Business Continuity Plan
(Emergency Preparedness, Resilience and Response)

Shropshire, Telford and Wrekin
Clinical Commissioning Group (STWCCG)

Author:	Sam Tilley, Director of Planning
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Reviewed by:	
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1.0 Document History

This plan is required to be reviewed at least annually, or sooner as required following activation of the plan or significant changes to the organisation's structure.

All amendments are noted below.

Date	Version Number	Changes Made	Name
01/11/21	0.1	First draft (combined STW CCG)	S Tilley

The Director of Planning (STWCCG) is the lead for business continuity for Shropshire, Telford and Wrekin CCG and is responsible for ensuring that a full review of this plan is undertaken on an annual basis, or sooner as required following activation of the plan or significant changes to the organisation's structure.

This will include ensuring that contact details are reviewed quarterly. However, all members of staff have a responsibility to inform the business continuity lead, via their manager if their contact details change.

3.0 Related documents

Other documents that may be useful to support this plan are detailed below.

Copies of existing policies are held in the dedicated On Call Microsoft Teams Area and in the CCG Shared Area (intranet)

National documents can be found at:
http://www.england.nhs.uk/ourwork/eprr

Document	Document Location
NHSE Incident response plan	Executive shared drive http://www.england.nhs.uk/ourwork/eprr
Heatwave Plan	Executive shared drive http://www.england.nhs.uk/ourwork/eprr
Fuel Shortage Plan	Executive shared drive
Flood/Cold Weather Plan	Executive shared drive http://www.england.nhs.uk/ourwork/eprr
Public Health England Incident response plan	Executive shared drive
Pandemic Flu Plan	Executive shared drive http://www.england.nhs.uk/ourwork/eprr
Serious Untoward Incidents	Executive shared drive
On Call Directors pack	Executive Shared drive
On Call Director Procedure	Executive Shared drive

Part 1 – Introduction

1.0   Business continuity planning forms an important element of good business management and service provision. All business activity is subject to disruptions such as technology failure, flooding, utility disruption and terrorism. Business continuity management (BCM) provides the capability to adequately react to operational disruptions, while protecting welfare and safety. BCM involves managing the recovery or continuation of business activities in the event of a business disruption, and management of the overall programme through training, exercises and review to ensure the business continuity plan stays current and up to date.

For the NHS, BCM is defined as the management process that enables an NHS organisation to:
- Identify those key services which, if interrupted for any reason, would have the greatest impact upon the community, the health economy and the organisation;
- Identify and reduce the risks and threats to the continuation of these key services;
- Develop plans which enable the organisation to recover and / or maintain core services in the shortest possible time.

This Business Continuity Plan (BCP) describes how Shropshire, Telford & Wrekin Commissioning Group (STWCCG) will discharge its functions in the event of a major incident that causes serious interruption of business operations involving one or more sections/service areas. This is a corporate level BCP which would be implemented when any incident cannot be contained and managed within a single section/directorate/service area. This plan is intrinsically linked to, and forms the core part of our Emergency Preparedness, Resilience and Response (EPRR) arrangements as a Category 2 Responder.

DUTIES FOR BUSINESS CONTINUITY AND RECOVERY

There are a number of key documents that outline and detail the need for NHS organisations to establish a business continuity management system:
- Civil Contingencies Act 2004
- NHS England Emergency Preparedness, Resilience and Response Framework 2015
- NHS England Business Continuity Management Framework (service resilience) (2013)
- ISO 22301 Societal Security – Business Continuity Management System

This document has been written to align to the NHS England Business Continuity Framework and ISO 22301 requirements

1.1   Purpose

This plan is to be used to assist in the continuity and recovery of Shropshire, Telford & Wrekin CCG in the event of an unplanned disruption. A disruption could be any event which threatens personnel, buildings or operational capacity and requires special measures to be taken to restore normal service. This could be a matter specifically relating to STWCCG or as part of a wider incident that affects a broader range of system partners

1.2   Aim

The aim of the plan is to set out the roles, responsibilities and actions to be taken by STWCCG to enable continuity and recovery of the key parts of the service following a significant disruption.

1.2.1 Business Interruption can be defined as;

'**An unwanted incident which threatens personnel, buildings, operational procedures, or the reputation of the organization, which requires special measures to be taken to restore things back to normal**'

1.2.2 Business continuity management (BCM) is a business driven process that establishes a fit-for-purpose strategic and operational framework to –

- Proactively improve the organisation's resilience against severe interruption;
- Provide a rehearsed method of restoring the organisation's ability to supply its key services to an agreed level within an agreed time after an interruption;
- Deliver a proven capability to manage a business interruption and protect the organisation's reputation and brand

1.2.3 BCM can be defined as:

"A holistic management process that identifies potential threats to an organisation and the impacts to business operations that those threats, if realised might cause, and which provides a framework for building organisational resilience with the capability for an effective response that safeguards the interests of its key stakeholders, reputation, brand and value creating activities."
(BS 25999 Business Continuity Management – Part 1 2006: Code of Practice, British Standards Institute)

At the heart of business continuity planning are four key areas:
- Damage/denial of access to premises;
- Non availability of key staff;
- Loss or damage to other resources;
- Loss/damage to IT or data.

1.2.4 Business continuity is complementary to the risk management framework that sets out to understand the risks to operations or business, and the consequences of those risks. Reference should be made to the organisation's risk management strategy and risk register which relate to corporate and directorate risk assessments that may be considered in conjunction with this continuity planning process.

1.2.5 Business Continuity is also complementary to Emergency Preparedness, Resilience and Response (EPRR). In the NHS reorganisation of 2013 Clinical Commissioning Groups were categorised as Category 2 responders (supporting agencies), so have lesser responsibilities than most other health service organisations. There are core EPRR standards set out by the Cabinet Office which all Category 1 responders have to meet. CCGs are also required to meet a large number of these as Category 2 responders. These requirements, in many cases, are part of necessary Business Continuity arrangements.

This Policy should be read in conjunction with the following documents:
- NHSE Emergency Preparedness Resilience and Response Framework
- NHSE Business Continuity Management Framework
- Guidance for the initial management of self-presenters from incidents involving hazardous materials
- Local Health Resilience Partnerships guidance
- Operating Framework – Response to Pandemic Influenza
- Roles and Responsibilities of CCG's in pandemic influenza

- The Cold Weather Plan for England
- The Heatwave Plan for England
- Flooding Advice for the Public
- Requests for Military Aid to the Civil Authorities (MACA) from the NHS in England

1.2.6   Objectives of the Business Continuity Policy and EPRR Framework

The objectives of the Business Continuity Policy and Planning Framework are:
- To ensure a comprehensive BCM system is established and maintained;
- To ensure key services, together with their supporting critical activities, processes and resources, will be identified by undertaking business impact analysis;
- To ensure risk mitigation strategies will be applied to reduce the impact of disruption on key services;
- To ensure plans will be developed to enable continuity of key services at a minimum acceptable standard following disruption;
- To outline how business continuity plans will be invoked
- To ensure plans are subject to on-going exercising and revision;
- To ensure the CCG's Governing Bodies are assured that the BCM system remains up to date and relevant.
- To ensure the appropriate arrangements are in place to support EPRR requirements

1.3   Scope

The scope of this BCP will centre on conformity with ISO23301, legislative requirements within the Civil Contingencies Act (CCA) 2004 and NHSE guidance.

This plan applies to the functions provided by Shropshire, Telford & Wrekin CCG at the following sites:

Halesfield 6,
Telford,
TF7 4BF.

Ptarmigan House
(Ground Floor)
Sitka Drive
Shrewsbury
Shropshire
SY2 6LG

A major disruption will invoke the NHS England Major Incident Plan and Shropshire, Telford & Wrekin CCG's Business Continuity Plan.

If the STWCCG's Halesfield site becomes unusable then the Ptarmigan House site will become the incident response location and vice versa

The details of the critical functions of Shropshire, Telford & Wrekin CCG have been included in this Business Continuity Plan (see section 1.4 below).

1.4   Critical service functions

Successful business continuity planning includes the ability to define the essential business services of

the organisation and must be identified at all levels. These can be broken down into critical, vital, necessary and desired. Determining and categorising services in this way is the responsibility of heads of service within the organisation.

CRITICAL services must be provided immediately or the loss of life, infrastructure destruction, loss of confidence and significant loss of revenue will result. These services will require continuity within 24 hours of interruption.

VITAL services are those that must be provided within 72 hours or loss of life, infrastructure destruction, loss of confidence and significant loss of revenue or disproportionate recovery costs will result.

NECESSARY services must be resumed within two weeks or considerable loss, further destruction or disproportionate recovery costs could result.

DESIRED services could be delayed for two weeks or longer, but are required in order to return to normal operating conditions and alleviate further disruption or disturbance to normal conditions.

This is a list of the possible interruption factors that represents the potential impact for the organisation;
- Loss of life or inacceptable threat to human safety;

- Disruption of essential services;

- Loss of public/stakeholder confidence;

- Loss of vital records;

- Loss of expertise;

- Significant damage or total loss of infrastructure;

- Significant loss of revenue or public funds;

- Disproportionate recovery costs.

Within the organisation the interruption factors may include;
- Access to or the ability to operate normal services from a site which can be either fully or partially interrupted due to an incident occurring e.g. fire, loss of utilities;
- IT systems are interrupted or the network fails, causing significant disruption to either a single or more department;
- Failure of service provision arising from a key 3$^{rd.}$ party supplier or provider organisation;
- Greatly reduced staffing levels e.g. severe weather condition, flu pandemic;
- Loss of telephone communications.

And as a result there is impact upon:
- Health and safety
- Possibility of either adverse financial or reputational damage.
- A requirement to relocate to alternative working premises or service delivery resources.

1.4.1 Business Impact Assessment

The CCG has undertaken an analysis of what services are considered **CRITICAL** services and these are as listed below. This takes into account which services should have priority, which services will be the most difficult to resume, the minimum resources to resume a service and an indication of the timeline in which it should be accomplished:

This plan covers the following critical functions within Shropshire, Telford & Wrekin CCG.

Critical Functions
• Communications
• Continuing care
• Continuity of commissioned services
• GP IT
• Patient advice
• Safeguarding children and vulnerable adults
• Serious incident management

1.5   Non-critical service functions

The critical function analysis also identified those functions that are less critical and could be suspended. These are detailed in the table below.

Service function	Length of time function can be suspended for
Administration	7 days
Claims management	28 days
Clinical audit	28 days
Clinical contract management	14 days
Commissioning services (planning, development and redesign)	28 days
Complaints	7 days
Corporate governance	7 days
Data analysis and performance monitoring	14 days
Equality and diversity	28 days
Finance	14 days
Freedom of Information requests	7 days
Incident management	2 days
Individual funding requests	14 days
Infection prevention and control	7 days
Information governance	28 days

Medicines management	14 days
Patient engagement	28 days
Primary care development and performance (incl. practice visits)	14 days
Research and evaluation	28 days
Serious incident management (levels 0-1)	7 days
Subject access requests	14 days

If a disruption occurs and this plan is activated, permission will be sought from the CCG Accountable Officer (if unavailable, another member of the CCG's Executive Management Team) to suspend the mainstream service functions detailed above and release Shropshire, Telford & Wrekin CCG staff who cover these functions to provide support to critical functions provided by other CCG areas.

1.6   Staffing requirements

The following staffing requirements have been assessed as being required to enable critical functions to operate.

Function	Staff group e.g. Director / Manager / Officer / Administrator	No. needed	No. workstations needed	Able to work from home
Communications	Manager	1	0	Yes
Continuing Care	Manager / Officer	1	0	Yes
Continuity of commissioned services	Manager / Officer	2	0	Yes
Patient advice	Officer	1	0	Yes
Safeguarding children and vulnerable adults	Manager / Officer	1	1	Yes
Serious incident management	Manager / Officer	1	1	Yes
Administrative	Administrators	4	0	Yes

In addition to the above staffing requirements relating to critical functions, at least one member of the CCG's Executive Management Team will be required to provide leadership.

1.7 Activating the BCP

Something has happened that impacts on critical business functions e.g. buildings, facilities or other resources, including staff need to be managed.

The Accountable Officer/ Deputy has overall responsibility for emergency response supported by the Emergency Accountable Officer (Emergency Preparedness, Resilience and Response Lead) and on call Director

This plan lists the critical functions that need to be maintained, and sets out emergency steps to manage the incident. Generally, the chain of events will be;

- An alert is raised and brought to notice by any member of staff to their Executive Lead or Head of Service.
- The Director will inform the Accountable Officer (or deputy), On Call Director and the Emergency Accountable Officer.
- The Accountable Officer (AO) or deputy, On Call Director and Emergency Accountable Officer will consider the appropriate response and whether to activate this BCP in full or in part. Figure 1, considers the activation levels.

The following activation sequence will normally be used when informing staff of the activation of this plan: Standby phase, Implement phase, Stand Down phase

- *'Standby'* will be used as an early warning of a situation which might at some later stage escalate and thus require implementation of this Plan. This is particularly important if an interruption occurs towards the end of office hours and staff may need to be asked to stay at work until the situation becomes clear. Standby means the EDDR Lead and On-call Director are made aware of potential business continuity issues and actions taken to mitigate their impact.

- *'Implement'* is the immediate activation of this plan.

- *'Stand Down'* will be used to signify the phased withdrawal of the activation of the plan e.g. the standing down of the incident room.

  In activating this plan, buildings, facilities or other resources, including staff need to be managed. This Plan lists the critical functions that need to be maintained, and sets out emergency steps to manage the incident. Generally, the chain of events will be;

Figure 1 – Plan activations

Incident dynamic Reported to AO and Director Team	Activation Potential considerations for Plan activation	Incident Response Team (IRT) Strategic, Tactical, and Operational responsibilities
The incident is **contained to single Department or Locality and** able to be managed effectively to conclusion by that Department/Locality	- 'Declare Locality /Department Business Continuity Incident' - Initiate **Directorate** BCP	- **Establish Locality/Dept IRT** - Director or Deputy as **Locality/Dept** Lead Officer - CCG On Call Director - Communications Officer - Building Manager - HR lead - Finance Officer - IT lead - Administration coordinator;
Does the incident affect **more than one Locality/Department?**	- 'Declare Corporate Business Continuity Incident' - Initiate **Corporate** BCP	- **Establish Corporate IRT** - CO or deputy as Strategic Lead - CCG On Call Director - Communications Officer - Building Manager - HR lead - Finance Officer

| | | - IT lead |
| | | - Administration coordinator; |

1.7.1 Criteria for escalation:

- Increase in geographic area or staff affected (Pandemic, flooding etc.)

- the need for additional internal/external resources

- increased severity of the business interruption

- increased demands from government departments, the service or commissioned service

- Incident affecting system partners which required CCG input as a category 2 responder or which has the potential to impact on the ability of the CCG to deliver its services

1.7.2   In the event of the activation of the BCP, the Business Continuity lead will identify an Incident Room (IR). This may be a virtual incident room utilising Microsoft Teams capability. If a physical incident room is required this would usually be Room B, Halesfield, (or the main meeting room, Ptarmigan House if Room B, Halesfield cannot be used)

1.7.3   The CCG incident response plan will be put into action by the Chief Officer /on Call Executive/ Emergency Accountable Officer

1.7.4   Shelter and Evacuation – Should one of the CCG premises become unusable and staff require evacuation this will be carried out in accordance with the building's fire regulations. Staff will initially evacuate to designated assembly points. Should these assembly points be deemed unsafe staff will be directed to either work from home or to access the alternative CCG site that is still functional. It is likely that this will only apply to a small number of office based staff as the CCG utilises an agile working approach and most staff are home based

As the CCG operates an in hours only service it is unlikely that shelter will be required. Should this be the case this will be provided at the CCG's alternative base if staff are unable to make their way home. The CCG will arrange transportation should it be required

1.7.5 Criteria for de-escalation
- Reduction in internal resource requirements
- Reduced severity of the incident
- Reduced demands from government departments, the service and commissioned service
- Reduced public or media interest
- Reduction in public or media interest

1.7.6 Communications

Effective communications are crucial. It is essential to disseminate accurate and timely information to staff, partners, stakeholders and where necessary the public during the response to a business interruption. The CCG On Call Executive/ Emergency Accountable Officer will liaise with the communications Director as needed to ensure effective, on-going communications. This will be overseen by the On Call Executive / Emergency Accountable Officer in charge.

1.8 Debrief

At the conclusion of the incident, the Emergency Accountable Officer will lead a debrief session and coordinate preparation of a report on the incident (Appendix VI), to include issues identified by the debriefing process. This should take place between 24 hours and fourteen days following the incident. The report will be considered at a meeting of the RT and submitted to the Audit Committee together with any recommendations and action plan. The report should be submitted to the Governing Body for approval.

1.9 Emergency Preparedness, Resilience and Response (EPRR)

Business Continuity and EPRR are closely linked. As Category 2 responders the CCG does not have the resilience infrastructure that a Category 1 responder would have. However, the CCG ensures that it meets the core standards required of it through the following actions:

- The Director of Planning is the Accountable Emergency Officer for EPRR
- The AEO is supported by the Deputy Director of Planning and the Corporate Services Manager
- The Director of Planning is a member of the Local Health Resilience Partnership Group and the Health Emergency Planning Officers Group (HEPOG), and is the first point of contact in the CCG for EPRR. Attendance at EPRR workshops and other events is part of this remit and relevant information is fed back to personnel within the CCG as needed.
- The CCG has an on call rota of senior, experienced and trained individuals in place to manage unexpected surges of activity within Shropshire and Telford and Wrekin that are not classified as Major Incidents, and to link with the NHS England Regional Team to support in the event of Major Incidents taking place
- NHS England Regional Team have in place a full Major Incident Plan and the CCG utilises this in the event of an Incident rather than having a separate Plan, as this ensures integration of response
- The CCG takes part, as needed, in EPRR exercises within Shropshire, Telford and Wrekin and Staffordshire
- The CCG has signed a Memorandum of Understanding for the mobilisation of NHS resources in the event of a significant Public Health Incident or Outbreak
- Should the CCG require specialist EPRR expertise it would request NHS England, to assist and advise.

The Accountable Officer in conjunction with the Accountable Emergency Officer would be responsible for determining the level of Emergency Planning processes used to manage a Business Continuity issue. This may include mobilisation of support from Communicaitons, Information Governance, finance and administrators and include the deployment of loggists.

1.10   Information Sharing
During a business continuity situation or an incident, the usual IG protocols, as set out in the STW Information Governance Handbook should be adhered to. A copy of the handbook can be found in the Executive Shared Drive,

The privacy of individuals should still be taken into account before sharing information, even in an emergency situation,

Whilst a great deal of information may need to be shared in relation to planning for or dealing with an emergency, as a category 2 responder only a small amount of this will relate to personal data. During an emergency it is more likely than not that it will be in the interests of the individual data subjects for personal data to be shared. When considering the issues and to help get to the right decision in an emergency it is acceptable for responders to have in mind the following set of questions:

- Is it unfair to the individual to disclose their information?

- What expectations would they have in the emergency at hand?
- Am I acting for their benefit and is it in the public interest to share this information?

Following these broad principles in an emergency will mean that the sharing of data is unlikely to be found unlawful.

Key Principles
- Data protection legislation does not prohibit the collection and sharing of personal data – it provides a framework where personal data can be used with confidence that individuals' privacy rights are respected.
- Emergency responders' starting point should be to consider the risks and the potential harm that may arise if they do not share information.
- Emergency responders should balance the potential damage to the individual (and where appropriate the public interest of keeping the information confidential) against the public interest in sharing the information.
- In emergencies, the public interest consideration will generally be more significant than during day-to-day business.
- Always check whether the objective can still be achieved by passing less personal data.
- Category 1 and 2 responders should be robust in asserting their power to share personal data lawfully in emergency planning, response and recovery situations.
- The consent of the data subject is not always a necessary pre-condition to lawful data sharing.
- You should seek advice where you are in doubt – though prepare on the basis that you will need to make a decision without formal advice during an emergency.

Part 2 – Training, Testing and Exercising

2.1   Training

All Shropshire, Telford & Wrekin CCG staff will have access to Business Continuity Information via the CCG intranet/ shared drives. New starters will be made aware of this plan and their potential role during a disruption as part of the CCG's new starter induction process.

Any staff with a specific role in the recovery from a disruption, or who may be asked to cover another suitable role, will be given appropriate training.

Line managers are responsible for making all staff in their teams aware of the CCG's Business Continuity Plan.

EPRR training will be provided to all relevant staff, but specifically on call staff as required

2.2   Plan testing and exercising

STWCCG will test this Business Continuity Plan on an annual basis. This will be facilitated by the local health resilience team by means of a table top exercise and via larger scale exercises arranged by the system as a whole or our partners

The call out / cascade arrangements, particularly the staff cascade, will be tested as necessary. With most staff now working remotely out of work access/ contact details are updated regularly

2.3   Debrief and Continuous Improvement

At the conclusion of the incident, the Accountable Emergency Officer will lead a debrief session and coordinate preparation of a report on the incident, to include issues identified by the debriefing process. This should take place between 24 hours and fourteen days following the incident. Areas for learning and improvement should be identified and the Accountable Emergency Officer will be responsible for ensuring learning is embedded. The report will be considered at a meeting of the IRT and submitted to the Audit Committee and/or Governing Body together with any recommendations and actions

This Business Continuity Policy will be reviewed and updated at least annually (but following an incident were learning has highlighted areas for improvement) to ensure it remains fit for purpose, accommodates and learning and accommodates updates in policy and best practice .

Periodic independent assessment of the CCG's Business Continuity/EPRR processes (or specific elements of these processes) will be carried out by the CCG's Internal Auditors and reported to the Audit Committee and Governing Body

Appendix 1 – Initial Response Checklist

Task	Completed by (date / time)
• Start a log of actions and expenses incurred **(see Appendix 2)**	
• Identify which critical functions have been disrupted	
• Consult with the Accountable Officer (or member of the Executive Management Team) about activating Business Continuity Plan	
• Seek permission from Accountable Officer (or member of the Executive Management Team) to suspend non-critical functions	

• Convene Executive Management Team meeting
  - Evaluate impact of situation
  - Decide on contingency actions to be taken **(see Appendix 3)**
  - Identify staff, resources, equipment required
  - Assign responsibility and timescales	

• Inform staff **(see Appendix 4)**	
• Inform relevant stakeholders **(see Appendix 5)**	
Daily tasks during the recovery process	
• Convene Executive Management Team as necessary to monitor progress made, obstacles encountered and decide on continuing recovery process	
• Provide updated information to staff and stakeholders	
• Maintain a log of actions and expenses	

Appendix 2

Incident Assessment and Situation Report - METHANE

Report details	
Date:	Time:
Name of person completing form	
Name of people contributing	

METHANE SUMMARY What are the facts about the incident?	
Major incident declared?	
Exact Location	
Type of incident	
Hazards – present or suspected	
Access – routes that are safe to be used	
Number – type and severity of casualties	
Emergency services present and/or those required	
Other facts	

What are the assumptions about the incident?
What additional information is required?

Warning and informing
What agencies/partners/public are involved in the incident? Who has been informed (when and by whom, if known?)
Do we need to inform or request actions of other individuals/services/partner organisations?

Risks
What are the main risks and consequences of the incident?
What are the knock-on effects to other services and/or partner organisations?

Media
Will the incident attract media interest? What is the current situation with the media? Are actions required?

What agencies are involved in the incident? Who has been informed (when and by whom, if known?)
Do we need to inform or request actions of other individuals/services/partner organisations?

Appendix 3 – Actions and Expenses Log

Date / time	Decision / action taken	By whom	Cost incurred

Appendix 4 – Business Continuity Action Plan

How to complete the action plan:

To ensure that the CCG has a workable business continuity strategy, it is recommended that time is allotted to complete the sections and that there is an active dialogue with all staff to ensure feedback on the planning process.

1. Consider the list of possible disruptions to services and add others you may believe relevant; this process is completed by working through the business impact analysis tool and remembering to focus on the questions below:

2. How would that particular disruption impact on the individual service area?

3. Plot each disruption against the 3 'Ss'

   a. **STAFF** (needed to provide critical activities)
   b. **SPACE** (workplace)
   c. **SUPPLIES** (consumables required to complete the critical activities, etc.)

4. Once plotted, actions to resolve issue?

   a. **STAFF** - Call in other staff, arrange cover etc. Consider such issues as contact lists for staff, the time to attend and method of travel to work.
   b. **SPACE** - What possible alternative locations would be available as space for essential staff to use on a temporary basis?
   c. **SUPPLIES** - IT, telephones, electricity, gas, water, road fuel, essential office supplies etc. How would the loss or shortage be resolved in the short term?

5. State what gaps or vulnerabilities are exposed by the process, how they can be addressed and any resourcing implications.

Appendix 5. Key Business Continuity Risks and Mitigations

TYPE OF DISRUPTION/EVENT	1. **Access denial to work area (any reason including fuel crisis) or utility failure (electricity, heating, water) or flooding**
IMPACT ON STWCCG BY THE DISRUPTION/EVENT	STWCCG would be unable to provide its critical functions as listed within section 1.4 of this Business Continuity Plan and would also need to suspend non-critical functions until normal services could be resumed or alternative premises or access to premises was established.
RISK RATING OF THIS EVENT	**MEDIUM/LOW**
CONTINGENCIES AVAILABLE REGARDING THIS DISRUPTION/EVENT	STWCCG staff are mainly based at home however, some staff work from the following locations: Halesfield 6 Telford Ptarmigan House (Ground Floor) Sitka Drive Shrewsbury Shropshire SY2 6LG **Critical functions** STWCCG staff that provide critical functions are able to work at the location listed above or remotely at home. Some staff may be able to work from other locations across Shropshire and Telford. With the approval of their line managers, office based staff may be able to work remotely from home **Non-critical functions** In short term incidents, if the interruption is due to utilities failure, lack of access to the building or damage to the building or work area and an alternative arrangement cannot

TYPE OF DISRUPTION/EVENT	1. **Access denial to work area (any reason including fuel crisis) or utility failure (electricity, heating, water) or flooding**	
	be found, then staff covering non-critical functions may be given time off at the discretion of their line managers. However, staff covering non-critical roles could be asked to take annual leave or flexi time whilst they are unable to attend their designated place of work or an alternative site; if reasonable efforts have not been made to attend work; or if the interruption is caused by lack of access to fuel or severe weather. This will be aligned to the CCG's policy annual leave, flexible working and special leave policies subject to negotiation.	
INITIAL ACTIONS DURING EVENT	If there is an issue with your place of work: • Verify the information and identify the anticipated timescale of the interruption. • Discuss and agree access to alternative locations to relocate staff on a temporary basis as above if required. • Notify the EAO or nominate deputy who will inform staff via the STWCCG communication cascade by email and text message (for relevant staff) if incident occurs in hours or by text message only if out of hours Contact Commissioning Support Unit to arrange IT/telecoms for the alternative sites for staff. If fuel shortage or severe weather (e.g. snow): • Confirm continuation of critical functions. • Implement flexible working arrangements for staff. • Communicate decisions to staff via appropriate medium.	
COMMUNICATIONS & MANAGEMENT CONTACTS Detail trigger points for events and list management contacts For Halesfield 6: Business Watch Out of Hours contact	Cordon established:	Building has to be evacuated – notify staff of evacuation if in hours via email / text message to relevant staff group. If out of hours and cordon is to remain in hours, then notify staff by text message.
	Damage or flooding to buildings:	Notify relevant staff via cascade of closure of building and alternative site to be used via email / text message in hours and via text message only out of hours.
	Utilities failure:	Notify staff who work at the affected location of alternative working arrangements and timescale of interruption and when normal

TYPE OF DISRUPTION/EVENT	1. Access denial to work area (any reason including fuel crisis) or utility failure (electricity, heating, water) or flooding	
number: **01952 582092** **For NHS Property services contact:** Pan Shropshire - Estates & Facilities Service hosted by Shropshire & South Staffordshire Foundation Trust **Normal Hours - 01785 221333** **Out of Hours 01785 257888**		arrangements are proposed. Provide number for staff to call to provide an update on progress or advise staff to check on the CCG website for information.
	Severe Weather:	Activate cascade to all staff as above. Provide flexible working arrangements to all staff ensuring critical functions are maintained. This will be aligned to the CCG's policy annual leave, flexible working and special leave policies subject to negotiation
	Fuel Crisis:	Activate cascade to all staff as above. Provide flexible working arrangements to all staff ensuring critical functions are maintained. The NHS England Local Area Team will activate the Fuel Shortage Response Plan and issue temporary authorisation to staff who qualify under this scheme.
ACTIONS IN RELATION TO STAFF Include details of contact lists held and the communications process with members of staff.	Activate staff communications cascade - via on call Director/EAO *NOTE: Senior Managers are required to have access to this information for the staff in their respective sections.*	
ACTIONS IN RELATION TO SPACE Include details of accommodation for visitors and staff workplace areas.	Limited accommodation for staff providing critical functions will be provided at Halesfield, Halesfield 6, Telford, TF7 4BF or Ptarmigan House (Ground Floor) Sitka Drive Shrewsbury. SY2 6LG or where office based arrangements will be made to facilitate home working. Hot desk facilities will be provided for staff but this may mean sharing facilities. Space will be identified in alternative sites to allow for meetings with visitors to proceed.	
ACTIONS IN RELATION TO SUPPLIES & SERVICES Include details of supply lines and actions following loss of service or utility.	Contact Commissioning Support Unit regarding the access to IT/Telecoms at alternative sites and where remote working is established. Suppliers will be notified by staff responsible for ordering essential supplies of any alternative location arrangements for deliveries. If utility services fail within specific sites it will be the responsibility of NHS Property	

TYPE OF DISRUPTION/EVENT	1. **Access denial to work area (any reason including fuel crisis) or utility failure (electricity, heating, water) or flooding**
	Services to liaise with the utility provider on progress and timescales for restoration of services.
PLANNING VULNERABILITIES & GAPS	If the incident affects patient facing services as well as commissioning functions, priority will be given to services which provide these services in terms of alternative sites and support from Commissioning Support Unit in relation to IT/Telecoms issues.
PROPOSED REMEDIAL ACTIONS	None
OTHER ACTIONS/COMMENTS	Ensure that the communications cascade is updated at least every six months and tested once completed to validate functionality. Ensure all TWCCG staff are aware of this plan and what is expected of them during incidents.

TYPE OF DISRUPTION/EVENT	2. **Loss of established systems (IT, specialised software, email and Telecoms)**
IMPACT ON TWCCG BY THE DISRUPTION/EVENT	STWCCG would be unable to provide its critical functions as listed within section 1.4 of this Business Continuity Plan and would also need to suspend non-critical functions until normal services could be resumed.
RISK RATING OF THIS EVENT	**MEDIUM/LOW**
CONTINGENCIES AVAILABLE REGARDING THIS DISRUPTION/EVENT	**Critical functions** For critical functions and where loss of IT functionality is expected to be more than 24 hours and up to one week – alternative premises to relocate these staff in the short term are to be identified through partnership discussions with local STW ICS partners. Commissioning Support Unit would need to arrange access to IT/Telecoms systems at these locations. With the approval of their line managers, office based staff are able to work remotely from home via if this functionality is available and not affected by the interruption. CSU would be mobilised to assess the issue and implement remedial action to both

TYPE OF DISRUPTION/EVENT	2. Loss of established systems (IT, specialised software, email and Telecoms)	
	address the IT failure and implement interim solutions if required **Non-critical functions** STWCCG staff providing non-critical functions that rely on IT functionality and who are unable to be relocated and are not able to work remotely from home via VPN, then they may be given time off at the discretion of their line manager. All other staff that do not depend on IT functionality could operate manual paperwork systems until normal IT services are re-provided by the Commissioning Support Unit.	
INITIAL ACTIONS DURING EVENT	If IT functionality is disrupted and critical functions are required: • Establish likely timescale of loss of functionality. • Discuss workstation availability at alternative sites for staff that provide critical functions. Alternatively agree staff working from home. • Contact Commissioning Support Unit to arrange software installation and remote connections where necessary. • Where possible notify staff in person if incident occurs in hours or by text message if incident occurs out of hours	
COMMUNICATIONS & MANAGEMENT CONTACTS Detail trigger points for events and list management contacts.	At sudden onset of IT failure which has been verified with Commissioning Support Unit. Including likely timescale of interruption	Implement the communications cascade to staff at affected sites via text message (assuming no email available).
	At sudden onset of Telecoms failure which has been verified with Commissioning Support Unit. Including the likely timescale of interruption	Implement the communications cascade to staff at affected sites via text message (assuming no email available). As and when the telecoms functionality at sites are affected this normally affects telecoms also as the system is Voice Over Internet Provider (VOIP). Use of media may be required to get message to staff and visitors and CSU will be required to support this.
ACTIONS IN RELATION TO STAFF	Activate staff communications cascade – via on call director/ EAO	

TYPE OF DISRUPTION/EVENT	2. Loss of established systems (IT, specialised software, email and Telecoms)
Include details of contact lists held and the communications process with members of staff.	*NOTE: Senior Managers are required to have access to this information for the staff in their respective sections.*
ACTIONS IN RELATION TO SPACE Include details of accommodation for visitors and staff workplace areas.	Staff will obtain IT as detailed above. Visitors will be advised on change of any locations.
ACTIONS IN RELATION TO SUPPLIES & SERVICES Include details of supply lines and actions following loss of service or utility.	Contact Commissioning Support Unit and maintain contact with them regarding progress on re-establishment of service. Commissioning Support Unit will contact all CCGs of IT/Telecoms issues which attract an Amber or Red rating via their IT Systems Incident Plan. Notify all relevant stakeholders of the interruption to Telecoms – via mobile phones.
PLANNING VULNERABILITIES & GAPS	Commissioning Support Unit may establish service to other services prior to TWCCG and therefore the interruption may be extended due to prioritisation.
OTHER ACTIONS/COMMENTS	Ensure that the communications cascade is updated at least every six months and tested once completed to validate functionality. Ensure all TWCCG staff are aware of this plan and what is expected of them during incidents.
TYPE OF DISRUPTION/EVENT	3. Restricted staffing levels for any reason (including Influenza Pandemic and travelling difficulties due to extreme weather conditions)
IMPACT ON TWCCG BY THE DISRUPTION/EVENT	STWCCG would be unable to provide its critical functions as listed within section 1.4 of this Business Continuity Plan and would also need to suspend non-critical functions until normal services could be resumed or where sufficient staff are available to cover these functions. All CCG staff are encouraged to have the annual influenza and Covid19 vaccinations where eligible and appropriate.

TYPE OF DISRUPTION/EVENT	2. Loss of established systems (IT, specialised software, email and Telecoms)
RISK RATING OF THIS EVENT	**MEDIUM/HIGH**
CONTINGENCIES AVAILABLE REGARDING THIS DISRUPTION/EVENT	Using staff redeployment, all critical functions are required to be maintained in this situation. In the first instance, staff available who cover non-critical roles and with suitable skills within STWCCG would be made available to cover the identified critical functions. If necessary, additional resources from other partners would be sought to support the critical functions. (Staffing MOU in place to support re-deployment) In extreme weather situations, flexible working arrangements will be implemented including working from alternative bases for up to one week or working from home remotely. This will be aligned to the CCG's policy annual leave, flexible working and special leave policies subject to negotiation

COMMUNICATIONS & MANAGEMENT CONTACTS Detail trigger points for events and list management contacts	Pandemic is announced and staffing numbers are affected. Daily reporting of staff situation indicates an impact on services provided.	Cascade to staff that BCP arrangements are being implemented, including suspension of non-critical functions where appropriate, redeployment of staff to cover the critical and essential workload and support of the pandemic flu response. Cascade information to staff via email contact lists and text message.
	Extreme weather warnings received.	Cascade to staff via email.
	Extreme weather happens/ schools/ nurseries close/ road networks affected/ public	Cascade to staff via email and text message (text message only if incident commences out of hours). Implement flexible working arrangements for staff, working from alternative sites, working from home. Staff unable to access an alternative location to work or unable to access work remotely will

	transport affected.	be asked to take annual leave. This will be aligned to the CCG's
		policy annual leave, flexible working and special leave policies subject to negotiation
		Staff needing to look after very young children due to nursery closures will be required to take annual leave if alternative carer arrangements cannot be found. This will be aligned to the CCG's policy annual leave, flexible working and special leave policies subject to negotiation
ACTIONS IN RELATION TO STAFF Include details of contact lists held and the communications process with members of staff.	Activate staff communications cascade – via on call director/ EAO *NOTE: Senior Managers are required to have access to this information for the staff in their respective sections.*	
ACTIONS IN RELATION TO SPACE Include details of accommodation for patients, visitors and staff workplace areas.	Under flexible working arrangements for severe weather situations, staff should already have notified their line manager of the nearest base they can attend or whether flexible working arrangements have been agreed.	
ACTIONS IN RELATION TO SUPPLIES & SERVICES Include details of supply lines and actions following loss of service or utility.	The CCG's Medicines Management Team will be critical in maintaining appropriate access to antivirals during a pandemic.	
PLANNING VULNERABILITIES & GAPS	If these situations arise during key staff holiday times, then the impact on staffing levels would be experienced earlier than in the times when staff would normally be at work (e.g. summer holiday periods, Easter and Christmas).	
PROPOSED REMEDIAL ACTIONS	None	
OTHER ACTIONS/COMMENTS	Ensure that the communications cascade is updated at least every six months and tested once completed to validate functionality.	

	Ensure all STWCCG staff are aware of this plan and what is expected of them during incidents.

Appendix 6

FIRST MEETING AGENDA - MEETING OF BUSINESS CONTINUITY (PLANNING) TEAM
DATE, TIME AND PLACE:
ATTENDEES: CHAIRED BY:

No	Item	Action	Action By Who	Action By When
1	**Analysis of Impact** - Review Service Impact Analysis Sheets - Brief team on nature, severity and impact of disruption. - Identify information gaps - Agree immediate action necessary - Adjourn to take immediate action as needed - Agree time to reconvene			
2	**Confirm Roles** - Agree roles and responsibilities of staff during the disruption. - If required revise roles and determine if additional staff/deputies are required. - Identify additional team members that may be required - Stand down members not required			
3	**Confirm Key Contacts at Scene of Disruption** - Main points of contact for ongoing information updates			
4	**Logs** - Ensure personal logs in place. (Written record of significant events and all communications)			
5	**Recovery Management** - Review recovery priorities - Determination of support requirements.			
6	**Welfare Issues** - Have members of staff, visitors or third parties been affected? - What is their location? - What immediate support and assistance is required? - What ongoing support and assistance might be required?			
7	**Communications** - Who should we inform? - Are Communications managers required / present? - Professional Public Relations/Media advisors required? - Determine which, if any external regulatory bodies should be notified. - Determine any internal communications that need to take place (other sites, affected services etc.			
8	**Media Strategy** - Determine the media strategy to be implemented. - What is the story? What is the deadline?			
9	**Legal Perspective** • Determine what legal action or advice is required.			
10	**Insurance Position** • Determine whether insurance cover is available and if so, how best to use the support it may provide.			
11	**Next meeting** • Date, time, place and attendees of next meeting			

Appendix 7

Debrief Template Post Incident

Incident Date: **Outline of Incident:**

This debrief template provides the framework for undertaking a structured De-brief and will assist in the development of the post incident Report which will cover –

- What was supposed to happen?

- What actually happened?

- Why were there differences?

- What lessons were identified?

Issues	Response
How prepared were we?	
What went well?	
What did not go well?	
What can we do better in the future?	
Is there a need to modify the plan / training?	
Other Issues	
Communications	
Equipment	
Human resources	
Planning and briefing	
Other issues	

Completed by: **Date:**