

## POLICY DOCUMENT

Policy Title:	Business Continuity Management
Policy Group:	Whole Organisation
Policy Owner:	Chief Executive
Issue Date:	13 March 2024
Review Period:	2 years
Next Review Due	13 March 2026
Author:	C Hinton
Cross References:	Risk Management, Major utilities failure, Financial Accounting, Winter Weather Policies, HR Recruitment & Retention Strategy, Business Continuity Plan 2020
Evidence:	NHS Resilience and Business Continuity Management Guidance, DH 2008
How implementation will be monitored:	Observations when some disruption occurs (e.g. heavy snowfall) and by review with managers in respect of specific threats
Action to be considered in event of a breach:	Not relevant
Computer File Ref.	O:Risk Management: Policies: whole organisation
Policy Accepted by MT	13 <sup>th</sup> March 2024

Sign-off by CEO

### Purposes of Policy:

- To describe the framework to ensure the continuity of service to key users and customers and to preserve confidence in the Hospital's services in the event of circumstances that threaten to disrupt those services;
- To allocate responsibility for implementing altered working arrangements;
- To make plans to check that the altered working arrangements are robust enough to safeguard essential services.

### Policy Statement:

1. The Hospital's management recognises the vulnerability of the in-patients in the event of loss or unplanned diminution of service and makes arrangements to ensure the continuity of essential services.
2. The policy offers assurance to patients, their families and to public bodies with which the Hospital contracts to provide services that a proven framework exists for achieving continuity of essential services under disruptive circumstances.
3. The policy takes account of guidance applying to NHS bodies and describes a framework that is feasible and proportionate to the scale

of operation of Holy Cross Hospital, as an independent, single-specialty unit.

4. This Policy is to be implemented in conjunction with the Business Continuity Plan 2020

### **Roles and Responsibilities**

The Chief Executive is responsible for

- overall planning and resource allocation in consultation with Management Team,
- leading the risk management processes,
- supporting the implementation of the Business Continuity Plan by the Managers indicated in the plan,
- handling communications with external bodies including regulator, NHS purchasers and the press
- securing external support in the event that the Hospital's own resources appear to be at risk of exhaustion

The Director of Patient Services is responsible for:

- identifying essential patient services,
- assessing the risks of those services being disrupted and the need for extraordinary measures to maintain them,
- detailed contingency planning in respect of clinical staff, services and supplies,
- implementing the Business Continuity Plan in respect of clinical staff, services and supplies,
- leading the co-ordination of other managers, to maintain essential clinical services.

The Finance Manager is responsible for

- assessing the impact of a threat to normal operation and advising Management Team on the financial consequences of decisions to vary normal operation,
- ensuring the continuity of financial systems including payment of employees, suppliers etc and maintenance of essential financial records
- overseeing the recording of information to enable fair and accurate payment of staff where normal working arrangements are subject to change

The Director of Operations is responsible for

- identifying essential services to maintain proper standards of patient care
- assessing the risk of those services being disrupted
- detailed contingency planning in respect of catering, housekeeping and maintenance staff, services and supplies,

- overseeing implementation of the Business Continuity Plan in respect of catering, housekeeping and maintenance staff, services and supplies,
- co-ordinating with the Director of Nursing Services and other managers

Human Resources Manager is responsible for

- maintaining contact with employees and other staff to assess the impact of a threat to normal operation and to provide advice to the Director of Nursing Services and other managers on the availability of staff
- providing information to employees and other staff about the need for altered working arrangements
- co-ordinate the provision of on-site accommodation for any who are prevented from making their normal journeys to or from work
- maintaining records throughout the disruption to enable fair application of policies to any employees who are not able to work normally

#### **Determining that the plan should be implemented**

The responsibility for deciding to implement the Plan or part of it will rest with the senior nurse on duty, acting wherever possible in consultation with at least one member of Management Team.

#### **Business Continuity Plan**

- The Hospital will own an overall Business Continuity Plan, endorsed by Management Team and reviewed at least annually.
- Individual policies will be maintained in respect of expected or frequently occurring hazards to continuity including winter weather, summer heatwave, major utilities failure, fire
- The Plan will identify essential services for in-patients and describe pre-planned measures to ensure those services are secure.
- The Plan recognises that loss of staff knowledge and skills is the greatest risk. It will include reference to diverting staff from services deemed non-essential where they have the knowledge and skills to replace shortages of staff delivering essential services. It will cover employees, service providers such as doctors and therapists, volunteers, catering and other contractors' employees

The Plan will include reference to implementing other pre-planned actions with regard to

- Infrastructure (access roads, buildings, plant, equipment)
- Utilities (gas, electricity, water, telephone/digital media)
- Technologies (computers and related equipment and internet connection)
- Supplies (medicines, medical supplies and oxygen, food including enteral feeds, all other supplies)

These plans set out the following details

- What is at risk
- How are the risks managed
- What additional resources may be deployed

### **Policy Testing and Review**

Testing and review will take place at least twice annually, once in respect of a review of the Fire Policy and Procedure and once in autumn in respect of weather events.

Heightened risk of a disruptive event (e.g. pandemic, fuel shortage, prolonged severe weather, volcanic debris, major terrorist incident, widespread civil disorder or industrial action) will trigger a specific test and review.

The results of all reviews will be recorded and a summary given to Management Team.

This policy has been reviewed for overt or implied discrimination within the scope of the Hospital's policies on equality and diversity and none was found.

The policy will be reviewed bi-annually to ensure that the system described continues to provide an effective framework for managing threats to Business Continuity.