

CAMBRIDGESHIRE COMMUNITY SERVICES NHS TRUST

BUSINESS CONTINUITY PLAN

VERSION 7.02

DOCUMENT PROCESS AND CONTROL

Title:	Cambridgeshire Community Services NHS Trust Business Continuity Plan
Synopsis:	This Plan details Cambridgeshire Community Services' NHS Trust responsibilities for Business Continuity planning and the specific actions to be taken in the event of a Major Incident.
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This is a Controlled Document. On receipt of a new version, destroy all previous versions.

AMENDMENTS

Amendment No	Date of Amendment	Name & Post of Person Inserting Amendment	Date Amendment Inserted
No.1	May 2015	Jo Downey – Resilience Manager	May 2015
CEO signature, and Board sign off	16.01.18	Julia Sirett – Chief Nurse	16.01.18
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Inclusion of Service Directors in Terms of Reference s.3.1 p.21	01.03.2018	Jo Downey – Resilience & PREVENT Manager	01.03.2018

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Distribution and Document Number

ORGANISATION

Cambridgeshire Community Services NHS Trust

On call folders in the designated central location holds a copy of the Trust's Business Continuity Plan.

Other Local NHS Organisations

Local Health Resilience Partnerships (LHRP): Bedford and Luton Clinical Commissioning Group and Cambridgeshire and Peterborough Clinical Commissioning Groups.

Cambridgeshire & Peterborough NHS Foundation Trust
Cambridgeshire University Hospitals NHS Foundation Trust

East of England Ambulance Service NHS Trust

Hinchingbrooke Healthcare NHS Trust

Luton & Dunstable Hospital NHS Foundation Trust

Papworth Hospital NHS Foundation Trust

North West Anglia Foundation Trust

Essex Partnership University Trust

Partner Agencies

Bedfordshire and Hertfordshire Health Protection Unit

Cambridgeshire County Council

Luton Borough Council

Norfolk, Suffolk and Cambridgeshire Health Protection Unit

Norfolk County Council

Peterborough City Council

SERCO

Suffolk County Council

Suffolk Integrated Healthcare

Chief Executive Officer's Statement

This Business Continuity Plan sets out the process by which Cambridgeshire Community Services NHS Trust (the Trust) will respond to, manage and recover from an incident.

As Chief Executive Officer, I am responsible for the overall preparedness for Business Continuity of the Trust.

Board-level responsibility for Business Continuity and Sponsor of the Business Continuity Plan is the Chief Nurse, whilst the Owner of the Plan is the Head of Resilience and Information Governance. Routine responsibility for ensuring the Business Continuity Plan is up to date and fit for purpose rests with the Trust's Resilience Group on behalf of the Trust's Board.

The Business Continuity Plan has been approved by the Trust's Board and will be reviewed by the Trust's Resilience Group on an annual basis or the identification of amendments following a Business Continuity or Major Incident, a test/exercise of the Plan or national, regional or local guidance.

The Trust's Board approved this version of the document on 12th July 2017.



Signed

Matthew Winn, Chief Executive Officer

Date: 15th January 2018

1. INTRODUCTION

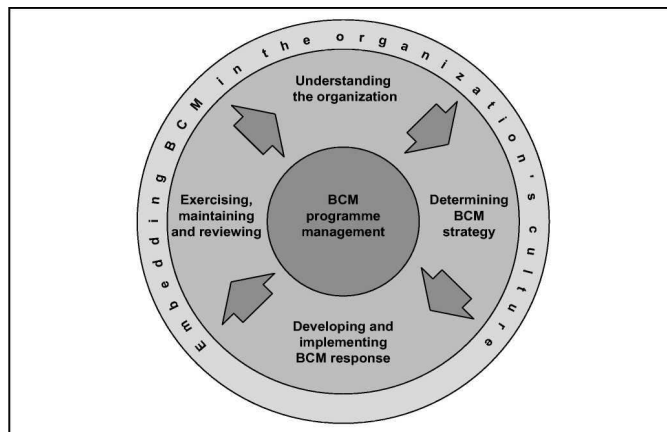
1.1 Purpose of the plan

The Civil Contingencies Act (2004) identifies certain NHS organisations as ‘Category 1 & 2’ responders. Cambridgeshire Community Services NHS Trust (the Trust) acts as a Category 2 responder.

It is good practice for the Trust to have effective and tested Business Continuity Plans (BCP) in place to ensure the Trust can continue to supply essential services during and after any incident or disruption to services, and that the Trust can then return to normal service provision as soon as possible.

1.2 Business Continuity Management (BCM) Definitions

ISO 22301:2012 Business Continuity Management (British Standards Institute) defines BCM 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 organisations resilience with the capability for an effective response that safeguards the interested of its key stakeholders, reputation, brand and value creating activities.



1.3 Business Continuity Management in Cambridgeshire Community Services NHS Trust (the Trust)

The Trust is committed to undertake Business Continuity Management in three key areas as required by the Civil Contingencies Act 2004. The Trust will direct efforts through its business continuity framework to maintain the corporate availability of information and communication technology, buildings and staff.

The Trust is dependent on the framework of these three areas.

The Business Continuity Management framework, at corporate level, will provide business continuity arrangements, which safeguard the availability and/or ensure the timely recovery of these areas.

The Trust will provide a framework for improving the resilience of service provision. This will be achieved through a series of service level business continuity plans and aims to:

- Identify key areas of service delivery
- Maintain or rapidly recover critical functions.
- Maintain the availability of key resources to support critical functions.
- Prevent or limit the disruption to service users, other services, partner organisations and stakeholders.

The Trust does not have a duty to undertake business continuity for other organisations, but only to promote the concept and to provide advice on the risks. The Trust will, therefore, act to raise awareness of Business Continuity Management through the Local Health Resilience Partnerships and the supporting sub groups to improve the health system resilience to the effects of emergencies. All third party suppliers have business continuity built into their contracts with the Trust.

Business Continuity Planning and any associated issues are actioned by the Trust's Resilience Group. The Terms of Reference for the Trust Resilience Group are at Annex A.

In the event of disruption to services as defined by this plan, the Trust will establish a Business Continuity Management Team to implement the Plan. Described in more detail in section 2.4.

1.4 Scope of The Plan

The Business Continuity Plan provides the basis to:

- Protect the safety of NHS patients, employees and visitors;
- Protect NHS Property and assets;
- Minimise disruption to service and wherever possible ensure essential services are still provided;
- Facilitate restoration of normality including early return to normal service provision.

The key objectives of the Plan are:

- To embed business continuity management into the culture of the Trust;
- To anticipate and manage changes and challenges to business demands;
- To complete and maintain a business impact analysis identifying critical functions across the Trust;
- To set out measures to maintain core business functions for several weeks during possible high levels of staff absence;
- To ensure provision of other bases/offices/telephone lines in alternative premises if current buildings become unusable;
- To ensure the business continuity plans are tested and reviewed on a regular basis.

1.5 Policies and other Plans linked to this Plan

The Trust's Business Continuity Plan will run in parallel with the following policies and procedures:

The Trust's Major Incident Plan

The Trust's Influenza Pandemic Contingency Plan

Risk Management Strategy

Serious Incident Policy

Local Resilience Fora Pandemic Flu plans

Department of Health Fuel Plan

Local Resilience Fora Fuel Plans

Cambridgeshire and Peterborough NHS Health System Fuel Plan

Bedfordshire and Luton LRF Vulnerable People Plan

1.6 Business Impact Analysis (BIA)

In line with the **ISO 22301:2012**, the Trust has determined and documented the impact of a disruption to the activities that support its key functions

through detailed business impact analysis (BIA) carried out across all business units. For each function we have:

- Assessed over time the impacts that would occur if the function was disrupted
- Established the period of time by which a function becomes critical
- Identified any inter-dependent activities, assets, supporting infrastructure or resources that have also to be maintained continuously or recovered over time.

As a result of the BIA and the risk assessment, the organisation has identified its critical functions and identified strategies to:

- Reduce the likelihood of a disruption
- Shorten the period of disruption; and
- Limit the impact of a disruption on the organisation's key functions.

1.7 Critical Services

The Business Impact Analysis process has enabled the Trust to identify the organisation's critical services which are set out at Annex D.

1.8 Red Emergency Folder

Each service team will hold a Red Emergency Folder which incorporates a number of key documents including:

- Contact Details for all members of the team and escalation phone numbers for On-Call managers
- Essential Fuel Workers
- Team Business Impact Analysis
- Team Business Continuity Plan
- The Trust's Business Continuity Plan
- The Trust's Major Incident Plan
- Corporate Documents for use in an Incident

- Standing Operating Procedures to support High, Medium and Low business functions.

2. COMMAND AND CONTROL STRUCTURE

2.1 Management Control Structure

There are a number of actions required to address disruption to services prior to a full business continuity response being activated. These are described below with reference to established working practices. However, at the point of a significant event, the need to respond to an emergency will need to be carried out in parallel with a review of the impact on the Trust's services and the activation of appropriate plans to ensure their continuation or recovery over the shortest period possible. This review will ensure that the Trust's critical functions are maintained and recovery to a new normality is achieved in the shortest possible time.

The levels determined for the Trust are set out in the table below.

Level 0	Normal Working Conditions.
Level 1	Disruption to one department.
Level 2	Disruption to more than one area.
Level 3	Disruption to significant building area or service delivery capacity.
Level 4	One or more NHS and Social Care Organisations completely disrupted including 30% sickness absence.
Level 5	Recovery.

Level	Example	Impact
Level 0 Normal Working Conditions	Loss of equipment or unexpected absence of an individual for a period of time.	<ul style="list-style-type: none"> Any events affecting normal working arrangements refer to relevant line manager or On Call Executive. On-going risk management and business continuity functions to alleviate any risks.
Level 1: Disruption to one department	Staff sickness absence	<ul style="list-style-type: none"> To be dealt with by appropriate management action.
Level 2: Disruption to more than one area	Fire, loss of IT, < 10% sickness absence	<p>Following immediate diagnosis and appropriate call-out:</p> <ul style="list-style-type: none"> To be dealt with by the Community Service Manager for each unit. Incident Form completed.
Level 3: Disruption to significant building area or service delivery capacity	Internal emergency, response to Major Incident, 10-30% sickness absence	<p>Following immediate response with evacuation/Major Incident implementation to secure safety (note involvement of senior staff in this process):</p> <ul style="list-style-type: none"> On Call Executive to consider appropriate response as Serious Incident or emergency requiring Business Continuity Plan activation. Business Continuity Management Team to form to undertake initial assessment. Implement the business continuity plan. Feed in to command and control structures
Level 4: One or more NHS and Social Care organisations completely disrupted Inc. 30%+ sickness	County or Region-wide Major Incident Pandemic Flu	<p>Following immediate response with evacuation/Major Incident implementation to secure safety (note involvement of senior staff in this process):</p> <ul style="list-style-type: none"> Business Continuity Management Team to form to undertake initial assessment. Implement the business continuity plan.

absence		<ul style="list-style-type: none"> • Feed in to command and control structures
Level 5: Recovery	Returning to a new normality	<ul style="list-style-type: none"> • This will be immediate or phased and will be determined by the BIA and individual Business Continuity Plans

Levels 3 and above refer to the Trust's Major Incident Plan.

2.2 Point of Contact

The Point of Contact for any impact on Business Continuity at Level 3 and above is via the On-Call Executive as set out in the On-Call Rota. This is set out at Annex E.

Note: Should a Major Incident be declared or on standby – the On-Call Executive will activate the Major Incident Plan.

2.3 Roles and Responsibilities within the Business Continuity Plan

Chief Executive Officer

The Chief Executive Officer (CEO) is responsible for the overall preparedness for Major Incidents, Emergencies and Business Continuity of Cambridgeshire Community Services NHS Trust.

The Chief Nurse & Deputy Chief Nurse

The Chief Nurse & Deputy Chief Nurse are responsible for developing the Business Continuity Plan supported by the Resilience Manager.

Service Directors

It will be the responsibility of each Director to ensure that their areas of responsibility have a Business Continuity Plan in place to ensure eventualities can be managed on a local basis. It is the responsibility of the Director to identify appropriate business continuity lead/s within their Units. The Chief Nurse is the Executive Director with lead responsibility for Resilience covering Major Incident Planning and Business Continuity.

On-Call Executive

The On Call Executive will liaise with the CEO or deputy to discuss what action to take and to convene the Business Continuity Management Team (BCMT) as necessary.

Head of Communications

The Head of Communications will be part of any major incident or emergency response, planning communications for business recovery and should, therefore, be undertaken by a combination of their team working in conjunction with the Chief Executive Officer and/or On Call Executive. The response would follow the specific communications actions within the Communications Strategy.

Specialist Support

The Business Continuity Management Team may require specialist support and it will be the responsibility of the Business Continuity Management Team Leader to access this support when appropriate (see Membership list in Paragraph 2.4 below). This could include:

SERCO Estates and Facilities
SERCO Informatics
Data Specialists

Staff

Trust Staff are required to co-operate fully with the implementation of the Business Continuity Plan and recognise that they may be required to fulfil duties that are not within their normal duties. Staff should be briefed on the potential impact of the Business Continuity Plan and are aware of the critical functions that have been identified in each area.

2.4 Business Continuity Management Team (BCMT)

A Business Continuity Management Team (BCMT) will be established in consultation with the Chief Executive Officer and the On-Call Executive. The Trust acknowledges that forming the exact teams for a business continuity response will be difficult because some key staff may also be involved in actions required in an evacuation or in a major incident or emergency.

The BCMT will be responsible for ensuring that the Trust's Business Continuity Plan is implemented and co-ordinate the response. The Team will report any risks associated with maintaining the critical functions of CCS NHS Trust to the Chief Executive Officer or Deputy Chief Executive Officer. The Business Continuity Management Team will be responsible for communicating internally and externally with support from the Communications lead.

Membership of the BCMT will be as follows:

Incident Leader/BCMT Leader On-Call Executive

**Incident Management Team
Members** Service Managers

Specialist Support As determined by the Team

Admin Manager	Manage the Team’s admin and co-ordinate actions
Loggist	Take minutes of meetings and general admin duties
Communications Lead	to ensure effective communications are put in place
Administration Assistant	to act as runner for the team and provide general administrative support to the Admin manager and team
Data Management Lead	to provide DATA advice.

Action Cards for each role are set out at Annex F.

An Agenda for the first Business Continuity Management Team meeting is set out at Annex G.

This BCMT will have immediate responsibility for assessing the potential impact on services and, therefore, the likelihood for restoring services to normality. Business Continuity Leads should initially assess the impact for their area of control. The impact should be assessed according to the following questions:

Service Questions	Can we maintain our critical functions? Are our patients safe? Are our staff safe? Are our buildings safe? Are our supplies safe? Are our communications systems working?
External Agencies Questions	Are our stakeholders services affected by the incident? Are their plans in place? Are staff who are not in work, safe? Are our future supplies deliveries secured? Are external communication systems working? Are alternative building/location plans viable?

The BCMT will complete an assessment checklist based on these key questions. This is set out at Annex H.

The BCMT will meet in the Incident Control Centre at the identified primary location.

An alternative location has been identified should the primary location be unavailable.

3 Communications

3.1 The BCMT will develop a Communications Plan to cover communication with:

- Staff
- Media
- Patients and the Public
- Other Providers
- Key Stakeholders
- Partner Organisations

3.2 This work will be led by the Communications Lead on the BCMT.

4. Recovery

The BCMT will implement a system for recovery to Level 5 when it first meets. (see agenda template Annex G)

Recovery will include:

- Identification of the resources needed for instigating the recovery strategy. Using the BIA, prioritisation of functions using the High Medium and Low Assessment with the Business Continuity Plans.
- Cost capture
- Capture of any lessons identified

This will aid resumption of normal services.

5. Exercising, Maintaining and Reviewing the Plan

The Trust will test its Business Continuity Plan on a regular basis. This will include:

- A test of the Plans every six months.
- A tabletop exercise every year.

- A 'live' exercise every 3 years.

The Trust conducts internal workshops and tabletop exercises and participates in county, regional and national tabletop exercises annually.

All records of staff training and exercising are kept for audit purposes.

6. Audit and Review Process

The Trust Business Continuity Plan will be subject to audit in the following ways:

- Internally and annually via the Trust's Resilience & On Call Forum.
- Clinical Commissioning Groups.
- Externally and annually via the Care Quality Commission.
- Post Incident, a review of the Plan or national, regional or local guidance.
- Regularly by Internal Audit.

Routine responsibility for ensuring the Business Continuity Plan is up to date and fit for purpose rests with the Trust's Resilience & On Call Forum, on behalf of the Trust Board.

The Resilience & On Call Forum will report to a sub committee of the Trust Board at least annually.

7. References.

Civil Contingencies Act 2004

<http://www.legislation.gov.uk/ukpga/2004/36/contents>

Standard ISO 22301:2012 – Guidelines on Business Continuity Management.

<http://www.bsigroup.co.uk/en-GB/iso-22301-business-continuity/>

Data Protection Act 1998

<https://www.gov.uk/data-protection/the-data-protection-act>

Caldicott Principles

http://www.hpa.org.uk/web/HPAweb&HPAwebStandard/HPAweb_C/1195733746440

RESILIENCE & ON CALL FORUM

TERMS OF REFERENCE

1. Purpose of Group

1.1 The purpose of the Resilience & On Call Forum is to lead the Emergency Planning process ensuring that Cambridgeshire Community Services NHS Trust (CCS) fulfils its responsibilities in acting in line with the Civil Contingencies Act 2004, the NHS England's Emergency Preparedness Framework 2013 and other relevant legislation and guidelines¹.

1.2 The Forum will assess and contribute to the work of the Cambridgeshire and Peterborough Local Health Resilience Partnership (CPLHRP), the Bedfordshire and Luton Local Health Resilience Partnership (BLLHRP) and other supporting agencies. The Group will ensure that CCS complies with major incident and business continuity guidance and requirements produced by the Department of Health and Civil Contingencies Secretariat.

1.3 The Forum will also ensure that CCS produces robust and relevant Business Impact Analysis statements allowing Service based continuity plans to be produced and feeding Community focused Business Continuity Plans that in turn ensure CCS' compliance with the planning requirements of the Civil Contingencies Act 2004.

2. Objectives

2.1 The Forum is to:

- Liaise with partner organisations and agencies, to address CCS' Emergency planning requirements
- Co-ordinate CCS' Major Incident planning and preparedness activities, including an annual review of Service Continuity Plans, Community Unit Business Continuity Plans, the overarching Major Incident Plan and associated Annexes
- Ensure regular testing and evaluation of elements of Business Continuity and Major Incident Plan and outcomes for review are cascaded throughout the organisation
- Ensure that appropriate resilience focused risk assessments are undertaken and incorporated within the Major Incident Plan and are linked to the Board Assurance Framework and Risk Register

- Ensure that service-based Emergency Planning issues are dealt with in line with Department of Health Guidance
- Oversee implementation of the Training and Development Programme for staff within the Trust
- Oversee the development of CCS Business Continuity Plans
- Ensure that key suppliers and shared services, such as SERCO fulfils its duties under the Service Level Agreement and provides robust Business Continuity Plans, which are tested on an annual basis and findings reported and acted upon
- Ensure information is communicated from and across the Trust to its staff and partners regarding emergency planning and associated National planning rounds (eg flu pandemic, adverse weather, industrial action)
- Link to the CPLHRP and BLLHRP and other Regional and National Resilience Forum Emergency Planning groups

3. Membership

3.1 The Group will comprise of nominated and responsible representatives from the following:

- Chief Nurse
- Deputy Chief Nurse
- Resilience and PREVENT Manager
- Incident, Risk Management & Resilience Team Assistant to provide the secretariat function
- Representative from each Service Unit
- Service Director or nominated deputy, acting in the capacity as Information Asset owner.
- Communications Representative
- Quality & Safety Team Representative

3.2 If members are unable to attend, a nominated person is to deputise. The Forum will co-opt other specialist staff / managers as necessary and according to circumstances, especially Human Resources and SERCO.

4. Quorum

4.1 A quorum membership will consist of the five people that should include:

- The Chair or Vice Chair
- Three other members including a delivery representative

5. Frequency of Meetings

5.1 The Group will meet every six months. Additional meetings called at the discretion of the Chair to meet operational requirements.

6. Standing Items

6.1 The following Standing Items will be included in the Forum Agenda:

- Review On Call incidents : identify trends and improvements
- Review local planning and compliance
- Review local incidents and lessons identified
- Training and Exercises
- Outcomes for Review Action Plan
- Review of CPLHRP activities
- Review of BLLHRP activities
- Other plans for development, monitoring or review
- Major Incident Plan – Annual Review
- Business Continuity Plan – Progress Reports and annual review
- National Planning – Progress Reports and annual review

7. Reporting

7.1 The Forum will report directly to a sub committee of the Trust's Board. This will be by providing an annual report to the Committee and reporting on any key issues as necessary.

8. Administration

8.1 The Deputy Chief Nurse will ensure the provision of secretarial support.

9. Review

9.1 An annual review of the Forum's Terms of Reference will be undertaken.

Author: Resilience & PREVENT Manager

Approved by: Resilience & On Call Forum

Date:

Endorsed by: Quality Improvement and Safety Committee

Date:

Cambridgeshire Community Services' Business Impact Analysis Template

Annex C

Cambridgeshire Community Services' Community Unit Service Continuity Plans Template

RESTRICTED

Cambridgeshire Community Service NHS Trust - PRIORITISED CRITICAL SERVICES

Annex D

Levels 0, 1 and 2	Levels 3 and 4 High Priority	Review all services every 24 hours	
		Medium	Low
All Services continue as normal	<ul style="list-style-type: none"> ▪ Community Nursing and Matrons ▪ Specialist Palliative Care ▪ Unplanned Care ▪ Planned Care <p>Children's Services</p> <ul style="list-style-type: none"> ▪ Holly and Special Care Baby Unit (all services) ▪ Community Nurses and Paediatrics ▪ Health Visitors, (progressive work) <p>Corporate</p> <ul style="list-style-type: none"> ▪ Incident Control Team, On Call Executives ▪ Communications. ▪ Safeguarding 	<ul style="list-style-type: none"> ▪ Contraceptive and Sexual Health ▪ Musculoskeletal Physiotherapy Service ▪ Dental Access and Community Dental ▪ Neuro Rehab/Oliver Zangwill ▪ Phlebotomy <p>Children's Services</p> <ul style="list-style-type: none"> ▪ Special Needs School Nursing ▪ Child Health Admin ▪ School Nursing ▪ Paediatric Occupational Therapy ▪ Chronic Fatigue Service ▪ Tuberculosis (TB) ▪ Paediatrics Physiotherapy and Speech and Language Therapy. ▪ Family Nurse Partnership <p>Corporate</p> <ul style="list-style-type: none"> ▪ Core support staff from Finance, Human Resources, Clinical Governance. 	<ul style="list-style-type: none"> ▪ Chlamydia Screening ▪ Community Dietetics ▪ Out-patients <p>Children's Services</p> <ul style="list-style-type: none"> ▪ Community Audiology ▪ Early Support ▪ Paediatrics Outpatient Departments <p>Corporate</p> <ul style="list-style-type: none"> ▪ Quality Performance, Serious Incidents', Risk Management ▪ Human Resources, Capacity Case Management ▪ Management and Leadership

RESTRICTED

Annex E

The Trust's On Call Rota

**CAMBRIDGESHIRE COMMUNITY SERVICES NHS TRUST (CCS) ON-CALL
 ARRANGEMENTS**

Week Commencing - <Date> 2014 -2015

(8.30AM on MONDAY <Date> to 8.30AM on Monday <Date> 2014)

Version 1 - <Date>

		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday
		<Date>	<Date>	<Date>	<Date>	<Date>	<Date>	<Date>	<Date>
ON CALL EXECUTIVE									
24 hour coverage	Mobile								
	Home								
	Office								

Kingfisher House Reception 01480 398500

Hinchingbrooke Hospital Switchboard 01480 416416

Annex F

Business Continuity Management Team Action Cards

Action Card 1	Business Continuity Incident Leader
Action Card 2	Business Continuity Incident Deputy Leader
Action Card 3	Business Continuity Admin Support Manager
Action Card 4	Business Continuity Loggist
Action Card 5	Business Continuity Admin Assistance
Action Card 6	Business Continuity Specialist Support
Action Card 7	Business Continuity Communications Lead
Action Card 8	Data Management Lead

Action Card 1

Business Continuity Incident Leader (On Call Executive)

No	Action	Notes
1	Information received from anywhere in Trust which indicates level 3 situation then contact the Chief Executive Officer and discuss whether to implement the Trust Business Continuity Plan or Major Incident Plan.	
2	If agreed, establish Business Continuity Management Team if Major Incident -activate the Major Incident Plan.	
3	Undertake Impact Assessment.	
4	Communicate any information or direction to Service Unit leads, and heads of departments.	
5	Ensure the CEO is kept up to date and discuss, if necessary, escalation to Major Incident.	
6	Ensure meeting is recorded accurately.	
7	Hold Service Managers to Account on Actions Agreed.	
8.	Promote Recovery Plan.	
9.	Log and maintain all Records.	

Action Card 2

Incident Management Deputy Leader (Executive from On Call rota)

No	Action	Notes
1	Attend Business Continuity Management Team.	
2	Take responsibility for ensuring the Business Continuity Plan is implemented.	
3	Identify risks to achieving the Plan.	
4	Undertake Actions agreed at by the Business Continuity Management Team.	
4	Promote Recovery Plan.	
5	Log and maintain all Records.	

Action Card 3

Business Continuity Admin Manager

No	Action	Notes
1	Attend Business Continuity Management Team.	
2	Provide Admin Support to the Business Continuity Incident Co-ordinator and Team.	
3	Establish any staff rotas.	
4	Take responsibility for following up all actions agreed by the Team.	
5	Log and maintain appropriate records.	

Action Card 4

Loggist

Remember to record all actions taken in the Emergency Incident Record Book

No	Action	Notes
1.	Open, maintain and keep secure the Business Continuity Management Team (BCMT) Incident Record Log which is in the Admin Box in the Incident Control Centre.	
2.	Accurately record all actions and decisions taken by the BCMT. Ensure that all decisions are agreed by the Incident Leader/Deputy.	
3.	Ensure all documentation such as flips charts, maps, faxes, messages are also accurately referenced and included in the BCMT Log.	
4.	Undertake tasks as delegated by the BCMT.	
5.	Ensure appropriate handover is undertaken at the end of your session.	

Action Card 5

Business Continuity Admin Assistant

No	Action	Notes
1	Attend Business Continuity Management Team.	
2	Undertake any admin duties as directed by the Business Continuity Admin Support Manager.	
3	Maintain a list of contacts.	
4	Log and maintain appropriate records.	
5	Undertake to “run” for the team as required.	

Action Card 6

Business Continuity Management Specialist Support Services

No	Action	Notes
1	Attend Business Continuity Management Team.	
2	Provide specialist support to the Team and ensure that Support Services Business Continuity Plans are in place.	
3	Advise Team of any risks to own plan and identify appropriate actions.	
4	Log and maintain appropriate records.	

Action Card 7

Business Continuity Management Communications Lead

No	Action	Notes
1	Attend Business Continuity Management Team.	
2	Implement Communications Plan.	
3	Prepare draft briefings and media releases as directed by the Business Continuity Incident Leader.	
4	Log and maintain appropriate records.	

ACTION CARD 8

DATA LEAD

Remember to record all actions taken on the appropriate Major Incident Occurrence Log.

If contacted by a member of the Incident Management Team:

No	Action	Notes
1	Attend Business Continuity Management Team.	
2	Provide DATA advice following assessment of the situation according to the Data Protection Act 1998 and the Caldicott Principles should be adhered to ensure a high standard of record keeping and to ensure best practice is followed.	
3	Report the DATA implications of the incident to the appropriate structures within the Trust so that the CE or (Deputy CE) is aware of risks.	
4	Log and maintain appropriate records.	

Meeting: Business Continuity Management Team
Time:
Date:
Location:

FIRST AGENDA

Chair: Business Continuity Management Team

1. Apologies
2. Introductions
3. Confirming Roles and Responsibilities
4. Recovery Strategy
5. Assessment Check-List and Action Plan
6. Business Unit Issues
7. Any Other Business
8. Date and time of Next Meeting

Annex H

**Business Continuity Plan
 Assessment Check-List and Action Plan**

Question		Yes/No	List Issues	Action Required
Services	Can we maintain our critical functions?			
Services	Are our staff safe?			
Services	Are our buildings safe?			
Services	Are our supplies safe?			
Services	Are our communications systems working?			

Question		Yes/No	List Issues	Action Required
External Agencies	Are our stakeholders services affected by the incident?			
External Agencies	Are their plans in place?			
External Agencies	Are staff who are not in work, safe?			
External Agencies	Are our future supplies deliveries secured?			
External Agencies	Are external communication systems working?			
External Agencies	Are alternative building/location plans viable?			