ISO22301 Clause 5
NHS SBS Business Continuity and Resilience Management Framework

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Contents

1. Purpose and Introduction

"Business Continuity is the capability of an organisation to continue delivering its critical activities to pre-defined levels during a disruptive incident." (ISO22301:2019).

Business Continuity and Resilience Management (BCRM) is an essential part of any business, enhancing an organisation's resilience by putting in place arrangements to help it respond to, and recover from, disruptive events effectively and efficiently. BCRM is a holistic management process that identifies potential threats to an organisation and the associated impacts to the business, should those threats materialise. BCRM provides reassurance, ensuring the protection of employees, customers, property, and the NHS SBS Brand by enabling its critical services to remain operational in the event of disruption.

2. Purpose and Justification

The purpose of the NHS SBS Business Continuity and Resilience Management Framework (BCRMF) document is to detail the organisations approach to BCRM and to outline the methodology that is used to monitor and maintain the appropriate standard of control and resilience, covering both Business Continuity and Disaster Recovery. The intention of the BCRMF is to:

- Minimise the risk of disruption to contracted services, through ensuring that the organisation has resilient infrastructure, systems, suppliers, and people.
- Identify critical business functions, resources, and infrastructure, through Business Impact Analysis (BIAs), which if disrupted would have a material impact on its ability to deliver its business-as-usual operations.
- Prepare IT DR Plans that align with the defined recovery requirements identified through BIAs and contractual obligations.
- Assess the impact of plausible disruption scenarios on all critical business functions, resources, and infrastructure.
- Implement appropriate recovery strategies to ensure that all necessary resources and mitigations are readily available to withstand the impact of the disruption.
- Develop, implement, and maintain a series of Business Continuity Plans (BCP) that document procedures and information to enable business units to respond to disruptions and recover critical business functions quickly.
- Ensure regular exercising and testing is undertaken in order to confirm that planned incident responses are effective.
- Ensure that BCPs are reviewed at least annually (or in line with contractual requirements) by a responsible senior manager and periodically through internal audit or by an external expert.

- Include BC Management as part of the planning phase for all new business acquisitions, joint ventures, material outsourcing arrangements and major projects that involve the introduction of new business processes, suppliers, people, or systems.
- Enable NHS SBs to achieve the Business Continuity Objectives stated within the Business Continuity and Resilience Management Policy.

This framework aligns, where appropriate, with the following standards:

- ISO 9001 – Quality Management
- ISO 20000 – IT Service Management
- ISO 22301 – Business Continuity Management
- ISO 22320 – Emergency Management
- ISO 22361 – Crisis Management
- ISO 27001 – Information Security Management
- BCI Good Practice Guidelines (GPG) 2018

3. Roles, Responsibilities and Authorities
(Reference: NHS SBS - C05.03 Roles, Responsibilities and Authorities V1.0)

3.1. Managing Director
- Overall accountability for the success of the BCMS.

3.2. Top Management Representative
- Accountable for the delivery of the BCMS in line with the ISO22301 standard
- Responsible for representing BC management at management reviews

3.3. Executive Team / Senior Leadership Teams
- Responsible for ensuring that service line has appropriate BC plans in place to ensure quick and controlled response and recovery
- Responsible for recovery from disruptive events
- Responsible for identifying and managing potential threats that may result in a disruptive event
- Responsible for promotion of BC management throughout service line and providing adequate resource capacity

3.4. Head of Business Continuity
- Nominated BC Lead with appropriate seniority, authority, and competence.
- Responsible for delivering BCMS in line with ISO22301 standard and the assessment of NHS SBS BCMS adequacy

- Responsible for leadership and coordination of all BCMS programme activities
- Responsible for provision of management review reporting, recommendations, and findings
- Responsible for provision of function review reporting, recommendation, and findings
- Responsible for coordination of internal audits and management reviews
- Responsible for maintenance of overarching BC documentation
- Responsible for creating and conducting awareness programmes
- Responsible for creating and conducting exercise programmes, including briefings and debriefings
- Responsible for keeping interested parties informed
- Responsible for maintaining relationships with functions and providing support during disruptive events

3.5. Plan Owners
- Responsible for maintaining business continuity impact assessments, plans and procedures in line with review cycles
- Responsible for updating documentation at the point of change
- Responsible for performing and reporting on BCMS programme activities as directed
- Responsible for taking part in and resourcing exercising
- Responsible for undertaking corrective actions in a timely manner
- Responsible for BC Plan invoke and stand down

3.6. Plan Reviewers
- Responsible for the review of documentation in line with review cycles
- Responsible for updating documentation at the point of change

3.7. Supplier Owners
- Responsible for ensuring that BCDR is built into all Supplier Contracts and managed throughout the lifetime of the contract
- Responsible for confirming that the suppliers BCDR is tested and maintained

3.8. System Owners
- Responsible for ensuring that BCDR is defined and documented for all Systems and Applications
- Responsible for undertaking DR Testing in line with the Testing Strategy

3.9. People Managers

- Responsible for understanding the BC Plans in place for the managers area of coverage
- Responsible for informing team of any changes that could impact Business Continuity
- Responsible for ensuring the safety of the team during a major event

3.10. Individuals

- Responsible for ensuring that line manager has up to date contact information
- Responsible for ensuring adherence to Health and Safety / Evacuation protocols
- Responsible for looking after company equipment and maintaining ability to work from home where applicable

3.11. Area Risk Committee

- Responsible for overseeing NHS SBS's compliance to the BCRM Policy and Framework

3.12. Quality Assurance Board

- Responsible for monitoring BCMS reporting, recommendations, and findings.

3.13. Crisis and Incident Management Teams

In alignment with the NHS SBS Incident Management Policy an incident management team will convene to address BC related incidents. The process to invoke an incident will be as stipulated within the Incident Management Procedure

Gold Level Incident / Crisis Management – Responsible for Strategic Recovery

A crisis is a situation with a high level of uncertainty that disrupts the core activities and/or credibility of an organization and requires urgent action. These types of incidents require strategic recovery, managed by the Gold Command Team made up predominately of Exec Team Members. These types of incidents will likely also require the support of the Tactical and Operational Recovery Teams (Identified as Silver and Bronze Teams within the Incident Management Policy and Procedure)

Silver Level Incident Management – Responsible for Tactical Recovery

Tactical recovery is managed by the Silver Command Team made up predominately of Senior Leaders from a single Line of Business. This can either be alongside the crisis management team for major incidents, or in response to a BC Event that impacts only a small section of the business and is not perceived as a crisis.

Bronze Level Incident Management – Responsible for Operational Recovery

Operational recovery is managed by the Bronze Command Team made up predominately of Process Owners, area specific managers and SMEs. This can be either alongside the Tactical Recovery Team for Major and Moderate incidents, or in response to minor BC Events from which there is only minor impact.

4. Business Continuity and Resilience Programme Management

NHS SBS's overall BC Programme is managed by the Head of Business Continuity and is reportable to the Area Risk Committee (ARC) and Quality Assurance Board (QAB). The programme is responsible for:

- Determining the scope and approach of the organisations BCRM
- Developing the BCRM Policy and Framework, including roles, responsibilities, and authorities
- Establishing a governance structure and process
- Establishing monitoring and reporting for progression of BIAs, BCPs, Exercising, Testing and Training
- Undertaking risk and threat analysis in relation to BC

Success of the BCRM programme is underpinned by the commitment of the Executive Team and Senior Leaders, supporting the programme via the provision of resource and expertise to implement, maintain and improve NHS SBS BCRM.

NHS SBS identifies the following three stages of Business Continuity Management:

Stage	Framework Section	Activity covered
Before	NHS SBS Business Continuity Lifecycle	• Business Assessment • Business Continuity Planning • Risk Mitigation • Review Cycles • Testing and Exercising Cycles • Continual Improvement
During	NHS SBS Crisis Response and Incident Management	• Incident Management • BCP Invocation • Immediate Response • Corrective Measures • Communications
After	NHS SBS Crisis Response and Incident Management	• Recovery and Service Restoration • Lessons Learnt / Closure Reports • BIA / BCP Review and Improvement • Preventative measures

5. Business Continuity Management Software

To support BCRM Continuity2 software is used. Business Impact Analysis (BIAs) and Business Continuity Plans (BCPs) are created, stored, managed, and reviewed within the Continuity2 system, with version control and review cycles automatically managed by the software. System reporting is used to monitor status and progress of BIAs and BCPs and consolidated data is fed into exercising and testing scenarios.

The software is a secure web-based tool, designed to alleviate and assist with the day-to-day management of an organisations Business Continuity Management system, allowing the speed of change and reducing the level of administration needed to maintain strong business continuity plans and protocols. The software is an integrated BC Quality Management system that aligns to good practice methodology in relation to Business Continuity.

6. NHS SBS Business Continuity Lifecycle

NHS SBS operates a Plan-Do-Check-Act (PDCA) model for its development and implementation of the BCRMF. This model ensures a consistent and standard approach for NHS SBS that aligns to the NHS SBS Risk Management Policy, NHS SBS Incident Management Policy, and appropriate ISO Standards.
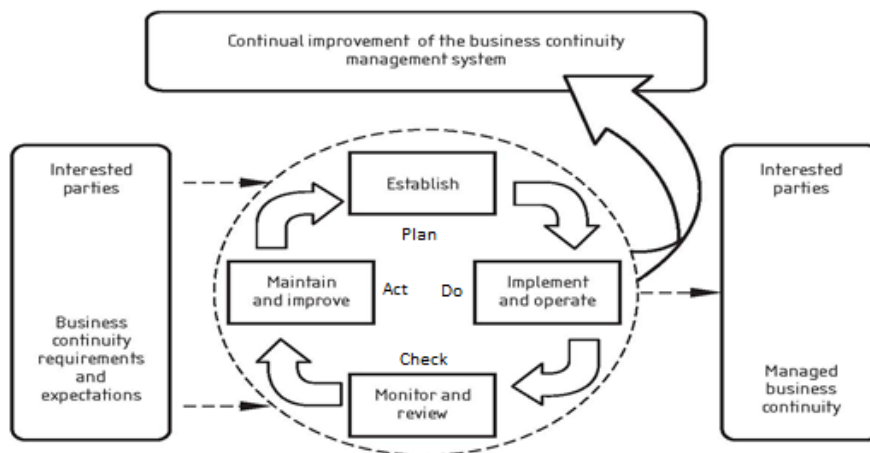
6.1. Plan and Establish

Scope

The NHS SBS BCRM Policy and Framework covers the following:

Locations
- Bristol - Ground Floor, Spectrum Building, Bond Street, Bristol, BS1 3LG
- Huntingdon - Kingfisher House, Hinchingbrooke Business Park, Huntingdon, PE29 6FH
- Salford (NW Hub) - Floor 9, 8 Exchange Quay, Salford, Manchester, M53EH
- Southampton - Waterside House, Town Quay, Southampton, SO14 2AQ
- Leeds – 1st Floor, Munroe Court, White Rose Office Park, Millshaw Park Lane, LS11 0EA
- Sheffield - Sheffield digital campus, Room 2508, 3 concourse way, Sheffield, S1 2BJ
- Mobile – Resources are home based.

Functions and Activities
• Finance and Accounting (Inc IT&C)
• Employment Services
• Procurement
• Information Technology
• Integrated Healthcare Solutions
• Client Partnership and Business Development
• Finance
• Commercial
• Marketing and Communications
• Information Governance
• Facilities

People
• All resources employed within the included functions
• All resources contractually located at the included locations

Systems
• All systems identified within the Business Impact Analysis for the included functions
• All hardware located at the included locations

Suppliers
• All suppliers identified within the Business Impact Analysis for the included functions
(Reference: NHS SBS - C04.01 Clause 4 – Context, Requirements and Scope V1.0)

Scope Exclusions

The NHS SBS BCRM Policy and Framework excludes the following areas:

Locations
India
- Noida - A-67, Sector 64 201301 Noida, Uttar Pradesh
- Pune - A-28 to A-32 Talawade Software Technology Park MIDC, Talawade 412105 Pune, Maharashtra

These are excluded from the NHS SBS BCMS as these are covered by the SopraSteria BCMS

Functions and Activities
- IT India
- HR

These are excluded from the NHS SBS BCMS as these are covered by the SopraSteria BCMS

People
- All resources employed within the excluded functions
- All resources contractually located at the excluded locations

Systems
- All systems identified in the Business Impact Analysis for the excluded functions
- All hardware located at the excluded locations

Suppliers
- All suppliers identified in the Business Impact Analysis for the excluded functions
(Reference: NHS SBS - C04.01 Clause 4 – Context, Requirements and Scope V1.0)

Where it is identified that NHS SBS is dependent on an external supplier, these suppliers will be liaised with to ensure recovery timescales and priorities are agreed and understood. Where possible and relevant, mitigating plans will be put in place by NHS SBS. NHS SBS request all thirds parties to ensure that they have their own BCMS in place; however the responsibility to recover service of an impacted third-party supplier is beyond the scope of this document.

Where a customer requests NHS SBS to demonstrate that they have a sufficient BCRM in place a statement of capability and the BCRM Policy and Framework will be supplied. To ensure that the security of NHS SBS processes and systems is maintained individual BIAs and BCP's will not be provided unless stipulated within the contractual agreements.
This Framework covers only activities and functions under the control of NHS SBS. it does not cover the requirements that are the responsibility of the client or supplier such as any end user activities or BC/DR activities that are the responsibility of the end user, for instance hospitals, surgeries, clinics, dentists, or client finance and admin functions. It is expected that the Clients, suppliers, and external parties maintain their own Business Continuity arrangements.

Risk Assessment

NHS SBS undertakes detailed risk assessment as stated in the NHS SBS Risk Management Policy. BCRM focuses on four key risk areas:

- **Personnel** – The approach to recruitment within NHS SBS and the assessment of the risks associated with NHS SBS Employees, such as accident, injury, and loss of key skills.

- **Facilities** - The environment and infrastructure which NHS SBS Operate within. Assessment of location-based risks inclusive of Physical Facility Risk, Neighbour Risk and Environment Risk.

- **Information Technology** - The security and management of all systems and data, the prevention of failure or loss and the avoidance of accidental or malicious damage.

- **Suppliers** – An assessment of the criticality of 3rd party suppliers, and the viability / stability of the supplier within the current marketplace.

A risk review is undertaken monthly for all BC Related Risks. For further details of the risks identified please contact the Head of Business Continuity.

Business Impact Analysis (BIA)

Business Impact Analysis (BIA) is undertaken in each area of the organisation to determine NHS SBS's critical services (i.e. services that must be given priority following an incident). Through BIAs NHS SBS will identify the required timescales to recover its critical business activities, and the alternate actions available to mitigate the impacts of an incident, with a view to meeting its contractual obligations, minimising impacts on service to customers, minimising financial loss and limiting damage to its reputation. During the completion of the BIA NHS SBS not only consider NHS SBS activities but also consider the requirements and obligations of interested parties.

The BIA considers both tangible and intangible losses for each business process and tracks how these change over the duration of an incident. All considerations are against worst case scenario, in relation to the loss of Sites, Suppliers and Systems, or in connection to reduced headcount or loss of key skills.

The BIAs identify the Recovery Time Objective (RTO) and Maximum Period of Tolerable Disruption (MPTD) for each activity, against which the criticality of each process activity is assessed and prioritised. In addition to RTO and MTPD the BIA will also assess:

- **Key Operational Dates** - These may compound an event or the recovery from an event should they occur on the same date.
- **Internal and External Outputs** – These groups may be impacted by an event in the activity area.
- **Internal and External Inputs**– These groups may be impacted by an event in the activity area or may be the cause of an event or outage impacting delivery of service.
- **Resources and Skills** – The volume of resources and skill types required to delivery contracted activity, along with an understanding on training timescales.
- **Applications, Equipment and Data** – The resources and documentation needed to deliver standard service.
- **High Level Mitigations** – Predetermine mitigation or responses to potential BC events.
- **Site Recovery** – Identification of Work Area Recovery (WAR) options.

Each BIA will be allocated a business reviewer (ideally an area SME) and a business approver (Ideally the process owner). Each BIA will also be allocated a distribution group to ensure appropriate stakeholders are provided with copies, should changes be made.

A full review of all BIAs will be undertaken annually (or in line with contractual requirements), or at the point of change such as during an acquisition, outsourcing, disposal, relocation, or development of a new business line.

6.2. Implement and Operate

Business Continuity Plans (BCP)

NHS SBS has BCPs covering all operational areas and sites. These plans are derived from the BIAs and linked closely with the IT DR Strategy to ensure that plans take account of the achievable IT recovery timescales. The business recovery strategy covers the implementation of measures to reduce the likelihood of an incident occurring, increases the levels of operational resilience and implements strategies to recover from an incident in a controlled and prioritised manner.

The purpose of the BCP is to:

- Identify the initial reactions to a BC Event and invocation trigger points.
- Enable staff to be accounted for and managed during a BC Event
- Assist with the assessment of the impact of a BC Event
- Identify recovery options and priorities
- Coordinate communications with employees, clients, suppliers, and stakeholders

STAR Methodology

Each BCP follows the STAR methodology with regards to recovery, providing guidance to users of the actions required immediately following BC event identification.

- **S** (SAFE) – NHS SBS has a responsibility for the safety of its employees, visitors, and guests. Should a BC event occur it is the line manager's responsibility to ensure that all employees are Safe as priority over any other recovery activity. (In the case of visitors and guests this is the responsibility of the NHS SBS host).

- **T** (Tell) – Upon identification of a BC event it is important that the protocol for raising a bronze, silver or gold incident is followed and complies with the NHS SBS Incident Management Policy and Procedure.

- **A** (Assess) – Upon Identification of a BC event the Incident Group should use the BCP and BIA information to assess the impact on critical services. This should include reviewing the status of activity at the time of the incident and ascertaining any impacts on asset availability (such as access to critical data or facilities).

- **R** (Respond and Recover) – As part of the incident management process the incident group should identify and cascade appropriate responsive actions to the BC Event. It may be prudent for all non-critical work to be placed on hold to generate capacity to continue delivering business critical services. Recovered status and BC event closure can only be undertaken with the agreement of the senior incident leads and stand down authorities.

Where appropriate, cost-effective resilience measures are implemented to lessen the likelihood of an incident and minimise the impact of a BC event. Such measures include, but are not limited to, the availability of remote access for all computer-based users, site security, fire suppression systems, generators and IT security and monitoring systems.

Each BCP will be allocated a business reviewer (ideally an area SME) and a business approver (Ideally the process owner). Each BCP will also be allocated a distribution group to ensure appropriate stakeholders are provided with copies, should changes be made. A full review of all BCPs will be undertaken annually (or in line with contractual requirements), or at the point of change such as during an acquisition, outsourcing, disposal, relocation, or development of a new business line.

Disaster Recovery and Backup Plans

Disaster Recovery (DR) and Backup (BU) plans are included within the scope of the BCRM Policy and Framework, with DR and BU plans forming an integral part of NHS SBS's response to BC events. These plans are developed, managed, reviewed and tested by the appropriate IT Department and supported by run book recovery documents.

BU of data and documentation will be maintained to ensure appropriate recovery is completed with the minimal of interruption to the service. BU Plans will incorporate recovery point objectives (RPO) and be monitored against the recovery time objectives (RTO) identified within the organisations BIAs.

DR Plans will incorporate a testing cycle, in line with business need and contractual obligations. DR tests may take place in part to test the predetermined failovers or may be tested in full to ensure services can resume following successful implementation of the DR strategies. DR tests will only be conducted following full and prior notice to the system end users.

Please note: DR Plans are currently managed outside of the Continuity2 system, though referenced in the Application and Software section of the BIA.

Training

BC training is provided based on responsibility and reflects the competencies required to plan for, respond to and recover from BC Events. The following training provisions are in place:

- Business Impact Training / System Usage
- Business Continuity Plan / System Training
- Continuity2 Standard Operating Procedure
- NHS SBS Risk Management Training
- NHS SBS Crisis Management Training
- NHS SBS Incident Management Training

Competencies

For the BCMS to comply to required standards the following competencies and skills are required:

Head of Business Continuity
- ISO22301 Lead Implementor Trained
- BCI Good Practice Guidelines Diploma / BCI Membership
- Expert Continuity2 User
- Emergency Response and Crisis Management Trained
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained
- BC Exercise Planner
- DR Testing Planner

Managing Director / Top Management / Executive Team
- Basic Continuity2 User
- Introduction to Business Continuity and Plan Invocation
- Expert understanding of Business Continuity measures in area of control
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained

Plan Owner / People Managers
- Experienced Continuity2 User
- Introduction to Business Continuity and Plan Invocation
- Expert understanding of Business Continuity measures in area of control
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained

Plan Reviewer
- Experienced Continuity2 User
- Introduction to Business Continuity and Plan Invocation
- Understanding of Business Continuity measures in area of control
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained

Supplier Owners
- Introduction to Business Continuity and Plan Invocation
- Supplier Management Trained
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained

System Owners
- Introduction to Business Continuity and Plan Invocation
- Expert in DR Management and Testing
- Expert in Back Up Management and Testing
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained

Individual
- Introduction to Business Continuity and Plan Invocation
- NHS SBS Crisis and Incident Management Trained
- NHS SBS Risk Management Trained

Training and competency levels are monitored to ensure appropriate completion

6.3. Monitor and Review

Document Review Cycle

BIAs and BCPs are reviewed and updated on an annual basis (or in line with contractual requirements) or at the point of change such as during an acquisition, outsourcing, disposal, relocation, or development of a new business line.

It is the responsibility of the BIA and Plan reviewers and approvers to ensure the accuracy of the data captured, however thorough testing will serve to identify weaknesses or gaps within the BC documentation.

Exercise and Testing Strategy

BIAs and BCPs are risk assessed in line with the NHS SBS Risk Management Policy. BC exercising is undertaken in line with a risk-based exercising and testing strategy stipulating that:

- Business areas assessed as low risk, with a risk rating of 0-9 are tested every 24 months
- Business areas assessed as moderate risk, with a risk rating of 10-19 are tested every 12 months
- Business areas assessed as high risk, with a risk rating of 20-25 are tested every 6 months

The NHS SBS BC testing strategy ensures that BC plans and procedures remain valid and effective and are consistent with the BCRM Policy and Framework as well as supportive of the Organisations Strategic Objectives.

Exercising and Testing Protocol

Exercising and Testing supports the continual improvement of NHS SBS BCMS and provides leaders and employees with valuable training. BC testing and exercising can be undertaken in a variety of ways. The below table provides examples of the types of exercising and testing undertaken by NHS SBS.

Nature of Test	Focus	Expected Outcome
Singular Simulation / Scenario Exercise	Desktop Exercise to walk through the response to a planned progressive incident scenario.	Refining BIA / BCP, identifying weakness or areas of improvement.
Multiple Simulation / Scenario Exercise	Desktop exercise to walk through the response to a planned progressive incident scenario for multiple BCP or Site Plans	Refining BCP, identifying weakness or areas of improvement. Validating areas of dependency and impact.
Transactional Exercising	Exercising recovery strategies through the live transfer of activity to mitigation / back up plans (i.e. working from planned WAR site)	Validating recovery strategies and predetermined mitigations. Uncovering any unexpected complications to allow these to be addressed prior to a BC Event.

Call Tree Testing	Testing the ability for messages to be cascaded throughout the organisation and to key stakeholders.	Validating the data held for all NHS SBS Employees, validating the reach of emergency messaging, practicing methods of cascade prior to a BC Event.
Disaster Recovery Testing	Controlled testing of the System and Application DR Plans to validate the predetermined run book responses.	Validation of the DR runbook and identification of any weaknesses, errors, or improvements.
Back Up Testing	Controlled testing of the data and system back ups to validate their availability and integrity in line with RPO requirements	Confirmation Back Ups are available, complete, and aligned to Business RPO requirements

NHS SBS do not employ partial or full interruption testing, as the above exercise and testing scenarios are sufficient to achieve the desired outcome without impacting the service provided.

NHS SBS BC testing and exercising will involve employees from all levels of the organisation, as appropriate and will include participation of employees with direct BC responsibility as well as their deputies.

Each BC exercise or test will be fully documented within 2 weeks of the test taking place. Observations and recommended actions will be provided to Plan Owners and all agreed actions will be monitored through the monthly BC Progress Reporting.

6.4. Maintain and Improve

Education, training, exercising and promotion of the NHS SBS BCRM Policy and Framework is undertaken to ensure that BCRM is successful embedded into normal business practices and that BIAs, BCPs and recovery strategies are continuously maintained and validated.

Lessons Learnt are undertaken following all real life and test events to ensure all weaknesses or areas for improvement are addressed. Lessons Learnt draws upon the thoughts and expertise of Senior Leaders, Plan Leaders, SMEs, and those with direct BC responsibility.

Change Management

Changes are authorised by the NHS SBS Head of Business Continuity and the appropriate Plan Owner or Senior Leader. The BCP and associated documentation will be reviewed when:

- There is a significant or major change to the scope of the service delivered by NHS SBS.
- A change has been made to a contracted service or agreement with the customer.
- A new service has been introduced.
- An existing service is changed or retired.
- There are changes to legislation or regulatory requirements.
- An exercise / test / review report is issued identifying areas of weakness or areas for improvement.
- Following an incident or live scenario in line with the Lessons Learnt process.
- At the written request of a client, or interested party with appropriate justification

Performance Indicators

BCMS performance indicators have been developed to help monitor and measure the performance of the NHS SBS BCMS against the requirements set out within the BCRM Policy and Framework. Results are reported to:

- Area Risk Committee (ARC) – Monthly
- Quality Assurance Board (QAB) – Quarterly
- Business Directors – 2 Monthly
- LOB Governance Leads – 2 Monthly

7. Crisis Response and Incident Management

As soon as there is a recognised threat to maintaining continuity of services, NHS SBS will prepare to invoke the BCP if necessary. In the event of a complete loss of technical service IT DR Plans will be immediately invoked.

Some incidents can be immediately categorised as 'Disaster' (e.g Fire, Flood, Earthquake, etc) and as such will require immediate action from the Gold Level Incident Management Team, with potential invocation of a large number of BCPs. Incidents that have an anticipated longer than acceptable recovery time, or those with a greater than acceptable impact may also be categorised as 'Disaster' upon agreement with the Head of BC and Senior Leads.

In alignment with the NHS SBS Incident Management Policy the incident management team will convene to address BC related incidents. The process to invoke an incident will be as stipulated within the Incident Management Procedure. Initially, crisis or incident meetings will be held virtually via Microsoft Teams, ensuring appropriate attendees are present as set out within the NHS SBS Incident Management Policy and Procedure.

Gold Level Incident / Crisis Management – Responsible for Strategic Recovery
- Strategic command and control of collective NHS SBS response
- Notification to stakeholders and invocation of communications plan (including media relations)
- Approval of Invocation of BCPs or DR Plans, including reinstatement of BUs
- Evaluation of response strategies at tactical and operational levels
- Liaising with Silver Team where appropriate

For further details on membership please refer to the NHS SBS Incident Management Policy and Procedure

Silver Level Incident Management – Responsible for Tactical Recovery
- Managing the incident and local recovery
- Accessing Site or Function BCPs and selecting appreciate response strategy
- Approval of Invocation of Site of Functional BCPs
- Mobilising the workforce to focus on recovery and critical deliverables
- Initiating staff call out and communication cascade where required
- Supporting customer and media relations
- Liaising with 3rd Party Suppliers
- Liaising with Gold and Bronze Team as appropriate

For further details on membership please refer to the NHS SBS Incident Management Policy and Procedure

Bronze Level Incident Management – Responsible for Operational Recovery
- Accessing individual BCPs and selecting appropriate response strategy
- Monitoring, managing, and communicating to the workforce where appropriate
- Implementing practical recovery methods and supporting the recovery efforts
- Monitoring workflow against KPIs and SLAs
- Maintaining customer relationships
- Liaising with Silver Team where appropriate

For further details on membership please refer to the NHS SBS Incident Management Policy and Procedure

8. Force Majeure

NHS SBS will immediately notify SopraSteria, the Department of Health and its affected interested parties of a Force Majeure incident and implement the NHS SBS Incident Management process and procedures. Strategies for recovery of systems and services will be agreed to facilitate the continued performance of services.

Force Majeure will apply when any cause affecting the performance by NHS SBS (or its customers) of its obligations arising from acts, events, omissions, happenings, or non-happenings beyond its reasonable control result in a work area being inaccessible or accessible but without major services.

In the event of a work area recovery scenario where Force Majeure is applicable NHS SBS will endeavour to set up work area recovery sites by making use of the existing work area recovery site options until such a time that a planned return to the original site and service can be executed. The restoration of the service will follow the same procedures as those taken for work area recovery, although the timescales will be extended.

IT and Physical Security
During a BC event IT and Physical security will be maintained at all times. Only in extraordinary circumstances, with full justification and formal approval from the Gold Command Team and Chief Information Security Office can IT or Physical Security be reduced.

9. Invocation Process

To ensure a consistent and strategic approach to response and recovery, NHS SBS BCP's will be invoked in the following circumstances:

- Loss of access to a single site for more than 4hours, which impacts onsite employees or where KPIs and contractual obligations are at threat of being missed.
- Loss of Utilities (Electricity, Gas, Water) at a single site, likely to continue longer than 4hours, which impacts onsite employees.
- Loss of network access or system outage, for a timescale that will likely breach contractual obligations or where KPIs are at threat of being missed.
- Unavailability of greater than 20% of resources or unavailability of specific skills required to meet contractual obligations.
- In the event of, or in preparedness for, a terrorism, cyber or pandemic event.
- At the notification of a serious event at a customer or interested party site, where there is a potential for serious disruption to services provided by NHS SBS.
- Where, in the opinion and agreement of a senior leader or plan owner, the circumstances cause or threaten to cause serious disruption to the services provided by NHS SBS.

Invocation and stand down authorities (Named individuals) are identified on all BCPs.

9.1. Invocation Timescales

The following high-level schedule indicates the types of activities to expect in the first few hours following the identification of a Disaster, Crisis, or Major Incident. These timescales will vary depending on the nature and extent of the event.

Within 1 Hour of Incident Notification
Where an internal individual identifies an incident the incident management process will be followed to ensure that an Incident call is raised promptly with the appropriate Incident Management Team (IMT) (i.e. Gold, Silver, Bronze) in line with the NHS SBS Incident Management Policy and Crisis Management Plan.

Where an external party identifies an incident, this should be flagged to their account manager or key contact, who will then be responsible for invoking the incident management process within NHS SBS in line with the NHS SBS Incident Management Policy and Crisis Management Plan.

Activities to be undertaken
- NHS SBS IMT to be notified and a call, where required, to be held,
- Assessment of the immediate situation to be undertaken
- Resources to be assigned to
  - Assess the immediate and long-term impact (Rapid Impact Assessment)
  - Utilise BIA / BCP to identify appropriate workarounds
  - Identify the likely duration of the incident
  - Identify cause and likely recovery scenario
  - Identify communication requirements and draft communications
- Incident to be reported following the standard process

Within 1 to 4 Hours of Incident Notification
Depending on the type and criticality of the identified incident IMT Teams will be formed at Gold, Silver, and Bronze Levels as appropriate.

Activities to be undertaken
- NHS SBS IMT regular incident calls to be scheduled until event closure.
- Investigation works to be completed into impact, workarounds, and recovery scenarios. Utilisation of BIAs / BCPs.
- Likely root cause to be identified.
- Workarounds to be implemented where applicable
- Recovery scenarios to be agreed and implementation to commence where applicable
- Communications Plan to be defined and implemented

Following 4 Hours of Incident Notification
At this stage the workarounds and proposed recovery strategy should be known.

Activities to be undertaken
- Recovery plan will be agreed
- Recovery will be initiated and managed to completion
- Communications to be maintained with key stakeholders.
- Stand down status will be defined – This is ideally when services are returned to pre incident levels.

Invocation and stand down authorities (Named individuals) are identified on all BCPs.

9.2. Full-service restoration

Full-service restoration can be achieved either at the original site or at a combination of the DR and WAR Site(s). However the return to normal service involves returning the recovered services to their 'normal' operating location. The 'normal' location may not be available and therefore the recovery plan will not be able to be fully completed until the extent of the damage is assessed. Damage and impact assessment should take place in the early stages of the incident with input from all key stakeholders.

10. Communications

Communication is a vital part of managing any BC Event and ensures that employees, clients, suppliers, and other interested parties are kept abreast of the situation, impact and recovery efforts.

All Employee Call Tree

The employee call tree information is captured within the Continuity2 system using data downloads from the SopraSteria HR4You system. The system has the capability to issue mass text and email notifications to users when required. People managers are also responsible for ensuring that they maintain contact information for their direct reports to ensure cascade communication is possible when required and directed by the IMT Teams.

All Employee Communications

All employee communications are managed by the NHS SBS Marketing and Communications Team. As part of the incident processes communications will be drafted and approved by a relevant senior leader prior to issue. These communications will be clear and concise, providing impact and update information and directing action where required.

Process Owner and Manager Communications

Process Owner and Manager communications are managed by the NHS SBS Marketing and Communications Team. As part of the incident process communications will be drafted and approved by a relevant senior leader prior to issue. These communications will be clear and concise, providing impact and update information and directing action where required.

Depending on the severity of the BC Event the sector senior leader may issue these communications directly.

End User Communications

As part of the incident management process end user communication requirements will be defined. These communications can be undertaken in the following forms:

- Digital Helpdesk / Home Page / News Page updates – Updated by the appropriate IT Department.
- IVR / Service Desk updates – Updated by the appropriate IT / Service Department
- Direct Telephone / Email Contact – Undertaken by the Client / Account Manager / Key Contact.
- All user communication – Issued by Marketing and Communications

External Communications

As part of the incident management process client, supplier, and interested party communication requirements will be defined. These communications can take the following forms

- Direct Telephone / Email Contact – Undertaken by the Client / Account Manager
- External Communications – Undertaken by the Marketing and Communications Team
- Press / Media – Managed by the Marketing and Communications Team and Executive Team
- Web page updates – Managed by the Marketing and Communications Team

Client Internal Communications

It is the responsibility of the client organisation to communicate internally within their own organisation, however where possible NHS SBS can support with this activity.

BC	Business Continuity
BCMS	Business Continuity Management System
BCRM	Business Continuity and Resilience Management
BCRMF	Business Continuity and Resilience Management Framework
BCRMP	Business Continuity and Resilience Management Policy
BIA	Business Impact Analysis
BCP	Business Continuity Plan
RTO	Recovery Time Objective
RPO	Recovery Point Objective
MTPD	Maximum Tolerable Period of Disruption
IMT	Incident Management Team
DR	Disaster Recovery
BU	Backup
WAR	Work Area Recovery
PDCA	Plan Do Check Act
ARC	Area Risk Committee
QAB	Quality Assurance Board

10.1. Implementation and Monitoring

10.2. Implementation

This Policy will be published on The Beehive. Employees will be made aware of this Policy through employee communications and training.

10.3. Process for monitoring implementation & effectiveness

For this policy, the following monitoring processes are in place.

Standard	Monitoring process
Monitoring arrangements for compliance and effectiveness	The Framework will be reviewed annually and an annual report of any changes produced for the Quality Assurance Board
Responsibilities for conducting the monitoring / audit	Head of Business Continuity and F&A Governance
Frequency of monitoring/audit	Annually – or as necessary following a Business Continuity event
Process for reviewing results and ensuring improvements in performance occur	The Quality Assurance Board will review the results of this audit. The discussion and any action points will be recorded in the minutes and followed up by the Quality Assurance Board.

11. Dissemination & Access to the Framework

This policy will be accessible to all employees on the Governance and Assurance pages of The Beehive.

12. Review, Updating & Archiving

The Privacy, Risk & Counter Fraud Coordinator will maintain an archive of all policy documents; this can be accessed through the Senior Privacy Manager. This policy will be reviewed annually unless there are any legislative changes prior to this.

13. Information and References

- NHS SBS Business Continuity and Resilience Policy
- NHS SBS Incident Management Policy
- NHS SBS Incident Management Procedure
- NHS SBS SIRI Management Policy
- NHS SBS Risk Management Policy
- NHS SBS Health and Safety Policy
- NHS SBS Crisis Management Plan

14.   Version Control Sheet

If revising a policy/procedure summarise the key changes made in the comment's column.

Where a policy/procedure replaces a previous version, the old version will be archived in accordance with the Policy for the Development and Management of Policies and Procedures.

Version	Date	Author(s)	Job Title	Comment
0.1	March 2022	Claire Street	Head of BC and F&A Governance	Draft
1.1	January 2023	Claire Street	Head of BC and F&A Governance	Updated Salford, Leeds and Sheffield Addresses
1.2	January 2023	Claire Street	Head of BC and F&A Governance	Updated following QAB review
2.0	January 2023	Claire Street	Head of BC and F&A Governance	Approved version