

# **Business continuity policy**

## CORP-0048-v4.1

Status: Ratified Document type: Policy

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## 1. Why we need this policy

#### 1.1. Purpose

The purpose of this policy is to state and communicate the Tees, Esk and Wear Valleys NHS Foundation Trust's intention, organisation and arrangements for Business Continuity Management, to:

- Ensure Business Continuity resilience.
- The ongoing management and maintenance of business continuity capability through Business Continuity Plans.

#### 1.2. Objectives

- Manage the risks and minimise disruption to normal operation of the Trust's critical services which may arise from the external environment or from within the organisation.
- Enable a co-ordinated approach to the assessment, prevention, preparation, response and recovery of any critical service where normal operational conditions have been disrupted.
- Ensure Trust staff have the appropriate guidance and training to continue delivery of critical services at an acceptable level during a period of disruption.
- Ensure that there is a robust and predefined Command and Control system within the organisation to respond to and manage significant disruption.
- Work with partner organisations to ensure local plans are mutually supportive and collaborative.

## 2. Scope

#### 2.1. Who this policy applies to

• All Trust staff.

## 2.2. Roles and responsibilities

| Role                                  | Responsibility   |
|---------------------------------------|--|
| Chief Executive                       | • Ensuring the organisation has a Business Continuity Policy and comprehensive Business Continuity Plans (BCPs) in place.  |
| Non Executive Directors               | • Via reports from the Audit Committee ensuring that the<br>Executive Management Team and other senior officers fulfil<br>their responsibilities for this policy.  |
| Executive/Service Directors           | <ul> <li>Ensuring that critical services and support systems (including IT systems) have been identified in their area of responsibility;</li> <li>Having comprehensive and up to date Business Continuity Service Plans in place and embedded throughout the services to maintain critical services at acceptable levels in the event of a disruption.</li> </ul>   |
| Chief Operating Officer               | <ul> <li>Identified as Emergency Planning Lead Director;</li> <li>Ensuring this policy is implemented;</li> <li>Chairing the Emergency and Business Continuity Planning<br/>Working Group;</li> <li>Maintaining the Trust Command and Control arrangements;</li> <li>Managing any Business Continuity issues in line with the<br/>Command and Control BCP;</li> <li>Maintain the Trust's Pandemic Influenza and BCP;</li> <li>Maintaining the Trust's Command and Control Business<br/>Continuity Plan.</li> </ul> |
| Director of Nursing and<br>Governance | <ul> <li>Maintaining the Trust's Pandemic Influenza Plan.</li> </ul>   |

## 3. Policy

#### 3.1. Business Continuity Management System

The Trust has implemented the following Business Continuity Management system:-

- Business Impact Analysis a strategic overview via a survey and analysis process has been used to differentiate between critical and non-critical Trust services and systems
- The Business Impact Analysis has led to Business Continuity Service Plans being developed for all critical services and systems in readiness for use in an incident to assist the Trust to continue to deliver its critical services at an acceptable pre-defined level
- Command and Control function Comprehensive Business Continuity and Pandemic Influenza Command and Control plans are in place to enable a team to be established to efficiently manage an emergency or disruption impacting on Trust critical services
- Risk Register An Emergency Planning and Business Continuity Risk Register is in place which identifies Trust risks including those linked to the National and Community Risk Registers. High level risks are escalated to locality and Trust Risk Registers as appropriate

The above elements of the Business Continuity Management System do not stand alone and in the event of a Trust-wide or site-wide incident a number of Service Plans and the Command and Control Plan will inter-link to effectively manage the issue

#### 3.2. Maintenance of Business Continuity Management System

Validation and maintenance of the Business Continuity plans and Incident Co-ordination Centres is essential to ensure that they are fit for purpose and to take account of any change in circumstances. The responsibility for carrying out the necessary actions to ensure this occurs is shown in the table below:

| Action  | Ву  | Frequency  |
|---|---|------------|
| Review and update Command and<br>Control Business Continuity Plan   | Emergency Planning & Business<br>Continuity Manager       | Bi-monthly |
| Review and update Command and Control Pandemic Influenza Plan   | IPC and Physical Healthcare Senior Nurse                  | Bi-monthly |
| Review and update Service Business<br>Continuity Plans  | General Manager / Associate<br>Director                   | Bi-monthly |
| Review Emergency Planning and<br>Business Continuity Risk Register  | Emergency Planning & Business<br>Continuity Working Group | Quarterly  |
| Arrange for Testing of Trust Incident<br>Coordination Centre (ICCs)   | Emergency Planning and<br>Business Continuity Manager     | Monthly    |
| Implement programme of desk top<br>exercises for Command and Control and<br>Service Business Continuity Plans | Emergency Planning and<br>Business Continuity Manager     | Annually   |
| Live Test the ICC's   | Emergency Planning and<br>Business Continuity Manager     | Annually   |

#### 3.3. Training/Awareness Raising

To embed Business Continuity Management into the everyday business process of the Trust, an ongoing programme of training / awareness raising events needs to take place. The Trust intends to achieve this by:-

- Including a section on Business Continuity Planning on the Trust Corporate Induction Sessions;
- Implementing a Business Continuity e-learning package;
- Incorporating guidance on Business Continuity into the Health, Safety, Security and Emergency Planning Workbooks held by each wards department;
- Carrying out an annual programme of table top exercises;
- Carrying out an annual semi live test.

## 4. Planning framework

#### 4.1. Internal emergency plan

| Purpose   | Plan                    |
|---|-------------------------|
| <ul> <li>This Plan identifies:</li> <li>what is required of the services in the event of an internal emergency;</li> <li>the roles needed to be undertaken</li> </ul> | Internal Emergency Plan |

#### 4.2. External Major Incident Plan

| Purpose   | Plan                         |
|---|------------------------------|
| This Plan identifies the roles and responsibilities of the Trust in the event of an External Major Incident | External Major Incident Plan |

## 4.3. Command and Control Business Continuity Plan

| Purpose   | Plan  |
|---|---|
| This plan describes the arrangements that the Trust has<br>in place to ensure the effective management of a<br>disruption which may impact on critical services | Command and Control Business<br>Continuity Plan |

### 4.4. Pandemic Influenza Plan

| Purpose  | Plan                    |
|--|-------------------------|
| This Plan describes the arrangements that the Trust has<br>in place to ensure the effective management of<br>Pandemic Influenza outbreak | Pandemic Influenza Plan |

## 4.5. Service Business Continuity Plan

| Purpose   | Plan   |
|---|--|
| These plans detail the response to interruptions of<br>critical services and action required to maintain services<br>at an acceptable level and return them to business as<br>usual as soon as possible | Service Business Continuity Plan (held<br>locally) |

## 5. Definitions

| Term                              | Definition  |
|-----------------------------------|---|
| Business Continuity               | • Creation and validation of a practiced logistical plan for how an organisation will resume and continue delivery, partially or completely, of interrupted critical functions within a predetermined time after a disaster or disruption   |
| Business Continuity Plan<br>(BCP) | • A documented collection of procedures developed, compiled<br>and maintained in readiness to use in an incident to enable an<br>organisation to continue to deliver its critical services at an<br>acceptable, pre-defined level   |
| Business Impact Analysis<br>(BIA) | <ul> <li>A survey and analysis process to determine the differentiation<br/>between critical and non-critical organisation services/processes</li> <li>A service may be considered critical if the implications cause<br/>damage to the organisation and are regarded as unacceptable</li> </ul>  |
| Command and Control               | • The exercise of authority and direction by a designated Leader<br>in the Incident Coordinating Centre (ICC) over an assigned and<br>attached team in order to efficiently manage an organisations<br>response to a major incident/disruption  |
|                                   | • Functions are performed through an arrangement of personnel,<br>equipment, communications, facilities and procedures employed<br>by the Team Leader in planning, directing, co-ordinating and<br>controlling designed to continue delivery of critical services at<br>acceptable levels and effect an orderly return to Business as<br>Usual operations |

## 6. Related documents

See 4 planning framework

## 7. How this policy will be implemented

- This policy will be published on the Trust's intranet.
- <u>Directors of Operations and</u> Line managers will disseminate this policy to all Trust employees through a line management briefing.

## 8. How this policy will be audited

The Emergency Planning and Business Continuity Manager will carry out an annual audit of all Business Continuity Service Plans to ensure that they are being maintained.

## 9. References

- NHS Emergency Planning guidance
- NHS Operating Framework
- Civil Contingencies Act 2004

## **10. Document control**

| Data of annroyali                                       | 00 May 2019  |   |
|---|--|---|
| Date of approval:                                       | 09 May 2018  |   |
| Next review date:                                       | 09 November 2021   |   |
| This document replaces:                                 | Business Continuity Policy (                                   | CORP-0048-v4  |
| Lead:   | Name   | Title   |
|   | Linda Parsons  | Associate Director of Estates And Facilities Management |
| Members of working party:                               | Name   | Title   |
|   |  |   |
| This document has been                                  | Name   | Title   |
| agreed and accepted by:<br>(Director)                   | Brent Kilmurray  | Chief Operating Officer                                 |
| This document was approved                              | Name of committee/group  | Date  |
| by:   | Emergency and Business<br>Continuity Planning<br>Working Group | 05 March 2018   |
| This document was ratified by:                          | Name of committee/group  | Date  |
|   | Executive Management<br>Team                                   | 09 May 2018   |
| An equality analysis was completed on this document on: | 26 April 2018  |   |
| Amendment details:                                      | V4.1 09 May 2018 – Full rev<br>V4.1 Oct 2020 - Review da       | C   |

#### Appendix 1 - Equality Analysis Screening Form

#### Please note; The Equality Analysis Policy and Equality Analysis Guidance can be found on InTouch on the policies page

| Name of Service area, Directorate/Department i.e. substance misuse, corporate, finance etc.  | Estates and Facilit                    | ies N | lanagement                   |         |                                     |  |
|--|--|-------|------------------------------|---------|-------------------------------------|--|
| Name of responsible person and job title   | Linda Parsons, As                      | socia | te Director of Operational S | Service | 28                                  |  |
| Name of working party, to include any other individuals, agencies or groups involved in this analysis  | N/A                                    |       |                              |         |                                     |  |
| Policy (document/service) name   | Business Continuit                     | y Po  | licy                         |         |                                     |  |
| Is the area being assessed a   | Policy/Strategy                        | ✓     | Service/Business plan        | F       | Project                             |  |
|  | Procedure/Guidan                       | ce    |                              | C       | Code of practice                    |  |
|  | Other – Please sta                     | te    |                              |         |                                     |  |
| Geographical area covered  | Trust-wide                             |       |                              |         |                                     |  |
| Aims and objectives  | To state and comm<br>continuity manage |       |                              | ganisa  | ation and arrangements for business |  |
| Start date of Equality Analysis Screening<br>(This is the date you are asked to write or<br>review the document/service etc.)                        | 26 April 2018                          |       |                              |         |                                     |  |
| End date of Equality Analysis Screening<br>(This is when you have completed the equality<br>analysis and it is ready to go to EMT to be<br>approved) | 26 April 2018                          |       |                              |         |                                     |  |

| Trust Managers  |    |  |          |   |    |
|---|----|--|----------|---|----|
| 2. Will the Policy, Service, Function, S<br>protected characteristic groups bel             |    | Code of practice, Guidance, Project or E   | Business | plan impact negatively on any of the  | 9  |
| Race (including Gypsy and Traveller)  | No | <b>Disability</b> (includes physical,<br>learning, mental health, sensory<br>and medical disabilities)                 | No       | Gender (Men, women and gender neutral etc.)   | No |
| Gender reassignment (Transgender and gender identity)                                       | No | Sexual Orientation (Lesbian, Gay,<br>Bisexual and Heterosexual etc.)   | No       | Age (includes, young people,<br>older people – people of all<br>ages)   | No |
| <b>Religion or Belief</b> (includes faith<br>groups, atheism and philosophical<br>belief's) | No | <b>Pregnancy and Maternity</b><br>(includes pregnancy, women who<br>are breastfeeding and women on<br>maternity leave) | No       | Marriage and Civil<br>Partnership<br>(includes opposite and same<br>sex couples who are married or<br>civil partners) | No |

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| <ol> <li>Have you considered other sources of information such as; legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.?</li> <li>If 'No', why not?</li> </ol>  | Yes | ✓ | No |  |  |  |  |  |  |  |  |  |
|---|-----|---|----|--|--|--|--|--|--|--|--|--|
| <ul> <li>Sources of Information may include:</li> <li>Feedback from equality bodies, Care Quality<br/>Commission, Equality and Human Rights Commission,<br/>etc.</li> <li>Investigation findings</li> <li>Trust Strategic Direction</li> <li>Data collection/analysis</li> <li>National Guidance/Reports</li> <li>Staff grievances</li> <li>Media</li> <li>Community Consultation/Consultation Groups</li> <li>Internal Consultation</li> <li>Research</li> <li>Other (Please state below)</li> </ul> |     |   |    |  |  |  |  |  |  |  |  |  |
| <ul> <li>4. Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the following protected groups?: Race, Disability, Gender, Gender reassignment (Trans), Sexual Orientation (LGB), Religion or Belief, Age, Pregnancy and Maternity or Marriage and Civil Partnership</li> <li>Yes – Please describe the engagement and involvement that has taken place</li> </ul>   |     |   |    |  |  |  |  |  |  |  |  |  |
| No – Please describe future plans that you may have to engage and involve people from different groups  |     |   |    |  |  |  |  |  |  |  |  |  |
| N/A   |     |   |    |  |  |  |  |  |  |  |  |  |

| 5. As part of this equality analysis have any training needs/service needs been identified?  |   |    |               |    |                                       |  |                        |  |  |  |  |
|--|---|----|---------------|----|---------------------------------------|--|------------------------|--|--|--|--|
|  |   |    |               |    |                                       |  |                        |  |  |  |  |
| No   | Please describe the identified training needs/service needs below |    |               |    |                                       |  |                        |  |  |  |  |
|  |   |    |               |    |                                       |  |                        |  |  |  |  |
|  |   |    |               |    |                                       |  |                        |  |  |  |  |
| A training need has been identified for;   |   |    |               |    |                                       |  |                        |  |  |  |  |
|  |   |    |               |    |                                       |  |                        |  |  |  |  |
| Trust sta  | aff   | No | Service users | No | No Contractors or other outs agencies |  | No                     |  |  |  |  |
| Make sure that you have checked the information and that you are comfortable that additional evidence can provided if you are required to do so  |   |    |               |    |                                       |  |                        |  |  |  |  |
| The completed EA has been signed off by:   |   |    |               |    |                                       |  |                        |  |  |  |  |
| You the Policy owner/manager:  |   |    |               |    |                                       |  | Date: 26 April         |  |  |  |  |
| Type name: Linda Parsons, Associate Director of Operational Services   |   |    |               |    |                                       |  | 2018                   |  |  |  |  |
|  |   |    |               |    |                                       |  |                        |  |  |  |  |
| Your reporting (line) manager:   |   |    |               |    |                                       |  |                        |  |  |  |  |
| Type name: Paul Foxton, Acting Director of Operations EFM  |   |    |               |    |                                       |  | Date: 26 April<br>2018 |  |  |  |  |
| If you need further advice or information on equality analysis, the EDHR team host surgeries to support you in this process, to book on and find out more please call: 0191 3336267/3046 |   |    |               |    |                                       |  |                        |  |  |  |  |