Business Continuity Management System Policy & Plan

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17/6/2013	**D.01**	First draft	**Kirsten Owen**
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15/08/2013	**D0.6**	**Removed comments and included a section on telephone, removed the contract details as these are internal documents**	**Kirsten Owen**
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North Staffordshire CCG
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Contents

Section 1 – Policy Introduction

1.1 Introduction

Business Continuity Management (BCM) is a statutory requirement for NHS North Staffordshire Clinical Commissioning Group (hereinafter referred to as the 'NSCCG') to undertake. The responsibilities for business continuity are set out in the Civil Contingencies Act 2004, and the NHS Commissioning Board Business Continuity Management Framework (service resilience) 2013.

The role of NSCCG is to commission healthcare, both directly and indirectly, so that valuable public resources secure the best possible outcomes for patients. In doing so, the CCG will seek to meet the objectives prescribed in the Integrated Strategy and Operating Plan (ISOP) and to uphold the NHS Constitution. This policy is important because it will help the CCG make sure that it can continue to deliver its business on behalf of patients in times of disruption.

The CCG recognises the potential operational and financial losses associated with a major service interruption, and the importance of maintaining viable recovery strategies. The CCG also recognises that any event will also impact on the CCG's brand, status, relationship and reputation and that all business continuity arrangements should ensure that the CCG meets their legal, statutory and regulatory obligations to both staff and dependent stakeholders

This Business Continuity Management System Policy & Plan (BCMSP&P) is intended to provide a framework for the CCG to follow in the event of an incident such as fire, flood, bomb or terrorist attack, power and/or communication failure or any other emergency that may impact upon the daily operations of the CCG.

It describes the plan for implementing and maintaining a suitable business continuity process within the CCG, including the roles and responsibilities of the officers with the responsibility for implementing it.

This policy will support the organisation to think ahead in order to avoid or mitigate risk, take corrective action and be in control of the outcome of an emergency.

This policy has been considered and agreed by NSCCG Governing Board. The Board will undertake an annual review of the BCMSP&P, which will include as a minimum reports on exercises, training, testing and risk management.

This policy will be published on the CCG website

1.2   Definitions

The definitions used within this document are used in with BS25999 (ISO 22301):

Activity: Processes or sets of processes undertaken by the CCG, or on behalf of the CCG that supports delivery of services

Business as Usual (BAU): Pre-defined acceptable levels of delivery

Business Continuity Management (BCM): Holistic process to identify potential threats, assess the impact of those threats on the CCG and building a framework to support CCG resilience to those threats, including protecting patients' and stakeholders' interests and achieving strategic objectives. Includes strategic and tactical capability of the CCG to plan for and respond to business interruptions in order to support continued delivery of 'business as usual'

Critical Activities: Those activities carried out by the CCG which are most time sensitive and important for ensured continued delivery. These will be mainly those services essential for immediate life and death of patients. These activities will typically suffer if delayed by more than one hour.

Essential Activities: Those activities carried out by the CCG which are sensitive and important, but not critical to life and death of patients. These activities will normally suffer if delayed by more than one day.

Incident Control Centre (ICC): Control centre specifically dedicated for the management of major incidents.

Major Incident: an event classified as a Major Incident according to the CCG Major Incident Response Plan

Non –Urgent Activities: those activities carried out by the CCG which can be postponed or delayed most easily. These activities will begin to suffer if delayed by more than one month

Routine Activities: those activities carried out by the CCG which support business delivery on a daily basis and are not critical or essential. These activities will typically start to suffer if delayed by more than one week.

Service Recovery: the process through which business as usual is reached, following an interruption or disruption event.

Local Resilience Forum (LRF): A process for bringing together all the Category 1 and 2 responders within a local police area for the purpose of facilitating co-operation in fulfilment of their duties under the Civil Contingencies Act.

1.3 Scope of the policy

This policy sets out the general principles and corporate framework for the Business Continuity Management Service relevant to the business activities of the CCG. This document aims to ensure that all Business Continuity processes carried out by the CCG are in an agreed and controlled manner.

This policy applies to those members of staff that are directly employed by the CCG and for whom the CCG has legal responsibility. For those staff covered by a letter of authority/honorary contract or work experience the organisation's policies are also applicable whilst undertaking duties for or on behalf of the CCG. Further, this policy applies to all third parties and others authorised to undertake work on behalf of the CCG.

The CCG is classified as a category 2 responder and as such we are considered 'co-operating bodies". We are less likely to be involved in the heart of the planning for major incidents that extend further than the localised CCG area, but we will be heavily involved in incidents that affect our sector in co-operating in response and the sharing of information.

Category 1 and 2 responders come together to form local health resilience partnerships (LHRP), and these forums help to co-ordinate activities and facilitate co-operation between local responders.

The CCG as an NHS organisation is required have plans which set out how it plans for, responds to and recovers from disruptions, significant incidents and emergencies through our **Incident Response Plan.** In addition the CCG must provide a suitable environment for the management of significant incident or emergency **Incident Control Centre** and finally the CCG must develop, maintain and continually improve its **business continuity management systems** (BCMS).

The level of detail within these plans will be limited to how the CCG will continue to manage in the event of service interruption. This policy sets out the framework for the CCG to:

- Develop a local framework to respond to localised incidents relating to our commissioned services
- Escalate to the Area Team
- Manage and maintain the continuation of critical, core functions and services
- Manage the recovery and restoration of normal functions and services

1.4 Legal and Statutory Duties

The following general (Statutory) duties apply:-

The Civil Contingencies Act 2004 (CCA) places a duty on CCGs to have business continuity plans in place to ensure that they can continue to exercise their functions in the event of an emergency so far as is reasonable practicable. The duty relates to all functions, not just their emergency response functions

CCA definition of an emergency is as follows: "An event or situation which threatens serious damage to human welfare in a place in the UK, the environment of a place in

the UK, or war or terrorism which threatens serious damage to the security of the UK."

Healthcare standards require the organisation to be able to continue essential routine work during an incident or emergency situation and to provide essential supplies, with documented procedures for procuring additional or alternative supplies.

ISO 22301 gives guidance for establishing a business continuity plan and process within an organisation and this policy is written accordingly.

The CCG is responsible for the commissioning of a wide range of patient services to the local population and as such ensure that the providers it commissions with have the appropriate robust and adequately tested business continuity plans in place. In terms of the commissioning and support functions of the CCG the following will be restored and maintained as soon as practically possible:

- Maintaining an emergency response and support to Category 1 responders
- Mobilisation of the workforce, and support to ensure staff safety and welfare
- Provision of IT, through contract with Staffordshire and Lancashire CSU
- Response to public health/health protection emergencies
- Maintaining communications with the general public, member practices and CCG staff
- Essential HR processes
- Continuity of contract management responsibilities.

Each department has identified its own critical functions that are required to maintain its services and have developed their departmental plans. A synopsis of these is included in the appendices at the back of this document.

1.5 Duties and Responsibilities

The overall accountability for the smooth running of the organisation lies with the CCG Clinical Accountable Officer (CAO). The Board has delegated authority for EPRR to the Accountable Emergency Officer (AEO), who is supported by the Emergency Planning Officer (EPO). Delegated EPRR responsibilities within the CCG are detailed below in the table

	RESPONSIBILITY
Clinical Accountable Officer	Has responsibility for ensuring that the CCG has in place robust arrangements for business continuity management and service recovery.
Accountable Emergency Officer (Chief Operating Officer)	CCG representative on the Local Health Resilience Partnership (LHRP) Board. Ensuring that the Governing Board receives a report, at least annually, on business continuity, including reports on exercises, training and testing undertaken. Overall responsibility for implementation of business continuity and major incident plans. Responsible for alerting the need to activate Business Continuity Management System if such an event occurs.
Emergency Planning Officer (Senior Planning and	Strategic planning, the operational implementation, testing and training of the Business Continuity Management Policy.

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Development Manager)	Ensuring that the CCG complies with all the statutory requirements of the Civil Contingencies and NHS Guidance Ensuring that business continuity is aligned with risk management
Emergency Planning Administrator (Office Manager)	Ensure service continuity plans are maintained and developed Assist in the development and delivery of training and exercising events. Arranging a debrief following all disruptive events. Promote and communicate business continuity within their areas of control.
Clinical Directors and Senior Managers	Identification of business critical areas and the resumption priorities of such following a disruptive event. Successful implementation of business continuity for critical and essential services in area of responsibility
Communications Team	Responsible for the management of communications to staff, the public and the media
Individual Staff members	Responsible for ensuring they are familiar with the Business Continuity Management Policy and Plan and their own role within it

1.6   Alignment with other plans

The development of the CCG's Business Continuity Management Policy and Plan aligns and complements the following plans and arrangements:

- Major Incident Plan
- Winter surge plan
- On-call arrangements
- Category 1 Business Continuity Management System

1.7   Escalating to NHS England Area Team

Within the North Staffordshire local health economy there are a number of single provider trusts for acute, community and mental health services. In order to simplify commissioning and contracting arrangements, NSCCG and neighbouring Stoke on Trent CCG have agreed lead commissioner arrangements, detailed in appendix 1 attached to this document.

In the event of a localised incident involving the health services commissioned by the CCG, the lead commissioner for that service will assume the role of Accountable Emergency Officer and be responsible for keeping the NHS England Area Team as Category 1 responders informed. Other commissioners will form part of the LHE wider group managing the incident.

In the event of a localised incident involving health services that are only commissioned by NSCCG they will be responsible for escalating this to the NHS England Area Team as Category 1 responders.

More information regarding the NHS England expectation of CCGs regarding EPRR and scenarios can be found in appendix 5.

Section 2 of this policy outlines how CCG specific incidents will be declared and managed internally.

Section 3 of this plan outlines the management arrangements for the business continuity management system for the CCG; this includes the financial arrangements, organisational training, testing and reviewing of the plan.

Section 2 – Organisation Plan

2.1 Causes of Service Interruption

There are many and varied possible causes of service disruption. As a general guide, service continuity planning should be carried out to minimise the effects of a number of potentially disruptive events:

- Major accident or incident, national disaster, epidemic, terrorist attack
- Fire, flood, extreme weather conditions
- Loss of utilities, including IT and telephone systems
- Major disruption to staffing; epidemic, transport disruption, industrial action, inability to recruit; mass resignation (e.g. lottery syndicate).

It should be borne in mind that these events may not be mutually exclusive, e.g. extreme weather leads to loss of electricity, disruption to transport, staff unable to get to work.

2.2 Definitions of Incidents

There will be two levels of incident to provide a benchmark on which to judge the level of response required to manage the incident;

Minor Incident: defined as incidents that could pose an actual threat to CCG staff and property, but not seriously affect the overall functioning of the CCG. These may result in threats to our reputation and might include evacuation of part of the building or buildings with the support of the emergency services

Major Incident: defined as incidents causing a significant disruption to the CCG operations that may affect the entire building and/ or staff.

2.3   Reporting and Declaring Incidents

The detection or notification of a minor or major incident during office hours that could have an impact on the normal operations of NSCCG should be communicated to the Accountable Emergency Officer (07515 191280). During Out of Hours the contact will be the on call duty senior manager the following flow chart describes the plan activation route:

```
┌─────────────────────────┐
│   Incident occurs       │
│   Notify AEO            │
└─────────────────────────┘
            │
            ▼
┌─────────────────────────┐
│ Consider if crisis is   │
│ able to be contained    │
│ within the usual        │
│ resources              │
└─────────────────────────┘
       ↙          ↘
┌──────────────┐  ┌──────────────────┐
│    YES       │  │       No         │
│ No further   │  │ Agree that the   │
│ action is    │  │ business         │
│ required     │  │ continuity plan  │
│              │  │ should be        │
│              │  │ invoked          │
└──────────────┘  └──────────────────┘
                            │
                            ▼
┌──────────────┐  ┌──────────────────┐
│ Set up       │← │ Notify staff     │
│ incident and │  │ within           │
│ recovery     │  │ department and   │
│ team         │  │ any other        │
│              │  │ department/      │
│              │  │ services or      │
│              │  │ stakeholder that │
│              │  │ may be affected  │
└──────────────┘  └──────────────────┘
       │                    │
       ▼                    ▼
┌──────────────┐  ┌──────────────────┐
│ Progress and │← │ Initiate         │
│ any further  │  │ department plan  │
│ developments │  │                  │
│ to be        │  │                  │
│ assessed     │  │                  │
│ daily        │  │                  │
└──────────────┘  └──────────────────┘
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2.4   Business Continuity Management Team

A Business Continuity Management Team (BCMT) will be convened to oversee the process of ensuring essential services are maintained and that recovery plans are put into place. Membership may include:

- Chief Operating Officer or Deputy Operating Officer (Chair of BCMT)
- Emergency Planning Officer
- Chief Finance Officer or Deputy Chief Finance Officer
- Emergency Planning Administrator
- Communications Manager
- Commissioning Support Relationship manager.
- Estates Representation (if required)

- Any other personnel deemed necessary, for example HR or specialist advisors such as IT
- Other Heads of Service as identified through the Business Impact Assessments

The team will meet initially on a daily basis and will keep notes of the meetings, actions taken and progress made using agreed paperwork **attached**

2.5 Incident Control Centre

In the event of a localised incident that renders the normal base of operations inaccessible, the BCMT will be relocated to a local Incident Control Centre (ICC) which will be the Herbert Minton Building, Stoke. The first meeting of the BCMT will be convened via a telephone conference within 4-6 hours of the incident occurring, which will be dependent on the type of incident declared and the severity of the incident.

The second meeting of the BCMT will be held at the ICC within at least 12 hours of the initial telephone conference to enable time to assess the incident and call in additional specialists if required.

All records created during the implementation of the business continuity plan must be kept by the Emergency Planning Officer. These records will be stored in line with the Records Management NHS code of practice.

2.6 Business Impact Assessment

NSCCG provides a range of commissioning functions and some of these functions are through joint teams with Stoke on Trent CCG (SOTCCG) and there are other functions that are delivered through hosting arrangements or contracts with other organisations such as Staffordshire County Council and Staffordshire and Lancashire Commissioning Support Unit.

Each functional area of NSCCG will complete a business impact assessment of the impacts on delivery of their function due to the localised loss of; staff, communications, data systems, transport and buildings.

This assessment provides a basis for CCG critical functions that are required to ensure that NSCCG is able to continue with its statutory duties and provides a road map for how to bring the functions back on line following a localised incident that causes a disruption in service delivery.

2.7 Areas of Organisational Failure

There are some generic areas that could potentially affect the functions of NSCCG and these are described as follows:

Failure of IT Systems

The CCG like many organisations relies upon its IT systems for day to day business. A disaster that prevents the organisation from accessing these systems whether caused by the failure of the systems themselves, or being due to an incident such as fire or flooding, will potentially have a serious impact on the continuation of the CCG's functions.

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The telecommunications system is reliant upon the IT network (IP Telephony), so it is likely that telephone failure will also result from any IT network failure.

Each individual function of the CCG has undertaken a business impact assessment and the BCMP takes into account their key actions and recovery plans from a sudden loss of IT systems.

The priority in which restoration is required will depend on the service area and is detailed in the business impact assessments.

Should there be an individual loss of hardware or software through theft or damage then advice should be sought from the IT provider listed below and the incident reported to the CCG's Head of Governance or Chief Finance Officer (SIRO).

The maintenance and support of the CCG IT systems is provided by North Staffordshire Informatics Service under a Service Level Agreement (SLA), which is managed through Staffordshire and Lancashire Commissioning Support Unit (CSU).

CCG contact in the 1st instance would be: IT Service Desk

CCG escalation would be: Head of IT - CSU

Failure of Telecommunications

The CISCO IP telephone systems is managed and supported North Staffordshire Informatics Service under the above mentioned Service Level Agreement (SLA). All sites use CISCO IP phone systems rather than BT analogue phones. The systems phones requite both power and IT network to work.

In the event of system wide failure of the immediate solution would be the use of work mobile phones until a solution is agreed in line with our immediate priority services as detailed in the business impact assessments.

CCG contact in the 1st instance would be: IT Service Desk

CCG escalation would be: Head of IT - CSU

Failure of Utilities

The CCG is accommodated in Morston House, under shared letting arrangements with the other building's tenants. In the event of a failure of one or more of the various utilities supplied to the organisation an assessment of the impact will need to be undertaken.

If the electricity is lost an assessment should be made if it is localised to the floor, to the entire building or across a number of neighbouring buildings. Dependant on the outcome of the assessment will determine the response required.

- Localised to a single floor within the building, the source of the power outage needs to be determined by checking the fuse cabinets, if the source of the

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disruption cannot be identified a call to the building manager to resolve the issue.

- If the power outage is building wider a call to the buildings manager to the resolve the issue and provide details on how power will be restored.
- If the power outage is covering a number of neighbouring buildings and is not resolved within 10 minutes a call to the building manager should be placed to find out what they energy supplier is doing to resolve the issue.

Should it be established that it is going to be a prolonged outage over a period of 2 hours there will be a need to call a minor incident.

If the heating is lost an assessment should be made to the effect of the loss, the effect will largely be related to the time of year and the forecast temperature as to whether services can continue from the affected offices.

For plumbing emergencies the relevant contact will be made through the CCG's Office Manager or the building manager

In the event that the water supply fails the impact of the following must be assessed:

- Toilets
- Hand hygiene
- Drinking water

Loss of CCG buildings

If the CCG main premises are unable to be used then some services will need to be suspended and others will need to be relocated, The priority on which services need to be suspended and those that will need to be relocated will be decided using the business impact assessments.

Fuel Shortages

In the event of a fuel shortage the ability to maintain services may be affected. If it has been necessary for the invocation of the National Fuel Plan then a crisis management team will be convened to oversee the management of the situation within the CCG. It is unlikely there will be provision of fuel for all staff to get to their work base so alternative work base options will be supplied and notification of this will be made through the cascade channels.

Staff shortages

The absence of staff will have a varying effect depending on their role. In some cases roles can be covered by other staff but others may be highly specialised and necessary arrangements will be detailed in the CCG business impact assessments.

There may be a scenario when a number of staff are all incapacitated at the same time such as pandemic influenza or a large scale lottery win. The manager of the department will be responsible for assessing the impact on the ability to continue to provide a service and what

contingencies can be put in place, and whether some critical services can be cancelled as detailed in the CCG business impact assessments.

2.8   Recovery Process

Recovery from incident or an event is as equally important as the business continuity management process. It can be complex and a long running process, which may be costly in terms of resources and can come under close scrutiny from the community and media. In order to manage the processes the CCG has a recovery plan.

Staff and Stakeholder Communications

The rapid resumption of a clear line of communication with all staff, partners, stakeholders and the Area Team is a key element of an effective service continuity plan. Details of all key partners, stakeholders and providers are included in appendix 4. This list is not exhaustive and dependent on the incident will largely depend on who will need to be contacted.

Information Technology

Computers and the various IT systems that we use have their own protection and recovery systems, the majority of computer data is held on a mainframe. CCG staff need to be encouraged not to store any vital information on standalone hard drives or personal memory devices, this practice is in direct contradiction to the Information Governance Policy.

Temporary Accommodation

Help with relocating key personnel will largely come from within the local NHS community, neighbouring CCG's and local trusts. The BCMT will be housed in the headquarters of Stoke on Trent CCG under the reciprocal emergency accommodation arrangements. The deployment of departments and personnel will be devised and proportionate to the level of the incident. The extent of these arrangements and any compensation for disruption to the host should be carefully negotiate in advance and will form part of the final incident repose plan.

Reciprocal support

It may be appropriate for individual departments to make reciprocal arrangements with neighbouring CCGs to ensure the continuity of business functions. The extent of these arrangements and any compensation for disruption to the host should be carefully negotiated in advance and will form part of the final incident response plan.

Personnel Welfare

Any major disruption and subsequent recovery process may profoundly affect the staff involved. It is of the upmost importance to keep staff fully informed of the situation at regular intervals and to utilise their expertise to aid the recovery process.

The disruption caused by a major emergency like a fire can be very disturbing for staff. The loss of many years' work, personal possessions, vital notes and records may have a detrimental effect on morale. It is important that staff concerns are acknowledged and that a

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structured return to work is made. A positive and constructive attitude to the recovery phase should be encouraged. In severe cases, it may be appropriate to arrange for counselling sessions for individuals and/or groups to ease concerns.

Section 3 – Management Arrangements

3.1 Financial, Insurance and Legal Matters

It is likely that any disruption to services would result in an increase in expenditure and require budgetary consideration. The CCG will ensure that there are suitable financial resources available; this would be funded through the CCG required surplus of 1%. All spend will be tracked through the use of agreed financial codes, this is managed through the shared business services function of Staffordshire and Lancashire Commissioning Support Unit.

The financial systems are managed by Staffordshire and Lancashire Commissioning Support Unit, which provides additional safeguards during times of crisis so that localised incidents affecting the CCG would not have an impact on the CCG's financial capability at times of crisis.

The Chief Operating Officer and Head of Governance should be kept advised of the situation to ensure that any legal issue are being addressed.

3.2 Communication and Media Liaison

Good communication is essential at a time of crisis. An emergency communications plan will be developed to ensure there are appropriate statements for internal and external communication, in addition to processes for ensuring communication to all staff in the case of an emergency.

Depending upon the nature of the disruption to the service, there may be a degree of media interest and demands for information. The communication team at the CSU should be kept fully informed of all significant actions during the recovery process

3.3 Training

Managers tasked with business continuity management responsibilities must receive appropriate training to enable them to fulfil their management function; this training will be over and above the on-call training. The two training sessions for on call senior managers with these responsibilities are:

- Emergencies on trial
- Strategic leadership in crisis management

There will be additional business continuity management system awareness training for those staff that do not have direct business continuity management responsibilities. This training will provide an overview of the Business Continuity Management System and their responsibilities in terms of emergency contact details, alternative places of work, etc.

3.4   Testing

This Business Continuity Management System Policy & Plan will be tested on an annual basis. This will be facilitated by (need to consider who this might be) the by means of a table top exercise choosing from three different scenarios: loss of staff, loss of premises and loss of systems.

The call out / cascade arrangements, particularly the staff cascade will be tested every six months or in the event of significant organisational change occurring.

3.5   Reviewing

This policy will be reviewed no less frequently than every two years. An earlier review will be carried out in the event of any relevant changes in legislation, national or local policy or guidance.

If only minor changes are required the Organisational Development Committee has authority to make these changes without referral to the CCG Board. If more significant or substantial changes are required, the policy will need to be approved by the relevant Committee before final ratification by the CCG Board.

3.6 Communicating the policy

The communication of this policy and plan will be conduction through multiple channels, initially it will be included in the induction of all staff members, and there will be a comprehensive training plan for all senior managers and staff with key roles within the policy and plan. For all other staff there will be a one off awareness session of the BCMSPP held at both Governing Board and Staff levels.

This policy will be made available internally via the SharePoint Intranet and externally via the CCG website.

The policy and plan will be included in the on call pack for all NHS North Staffordshire Senior Managers.

Appendix

A1)   Lead arrangements with Stoke on Trent Clinical commissioning Group

A2)   Business impact assessments **(for internal use only)**

A3)   Contact details of key personal **(for internal use only)**

A4)   Contact details for key partners **(or internal use only)**

Appendix 1 - Lead Arrangements with Stoke

North Staffordshire and Stoke on Trent Clinical Commissioning Groups have lead commissioner arrangements in place the local providers as detailed below:

Provider name	Detail of services	Organisation	Identified role	Contact name
University Hospital of North Staffordshire	Acute Service	SOTCCG	Lead Commissioner	Sandra Chadwick Tony Matthews
		NSCCG	Support role	Marcus Warnes
Staffordshire and Stoke on Trent Partnership Trust	Community Services	NSCCG	Lead Commissioner	Marcus Warnes Tony Matthews
		SOTCCG	Support roles	Sandra Chadwick
Combined Health Care Trust	Mental Health Services	NSCCG	Lead Commissioner	Marcus Warnes Tony Matthews
		SOTCCG	Support roles	Sandra Chadwick
Staffordshire Doctors	Out of Hours Provider	NSCCG	Lead Commissioner	Sarah Blenkinsop Tony Matthews
		SOTCCG	Support roles	

In the event of a localised incident involving the health services commissioned by the CCG, the lead commissioner for that service will assume the role of Accountable Emergency Officer and be responsible for keeping the NHS England Area Team as Category 1 responders informed. Other commissioners will form part of the LHE wider group managing the incident.