

BUSINESS CONTINUITY POLICY

Document Type	Corporate Policy
Unique Identifier	CO-038
Document Purpose	To provide a structure through which: <ul style="list-style-type: none"> i. A comprehensive business continuity management system (BCMS) is established and maintained; ii. Plans will be developed to ensure continuity of key services at a minimum acceptable level and within specific timeframes following disruption. iii. Plans remain up to date and relevant through on-going review and testing.
Document Author	Emergency Planning Manager
Target Audience	All staff groups
Responsible Group	Emergency Planning, Resilience and Response Sub-Committee
Date Ratified	May 2013
Equality Impact Assessment	April 2013: this Policy has been screened using the Equality Duty Assessment Form and does not require a full Equality Impact Assessment

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Version History

Version	Circulation Date	Job Title of Person/Name of Group circulated to	Brief Summary of Change
0.1	24.01.13	Emergency Planning, Resilience and Response Sub-Committee	New document; first draft.
0.2	15.04.13	Emergency Planning, Resilience and Response Sub-Committee Senior Management Team Quality Governance Manager Named Professional, Safeguarding Adults and Children Head of Information Governance	Second draft; aligning the policy with the requirements of international standard, ISO 22301.

Accessibility

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- Face to face interpreting;
- Instant telephone interpreting;
- Document translation; and
- British Sign Language interpreting.

Training and Development

Worcestershire Health and Care NHS Trust recognises the importance of ensuring that its workforce has every opportunity to access relevant training. The Trust is committed to the provision of training and development opportunities that are in support of service needs and meet responsibilities for the provision of mandatory and statutory training.

All staff employed by the Trust are required to attend the mandatory and statutory training that is relevant to their role and to ensure they meet their own continuous professional development.

1. Introduction

- a. The NHS needs to be able to plan for and respond to a wide range of incidents and emergencies that could affect health or patient care. Under the Civil Contingencies Act 2004 (CCA), and the NHS Commissioning Board Core Standards for Emergency Preparedness, Resilience and Response (EPRR), all NHS organisations and providers of NHS funded care must develop, maintain and continually improve their business continuity management systems (BCMS).
- b. This means having suitable, up to date business continuity management (BCM) plans which set out how they will:
 - i. maintain continuous service when faced with disruption from identified local risks; and
 - ii. resume key services which have been disrupted by such risks.
- c. This policy provides the framework within which the Trust can comply with the business continuity requirements of commissioners and interested parties by introducing a business continuity management system (BCMS) that aligns with international standard ISO 22301: 2012, and the Trust's business planning cycle. The BCMS is being established to ensure the Trust can continue to deliver a minimum level of service in the event of a disruption. Plans will be made, published and tested for key services.

2. Purpose of document

The business continuity policy provides a structure through which:

- a. A comprehensive BCMS is established and maintained;
- b. Key services (both clinical and corporate), together with their critical processes and activities, and supporting resources and interdependencies, will be identified;
- c. Business impact analysis and risk assessment will be applied to the critical processes supporting resources and interdependencies. Risks will be documented in line with the Trust's Risk Management Policy;
- d. Plans will be developed to ensure continuity of key services at a minimum acceptable level and within specific timeframes following disruption;
- e. Invocation of business continuity plans and communications with interested parties can be managed;
- f. Plans are subject to on-going exercising and revision; and
- g. The Board can be assured that the BCMS remains up to date and relevant by linking the process into the annual business planning cycle.

3. Definitions

- a. Business continuity – capability of the organisation to continue delivery of products and services at pre-defined levels following a disruptive incident.
- b. Business continuity plan – a documented collection of procedures and information that has been developed, compiled and maintained in readiness for use in an incident, and allows an organisation to maintain the delivery of its key products and services.

- c. Business impact analysis (BIA) – process for identifying, quantifying and qualifying the impacts on a service of a loss, interruption or disruption of a critical activity and its supporting processes and resources.
- d. Disruption – event whether anticipated or unanticipated which causes an unplanned, negative deviation from the expected delivery of services or products according to the organisation’s objectives.
- e. Incident – situation that might be, or could lead to business disruption, loss, emergency or crisis.
- f. Interested parties – those with a vested interest in an organisation’s achievements.

4. **Scope**

- a. This Policy applies to all services and activities of the Trust; services delegated under a Section 75 agreement to Worcestershire County Council will be subject to the local authority’s business continuity arrangements.
- b. Managers responsible for contracting, commissioning or purchasing goods or services from external providers are responsible for ensuring that contracts and/or service level agreements with providers of goods and/or services include arrangements to ensure that critical services/activities are maintained. These arrangements should be in line with the provisions of this Policy, and evidence will be required.

5. **Training/Competencies**

- a. Workshops will be held for managers and team leaders to enable them to participate in the BCMS.
- b. A training and exercising programme will be developed for key services.

6. **Responsibilities and duties**

- a. Ownership of BCM is required at every level of the organisation; however, the following have key responsibilities.
- b. This Policy is owned by the Quality and Safety Committee.
- c. The Accountable Emergency Officer (Director of Services Delivery) is responsible to the Board for business continuity issues.
- d. Directors are responsible for the successful implementation of the BCMS within their areas of responsibility.
- e. The Emergency Planning Manager is the professional lead for business continuity within the Trust and will:
 - i. Review and develop the policy in line with best practice and needs of the Trust;
 - ii. Monitor the performance of the BCMS and compliance with the Policy;
 - iii. Provide support and guidance and training on business continuity issues.
- f. Managers are responsible for the development and implementation of BCM plans and risk registers within their area of responsibility.

- g. All staff must be aware of the plans that affect their department or service and their role following invocation of business continuity plans.

7. Main text of policy/guideline

- a. All NHS organisations and providers of NHS funded care must develop, maintain and continually improve their BCMS. For the Trust, this means having suitable plans which set out how it will maintain continuity in its services during a disruption (either planned or unplanned), from identified local risks and how it will recover delivery of key services in line with ISO 22301: 2012, the international standard for BCM.
- b. These plans must also:
 - i. include governance and management arrangements linked to relevant risks, and in line with ISO 22031 and relevant guidance;
 - ii. take into account the organisation's critical activities, the analysis of the effects of disruption and the actual risks of disruption;
 - iii. set out how the plans will be called into use, escalated and operated;
 - iv. describe the effects of any disruption and how they can be managed;
 - v. specify how they will be used, maintained and reviewed; and
 - vi. specify how they will be communicated to and accessed by staff.
- c. The Trust has a series of legacy documents from its predecessor organisations which include business continuity plans aligned with BS 25999-2, the British Standard Specification for business continuity management at the time. These plans cover both clinical and corporate services, and each plan is underpinned by a number of supporting documents:
 - i. business impact analysis (BIA);
 - ii. stakeholder analysis;
 - iii. resource record;
 - iv. risk mitigation record;
 - v. resource requirements.
- d. However, since the formation of the Trust in 2011, there have been significant changes to the way in which services are delivered. Whilst the information contained within the legacy documents may still be relevant, the Trust will undertake a complete review of its BCMS to ensure that plans are relevant and up to date.
- e. Each service within the Trust is aligned to a directorate. The Director will ensure that plans capable of maintaining a minimum acceptable standard of service delivery are in place for each key service.
- f. Functional departments will provide professional support to improve resilience of critical activities and resources that support key services.
- g. Each directorate will carry out an annual review of its business continuity plans as part of the business planning cycle alongside the development of annual business plans. The Emergency Planning, Resilience and Response Sub-Committee will monitor the review process, benchmark the results and provide support where necessary. Plans should be exercised annually, and plans updated accordingly.

- h. Contracts with suppliers of critical goods and services to the Trust must include a requirement for the supplier's business continuity processes to be approved and exercised to the satisfaction of the Trust.
- i. Interested parties will be kept informed about the BCM arrangements as they affect the service provided to them.
- j. The Trust will maintain a corporate BCM plan, providing a framework within which a significant and/or widespread disruption/incident can be managed, underpinned by directorate plans, which identify the key services, components and buildings within their scope of responsibility, and support services plans (e.g. IT, telephony, facilities, finance and HR) that meet the needs of the directorates to continue the operation of critical processes and activities.
- k. In order to meet information governance requirements, plans will also identify critical information assets (data processing facilities, communications services and data) and procedures will be put in place to prevent information being interrupted or disrupted through equipment failure, environmental hazard or human error.
- l. When managers are considering business continuity issues related to delivery of patient services, all efforts should be made to ensure that services to children and young people who are vulnerable e.g. those subject to safeguarding concerns and adults who are at risk of harm, are prioritised in order that any risks are not increased.
- m. Each base will have a set of work-around arrangements for known risks which can be identified, quantified and planned for, (such as utility failures or fires and any localised risks for the premises), linking back to the support services plans, and Trust policies where necessary. Action cards will provide an initial response for low level risks and escalation procedures in the event that the work-around arrangements do not restore delivery of the process or activity within a satisfactory timeframe, and or for unforeseen events.
- n. Each base will also identify a business continuity lead (and deputy), who will ensure that the procedures are kept up to date, and that staff working in the base are aware of what to do in the event of a disruption.
- o. Directorate plans will concentrate on the arrangements for co-ordinating a response when an incident significantly affects more than a single function/team through the establishment of a business continuity management team, set up to coordinate the response in the short-term. Membership of the team will depend on the nature of the incident and the extent of its impact. It may include staff from outside of the Directorate or outside the Trust as a whole where joint services are affected.
- p. Where multiple directorates are affected, the provisions of the Major Incident Plan may apply.
- q. The Trust will work closely with Worcestershire County Council to ensure continuity of services provided by the two organisations. This may include temporary arrangements for staff from one organisation to support services led by the other organisation.
- r. The Policy provides a clear commitment to establishing a BCMS within the Trust that enable the organisation to:
 - i. Continue to provide key services in times of disruption;
 - ii. Make best use of staff and other resources at times when both may be scarce;
 - iii. Reduce the period of disruption to the organisation, to patients and interested parties;

- iv. Resume normal working more efficiently and effectively after a period of disruption;
- v. Comply with governance standards;
- vi. Improve the resilience of the organisation's infrastructure to reduce the likelihood of disruption; and
- vii. Reduce the operational and financial impact of any disruption.

Monitoring implementation

- a. BCM arrangements will be monitored through the EPRR sub-committee and the annual Performance Review meetings. Reports on BCM will be submitted to the Board via the Quality and Safety Committee as part of the EPRR sub-committee report prepared by the Emergency Planning Manager.
- b. BCM plans will be reviewed annually as part of the annual business planning cycle.
- c. The Emergency Planning Manager will collate a central register of Business Continuity Plans.

8. References

- a. British Standards Institute, 2012. *ISO 22301, Business Continuity Management*. BSI, London.
- b. British Standards Institute, 2013. *The Route Map to Business Continuity Management – meeting the requirements of ISO 22301*. Sharp, J.
- c. NHS Operations, 2012. *NHS Commissioning Board Core Standards for Emergency Preparedness, Resilience and Response (EPRR)*. NHS Operations, Leeds.
- d. BSI British Standards Institute, 2010: *PAS 2015: 2010. Framework for health services resilience*. BSI, London.
- e. DH Emergency Preparedness Division, 2008. *NHS Resilience and Business Continuity Management Guidance – interim strategic national guidance for NHS organisations*. DH, London.

9. Associated documentation

- a. Major Incident Plan.

10. Appendices

- a. None.