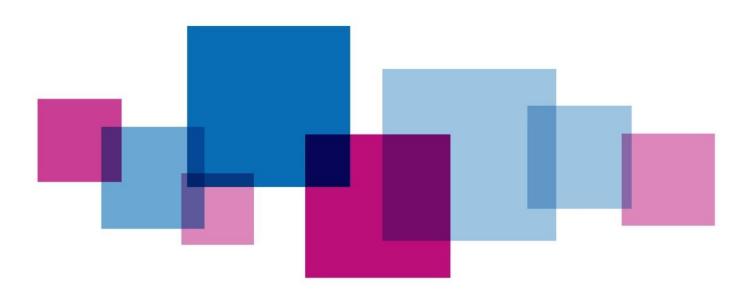


Bristol North Somerset and South Gloucestershire CCG Business Continuity Policy



Please complete the table below:				
To be added by corporate team once policy approved and before placing on website				
Policy ref no:	12			
Responsible Executive Director:	Lisa Manson, Director of Commissioning			
Author and Job Title:	Janette Midda , EPRR Manager			
Date Approved:	February 2020			
Approved by:	Governing Body			
Date of next review:	February 2022			

Policy Review Checklist

	Yes/ No/NA	Supporting information
Has an Equality Impact Assessment Screening been completed?	No	
Has the review taken account of latest Guidance/Legislation?	Yes	
Has legal advice been sought?	No	
Has HR been consulted?	Yes	Corporate Services Business Impact Assessment (BIA)
Have training issues been addressed?	Yes	Consult OD
Are there other HR related issues that need to be considered?	No	
Has the policy been reviewed by Staff Partnership Forum?	No	
Are there financial issues and have they been addressed?	Yes	Budget code allocated for EPRR activity

	Yes/ No/NA	Supporting information
What engagement has there been with patients/members of the public in preparing this policy?	N/A	
Are there linked policies and	Yes	EPRR Policy
procedures?		Incident Response Plan
Has the lead Executive Director approved the policy?	Yes	
Which Committees have assured the policy?		Corporate Policy Group
Has an implementation plan been provided?	No	
How will the policy be shared with		Internal through Stand Up
Will an audit trail demonstrating receipt of policy by staff be required; how will this be done?	No	
Has a DPIA been considered in	No	
regards to this policy?		
Have Data Protection implications have been considered?	Yes	

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Bristol North Somerset and South Gloucestershire Business Continuity Policy

1 Introduction

Business Continuity is a key part of the Bristol, North Somerset and South Gloucestershire (BNSSG) CCG responsibilities as a Category 2 responder for Emergency Preparedness, Resilience & Response (EPRR) requirements.

The CCG is required to deliver an effective Business Continuity Management System (BCMS) in order to secure the best possible outcomes for services and patients. The CCG recognises the potential operational and financial losses associated with a major service disruption, and the importance of maintaining viable recovery strategies. In addition, the CCG, together with the wider Health and Social Care system, must comply with the Civil Contingencies Act (2004) in developing robust business continuity plans.

The Business Continuity Policy defines the framework for implementation of the Business Continuity Management Strategy (BCMS) to minimise the impact of incidents. The Business Continuity Plan and Business Impact Assessments for each Directorate support within the CCG along with a training needs analysis and training attendance records, which sit within the EPRR, work programme.

1.1 BNSSG CCG Values

This Policy takes into account the CCG values by embracing diversity, acting with integrity, work better together by supporting each other, striving for excellence to do the right thing.

2 Purpose and scope

The CCG is committed to ensuring robust and effective Business Continuity Management (BCM) as a key mechanism to restore and deliver continuity of critical services in the event of an incident.



This policy provides a framework for CCG business continuity in the event of an incident, such as loss of people, loss of premises, and loss of process. It also states the procedures for implementing and maintaining a robust BCMS.

The CCG's business continuity plans will be based on the following standards:

- NHS England Core Standards for EPRR.
- ISO 22301:2012 Business Continuity Management Systems -Requirements.
- ISO / PAS 22399: 2007 Guideline for Incident Preparedness and Operational Continuity Management.
- Business Continuity Institute (BCI) Good Practice Guidelines 2018
- Recognised standards of corporate governance.

All BNSSG CCG Directors will ensure that nominated service level business continuity leads maintain business continuity management, including Business Continuity Plans (BCP), for prioritised activities within their area of responsibility. This will include assurance from external service providers.

All staff must be aware of the Business Continuity Plan (BCP) that affects their business areas and their individual role following invocation.

The CCG will implement a programme of BCMS training, exercise, maintenance and review to ensure the relevance of the BCMS.

In addition, the CCG will provide assurance to NHS England on progress with the BCMS following lessons identified and learned after incidents through the debriefing process.

3 Duties – legal framework for this policy

This policy has been written in accordance with the following requirements of the CCG:

- ISO 22301:2012, the International Standard for Business Continuity Management.
- PAS 22399:2007 Guidelines for Incident Preparedness and Operational Continuity Management
- NHS England Business Continuity Management Framework
- Civil Contingencies Act 2004; to have business continuity plans that ensure the organisation can deliver normal business during an emergency response.

It is aligned with, and meets the requirements of, NHS England Business Continuity Policy to ensure the CCG is able to support NHS England in discharging its functions locally.

Under the Emergency Preparedness, Resilience and Response Framework set out by NHS England the CCG is responsible for:



- Ensuring contracts with all commissioned provider organisations (including independent and third sector) contain relevant EPRR elements, including business continuity
- Monitoring compliance by each commissioned provider organisation with their contractual obligations in respect of EPRR and with applicable Core Standards
- Ensuring robust escalation procedures are in place so that if a commissioned provider has an incident the provider can inform the CCG 24/7
- Ensuring effective processes are in place for the CCG to properly prepare for and rehearse incident response arrangements with local partners and providers
- Being represented at the Local Health Resilience Partnership (LHRP), either on their own behalf or through a nominated lead CCG representative
- Providing a route of escalation for the LHRP in respect of commissioned provider EPRR preparedness
- Supporting NHS England in discharging its EPRR functions and duties locally, including supporting health economy tactical coordination during incidents (Alert Level 2-4)
- Fulfilling the duties of a Category 2 responder under the CCA 2004 and the requirements in respect of emergencies within the NHS Act 2006 (as amended).

4 Responsibilities and Accountabilities

4.1 Accountable Emergency Officer (AEO)

The Accountable Emergency Officer is the Board Level Director responsible for EPRR. They have executive authority and responsibility for ensuring that the organisation complies with legal and policy requirements and that the organisation is prepared to respond to an incident should this occur.

The Accountable Emergency Officer has responsibility for:

- Promoting business continuity culture within the CCG.
- Ensuring a robust BCMS is developed and reviewed.
- Provision of appropriate levels of resource and budget to achieve the required level of business continuity in response to incidents.
- Ensuring that appropriately experienced and trained officers and senior managers are available for both strategic and tactical support (respectively) to support an incident in line with the CCG's Incident Response Plan
- Ensuring information governance standards continue to be applied to data and information during an incident.
- Providing assurance to NHS England through the EPRR core standards selfassessment regular assurance meetings and engagement with the Local Health Resilience Partnership
- Appointing a nominated lead for implementation of business continuity plans.
- Ensuring the CCG is able to support NHS England in discharging its EPRR functions and duties locally.



4.2 Business Continuity nominated lead

The CCG's Business Continuity and EPRR nominated leads will be closely aligned, or executed as part of one job role. The business continuity nominated lead will support the Accountable Emergency Officer through:

- Developing, maintaining and reviewing this Business Continuity Policy and processes
- Development, exercise, maintenance and review of the relevant Business Impact Analysis (BIA) and Business Continuity Plans (BCPs).
- The management and recovery of relevant business continuity incidents under the command and control of the nominated Incident Response Manager
- Liaising with the NHS England Area Team BCMS.
- Carrying out a training needs analysis of all staff and delivering internal training for on-call staff
- Ensuring training and exercising are designed and delivered and that attendance records are maintained
- Making sure the BCP is tested, reviewed, updated and communicated at least annually
- Produce a report of any incident that leads to invoking BCPs and as a consequence sharing learning and updating plans as necessary
- Involving stakeholders such as NHSPS in any training and exercising to test resilience.

4.3 BNSSG CCG managers

All Managers are responsible for:

- Developing an awareness of BCM within their area of responsibility including undertaking business impact assessments and developing plans to mitigate risks to the service.
- Reporting in accordance with the relevant Incident Reporting and Management System for any business continuity incident.
- Understanding and contributing to business continuity incident and recovery plans within their area of responsibility, including the specific roles and responsibilities allocated.
- Developing business continuity standards within their own area of responsibility with the support of the Business Continuity nominated lead
- Releasing staff to participate in business continuity exercises and training as appropriate

4.4 BNSSG Staff

Staff are responsible for:

- Ensure an awareness of business continuity within your area of work including an understanding of plans and processes and mitigation to ensure critical services are maintained.
- Reporting in accordance with the relevant Incident Reporting and Management System for any business continuity incident.



- Understanding and contributing to business continuity (BC) incident and recovery plans within your area.
- Follow communications from CCG Communications Team during and following any BC event.

5 Definitions/explanations of terms used

Board means the Chair, Executive Members and Non-Executive Members of the CCG Governing Body collectively.

Budget means a resource, expressed in financial terms, proposed by the Board for the purpose of carrying out, for a specific period, any or all of the functions of NHS England.

Business Continuity means capability of the organisation to continue delivery of products or services at acceptable predefined levels following a disruptive incident.

Business Continuity Management (BCM) means a holistic management process that identifies potential threats to an organisation and the impacts to business operations those threats, if realised, might cause, and which provides a framework for building organisational resilience with the capability of an effective response that safeguards the interests of its key stakeholders, reputation, brand and value-creating activities.

Business Continuity Management System (BCMS) means part of the overall management system that establishes, implements, operates, monitors, reviews, maintains and improves business continuity.

NOTE: The management system includes organisational structure, policies, planning activities, responsibilities, procedures, processes and resources.

Business Continuity Plan (BCP) means documented procedures that guide organisations to respond, recover, resume, and restore to a pre-defined level of operation following disruption.

NOTE: Typically, this covers resources, services and activities required to ensure the continuity of critical business functions.

Business Continuity Programme means an ongoing management and governance process supported by top management and appropriately resourced to implement and maintain business continuity management.

Business Impact Analysis (BIA) means a process of analysing activities and the effect that a business disruption might have upon them.



Business Continuity Audit is a formalised method evaluating how business continuity processes are managed. The goal of an audit is to determine whether the plan is effective and in line with the organisation's objectives.

Incident means a situation that might be, or could lead to, a disruption, loss, emergency or crisis.

National Director means an Executive Member or other Officer of NHS England who reports directly to the Chief Executive.

Nominated Officer means an Officer charged with the responsibility for discharging a specific task within Business Continuity

Critical Activities means activities to which priority must be given following an incident in order to mitigate impacts.

NOTE: Terms in common use to describe activities within this group include: critical, essential, vital, urgent and key.

Risk Assessment means the overall process of risk identification, risk analysis and risk evaluation.

Incident Response Structure

The Incident Response Structure is defined within the BCP and resourced to ensure procedures facilitate response and recovery from an incident. This should include the following:

Incident Reporting and Management System

The BCP details procedures for incident reporting and management to facilitate effective command and control.

- Incident analysis, management and recovery.

 The Business Continuity nominated lead will support and provide guidance to the designated Business Continuity Management Team, as detailed in the BCP.
 - Incident Control Centre.

Facilities have been identified in all BNSSG CCGs offices to enable effective management of an incident. The Incident Director will coordinate operations from the designated location. The Incident Director and business continuity nominated leads will retain copies of the BCP for effective incident management.

6 Business Continuity Objectives

The business continuity objectives of the CCG are to:

1. Provide a framework for the development of a robust and consistent BCMS.



- 2. Identify and mitigate business continuity risk.
- **3.** Ensure that the BCMS provides planning, processes, training and continuous improvement to manage operational incidents.
- **4.** Enable the successful delivery of the Business Continuity Plan.
- **5.** Promote and maintain the reputational integrity of the CCG.
- 6. Meet the requirements of the Civil Contingencies Act (2004) and align to International Organization for Standardization (ISO) business continuity requirements and guidelines.
- **7.** Assure the Governing Body that Business Continuity plans are fit for purpose, and meet the necessary requirements.

The CCG's Emergency Accountable Officer has responsibility and accountability for the BCMS. This will provide assurance that the BCMS is aligned to the CCG's strategic objectives.

The following table shows the key risks that have been identified to business continuity within the organisation referencing National and Community Risk Registers.

	Risk scenarios	Likelihood	Impact	Score
1	Flu / health pandemic / infectious disease leading to 40-50% of staff in critical services being unable to work for 1 month+	4	5	20
2	Terrorist incident (national event)	4	4	16
3	Terrorist incident (affecting local infrastructure)	2	5	10
4	Loss of third party service (BT / IT provider)	2	5	10
5	Malicious or accidental cyber-attack / virus taking network down for 1 week+	2	5	10
6	Period of severe adverse weather such as snow, storm, heat wave or flooding	3	4	12
7	Fuel shortage for 4-5 days+	2	4	8
8	Terrorist incident (directly upon organisation)	1	5	5
9	Loss of one of the main buildings (any cause)	2	3	6
10	Loss of servers due to flooding or fire	2	3	6
11	Loss of a utility such as gas or water	2	3	6
12	Loss of a significant number of staff for a prolonged period of time due to Industrial action / Pandemic Flu / Extreme weather	2	3	6
13	Violent civil unrest / disturbance or occupation of the building	1	4	4

Following Directorate Business Impact Analysis critical services have been identified which, if withdrawn, would have a major impact on the public or would potentially cause the CCG to stop functioning within a very short timeframe or which would have a significant impact on patients.

Directorates

- Corporate to include Chief Executive Office
- Transformation
- Finance & Business Intelligence
- Commissioning
- Nursing & Quality
- Medical: Clinical Effectiveness
- Medical: Primary Care & Commissioning

The table below outlines critical services

Category	Impact	Recovery Timescale
Category A : Critical	Loss of service would immediately: Directly endanger life; Endanger the safety of those individuals for whom the CCG has a legal responsibility; Prevent the operation of another service in this category; Seriously affect the CCG's finances or	This service must continue to be provided. This group will include Services/ Functions that usually provide a full service 7 days a week, 365 days a year.
	accuracy of critical records; Prevent communication of vital information;	
Category B: High Priority Or Medium Priority	High Priority: Loss of service would immediately: Prevent a risk to Health and Safety; Prevent the CCG fulfilling a statutory obligation; Prevent the operation of another service in this category; Would seriously adversely affect the CCG's reputation? Medium Priority: Loss of service would lead to: Serious knock on effects for the operation of a Critical or High Priority Service; The CCG's reputation being adversely affected.	This service must be resumed within 3 calendar days. Services included in this group are mainly those that provide a reduced service at weekends and during holiday periods. This service must be resumed within 7 calendar days. Services included in this group will include those that normally close during

Category C: Low Priority	Loss of this service would lead to: Potential knock on effect in disrupting the activities and functions of other	This service should be resumed as soon as practicable.
	services within the CCG but no immediate impact upon the provision of Critical or High Priority services.	This includes all other service areas that are required in order for the CCG to go about its usual business.

BNSSG CCG Critical Services / Functions

	DNSSG CCG Chilical Services / Functions				
Category Type	Category	Activities/ Services/ Functions			
A:	Critical Function Must Continue	Commissioning: Strategic and Tactical on-call rota and support Exceptional Funding Urgent Integration Care Team			
		 Communications: Coordinate communications in OPEL 3 / 4, Critical Incident or Level 1-4 Major Incident Warning and informing the public and stakeholders Media liaison and management Managing staff text alert system 			
		 Corporate: IT provision and Support via CSU (Service Desk) N3 Connection via CSU Telephone connections (Digital and Analogue) via CSU 			
		 Clinical Effectiveness: Support to system (GP practices / Community pharmacies) under certain adverse conditions / incidents / e.g. bad weather 			
		 Finance & Business Intelligence: Payroll (including payments to HMRC) Payment of suppliers (including Primary Care) Ledger maintenance VAT returns 			
		 Nursing & Quality: Complaints, Customer Service, Contact Us portal Safeguarding Adults and Children Outbreak Management; Infection Prevention Control Continuing Health Care (CHC) 			

Category	Category	Activities/ Services/ Functions			
Type					
		Transformation:			
		Transforming Care Partnership Management			
		Primary Care & Commissioning			
		Referral Support Service			
B:	High Priority/ Medium Priority	Commissioning: EPPR: Emergency Preparedness, Resilience and			
	(Must continue within	Response			
	3 to 7 days)	Contracts: acute / non-acute / mental health / primary			
		care			
		Communications:			
		 Updating and maintaining public facing website Updating and maintaining public facing social 			
		 Updating and maintaining public facing social media channels 			
		Updating and maintaining staff intranet			
		 Updating, warning and informing primary care staff and GPs 			
		Stall and Of 3			
		Corporate: Freedom of Information requests			
		Clinical Effectiveness:			
		Develop commissioning policies for the CCG			
		IFR requests (Pharmacy input) Advice & guidence / gueries / (formular) website Advice & guidence / gueries / (formular) website			
		 Advice & guidance / queries / (formulary website & phone / emails) 			
		• Invoices			
		Responding to FOIs and complaintsDecision making (DTC) / Formulary			
		Policy / guideline development			
		Directorate advisory role to commissioning			
		processProgression of control centre work			
		PGDs (updating & review)			
		Practice work			
		Response to Safety alertsFinancial monitoring			
		Funding bids			
		Finance & Business Intelligence: • Financial reporting			
		- Internal (reporting to committees, budget			
		reporting, audit)			
		External (NHSE, audit)Support for business cases			
		Data Warehouse (BI)			
		Area Directorates:			
		Communications with other Directorates, partner			

Category Type	Category	Activities/ Services/ Functions
Туре		
		 agencies, practices, providers, stakeholders Contribution to system calls Nursing & Quality: Quality monitoring of providers, HCAI Serious Incidents Monitoring Primary Care Monitoring Transformation: Transformation activities supporting operational change Digital Development Strategy development Primary Care & Commissioning Working closely with the funding team regarding prior approval queries and policy issues ensuring the referral service approves or rejects applications correctly which directly impact on
C:	Posumo as soon as	CCG funding. Communications:
C:	Resume as soon as possible	 Analysing and responding to feedback from patients and the public
		 Corporate: Governing Body Meetings Travel Bookings (BAU and Access to bookings in the event of an Incident elsewhere) Postal Services to South Plaza
		Clinical Effectiveness: Delivering projects centred around reducing unwarranted variation and maximising value Providing support to CCG teams to identify unwarranted variation; focus on outcomes, consider how they will be evaluated, use evidence to support decision-making Whole Directorate Advisory role to commissioning process
		Finance & Business Intelligence : Responding to ad-hoc requests Internal External
		 Area Directorates Co-ordination of LLG and ALG meetings, PPIF and PPG networks Primary Care & Commissioning Ensure delivery of Primary Care within

Category Type	Category	Activities/ Services/ Functions
		 BNSSG Monitoring quality services of Primary Care Working with Primary Care contract team Oversee Primary Care programme of work focussing on improvement & sustainability of practices Hosting CEPN and ensure delivery of training meets NHS England and STP priorities Assist Primary Care in the development of NHS England services

7 Financial Arrangements

The finance representative within the BCMS is the Chief Finance Officer. The funding required to cover any Business Continuity eventualities will be made available from the CCGs financial allocation from the Department of Health.

A unique cost centre for Emergency Planning exists within the CCGs coding structures to record any unexpected costs related to a business continuity issue.

8 Training requirements

The business continuity nominated lead will identify levels of training and awareness facilitation for on-call and other relevant staff to ensure that a strong business continuity culture is embedded within the CCG. This will improve the organisation's resilience to the effects of incidents. The effectiveness of training and awareness will be tested through exercises on a regular basis and is timetabled in the EPRR Work Programme:

- Regular briefings to
 - Senior Leadership Team
 - o On call team
 - All staff through internal communications
- E-learning package to promote staff awareness.

9 Equality Impact Assessment

This document forms part of CCG's commitment to create a positive culture of respect for all staff and service users. The intention is to identify, remove or minimise



discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice.

As part of the development of this document an initial equality impact screening has been undertaken to determine any relevance to any of the protected characteristics. No negative equality impact has been identified at this stage. However the document identifies a link between this policy and the learning & development policy, as this policy highlights the important role that learning & development has to play in embedding a strong business continuity culture within the CCG.

The equality impact screening further identifies that embedding a strong business continuity culture, shall better equip the CCG in discharging its compliance with the public sector equality duties.

10 Implementation and Monitoring Compliance and Effectiveness

Compliance

Compliance with the policies and procedures laid down in this document will be monitored by post incident response debrief process. Lessons learned will inform policy change and updates cascaded to staff.

The Business Continuity Nominated Lead is responsible for the monitoring, revision and updating of this document.

Governance

- BNSSG EPRR Oversight Delivery Group will confirm assurance for the BC Policy and BC Plan.
- NHS England/Improvement will confirm assurance through NHS EI EPRR Core Standards Annual Assurance
- Accountable Emergency Officer will recommend the Policy to the CCG's Governing Body.

11 Countering Fraud

The CCG is committed to reducing fraud in the NHS to a minimum, keeping it at that level and putting funds stolen through fraud back into patient care. Therefore, we have given consideration to fraud and corruption that may occur in this area and our responses to these acts during the development of this policy document.

12 References, acknowledgements and associated documents

12.1 Associated documents:



- BNSSG CCG EPRR Policy
- BNSSG CCG Business Continuity Plan
- BNSSG CCG Directorate Business Impact Assessments
- EPRR Work Programme; Training and Attendance Records

12.2 Reference documents

- Civil Contingencies Act 2004.
- ISO 22301:2012 Business Continuity Management Systems Requirements.
- ISO 22313:2012 Business Continuity Management Systems Guidance.
- ISO / PAS 22399:2007 Guideline for Incident Preparedness and Operational Continuity Management.
- NHS England Business Continuity Framework.
- NHS England Core Standards for Emergency Preparedness, Resilience and Response (EPRR).
- NHS England Business Continuity Management Toolkit.
- NHS England Risk Management Policy and Procedure.
- PAS 2015:2010 Framework for Health Services Resilience.
- LHRP Concept of Operations
- BNSSG winter surge and escalation plans

13 Appendices

13.1 Implementation Plan

Target Group	Implementation or Training objective	Method	Lead	Target start date	Target End date	Resource Required
Staff	Policy awareness	Through Stand Up and Voice BNSSG CCG Intranet	EPRR Manager	January 2020	January 2020	None

