

Business Continuity Management Policy and Procedure

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1. Document Control

Please note the following table provides important information to populate the Policy Stat system but will not appear in this format once uploaded to the system.

Policy Site (delete as appropriate)	Clinical/Corporate/Human Resources		
Policy Area (delete as appropriate)	<ul style="list-style-type: none"> Clinical Governance/Infection Prevention and Control/Medicines Management/Safeguarding Finance/Information Governance/Operational Services/Health and Safety/IM&T/Risk Management/Communications Learning and Development/Recruitment 		
Dissemination Date		Implementation Date	
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Policy Owner (the “owner” of a policy is the office, department, division responsible for carrying out or oversight of that policy)	Name	Role
	Prasad Godbole	Accountable Emergency Officer
Policy Editor (who wrote/edited the policy)	Name	Role
	Gilbert Chimungu	Business Continuity and EPRR Manager
Policy Approver (which Board/committee/group has approved this policy – in line with policy for approval of policies)	Executive Team	
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Document Classification

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1 . Business Continuity Management Policy Statement

Pioneer Healthcare is strategically aligned with current NHS policy, particularly focused on the delivery of non-acute care components out of hospitals and closer to home, and the trend towards outsourcing and outcome-based commissioning.

We provide care for patients who require clinical input from Elective Care and urgent care services coordinated by the NHS 111 Centre. If these services were disrupted and could not be delivered for a period of time, this could have significant consequences for patients and the wider Organisation.

The criticality and dependency of these services require the Leadership Team and Board to be accountable and demonstrate leadership and commitment in relation to Business Continuity (BC) to support our wider strategic goals and to support staff in their Business Continuity roles and responsibilities.

Our Business Continuity objectives align and support the achievement of our strategic goals in order to achieve our Business Continuity objectives, we continue to effectively manage, monitor and maintain our Business Continuity Management System (Business Continuity Management System) which is currently aligned with ISO 22301 an internationally recognised standard that determines the capability of an organisation to continue to deliver services and products during a disruption. It utilises a Business Continuity Management System (BCMS) and a documented business continuity plan to enable businesses to respond effectively to disruption and Business Continuity Institute.

Business continuity management system requirements.

As an NHS Service Provider Contracted organisation, we are committed to the development, maintenance, and continual improvement of the Business Continuity Management System that follows the principles of ISO 22301 (International Standard for Business Continuity) and the Department of Health PAS 2015 (Framework for Health Services Resilience). We are also committed to continually satisfying the requirements set out under the Civil Contingencies Act (2004), NHS organizations must show that they can deal with incidents while maintaining services to patients by having effective Business Continuity arrangements in place.

To ensure that our Business Continuity Management System and Business Continuity Management arrangements are implemented, operating effectively, and demonstrating continual improvement, Pioneer Healthcare is committed to determining and providing the necessary resources required to minimise the impact of potential business disruptions and to effectively respond to the evolving landscape of internal and external threats which we face.

We will ensure that we effectively communicate the content of this policy to our staff , Suppliers and contractors and any associated interested parties as appropriate. Our Business Continuity Management System will be continually reviewed to ensure its effectiveness is maintained – this will include but is not limited to the following:

- Business Continuity Management System Internal Audit Programme to review the effectiveness of the Business Continuity Management System and identify corrective actions
- Appropriate metrics and KPIs to continually monitor and measure Business Continuity Management System performance
- Implementation of key outputs identified from exercises, tests and management review activities
- A review of all policies, plans, procedures and standards and procedures within the Business Continuity Management System at appropriately timed intervals

1.1. Target Audience

- All Staff
- Contractor
- Suppliers

1.3. Consultation

- Emergency Planning Group
- Local Health Resilience Partners (LHRP)
- NHSE Midlands

1.4. Resource implication

It is expected that this policy will be delivered within the existing resources of Pioneer Healthcare

1.4. Dissemination

- Group Website
- Staff intranet
- S Drive

1.5. Related Policies

- Emergency Preparedness, Resilience and Response (EPRR) Policy
- Risk Management Policy
- Information and Security Policy

2. Diversity, Equality and Inclusion

Equality Statement

As part of our ongoing commitment to promoting equality, valuing diversity, and protecting human rights, Totally is committed to eliminating discrimination against any individual (individual means employees, patients, services users, and carers) on the grounds of gender, gender reassignment, disability, age, race, ethnicity, sexual orientation, socioeconomic status, language, religion or beliefs, marriage or civil partnerships, pregnancy, and maternity, appearance, nationality, or culture.

Please note: This is not a replacement for ensuring that you understand the detail of the policy document. It simply acts to remind you of the essential steps you must be taken to fulfil the needs of the organisation in relation to this

3. Definitions

Business Continuity (BC)	The capability of the organization to continue delivery of products or services at acceptable pre-defined levels following disruptive incident
Business Continuity Management (BCM) Lifecycle	The ongoing cycle of activities of the business continuity programme, that build organizational resilience.
Business continuity management	A holistic management process that identifies potential threats to an organization and the impacts to business operations those threats, if realized, might cause, and which provides a framework for building organizational resilience with the capability of an effective response that safeguards the interests of its key stakeholders, reputation, brand and value-creating activities
Business continuity plan	Documented procedures that guide organizations to respond, recover, resume, and restore to a pre-defined (BCP) level of operation following disruption.
Business Impact Analysis (BIA)	The process of analysing activities and the effect that a business disruption might have upon them.
Business continuity programme	The ongoing management and governance process supported by top management and appropriately resourced to implement and maintain business continuity
Civil Contingency Act 2004	The Civil Contingencies Act establishes a new legislative framework for civil protection in the United Kingdom. It imposes a clear set of roles and responsibilities on those organisations with a role to play in preparing for and responding to emergencies.
Embedding	Embedding is the Professional Practice that defines how to integrate business continuity management.

4. Introduction

Business continuity management applies to all organisations, regardless of size, industry or nature of business. Floods, cyber-attacks, IT breakdowns, supply chain issues, or loss of skilled staff are just some of the possible threats to the smooth running of an organisation. If not addressed effectively, they can cause disruption or even business failure. Consistent planning for what to do when disaster strikes means a more effective response and a quicker recovery

NHS organisations are identified under the Civil Contingencies Act (CCA) 2004 as ‘category one’ or ‘category two’ responders. Category 1 responders are those organisations at the core of an emergency response and are subject to the full set of civil protection duties. Therefore, these organisations have a legal duty to develop robust business continuity management arrangements, which will help them to maintain their services, if there is a major emergency or disruption. However, the EPRR Framework and NHS EPRR Core Standards both last revised 2022, requires all NHS providers and commissioners to have suitable business continuity arrangements in place. This responsibility extends to services provided through partnerships or other forms of contractual arrangement.

Therefore, Pioneer Healthcare needs to be able to continue to deliver critical aspects of its day-to-day functions in the event of an emergency, if the impact on the health community it serves is to be kept to a minimum.

The Business Continuity Management System looks at the totality of the Pioneer Healthcare operations and services which must function for critical service delivery to continue. Awareness of the changes to the business environment is necessary to allow planning to be reviewed and updated as the strategic direction changes.

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This document details Pioneer Healthcare main Business Continuity procedure and overarching framework for response and recovery in the event of an incident and should be read in conjunction with the EPRR Policy, and Risk Management Policy.

Benchmark

- ISO 22301
- Business Continuity Institute

Embedding business continuity

Embedding activities is not unique to business continuity, therefore business continuity training will be part of personal inductions to all new starters like other management disciplines are also embedded in a similar way and business continuity training program to individuals or teams that will be involved in response teams.

This will Integrate business continuity awareness and practice into Group as business-as-usual activities and organisational culture. This will be collaborative approach between management disciplines to improve overall business resilience.

4.2 Purpose

The purpose of this Business Continuity Management Policy is to provide clear and consistent information to employees, contractors, consultants, agency staff, and Board. The organisational intent and importance of business continuity as a mechanism to achieve our business continuity objectives which contributes towards the achievement of our strategic goals and CARE values.

This overarching policy forms part of our Business Continuity Management System documented information set as part of our alignment with Civil Contingencies Act (2004) and Business continuity arrangements

4.3 Business Continuity Management Objectives

Our Business Continuity objectives have been established in alignment with our strategic goals to demonstrate how business continuity can contribute towards our achievement.

To support the delivery of our prioritised activities and services in the event of potential business disruption events by ensuring that plans, procedures and incident response mechanisms are implemented and working effectively to ensure we can safely and securely recover to minimise the impact on service delivery

4.4 Strategic Aims

Pioneer Healthcare is strategically aligned with current NHS policy, particularly focused on the delivery of non-acute care components out of hospitals and closer to home, and trend towards outsourcing and outcome-based commissioning. Our active buy-and-build approach ensures that we have the skills and expertise in house to deliver against the needs of our customers

- Deliver services and solutions which improve healthcare across the UK and in Ireland.
- Become a partner of choice in healthcare through a focus on quality, safety and efficiency.
- Ensure our operations are efficient and sustainable, adding value for commissioners and shareholders alike.
- Invest in our current and future workforce to become a great place to work and an employer of choice.
- Identify opportunities to grow both organically and through acquisition

5. Responsibilities

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Board	<ul style="list-style-type: none"> • The Board is responsible for monitoring the organisation Business Continuity arrangements and associated governance to ensure compliance with the regulatory framework and legislation. • Ensure that adequate resources are made available to enable the organisation to meet the requirements of Emergency Preparedness, Resilience and Response the Business Continuity Management System.
Executive	<ul style="list-style-type: none"> • Overall responsibility for the provision Emergency Preparedness, Resilience and Response of Business Continuity leadership and is accountable to the Board • Ensuring systems are in place to facilitate an effective major incident response.
Accountable Emergency Planning officer	<ul style="list-style-type: none"> • Will be responsible for ensuring that Organisation-wide Business Continuity Plans are developed, managed and maintained.
Information Governance Manager	<ul style="list-style-type: none"> • Act as point of contact for the ICO and for all IG related incidents/queries • Investigate data breaches • Review data sharing agreements and data protection impact assessments • Amend and update related policies
Business Continuity and EPRR Manager	<ul style="list-style-type: none"> • Facilitate and audit the development, implementation, training and exercising of the organisation Business Continuity programme, policies, plans and procedures • Conduct risk assessments on current and future threats identified by horizon scanning and intelligence gathering • Liaise with external agencies and NHS partners as required • Provide specialist advice and guidance in respect of BCM issues
Business Continuity Leads	<ul style="list-style-type: none"> • Responsible for the coordination and documenting of BC arrangements within their service area(s) which include Business Impact Analysis (BIAs), Risk Assessments (RAs) and BCPs. • Developing, maintaining and reviewing their BIAs and BCPs at least annually ensuring that any significant service changes or risks are reflected in plans Coordinating the organization's BCM program • Facilitation and co-ordination of BCP plans throughout the Division • Implement, review and maintain division Business Impact Analysis and Business Continuity plans on behalf of the plan owner • Conduct and participate in exercises • Communicate changes that may impact the business continuity programme
Heads of Services	<ul style="list-style-type: none"> • Be accountable and responsible for BCPs within their individual Services areas and provide strategic leadership in the event of BCP invocation. • Ensuring all their staff are familiar with their Service Business Continuity arrangements and BCPs • Implementing and supporting the Business Continuity Management policy
All Staff	<ul style="list-style-type: none"> • Be aware of their BCP and where to access it on site • Ensure all details are kept current and in date • Attend recommended training & exercising sessions. • Assist in the development of BIAs and BCP's.

	<ul style="list-style-type: none"> • Take part in the BCP activation process. • During periods of disruption, fulfil duties to manage the disruption in order to meet the requirements of the Service and organisation BCP's • Engage in debriefs and the continuous improvement process • Action any lessons learnt
External Suppliers	External suppliers to the organisation are required to have business continuity arrangements in place. In the development or review of contracts and service level agreements, provision for business continuity arrangements should be in place

6. Leadership and commitment to the business continuity policy and programme

The following methods will be used to show that leadership is committed to achieve Business Continuity program:

- Recognising and communicating the requirement for business continuity as a key management discipline in building and enhancing Pioneer Healthcare resilience.
- Ensuring that the business continuity policy and programme is aligned to Pioneer Healthcare objectives.
- Ensuring that the business continuity programme delivers its expected outcomes and meets the requirements stated in the policy.
- Maintaining support for the business continuity policy and programme.
- Ensuring staff undertake business continuity programme activities are well trained.
- Providing the resources required to implement the policy through the ongoing cycle of activities in the business continuity programme
- Business continuity related roles and responsibilities should be included in job descriptions and performance plans
- Directing and supporting continual improvement of the business continuity programme for example, through reviews and self-assessments.
- Providing direction and guidance to embed business continuity into the Pioneer Healthcare business as usual routines.

Protracted incident

In addition to the roles and responsibilities outlined. In a protracted incident, additional roles may be required to support the operations and delivery of the incident response. The roles will be based on a collapsible hierarchy that can be scaled to enable sufficient capacity to manage the response based on the demand and scale of the incident. It is likely that a number of people will be required to undertake each role, on a shift basis.

The decision on the staffing resource requirements to respond to an incident is the responsibility of the AEO in consultation with the Strategic Incident Director. Staff from across Pioneer Healthcare may be used to supplement key roles where feasible.

Additional alternative resourcing options may be utilised where demand within a response exceeds the availability of Pioneer Healthcare resources. The decision to either redeploy resources internally or bring in external resources should be made by the AEO and signed off by the Executive.

6.2 Risk Process

Risk Assessment

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Risks facing the organisation will be identified from several sources, not limited to but including:

- Risk arising out of the delivery of day-to-day work-related tasks or activities.
- The review of strategic or operational ambitions.
- As a result of an incident.
- The outcome of an investigation following a specific complaint or claim.
- Assessment of impacts on staff
- Direct feedback from a patient or another source.
- As a result of health and safety inspections/assessments, external review, or audit reports.
- National requirements and guidance.

Community Risk Register

In accordance with CCA (2004) Local Resilience Forum (LRF) produces a Community Risk Register which identifies high risks for the county. Pioneer Healthcare will utilise the Community Risk Register to prioritise and schedule emergency preparedness activities and contribute to this as appropriate, maintaining a risk register specific to Pioneer Healthcare risk.

Training and Exercising

Training

It is important that staff fully understand the need for Business Continuity Management, as well as their role in response to any invocation. Therefore, training staff that have a response role for incidents is of fundamental importance. If staff are to respond to an incident in a safe and effective manner, they require the tools and skills to do so in line with their assigned role.

Business Continuity training will be mandatory to Business Continuity Leads and to all new starters as part of personal induction, like other management disciplines. Training will also be provided to any member of the organisation who is likely to be involved in the management of any incident

Exercising

Pioneer Healthcare business continuity and incident management arrangements cannot be considered reliable unless exercised and regularly maintained. Exercises will be scheduled and programmed into a series of events and activities that will allow Pioneer to improve capability, and the frequency of exercising is determined by Civil Contingency Act 2004

Type of exercise	Minimum frequency
Communication	Every six months: to test the ability of the organisation to contact key staff and other NHS and partner organisations, 24/7. This will include testing telephone, email and other communications methods in use, both during the in-hours period and the out-of-hours period on a rotational basis and should be unannounced
Tabletop	Every 12 months: The tabletop exercise brings together relevant staff, and partners as required, to discuss the response, or specific element of a response, to an incident.

6.3 Monitoring Compliance and Effectiveness

Monitoring of the programme will be via the Business Continuity Group with overall responsibility held by the

Accountable Emergency Officer. Business continuity will be a standing item on the agenda of the above group, with an update report delivered by the business continuity leads.

Business Continuity performance measures

- Percentage of annual review completion.
- Status of BIA review, by the services.
- Status of scheduled business continuity plan updates.
- Completion of business continuity plans exercised within set time frames

Review of document

This policy will be reviewed in full every two years by the Business Continuity and EPRR Manager and approved by the Emergency Planning Group.

Frequency of reviewing Business Impact Analysis and Business Continuity Plan.

Interim reviews where necessary will take place before the full review period and be approved at Emergency Planning Group. The frequency of review carried out will depend on the nature and expected pace of change in:

- Changes to services.
- Change of contact details
- Changes to legal or regulatory requirements
- Lessons learned from any Exercise and incidents where Business Continuity Plans have been invoked
- A change in the Pioneer Healthcare approach to risk which can be prompted by an incident or change in operating environment conditions.
- Changes to Pioneer Healthcare organisation structure, services (including those that are outsourced), infrastructure, processes or activities.
- A review or audit.
- A real incident, where lessons learned can be incorporated.
- Changes or updates in the business continuity management lifecycle, such as the BIA or continuity solution

Business Continuity Audit

Business Continuity Audit will be conducted to provide a formal, impartial review process that measures the organisations business continuity programme against a pre-agreed standard.

Audits will be performed to validate the organisation is compliance with business policy and programme and the audit scope will include, governance, compliance.

Internal audits will be conducted annually to identify areas for improvement, as well as identifying the appropriate resource and budget required to maintain a healthy BCMS and external audits will be undertaken every 3 years. The audit will be undertaken in agreement with organisation audit team/programme

6.4 Incident Declaration

A Business Continuity incident will be declared by the On-Call Director when any of the following conditions are arising:

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- If the incident has the potential to affect people external to the organisation or if the incident is internal but has significant and/or widespread impacts on the organisation then the organisation Major Incident Plan should be activated.
- Any interruption which causes disruption to the organisation business as usual – any incident arising which threatens personnel, patients, or patient services, premises from which services are delivered / office buildings or the operational procedures of Totally
- Access to, or the ability to operate normal services from a Pioneer Healthcare and NHS site is either fully or partially interrupted due to an incident occurring.
- The Pioneer Healthcare IT systems are interrupted causing substantial or significant system failure and therefore disruption to either a team or a wider group of users.

The On-Call Director, acting as Gold (Strategic) Commander should delegate to the Operational On-Call Manager (Silver / Tactical Commander) to establish and set up a control room as appropriate.

If the incident can be managed at a local service or Clinical/Corporate Service level, the appropriate Heads of Clinical Services / Corporate Service Director will refer to their own Business Continuity Plans (this will be managed by the On-Call Director and Manager during the Out of Hours period). The call-out cascade is at Appendix

ALL REPORTS, DECISIONS AND ACTIONS MUST BE RECORDED

Activation of the Procedure

The member of staff discovering an incident is responsible for the initial reporting of the incident to the Service Manager in the first instance. In the event of this manager being unavailable the person deputising for them or the Tactical On-Call should be alerted.

Normal Working Hours

In the event of an incident which may present a risk to the delivery of services, the Service Manager should invoke the Service BCP and escalate to Head of Service/Service Director. If appropriate the Accountable Emergency Officer will declare a Major Incident or Standby to enable an effective response and the involvement of partners if required.

Out of Hours

In the event of an incident which may present a risk to the delivery of services, the Service Manager should invoke the Service BCP and escalate to the On-call Manager for onward escalation to the On-call Director. If appropriate the On-call Director will declare a Major Incident or Standby to enable an effective response and the involvement of partners if required.

IT Operations Disaster Recovery Arrangements

Pioneer Healthcare IT will develop a disaster recovery plan, which will complement Services business continuity arrangements. The IT Operations Disaster Recovery Plan will detail computer and communication systems that have been identified as critical. Each of these systems will be given a Maximum Tolerable Period (MTP) Recovery Time Objective (RTO) /Recovery Point Objective (RPO).

Departmental Business Impact Analysis will inform the Digital Operations Disaster Recovery Plan, by indicating which services the organisation agrees are critical and how quickly these services need to be recovered.

IT Operations are responsible for their own business continuity arrangements, and for recovering systems in the event of a disruption or failure. Individual departments are required to ensure arrangements are in place within their Business Continuity Plans for how they will continue their services in the event of an IT systems failure.

6.5 Response

Business Continuity Incident Management Team

Depending on the nature and extent of the incident/emergency, a Business Continuity Incident Management & Recovery Team may be convened to co-ordinate the organisation's response and recovery. Membership may include:

- Strategic On-Call
- Tactical On-Call
- Operations Director or Deputy
- Loggist
- Service Manager
- Communication Lead
- Business Continuity and EPRR Manager
- Information and Security Manager

If the Business Continuity Incident has already been or is simultaneously activated, it is assumed that an Incident Response Team will be convened. In this situation, it is the responsibility of the Executive Leadership Team to ensure there is sufficient capacity to cover the response to the emergency situation and management of Business Continuity to ensure the delivery of the Pioneer Healthcare priority services.

The focus on BCM priorities may change through the life cycle of an incident response, to meet differing demands. The need to provide cover for the response may not be just a short-term requirement, but may be required over a longer period of time.

Recovery should be considered from the beginning of the incident and not left until the response phase is over.

For example as people plan to cease services to create capacity to deal with an emergency, it makes sense they should also plan how and when to start them up again

Service Response

When an incident has occurred that will affect the organisations provision of services, the Business Continuity Incident Management Team will be convened and make decisions on how the organisation will continue to provide services; a Service / Department may be requested to activate its Business Continuity Plan.

Once this request has been received the appropriate Business Continuity Plan should be obtained. BCPs can be located in service/department electronic copy folders within the organisation S drive and paper form in the Incident Control Centre Cupboard.

Priority 1 Functions

There are a number of services that have a criticality rating as priority one services (target recovery time of one day or less) in the event of an emergency or serious business disruption; this is because the service, or an aspect of it is either an essential service or it is essential in managing the disruption or in assisting services to recover. The Priority 1 services may change dependent on a number of factors (i.e. service provided, time/date/ seasonal period, type of threat).

The BC Incident Management Team, in consultation with appropriate Heads of Services and Directors of the organisation Escalation/ Surge plan will determine whether services will be:

- **Enhanced** – to respond to the Business Continuity Incident
- **Reduced** – in order to enable the transfer of resources to support a higher priority service.
- **Suspended** – to enable the re-allocation of resources Corporate Service Directors and Heads of Clinical Service should be consulted to inform them of the need to transfer/reallocate resources.

The BC Incident Management Team will consider the requirement for additional premises and resources required for Priority 1 functions which if affected, must be recovered first.

6.6 Stand Down

The Accountable Emergency Officer or On-call Director, in consultation with Service managers will declare stand down as appropriate when:

- The incident has been controlled
- The immediate needs of affected service users have been met
- Plans have been put in place to return to normal service / functions
- A communication system has been put in place to deal with any long-term effects
- Staff and/or service user concerns have been addressed.

This marks the end of the incident response phase and, where appropriate, handover to recovery. Stand-down is to be communicated to all staff, relevant key stakeholders, partner organisations, and service users.

6.7 Business Continuity Incident Recovery Team

An Incident Recovery Team may be convened to:

- Co-ordinate recovery activities across the Clinical or Corporate Services.
- Establish the organisations' recovery objectives in the event of a business interruption or the threat of an interruption to the delivery of one or more of the critical services
- Co-ordinate recovery activities with appropriate stakeholders, including suppliers and manage the budget and allocate resources for recovery, resolving any recovery conflicts if required.
- Implement, review and maintain division Business Impact Analysis and Business Continuity plans on behalf of the plan owner
- Provide support to the Service Business Recovery teams and the team will also monitor and direct all staff welfare, communications and support service activities relating to recovery.
- Receive and act upon situation reports.

Services will need to effectively recover their operational capability in the shortest possible time with minimum disruption to patients and staff. The fully implemented recovery phase may not be completed for some considerable time. The organisation will need to consider the following priorities:

- Managing the return to normal service delivery
- Priority of Services including the impact on targets
- Communication with service users affected by the incident including the re booking of cancelled appointments
- Staffing levels in the immediate future
- Identifying patients who require further surgical intervention
- Support of staff welfare including appropriate counselling
- Re-stocking of supplies and equipment
- Auditing and reporting of the incident

ALL REPORTS, DECISIONS AND ACTIONS MUST BE RECORDED.

6.7.1 Debrief

It is essential following a Business Continuity Incident for a formal structured debrief to be held to evaluate the

response, develop action plans to revise plans that are in place, ensure appropriate actions are taken to prevent further incidents and identify and cascade any lessons. Business Continuity and EPRR Manager will normally coordinate attendances at an internal debrief.

The debriefing may be held in large or small groups. There should be an opportunity to provide written comments. Whatever form the debrief takes, it should take place as soon as possible after the incident and will contribute towards the post-incident report.

Post-incident Report

The business Continuity and EPRR Manager should produce a post-incident report for the AEO to present to the organisation Board.

7. References

- The Civil Contingencies Act 2004 (Contingency Planning) Regulations 2012;
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014; and Care Quality Commission Fundamental Standards.
- NHS England Emergency Preparedness, Resilience and Response Framework 2015;
- NHS England Business Continuity Management Framework 2013;
- NHS England Core Standards for Emergency Preparedness, Resilience and Response 2015;
- Good Practice Guidelines 2018 Edition: The global guide to good practice in business continuity.

Appendix A

Equality and Diversity Statement

The management of Pioneer Healthcare are committed to providing equality of opportunity, not only in its employment practices but also in the services for this policy which it is responsible. The Equality Impact Assessment of the plan is neutral.

Pioneer Healthcare also value and respect the diversity of their respective employees and the communities they service. In applying this policy they will have due regard for the need to:

- Eliminate unlawful discrimination.
- Promote equality of opportunity.
- Provide for good relations between people of diverse groups.

Equality Impact Assessment

Date of assessment:	13/12/23			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Age ¹	None identified	Not applicable	Not applicable	The purpose of this policy is to ensure that the needs of all members of the public are considered when responding to incident or disruption to service delivery, especially those considered to be vulnerable.
Disability ²	None identified	Not applicable	Not applicable	
Gender identity (trans, non-binary) ³	None identified	Not applicable	Not applicable	
Marriage or civil partnership status ⁴	None identified	Not applicable	Not applicable	
Pregnancy or maternity ⁵	None identified	Not applicable	Not applicable	
Race ⁶	None identified	Not applicable	Not applicable	
Religion or belief ⁷	None identified	Not applicable	Not applicable	
Gender ⁸	None identified	Not applicable	Not applicable	
Sexual orientation ⁹	None identified	Not applicable	Not applicable	

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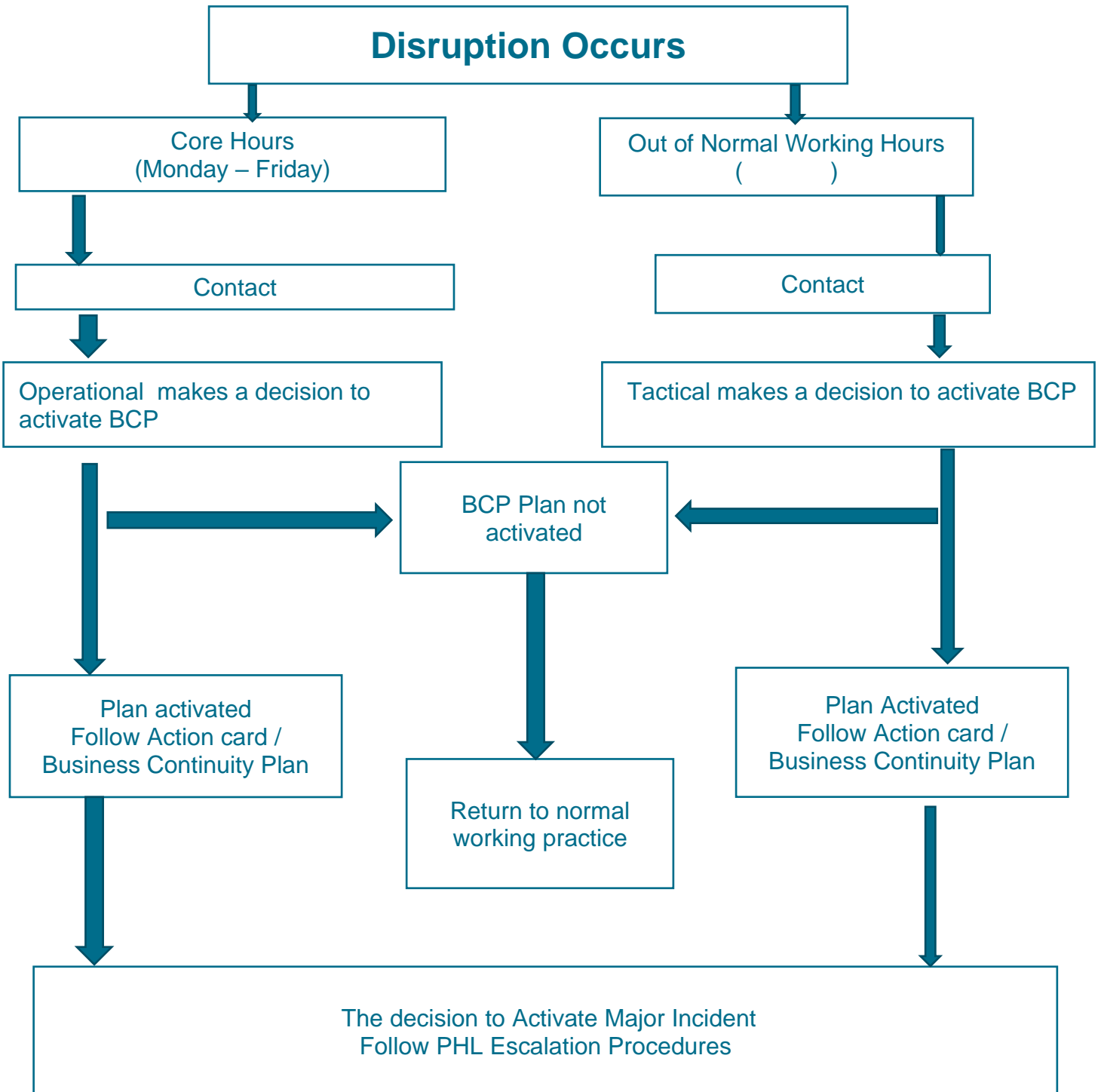
Appendix B

Risk	Reason
Loss of workplace / premises	<ul style="list-style-type: none">• Fire• Flood• Unsafe building• Act of terrorism• Extreme weather conditions• CBRN Incident
IT OUTAGE	<ul style="list-style-type: none">• Loss of server access /power• Theft/Crime• Loss of information• Cyber-attack
Loss of Communication	<ul style="list-style-type: none">• Power failure affecting phone exchange/server• Loss of service due to supplier issues
Fuel shortage	<ul style="list-style-type: none">• Transportation Disruption
Loss of Equipment	<ul style="list-style-type: none">• Fire• Flood
Chemical, Biological, Radiological, or Nuclear Incident	<ul style="list-style-type: none">• CBRN incident self-presenters
Loss of Staff	<ul style="list-style-type: none">• Extreme weather• Conditions, Industrial action, Outbreak of Diseases
Power Outage	<ul style="list-style-type: none">• Extreme weather
Loss of Supply	<ul style="list-style-type: none">• Transportation Disruption

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Appendix C

Internal Business Continuity Escalation Process



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Appendix D

SBAR reporting template (version 3)

Organisation name			
Site name(s) affected			
Date of report	Dd mmm yyyy	Time of report	24hr
Type of incident declared		Business Continuity/Critical Incident	
Date declared	Dd mmm yyyy	Time declared	24hr
Completed by (name, role)			
Exec Sign off by (name, role)		Executive level director sign off required	
Signature		Please include electronic signature	
Element	Prompts	Description	
S	<u>Situation</u> Clearly and briefly describe the current situation.		
B	<u>Background</u> Provide clear, relevant background information on the incident including: <ul style="list-style-type: none"> • Timings • Media • Exact situation 		
A	<u>Assessment</u> State your assessment of the situation based on the situation and background. Include impacts to the hospital and services		
R	<u>Recommendations</u> Explain the actions being taken by the organisation to standdown from the incident/situation alongside any support required of partner agencies, ICB or NHS England		

Appendix E

Business Continuity Management Life Cycle



The ongoing cycle of activities of the business continuity programme, that will build Pioneer Healthcare resilience.