Classification: Official

Publication approval reference: PR1254



# Part 1- Plan Resource D Site Business Continuity Plan Template

Version 2.0, 17 April 2023

# **Contents**

1. Scope of the Plan	. 2
2) Aim	. 2
3) Plan Objectives	. 2
4) Communications	. 3
5) Site Risk Assessment	. 4
6) Internal Plan Activation Triggers	. 6
7) Plan Activation and Escalation	. 7
8) Plan activation Key On call contacts	. 8
9) Services Operating from this Site	10
10) IT and Telephony	11
11) Space Availability	12
12) Reporting / Debriefing	12
13) Site Agreed Single Point of Contact Action Card	13
14) Sign Off	14
Annex 1: Fire Evacuation Procedures	15
Annex 2: Lockdown Procedures	16
Annex 3: Incident Impact Assessment Form	17
Annex 4: Site Incident Management Meeting Agenda	19

#### 1. Scope of the Plan

With increasingly integrated models of care delivery, buildings or sites are often occupied by multiple organisations. Dependencies and responsibilities for communication during times of disruption can be unclear.

Note:

Each organisation is responsible for providing information on the services operated from a building and points of contact / escalation.

The Site Continuity Plan for the named site identifies:

- The Site Agreed Single Point of Contact responsible for alerting building / site users from other organisations as to disruption.
- All essential building infrastructure elements (hard facilities management, e.g maintenance)
- Soft facilities management services such as security e.g. account for colleagues withing the building as well as cleaning)
- Any information technology infrastructure and key public facing telephone numbers at the property level

#### Out of Scope:

- Each organisation is responsible for maintaining appropriate service business continuity plans including call cascade processes once alerted.
- Some facilities management services may also be covered under specific service level agreements to restore services following disruption in an agreed timeframe.

#### 2) Aim

To ensure staff and patient safety through a co-ordinated response to building or site disruptions, thereby minimising the impact on the wider health economy.

#### 3) Plan Objectives

- That building users, facilities managers and relevant contractors fully understand their role and responsibilities in the event of a building or service disruptive incident.
- That any important building information which would be useful in emergencies is produced and recorded in this document.
- That clear escalation and communication routes exist across services and organisations to inform early activation of service level business continuity plans and appropriate coordinated support at local and regional level.
- That proposed escalation and coordination arrangements mitigate the impact of any incident. Total site loss will require discussions with commissioners, insurers and other interested parties.

#### 4) Communications

Business continuity plans should have clear and concise communications procedures for organisations, this should be both internal and external. Procedures for warning and informing the public should be documented with the business continuity plans. Furthermore, organisations should also document processes to deal with media management within their plan. This allows for a unified approach especially when responding to an incident. Information sharing procedures should also be aligned to the organisations Information Governance standards.

#### 5) Site Risk Assessment

(Risks to the building based on review of relevant local risk registers and the history of incidents affecting the site and wider area.) The following generic risks have been identified for all sites.

- · Damage to or denial of access to premises resulting in loss of accommodation for staff / patient / support service
- Loss of or damage to Information and Communications technology
- Non-availability of key staff
- Loss of or damage to key resources
- Loss of key partner resources

Hazards present/threatening site	Risk Rating	Comments / Details	
			-//
Add as required			

<sup>\*</sup> Please see service Business Continuity Plans for identified risks to services.

Commented [SA1]: For example, surface water flooding, loss of power, loss of telephony, heating failure

A risk table could be added if it assists with understanding

Delete this box when completed.

Commented [SA2]: Scoring is up to local discretion. Use organisation's own risk management policy/ matrix and /or agree between contributors which risk matrix is used, for example, community risk register matrix. Delete this box when completed

Commented [SA3]: Location of plans or mitigation measures. You may wish to put hyperlink to other plans, service level Agreements or Memoranda of Understanding here.

Delete this box when completed

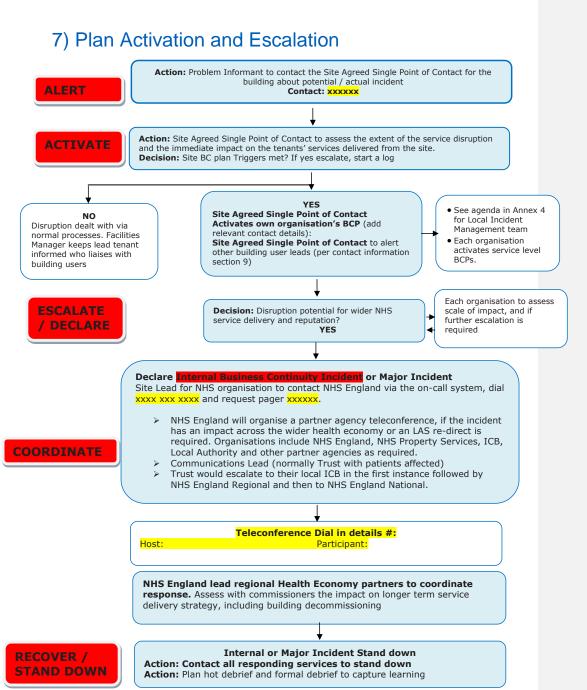
#### **Key Building Safety Information**

Type of information	Location of items within	Location of specific plans or	Brief details or comments of initial p	rocedures	
	building	procedures for rapid access	or contingencies:	document reprodu	:]: It is not intended that this ces existing procedures. It should be
Key holder details				helpful information	e their location and to detail very brief to make safe and initiate
Gas shut off				contingencies Delete this box wh	en completed
Water stop cock					
Fuse box					
Alarm panel					
Asbestos register					
Medical gas storage and shut off					
Fire-fighting equipment					
Add as required					

# 6) Internal Plan Activation Triggers

This is important because it determines when you need to escalate for wider support. Review the incident levels. If unsure, complete the impact assessment in annex 3 and escalate early. This is a generic template, therefore, tailor the internal plan activation triggers to your organisation.

Incident Level	Description	Example	Plan Activation	Escalation
1 – Low level incident	This level would consist of routine building issues which can be dealt with within business as usual (BAU) measures and will not impact upon any critical activities/services.	Leaks, spills, generic maintenance issues	No	Escalation should stay within <b>local limits</b> of building users to ensure <b>BAU</b> capabilities are met.
2 – Moderate level incident	Loss of non-critical activities/services due to a minor disruption or incident which is not expected to last more than the Recovery Time Objective (RTO) and will not impact on critical activities/services.	Local flooding, local IT failure, telecoms disruption, localised infection disease outbreak	No Should be managed by the service business continuity plan.  YES Should disrupted services require further resource or site support, this plan may be activated to support their response.	Agreed Single Point of Contact escalates to Building Users / Senior Managers on-Call out of hours for them to activate their Service Continuity Plans as required
3 – Significant level incident	Loss of critical activities/services due to a disruption or incident which has a potential to last more than the Recovery Time Objective (RTO) but will need the coordination of a senior manager.	Utility failure, damage to site, restricted access to site, partial loss of key suppliers	This plan will support services in their ability to continue their most critical functions by recovering the sites critical activity within the RTO	Agreed Single Point of Contact escalates to Building Users / Senior Manager on-Call out of hours and NHS England Regional Team to activate their Service Continuity Plans as required
4 – Extreme level incident	Loss of critical activities/services due to a disruption or incident which is expected to last more than the RTO and may cause risk to patient and staff safety	Fire on a ward resulting in evacuation, Severe weather conditions causing damage to site and access issues, complete prolonged IT or Utility failure, External Major incident	This plan will support services in their ability to continue their most critical functions by recovering the sites critical activity within the RTO	Agreed Single Point of Contact escalates to Building Users / Senior Manager on-Call out of hours and NHS England Regional Team, and consider national escalation to co-ordinate the response.



#### 8) Plan activation Key On call contacts

SITE AGREED SINGLE POINT OF CONTACT: Use the contact details provided here to inform other tenants to activate their Business Continuity arrangements

**Note:** It is good practice to hold an alternative / personal contact number of key staff to be contacted in the event of an emergency. Contact details should be stored securely and be used only in the event of an emergency to convene a team to manage the incident.

Function	Organisation / Name	Numbers
Site Agreed Single Point		Direct:
of Contact (SPOC)		Mobile:
Key holders		Direct:
·		Mobile:
Site Facilities Manager		Direct:
(may also be Site Agreed SPOC and or key holder)		Mobile:
Deputy / Alternative		Direct:
		Mobile:
Tenant 1		Direct: Mobile:
Tenant 2		Direct:
		Mobile:
Tenant 3		Direct:
		Mobile:
Tenant 4		Direct:
		Mobile:
Add rows as required		
Cita Cannita / Alama		Direct:
Site Security / Alarm Company		Mobile:
(In / Out of Hours)		Mobile.
Building Reception		Direct:
		Mobile:
Building Owner		Direct: Mobile:
Soft FM services		Direct:
(Cleaning, catering,		Mobile:
maintenance)		WODIIG.
Hard FM Services		Direct: Mobile:
Add rows as required		

Commented [SA5]: You may wish to colour code Red, Amber, Green the priority in which contacts should be called, or simply rank in priority order Delete this box when completed.

**Commented [SA6]:** Specify 24/7 or office hours only Delete this box when completed

Note: Routine facilities management issues and building management issues are to be reported and managed according to normal locally agreed business as usual procedures. 9 | Part 1 - Resource D, Business Continuity Site Plan Template

# 9) Services Operating from this Site

Each organisation is to assess their own services on the site against the criteria below. The single point of contact identified in section 9 is responsible for alerting across all services affected in their organisation.

		ather replines if these suist in service Dusiness largest
4	Essential service – cannot be shut down for any time at all. Recovery Time Objective within 4 hours	other rankings if these exist in service Business Impact Analysis already completed. This should be agreed
3	High Priority: Needs to be priority for service resumption. Recovery Time Objective within 24 hour	locally.
2	Medium Priority: Recovery Time Objective 48 Hours	Delete this box when completed.
1	Low Priority: Recovery Time Objective 72 Hours or longer	

Commented [SA7]: Organisations may wish to use

Organisation	Service / Activity	Criticality (4-1) ranked	Alternative Location Identified (Yes / No)
Add rows as required			

# 10) IT and Telephony

Please list any highly published public facing numbers within the building

Number	User/Organisation used by	Criticality	de	dermatology	d [SA8]: e.g. patient helpline for ox when completed.

Are critical IT hardware / Servers hosted on this site?	If Yes - Single Point of Contact in and out of hours	Commented [SA9]: Please detail e.g. Server room for
		all community services Applications and Single Points
		of Failure
		Delete this box when completed.
		Commented [SA10]: Single point of Contact:
		In hours:
		Out of Hours:
		Delete this box when completed.

#### 11) Space Availability

Please list any available spaces e.g. flexible space (hot desking), meeting rooms, clinic spaces within the building that can be used temporarily for disrupted staff or service.

Building floor Number	Type of spac	How many people / patients can occupy the vacant space	Please provide additional information	deski	mented [SA12]: Specify treatment room/ hot ing – state the number of bed / desk spaces te this box when completed.
				availa	mented [SA13]: For example, is there Wi-Fi able, network printers etc te this box when completed.
					mented [SA11]: e.g. 1 <sup>st</sup> / 2 <sup>nd</sup> floor etc. te this box when completed.

#### 12) Reporting / Debriefing

Activation of this plan needs to be reported on via NHS England and within each organisation following internal procedures. The site single point of contact is responsible for notifying tenants to the activation of this plan, whilst individual organisations are responsible for notifying commissioners and partners to the activation of this or their own service business continuity arrangements. This also means the organisation can brief NHS England as to their actions and impact to services which the building owner will not actually know.

Please ensure that a log book is completed to record decisions taken, and secured to inform the later debrief and for legal reasons

### 13) Site Agreed Single Point of Contact Action

#### Card

As the Site Agreed Single Point of Contact (or Deputy noted on page 3), you are responsible for escalating awareness of the incident to all building users, maintenance providers and operational service leads.

Your building and services have been disrupted.

No	Site Agreed Single Point of Contact is responsible for:	tick
1	Identify the scale of the disruption and the services/activities it is affecting	
	Alert / Activate all services in the building (via reception / tannoy / email group or other arranged mechanism)	
2	Confirm the safety of patients, staff, contractors and visitors coordinating response with other building users and hard / soft facilities providers	
3	Call Service Managers / Leads of services or any internal/ external persons operating from this site to inform them of incident and to activate their service Business Continuity Arrangements / Plans.	
4	Inform the building owner / head leaseholder (e.g. NHS Property Services, affected Trusts)	
5	Notify upwards: (details per escalation flow chart)	
	1. Own Organisation: On call Manager (organisation silver/tactical)	
	2. Other building users: Business Continuity leads	
	3. NHS England Regional team	

#### Receiving disrupted services into the building

No	Site Agreed Single Point of Contact is responsible for:	tick
1	You receive information that another location has been affected and that staff may need to work from your location	
2	Alert all service managers in the building (via reception / tannoy / email group or other arranged mechanism) to meet to review either in person if easiest or via teleconference	
3	Identify the type and number of staff that can occupy the available space, in the next 24- and 48-hour period.	
	Consider what can be postponed / cancelled to make way for critical services	

4	Confirm the space and equipment available on NHS England Area team teleconference.	

## 14) Sign Off

This section is to be completed by the Site Agreed Single Point of Contact, their line manager and building tenants (service managers).

#### **Lead Tenant**

Name / Organisation	Signature	Date

#### **Lead Tenant Line Manager / Director**

Name /Organisation	Signature	Date

#### **Tenants:**

Name / Organisation	Signature	Date

# **Annex 1: Fire Evacuation Procedures**

Please insert any agreed local procedures in here. These may include evacuation routes, assembly points and fire warden details

**Commented [SA14]:** Suggested Annexes remove or add as appropriate to your organisation or building

#### Annex 2: Lockdown Procedures

Please detail agreed joint procedures and point of contact and advice

# Annex 3: Incident Impact Assessment Form

Use this Impact form to help you understand the impact of the disruption/incident on the business. The criteria should not be seen as restrictive or exhaustive

BEST	Impact Expectations:			WORST		
Incident/outcome	Low	Med'	High	Catastrophic	Ir	cident/outcome
STAFF/PERSONNEL						
Illness or injuries minor or non-existent					Serious fatalities	illness or injuries and/or
No impact on staff morale					Severe i	mpact on staff morale
		FINANC	IAL LOSS			
Key assets unaffected						more key assets out-of- r destroyed
No contract penalties					Substar	tial contract penalties
No additional operating costs					Substar	ntial uninsured additional
No loss of income					Substar	ntial loss of Income
		SERVICE	FAILURE			
Single event					Multiple	events
No prioritised activities affected					One or affected	more prioritised activities
Site/building access not affected					Access week or	to site/building denied for a more
Impact will be for a short time only					Impact	will be for weeks
Staff and management continuing normal duties						d management attention for an extended period
All site business functions are working/continuing					Full off-	site re-location necessary
No impact on low priority business operations						impact on low priority s operations
	R	EPUTATIO	NAL DAMA	GE		
No impact on reputation					Severe	impact on reputation
No impact on local community					Severe	impact on local community
No media interest in the event/impact					Media ii	nterest certain
No single interest group involvement					Single in certain	nterest group involvement
No pollution/environmental impact					Severe	impact on environment
	REGULAT	TORY/LEGA	AL NON-CO	MPLIANCE		•
No Impact CCA obligations					Severe	Impact on CCA obligations
No H&S impact					Significa	ant H&S impact
No legal or regulatory Implications					Inevitable legal and regulatory Implications	
No external agencies involved					Externa	I agencies must be notified
		CURREN	T IMPACT			
Incident Level: BC 1		BC 2		BC 3		BC 4
Current Assessment D	ate:		Next R	eview	Date:	

	Time:	Time:	
Assessor Name			

This form is OFFICIAL - SENSITIVE COMMERCIAL when in use

# Annex 4: Site Incident Management Meeting Agenda

	Immediate Action
	Confirm chair – who will take primacy (normally Agreed SPOC / Facilities Manager if on Site)
	Nominate individual to meet Emergency Services
1	Confirm loggist/minute taker
	Confirm attendees / make introductions if needed
2	Overall situation report including nature and extent of disruption and summary of key events
3	Situation reports to be provided
	Update from affected services
	Building damage – estates, engineers and security
	IT/telephone availability
	Staffing
	Suppliers/contractors
	Partner agencies
4	Patients
	Do inpatients need to be moved?
	Numbers
	Organise transport
	<ul> <li>Does outpatient activity need to be cancelled?</li> </ul>
	<ul> <li>Are patient lists for the day/week available?</li> </ul>
	Does a helpline need to be set up?
5	Employees
	<ul> <li>Do staff need to be moved/relocated?</li> </ul>
	Agree Communications lead / messages / channels
	Consider the need for a staff helpline
	Inform staff not to speak to the media
	Do not let staff leave without taking contact information

**Commented [SA15]:** Use this agenda as an example. Create an agenda based on your organisations needs and the incident before you.

	<ul><li>Hotel accommodation required?</li><li>Transport arrangements</li></ul>
6	Media and Communications
	Internal communications – to staff
	<ul> <li>Stakeholder communications – to patients, families, commissioners etc.</li> </ul>
	<ul> <li>Media communications: agree media message, agree methods of delivery</li> </ul>
8	Suppliers / Sub contractors
	<ul> <li>Are suppliers and contractors affected?</li> </ul>
	contact and communicate incident
9	Any other business
10	Decide date and time of the next meeting

(It is good practice to attach a map locating the building / campus / Muster points at the end of this document)