

Business continuity plan

Business continuity plan for

Author:)
Date:

This plan is reviewed annually

Please populate the blue areas in this document with the information you collected in the previous stages (business impact analysis, risk assessment and strategy). Delete this paragraph when you have finished.

Document history

| Date | Version | Action | Amendments |
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Membership of the development / review team

The following people were involved in developing this document:

| Name | Designation |
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The document was circulated to the following individuals for comments

| Name | Designation | | |
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Contents

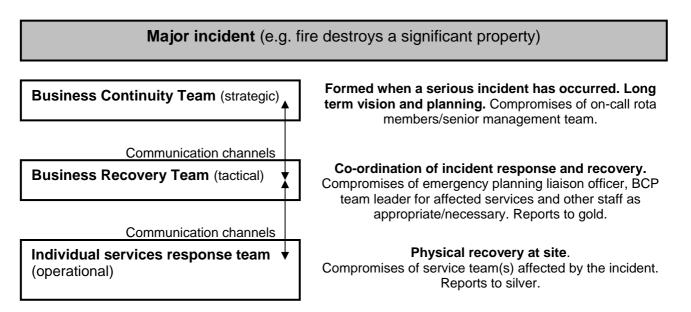
<<Insert Table of Contents>>

1 INTRODUCTION

The scope for this business continuity plan is to ensureNHS Board can continue to provide healthcare services for the community in case of disruption or interruption. It is a requirement under the Civil Contingencies Act that all category one responders must maintain plans to ensure they can continue to exercise their functions in the event of a disruptive event.

1.1 Roles and responsibilities

When an incident has occurred that will affect the Board's provision of services the business continuity team (BCT) will be convened and make decisions on how the organisation will continue to provide its services. The members of the business continuity team (senior management team) will manage the immediate incident and if appropriate, invoke the corporate and individual services business continuity plans.



When a major incident has been declared by a member of the business continuity team (BCT), the BCM team leader for each affected service will report directly into the BCT. All ad hoc requests for decisions, assistance with facilities, acquiring outside services etc will be directed by the BCM team leader to the BCT through the business recovery team.

It will be the BCM team leader's responsibility to ensure staff in their service are informed of the incident and what, if any, actions they should take.

The BCM team leader will be responsible for the successful implementation of this plan.

1.2 Emergency operation centre

1.2.1 Primary site

<Describe where the service response team will initially meet to discuss and review and plan their activities. State the address and telephone number(s) of the location and detailed instructions on how to get there.>

1.2.2 Backup site

<In the event that the primary site is unavailable, describe where the team will meet to review and plan their activities. Give the address and telephone number(s) of the location and detailed instructions on how to get there.>

2 SCOPE AND OBJECTIVES

<A description of the scope and objectives of this plan. State briefly what services you provide and the objective of this plan for your service.>

3 CONTACT DETAILS

3.1 BCM team leader details

| Name & title: | Work no: | Home no: | Mobile no: | Home address: |
|---------------|----------|----------|------------|---------------|
| | | | | |
| | | | | |

3.2 Essential staff details

| Name & title: | Work no: | Home no: | Mobile no: | Home address: |
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4 SCENARIO 1

<Insert scenario 1 – describe why it is likely to happen and what the impact would be>

<Insert name of service function 1 that would be affected, eg patient records>

<Provide a brief description of the service function you are resuming/recovering>

4.1 Recovery Procedure

<A brief description of the recovery procedure (refer to the wording in your strategy document).>

4.2 Recovery time objective (RTO)

<RTO is defined as the maximum acceptable length of time that can elapse before the lack of service function severely impacts the overall service/organisation. State your recovery time objective for this function and the level of service to be attained within the RTO. You may have multiple levels of service and RTO's. (e.g. - 50% resumption of service within 4 hrs, 80% within 8 hrs, 100% within 2 days, your business impact analysis will provide you with these figures).>

4.3 Recovery location

< Describe the location where the service resumption/recovery procedures will take place. Give address, telephone number(s) and detailed directions on how to get there. If this activity is to take place in a pre-arranged area of a common location, specify where this area is. >

4.4 Dependencies

<Describe dependencies this recovery process has on other departments (e.g. you may need access to facilities used by another service/department, you may be dependent on an updated employee telephone list etc).>

4.5 Other considerations

<If applicable, describe any other factors that should be taken into consideration or that might affect the recovery process (e.g. - this process could involve a major financial expenditure).>

4.6 Recovery steps

<Below, describe the steps that needs to be carried out to resume the affected service function. Please note that this may be different depending on if the incident occurs inside or outside working hours>

| | Out of hours | | | | | |
|----|--------------|---|----------------|---|--|--|
| No | Action | Carried out within (D=days, H=hours) | Responsibility | Sign and note when action is completed | | |
| 1 | | | | Time: | | |
| 2 | | | | Time: | | |
| 3 | | | | Time: | | |
| 4 | | | | Time: | | |
| 5 | | | | Time: | | |
| 6 | | | | Time: | | |
| 7 | | | | Time: | | |
| 8 | | | | Time: | | |
| 9 | | | | Time: | | |
| 10 | | | | Time: | | |

| | Inside working hours | | | | | |
|----|----------------------|---|----------------|---|--|--|
| No | Action | Carried out within (D=days, H=hours) | Responsibility | Signed and noted when action completed | | |
| 1 | | | | Time: | | |
| 2 | | | | Time: | | |
| 3 | | | | Time: | | |
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| 7 | | | | Time: | | |
| 8 | | | | Time: | | |
| 9 | | | | Time: | | |
| 10 | | | | Time: | | |

<Copy the above information for each scenario and the service functions that would be affected>