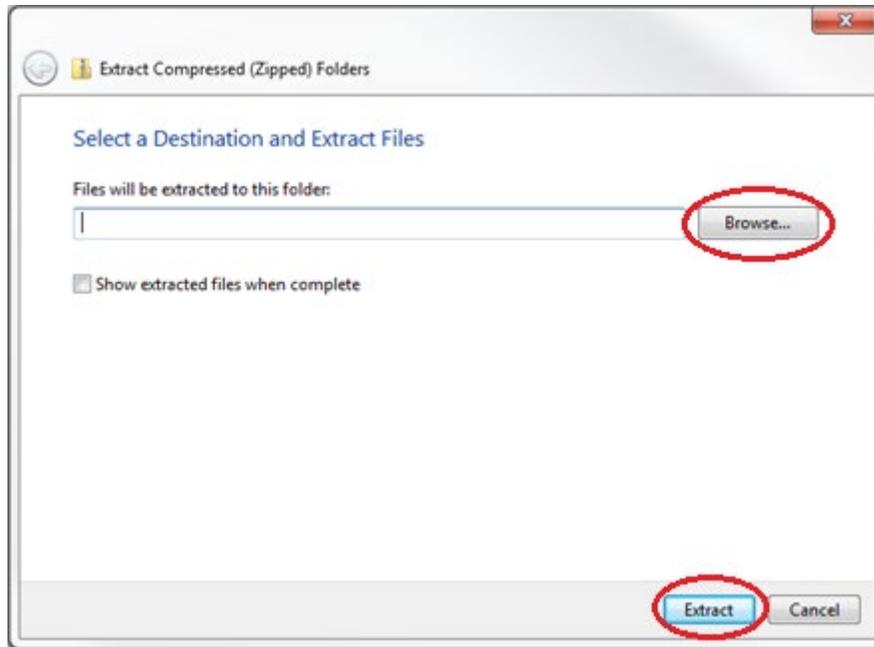


Figure 2. Selecting an installation location.

Once a location has been selected, click the Extract button. A folder named “HPH RISC” will be created that contains all of the necessary files and folders of the toolkit. When complete, go to the chosen file location and ensure that all files and folders as depicted below were installed.

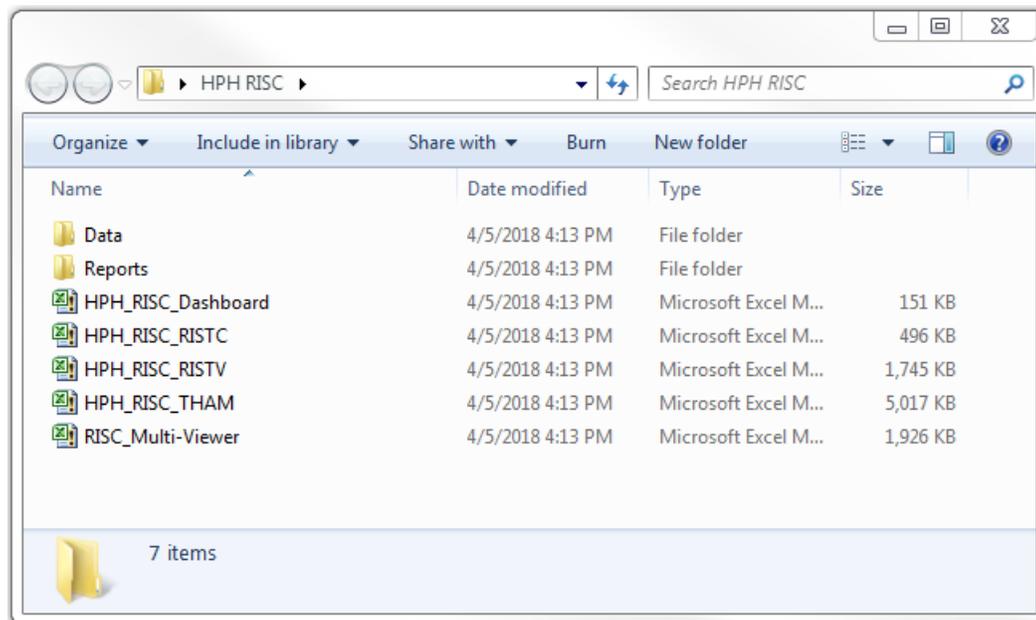


Figure 3. Components of the Toolkit after installation.

Important: for the toolkit to function properly, do not change the names of the files and folders within the HPH RISC folder or move them once installed.

1.2 Where do I start?

Once you have installed the Toolkit, open the Excel file named HPH_RISC_Dashboard. From there, you will access all of the individual modules of the Toolkit through buttons within the Toolkit.

1.3 The Dashboard won't open the modules.

If the buttons to open modules from the HPH RISC Toolkit Dashboard are not working, the file name of a module may have been changed, or a module may have been moved out of the HPH RISC folder. Make sure that all the modules are in the folder together, that the file names have not been changed, and that all modules and folders have been extracted (see [How do I install the HPH RISC Toolkit?](#)).

1.4 The finish button doesn't work.

If the buttons to finish a module and import the data into the HPH RISC Toolkit Dashboard are not working, the Toolkit may be missing either the Data or the Reports folder; the file name of a module may have been changed; or a module may have been moved out of the HPH RISC folder. Make sure that all of the modules (HPH_RISC_Dashboard, HPH_RISC_THAM, HPH_RISC_RISTV, and HPH_RISC_RISTC) are in the folder together, that the file names have not been changed, and that the Data and Reports folders are in the same location as the Toolkit modules. Additionally, ensure that all modules and folders have been extracted (see [How do I install the HPH RISC Toolkit?](#)).

1.5 Questions or results are cut-off and I can't read them.

The text within the tool will display differently depending on your computer and monitor settings. As a result, rows may be too short or columns too narrow to show all of the text contained within them. You can change the height of a row or width of a column until all of the contained text is visible. To change the height of a row, hover the mouse pointer over the divider below the row number until the cursor turns into double arrows; click and drag to resize the column. Do the same to resize columns by dragging the divider between column headers. See the screenshots below.



Figure 4. Resizing rows and columns.

1.6 *How do I print from the tools?*

Functionality in the tool to print reports of module-specific results has been coded into the THAM, RIST-C, and RIST-V. Both the RIST-V and RIST-C have additional functionality to enable printing of entire question sections. Click the Print Section button on any page within the tool to generate a formatted, printer-friendly, PDF version of the results or question sets. The PDF will automatically be saved in the Reports folder of the Toolkit.

You may also print any page or set of pages from the tool [using Excel's print function](#). For information on the many printing options within Excel, see this [Printing in Excel webpage](#). We recommend the following settings to make sure the printout is appropriately formatted:

- [Set the print area](#) to include only the desired part of the screen.
- [Scale the worksheet](#) to fit the width on one page.

1.7 *How do I share my results?*

The Print Report button on the final results page in each of the modules generates a printer-friendly, sharable PDF report, which is saved in the Reports folder of the Toolkit. Additionally, an Excel version of the results page is generated and stored in the Data folder after clicking the Finish button in each of the modules. Both the PDF reports and the Excel data files can be shared by email or other methods. The data files can be imported into the Risk Multi-Viewer for regional, system, or coalition assessments.

1.8 *I've encountered an error, what should I do?*

Please report all errors or bugs encountered to hphrisc@hhs.gov. Please include as much information as possible, including error messages and screenshots.

1.9 *How are Risk Ratings calculated?*

Risk Ratings are calculated by multiplying your scores from each of the three modules (THAM, RIST-V, and RIST-C). The overall score is the product of the relative Threat/Hazard Rating, the hazard-specific Vulnerability Score, and the hazard-specific Consequence Rating. A full explanation of the scoring process is described in the HPH RISC Toolkit Reference Guide.

1.10 *Why are external hazards and local/internal hazards assessed separately?*

The two types of threats/hazards are inherently different in their origin and impact—external events affect a region or community, whereas local/internal events by and large involve a single facility—as well as how an individual facility prepares for and responds to them (i.e. facility-specific power outages, IT disruptions, infant abductions, etc.). Therefore, the components of the Toolkit present these hazard types separately to facilitate the different processes an organization may use to address them. Additionally, due to the different data sources available, Threat/Hazard Ratings for external and local/internal events are calculated differently.

1.11 Why can't I compare the Threat/Hazard Ratings, T×V Scores, or Risk Ratings of external hazards with those of local/internal hazards?

External hazards have been assessed based on historical events located within the area surrounding a facility. These historical incidences have also been adjusted to determine the rate at which they occur in relation to each other (e.g., tsunamis happen most frequently in the United States to Hawaii and Alaska, but have only occurred three times in the past 20 years). However, local/internal hazards are based on non-national data sources, and are relative to other local/internal hazards. Since local/internal hazards scores are not derived using the same two-step approach used for external hazards, they cannot be compared.

1.12 I just printed a section/report and now I can't answer any of the questions. What should I do?

Use of the Print Section button and the Print Report button will sometimes result in users being unable to answer questions on the active page. If this occurs, click any navigation button (e.g., Next or Previous) to move to a different page and then return to the original page. You should now be able to continue answering questions.

1.13 I printed a section/report and now there are lines on the screen. Can I delete them?

These lines represent the printed area of the PDF sections/reports and are generated by Excel when using any of the print functions. If you would like to remove them from the screen, just close the module and open it again. Be sure to save your progress before closing the module.

1.14 How do I assess multiple facilities using the RISC toolkit?

The RISC toolkit is designed to assess a single facility at a time. To assess multiple facilities, create a separate toolkit for each facility. If you wish to start a new assessment with a blank toolkit, extract the HPH_RISC.zip file into a new drive location (see Question 1.1 for more details on extracting files). Alternatively, you may want to start a new assessment using responses from a previously completed or partially-completed assessment. To do this, copy the HPH RISC folder of the completed toolkit and paste it into a new drive location. Make sure to copy the entire HPH RISC folder, not just the individual modules contained within. You may rename the HPH RISC folder to identify a specific facility, but to ensure the toolkit operates properly, DO NOT change the name of the files contained within.

Starting assessments from previously completed ones may be useful for organizations with some centralized policies that apply equally to multiple facilities. For example, if all hospitals within a healthcare system operate under the same network management policies, you might complete the Cybersecurity Management section of the RIST-V once, then create copies of the partially completed RISC to complete the remainder of the assessment for specific facilities.

After copying completed or partially-completed RISC toolkits, it is recommended to open the Data and Report folders and delete all previously generated files, then start again from the Dashboard as you would with any assessment. Enter the new facility name into the Dashboard,

then select the "Start THAM" button and complete the modules. You can clear any data from the Dashboard by using the Clear Data buttons at the bottom of the main Dashboard page.

2 THAM

2.1 *Why isn't my city in the drop-down list on the Facility Characterization page of the THAM?*

The list of cities contained within the Facility Characterization page was generated based on the data sources for the threats and hazards that are reported on a city level. Some smaller cities may not be present in the dropdown list if no data was reported by any of the sources consulted. In such cases, select "Other/Not Listed" at the bottom of the list. You will then need to calculate Threat Ratings for violent crime and property crime manually as directed in the THAM Narrative Methodology.

2.2 *A link in the THAM doesn't work, what should I do?*

Please report the broken link to hphrisc@hhs.gov.

2.3 *I wrote over or deleted my Threat/Hazard Ratings reported in the THAM tool module; how do I go back to the original values?*

Click the Reset Values button from the results page of the THAM tool to repopulate the report with the THAM-generated values. This will reset all ratings to the values that were calculated by the tool. If you only want to reset ratings for specific threats or hazards, we recommend you record any modified ratings you wish to keep in a separate location before clicking the Reset Values button. Also, be sure to click the Finish button when complete to import the newest data into the Dashboard.

2.4 *I filled out the Local/Internal Hazards portion of the THAM, but the menu page doesn't show that I've completed it. What's happening?*

The check mark indicating completion only appears on the menu page if every local/internal hazard event type has been answered. Please double check that all local/internal hazard event types have been assessed. A quick check can be completed by viewing the THAM results and identifying those local hazards with a score of "No Data." If all local event types have been answered, yet the completion check mark does not appear in the menu page, please contact hphrisc@hhs.gov to report this as a bug.

2.5 *The latitude field of the THAM Facility Characterization page is protected and I cannot enter data.*

This is the result of a known bug that occurs when using the Toolkit with Microsoft Office 2010 while storing the tools on a networked drive (e.g., Google Drive). There is no solution to this Microsoft-based bug, but it can be avoided by storing the tools on the user's computer or desktop. The tools can still be shared, but not through a networked sharing drive.

2.6 *The text in the latitude field of the THAM Facility Characterization page is white and I cannot read my entry.*

This is the result of a known bug that occurs when using the Toolkit with Microsoft Office 2010 while storing the tools on a networked drive (e.g., Google Drive). There is no solution to this Microsoft-based bug, but it can be avoided by storing the tools on the user's computer or desktop. The tools can still be shared, but not through a networked sharing drive.

2.7 *What is this local/internal hazard event?*

To see a glossary of local hazard definitions, press Ctrl + G while on the local/internal hazards page. This glossary can also be found in the THAM Narrative Methodology document.

2.8 *Which threats and hazards are assessed in the THAM by the information on the Facility Characterization page?*

To see which threats/hazards correspond to each question on the Facility Characterization page, click the information button (i) next to the question. In all, 24 threats and hazards are assessed through the information provided on the facility characterization page: Annual Influenza Epidemic; Damaging Wind; Drought; Earthquake; Flash Flood; Flood; Hail; Ice Storm; Snow Fall/Blizzard; Storm Surge; Tornado; Wildfire; External HAZMAT Exposure, Facilities; Violent Crime; Property Crime; External HAZMAT Exposure, Highway; External HAZMAT Exposure, Maritime; External HAZMAT Exposure, Railway; Extreme Cold; Extreme Heat; Space Weather; Active Shooter; Information Theft; and Cyber.

2.9 *I can't determine if I'm in an area with Karst formation using the provided map (subsidence/sinkhole).*

The lower resolution of the provided map is an acknowledged data limitation; however, the data source utilized was the only national indication of subsidence potential identified. If you have knowledge of a better or more user-friendly national resource, please share the source with hphrisc@hhs.gov for possible inclusion in future versions of the THAM.

2.10 *I don't see any hurricane search results from the NOAA Hurricane Historical Tracks website.*

The NOAA Historical Hurricane Tracks Tool will occasionally not display the search results. Please close the window and try again.

2.11 *What do my THAM results mean?*

Threat/Hazard Ratings represent the likelihood of each event occurring at the assessed facility, relative to other facilities and other event types. The ratings range from 0.1 to 4.0, with a higher rating indicating a greater likelihood. They do not consider protective measures in place to protect against the event or the extent of damage it may cause; for those factors complete the RIST-V and RIST-C.

2.12 *How can I use my Threat/Hazard Ratings?*

The THAM separates reporting of Threat/Hazard Ratings according to two different types of events: external threats/hazards for which there are objective, national-level data sources regarding their frequency of occurrence (e.g., hurricanes, HAZMAT spills, active shooters); and local/internal hazards specific to a single facility and for which no national datasets exist (e.g., HVAC failure, violent patients, chemical theft). Such information can be useful as inputs for planning and preparedness activities, and may be used in any such practice where objective data on incident occurrence is needed. Using the THAM as part of the HPH RISC Toolkit will provide additional information and calculate Risk Ratings for each threat/hazard, allowing risk-based prioritization.

2.13 *I don't agree with my Threat/Hazard Ratings.*

The values calculated by the tool are based on national-level data sources. Sometimes, local data, subject matter experts, or institutional knowledge may provide additional information that can be used to refine the calculated ratings. In such cases, you may overwrite the calculated ratings on the results page. The user entered score will be carried through the entirety of the risk assessment process. Should you choose to go back to the THAM generated values, click the Reset Values button on the THAM results page.

2.14 *I answered all of the questions presented in the THAM, but some ratings were not carried over into the Dashboard when I hit the Finish button.*

This is the result of a known bug that occurs when using the Toolkit with Microsoft Office 2010 while storing the tools on a networked drive (e.g., Google Drive). There is no solution to this Microsoft-based bug, but it can be avoided by storing the tools on the user's computer or desktop. The tools can still be shared, but not through a networked sharing drive.

3 RIST-V

3.1 *From which sources are the questions in the RIST-V derived?*

The questions found in the RIST-V come from the major discipline-specific standards and best practices identified for the Healthcare and Public Health Sector, as well as from subject matter expert input. The list of sources is as follows:

- ASIS International (2009) Facilities Physical Security Measures Guideline
- ASIS International (2012) Security Management Standard: Physical Asset Protection
- Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response (2012) Healthcare Preparedness Capabilities: National Guidance for Healthcare System Preparedness
- Center for Medicare and Medicaid Services Emergency Preparedness Rule
- Centers for Disease control and Prevention, Office of Public Health Preparedness and Response (2011) Public Health Preparedness Capabilities: National Standards for State and Local Planning

- Department of Homeland Security (2013) Infrastructure Survey Tool and Rapid Survey Tool and supporting reference manuals
- California Emergency Medical Services Authority (2014) Hospital Incident Command System Guidebook
- Borten, K. (2016) Combat Visual Hacking in Healthcare
- National Fire Protection Association (2015) NFPA 1600: Standard on Disaster/Emergency Management and Business Continuity/Continuity of Operations Programs
- New Jersey Hospital Association (2004) Emergency Preparedness Hospital Security Readiness Assessment Tool
- The Joint Commission (2011) Comprehensive Accreditation Manual for Hospitals
- National Institute of Standards and Technology (2014) Framework for Improving Critical Infrastructure Cybersecurity

3.2 *I don't understand what a term in the RIST-V means.*

Many terms have been defined, as indicated by a light blue underlined text; click on these terms to display a pop-up window containing the definition. If you have identified additional terms that you believe should be formally defined, please send your request to the hphrisc@hhs.gov.

3.3 *A question in the RIST-V doesn't apply to me. How should I answer?*

Many questions in the tool have the option to select Not Applicable (N/A). If you have identified an additional question that does not apply to your facility type, please report this to hphrisc@hhs.gov. Provide the question number and your facility type and the question will be reviewed for possible modification in future versions of the RIST-V.

3.4 *What does the RIST-V do with the free-response answers I enter into the assessment?*

These narrative responses are not used in the Vulnerability Score or subsequent risk calculations. They are intended to function as institutional memory and be used by the facilities themselves to track their answers. You can see all of your free-response entries at a glance by clicking the Show Details button on the RIST-V results page.

3.5 *How do I access the free-response answers I provided in the RIST-V?*

A summary of your free-response answers can be accessed on the RIST-V results page by clicking the Show Details button. After viewing your responses, return to the results page by clicking the Close Details button.

3.6 *I don't know the answer to a question in the RIST-V.*

The questions in this tool cover a wide range of topics that will require diverse expertise and disparate information to complete; therefore, it is anticipated that the tool will be completed by a group of experts rather than a single individual. While the tool may be completed by a single individual, it is recommended that users collaborate with the relevant individuals and departments within their organization with the appropriate operational knowledge (e.g., CFO, IT Department, Emergency Manager), as well as with external agencies as needed.

3.7 *The RIST-V says that I haven't answered every question. How do I find the questions that I've missed?*

The menu page displays a count of total questions as well as how many questions have been completed. This can be used as a quick resource to identify sections and subsections that have unanswered questions remaining. You can access the menu by clicking the Menu button at the bottom of any page of the RIST-V.

If all questions appear to have been answered, even after a review of those sections which the tool reports as incomplete, a known bug could be occurring. If you are using Microsoft Office 2010 and have stored the tool on a networked drive (e.g., Google Drive), certain aspects of the Toolkit modules might break. Please export each of the completed RIST-V sections as a PDF using the Print Section button, redownload the Toolkit, and install on your computer or desktop. Use the PDF reports as an answer guide to recomplete the RIST-V survey. If you are still encountering problems, please contact the hphrisc@hhs.gov.

3.8 *What do my RIST-V results mean?*

The Vulnerability Scores reported in the RIST-V represents the overall facility vulnerability as well as the vulnerability for each major section and subsection of the tool. These scores depict the extent of the facility's vulnerability to the entire all-hazards landscape (i.e., are not hazard-specific) based on the policies, plans, procedures, and capabilities in place at a facility. The Vulnerability Scores are calculated on a scale from zero to one; a score closer to zero indicates the facility or asset being assessed has low overall vulnerability and is highly resistant.

In the Dashboard, the overall Vulnerability Score is adjusted to reflect only the vulnerabilities relevant to each specific threat or hazard. For example, physical security training will play a role in mitigating the risk associated with an active shooter event, but will not affect the risk associated with a hurricane. These scores are on a scale of zero to one, and are analogous to the RIST-V Vulnerability Scores divided by 100 (i.e., a 0.23 in the Dashboard is similar to a 23 in the RIST-V).

3.9 *How can I use my Vulnerability Scores?*

The RIST-V report provides an overall Vulnerability Score for the facility as well as Vulnerability Scores for each major section and subsection of the tool. All Vulnerability Scores are on a scale of 0 – 100, with a score closer to zero indicating less vulnerability. The scores reflect the number of protective measures and procedures in place as reflected in your answers to the survey questions. Users can review sections with high vulnerability scores to determine what actions can be taken to reduce vulnerability. The results of the RIST-V can be used on their own or in combination with existing planning and preparedness activities in your organization. However, a risk-based approach to preparedness planning also incorporates information on likelihood and consequence of individual threats/hazards. Using the RIST-V as part of the HPH RISC Toolkit will provide additional information and calculate Risk Ratings specific to individual threats/hazards, allowing risk-based prioritization of corrective actions.

3.10 Is a larger Vulnerability Score better or worse?

A larger Vulnerability Score indicates a greater level of vulnerability; thus, follow-on actions after performing a vulnerability assessment with the RIST-V should be designed to reduce your scores. Notably, Vulnerability Scores are based on all survey questions regardless of facility type, size, or other characteristics. Therefore, some procedures or mitigations that could be implemented to reduce vulnerability may not be desirable or feasible for your facility (for example, screening and badging all visitors in a large hospital). The end goal of this assessment should be to identify ways to minimize vulnerabilities, not to reduce all vulnerability to zero.

3.11 How can I improve my Vulnerability Scores?

An initial step to improve Vulnerability Scores is to identify those sections and subsections with the highest vulnerability scores. Users can then go review those sections to identify responses that increased vulnerability, thus identifying specific actions to improve scores. A handful of general resources regarding vulnerability are provided in the introduction page of the RIST-V module that can be accessed for ideas on improving mitigation strategies and reducing vulnerability.

4 RIST-C

4.1 What is the difference between consequence and criticality?

The hazard-specific Consequence Rating indicates the types and extent of impacts to the facility, its patients/customers and/or its staff that could be expected to occur following a specific incident. The Consequence and Impact Ratings are specific to individual threat/hazard types and may be calculated for any threat/hazard of interest. Consequence is one of the three components in the risk calculation, along with threat and vulnerability.

The Criticality Rating provides an indication of the level of impact to the Healthcare and Public Health Sector that could be expected due to the loss of function of the facility or asset being assessed. Criticality is not a component of risk, but a description of the level of importance of a facility to the national healthcare and public health system.

4.2 I don't know the answer to a question in the RIST-C.

The questions in the RIST-C cover a wide range of topics that will require diverse expertise and disparate information to complete; therefore, it is anticipated that the tool will be completed by a group of experts rather than a single individual. While the tool may be completed by a single individual, it is recommended that users collaborate with the relevant individuals and departments within their organization with the appropriate operational knowledge (e.g., CFO, IT Department, Emergency Manager), as well as with external agencies as needed.

4.3 How do I pick which Threats and Hazards to assess for consequences?

We recommend that you assess as many threats and hazards as possible. If you cannot assess all threats and hazards, we recommend you choose those threats and hazards with the highest T×V

score calculated by the Dashboard. You can access T×V scores from the RIST-C by clicking the Show T×V button on the Hazard Effects page.

4.4 Can I assess consequences for the same hazard, but assume a different level of effect each time (e.g., assess both a Category 1 and a Category 4 hurricane)?

Within the consequence tool, you can assess a hazard multiple times, but the RISC Toolkit Dashboard will only calculate risk for a single instance of the threat or hazard. If you choose to assess a threat or hazard multiple times, please retain only a single assessment by removing the duplicate hazard types. Consequence entries can be removed by clicking the Remove Hazard button and entering the table entry number.

4.5 What does my Consequence Rating mean?

The Consequence Rating is composed of three Impact Ratings: human impacts, which are the potential for injury or loss of life to staff, patients and others on site; property impacts, which reflect damages to and loss of property and equipment; and business impacts, which are monetary losses due to business interruption as well as regulatory and legal costs. These impact estimates are relative ratings on a scale of one to four, and are derived from user-provided valuations of property and business activities plus enumerations of specific staff and patient/customer populations. The overall Consequence Rating is an average of the three Impact Ratings.

4.6 How can I use my Consequence Ratings?

The Consequence Ratings and associated Impact Ratings (human, property, and business impacts) are not intended to be used independently from risk. The HPH RISC Toolkit provides an automated way for risk calculation and prioritization of threats/hazards, and it is recommended that the RIST-C be used as part of this toolkit. Assessing a threat or hazard solely based on the potential for consequential impacts does not take into consideration any mitigation strategies, or the likelihood of the event happening, thus it is not recommended to use the consequence outputs for any other purpose than to complete the HPH RISC Toolkit.

4.7 How can I lower my Consequence Rating?

The Consequence and Impact Ratings describe the anticipated level of impact to your facility, staff, and population served as a result of specific incidents. The ratings are a factor of the size of staff, patient, or customer populations, value of property and equipment, and business-related costs; they do not imply a value judgment and cannot be raised or lowered through corrective actions. The Consequence and Impact Ratings typically will not be used on their own. Their primary value is in the calculation of risk, in which threat/hazard likelihood and vulnerability are factored together with consequence.

4.8 *Even when I enter large impacts for a hazard, my Consequence Rating is still low. Why is that?*

The Consequence module is completed in two parts: first, you are asked to estimate the size of certain populations (staff, patients, etc.) that could be affected and the potential property loss and business interruption costs that could be incurred should any disruption in operations occur (Consequence of Loss or Disruption); second, you will select a specific threat or hazard and provide estimates of the extent of disruption that would result from that specific event (Hazard-Specific Consequences). Should either the first or second component of consequence describe a smaller population or a minimal extent of damage or loss, then the subsequent Consequence score will be low. For example, the tool asks what the total average population at any given time at the hospital is. If that total population is one of the smaller selectable options in the tool, even if the selected hazard to assess for Hazard-Specific Consequences disrupts the facility's operations for an extended period, the impacted population is still small, and, thus, the calculated Consequence Rating remains low.

4.9 *What does my Criticality Rating mean?*

The Criticality Rating can be used as a relative measure of the extent of impact the HPH Sector (or region, coalition, etc.) would experience after loss or disruption of the facility's services. It is calculated based on general measurements of criticality such as population served and unique services provided. The Criticality Rating is not part of the risk calculation but is a separate metric that can be used by healthcare coalitions, organizations and governmental bodies to identify key health assets.

4.10 *How can I lower my Criticality Rating?*

The Criticality Rating describes the extent of impact the HPH Sector would experience after loss or disruption of the facility's services. The rating is a factor of the services provided, including the size of the patient or customer population; it does not imply a value judgment, and cannot be raised or lowered through corrective actions.

4.11 *Why is my Criticality Rating lower than I expect?*

Criticality can be used as a relative measure of the extent of impact the HPH Sector would experience after loss of the facility's services. While you may compare Criticality Ratings for facilities across a region, coalition, or other cohort, the ratings are calculated on a national scale. For example, a facility might be very critical for a region (e.g., the only hospital in a 25-mile radius), but if the population served is still relatively small and it does not offer many specialty services, it might not play as crucial a role when looking at the entirety of the health care sector on a national level and thus will have a lower Criticality Rating.

5 Risk Multi-Viewer

5.1 *Who should use the Risk Multi-Viewer?*

This utility can be used by coalitions; healthcare organizations; local, regional, or federal public health offices; and others to compare the threat, hazards, vulnerabilities, criticality, consequences, and risks associated with multiple facilities under their purview. The comparisons can be used for trend analysis, the identification of common vulnerabilities, the identification of anomalies, and other organization-specific analyses.

5.2 *Where do I find the data that I need to import into the Risk Multi-Viewer?*

The data files that can be imported into the Multi-viewer are Excel files that are automatically generated when you click the Finish button in any of the toolkit modules. They can be found in the Data folder within the HPH RISC folder. (Note: the Excel data files are separate from the PDF-generated reports of results, which are stored in the Reports folder; report files cannot be imported into the Multi-Viewer.)

5.3 *How do I show statistics of all the facilities I've assessed in the Risk Multi-Viewer?*

At the bottom of each of the module tabs, as well as at the bottom of the Risk tab in the Multi-viewer, click the Show Statistics button to see general statistics of the imported facility data. The statistics provided are average, median, maximum, and minimum.

5.4 *On the Risk Results page there is an entry that has “Not all modules completed” at the end of the facility name. What is that?*

Risk is calculated automatically in the Multi-Viewer from the THAM, RIST-V, and RIST-C results that are imported for a given facility. If a row does not have an entry for all three modules in the Multi-Viewer, a Risk Rating cannot be calculated, and the phrase “Not all modules completed” is added to the end of the facility name as a warning.

5.5 *On the Risk Results page there is an entry that is yellow and has “WARNING: Facility names do not match!” at the end of the facility name. What is that?*

The Multi-Viewer calculates risk for a single facility based on the THAM, RIST-V, and RIST-C data in a given row in each of the module tabs. That is, it assumes that the facility is in the same row number on each of the three import pages. As a precaution, the Multi-Viewer checks that the facility name imported is the same on each of the three tabs in a given row; if it is not, the name of the facility is highlighted in yellow on the Risk Results page and the phrase “WARNING: Facility names do not match!” is added to the end of the facility name as a warning. This warning could result from one of two occurrences.

- 1) Module results were not imported in the same order. When importing THAM, RIST-V, and RIST-C results, you must ensure that facilities are imported in the same order for each module, so that the facility appears in the same row on each tab of the Multi-Viewer. It is for this reason that we recommend you import all three modules for a single facility before

importing another facility. If the facilities you have imported are not in the same order on each tab, you will need to remove some or all of the entries and re-import them, using the buttons on the import pages.

- 2) The facility name is not consistent across all three modules. If the assessor did not enter the name of the facility exactly the same as they completed each module, the Multi-Viewer will detect the difference and display the warning. It is for this reason that we recommend you enter the name of the facility in the Dashboard only—it will be copied into each of the modules as you proceed through them. If the facility names do not match in the exported data files, you can open the data files and enter a new facility name manually. You will then need to remove the corresponding entries from the Multi-Viewer and re-import them, using the buttons on the import pages.