



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

**Business Continuity Management
Policy**

May 2009

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1.0 Business Continuity Management Policy Statement

The Health Service Executive is committed to providing the best possible patient care at all times, including during times of crises, through the best use of available resources and in accordance with legislative requirements. The Health Service Executive will take all reasonable steps to ensure that in the event of service interruption, essential services will be maintained and normal services restored as soon as possible.

2.0 Purpose

In order to respond to internal- and external emergencies the Health Service Executive has in place, both at national and local level, a number of plans that may be activated during times of internal and/or external emergencies.

The purpose of this document, which is complementary to such internal- or external emergency plans, is to outline the Health Service Executive's policy on continuing its business, i.e. patient care, when one or more services are facing difficulty, disruption, reduction or cancellation due to an emergency or any financial-, human resources- or other constraint that may be placed on the services.

Not only direct patient care services, such as clinical services, are at risk if such an eventuality occurs, other, non-clinical services such as catering, laundry, (Bio-) technical services, CSSD, Laboratory, and Radiology etc. may also be affected. Shortages or loss of utilities such as energy or water, IT facilities, communication systems, food restrictions etc. may have significant effects on the ability to deliver patient care.

All of the above highlight the need for the service to be prepared and to be resilient in order to continue business. Indeed, in an earlier document that was produced by the Health Service Executive, namely *OQR010 Developing and Populating a Risk Register Best Practice Guidance*¹, business continuity was identified as one of its areas of risk that must be managed to prevent or minimise harm occurring. The HSE Risk Assessment Tool² has 'business continuity' included in its impact table.

This '*Business Continuity Management (BCM) Policy*' and its supporting document '*Business Continuity Management; Guidance for Policy Implementation*' provides the framework by which the Health Service Executive builds its capacity to provide its services during times of emergency or during times of financial or other constraints.

^{1,2} OQR010 Developing and Populating a Risk Register; BPG is available to download from: http://hsenet.hse.ie/HSE_Central/Office_of_the_CEO/Quality_and_Risk/Documents

3.0 Scope

This policy is applicable to all Directorates, including all their facilities, and all the support functions within the Health Service Executive and funded by the HSE.

This policy sets the parameters for Business Continuity Management within the Health Services Executive and its directorates, while the policy's companion document '*OQR033 Business Continuity Management; Guidance for Policy Implementation*' provides information for its implementation.

Both documents are drafted against the background of a number of principles, described in Section 5, to which the Health Service Executive are committed.

4.0 Glossary of Terms & Definitions

Business Continuity Management (BCM)	<p>A management process that enables</p> <ul style="list-style-type: none">• To identify those key services, which if interrupted, would have greatest impact• To identify and reduce the risks to the continuation of those key services• To identify, potential, issues that may threaten the delivery of services. <p>It provides a framework and capability for an effective response that safeguards the delivery of services. It also outlines the organisation's capability to recover and restart the interrupted service(s) should that be required (Business Continuity Management Good Practice Guidelines 2008)</p>
Control	<p>An existing process, policy, device, practice or other action that acts to minimise negative risk or enhance positive opportunities (AS/NZS 4360:2004))</p>
Incident	<p>The outcome of an event expressed quantitatively and/or qualitatively being a loss, injury, disadvantage or gain.(adapted AS/NZS 4360:2004)</p>
Risk	<p>The chance of something happening that will have an impact on objectives (AS/NZS 4360:2004)).</p>
Risk Analysis	<p>Systematic process to understand the nature of and to deduce the level of risk (AS/NZS 4360:2004))</p>

Service interruption	Any disruptive challenge that threatens services, personnel, estate or operational procedures and that requires special measures to be taken to restore normal operating functions (adapted NHS Business Continuity Management 2008)
System Analysis	A structured, systematic study of a system with a view to establishing, either reactively or proactively the root cause(s) of actual or potential adverse effects and the actions necessary to prevent or mitigate future adverse effects (Emslie, S. 2008). (Note: this is both a pro-active and re-active process).

5.0 Principles of this policy

From the glossary it is clear that BCM is focused at ensuring that an organization is able to continue its business at a pre-determined level in the event of major internal or external emergency, reduction in financial resources or any other disruption. Implicit in BCM is that **not** having a Business Continuity policy and plan could have serious implications such as:

- Failure to deliver key services
- Risk of harm to patients/service users, staff and others
- Loss of public confidence in the ability of the HSE to provide services
- Exposure to the potential of legal action

The principles upon which this policy is based are:

- That the HSE has an obligation to provide a range high quality service at all times irrespective of Financial funding, Human resources or other constraints
- That the HSE meets the requirements of governance set out by the HSE Board
- All services that the HSE provides in any facility are part of any BCM process or plan. Services include all clinical services and all support functions
- That the BCM process(es) and plan(s) are based on, inter alia,
 - Key Risks as identified during risk assessment and included on the risk register(s)
 - Provision of main services that cannot be done without
 - Thorough assessment of exposure to outside influences
- Identification of the potential impact that threaten the delivery of services
- That all services in the HSE have conducted a Business Continuity Risk assessment and have in place the continuity plans necessary to respond to those risks

- Identify, where possible, appropriate actions that mitigate the impact from any type of internal- or external emergency, financial or other constraints that has arisen or is likely to take place

6.0 Business Continuity Management Policy Objective and Implementation Process

The objective of this policy is:

To ensure that, in the event of disruption to services due to internal- or external influences whether financial or otherwise, a level of service that is reasonably acceptable to all users of the service is planned for and available.

This objective is to be achieved by putting in place the HSE Business Continuity Process.

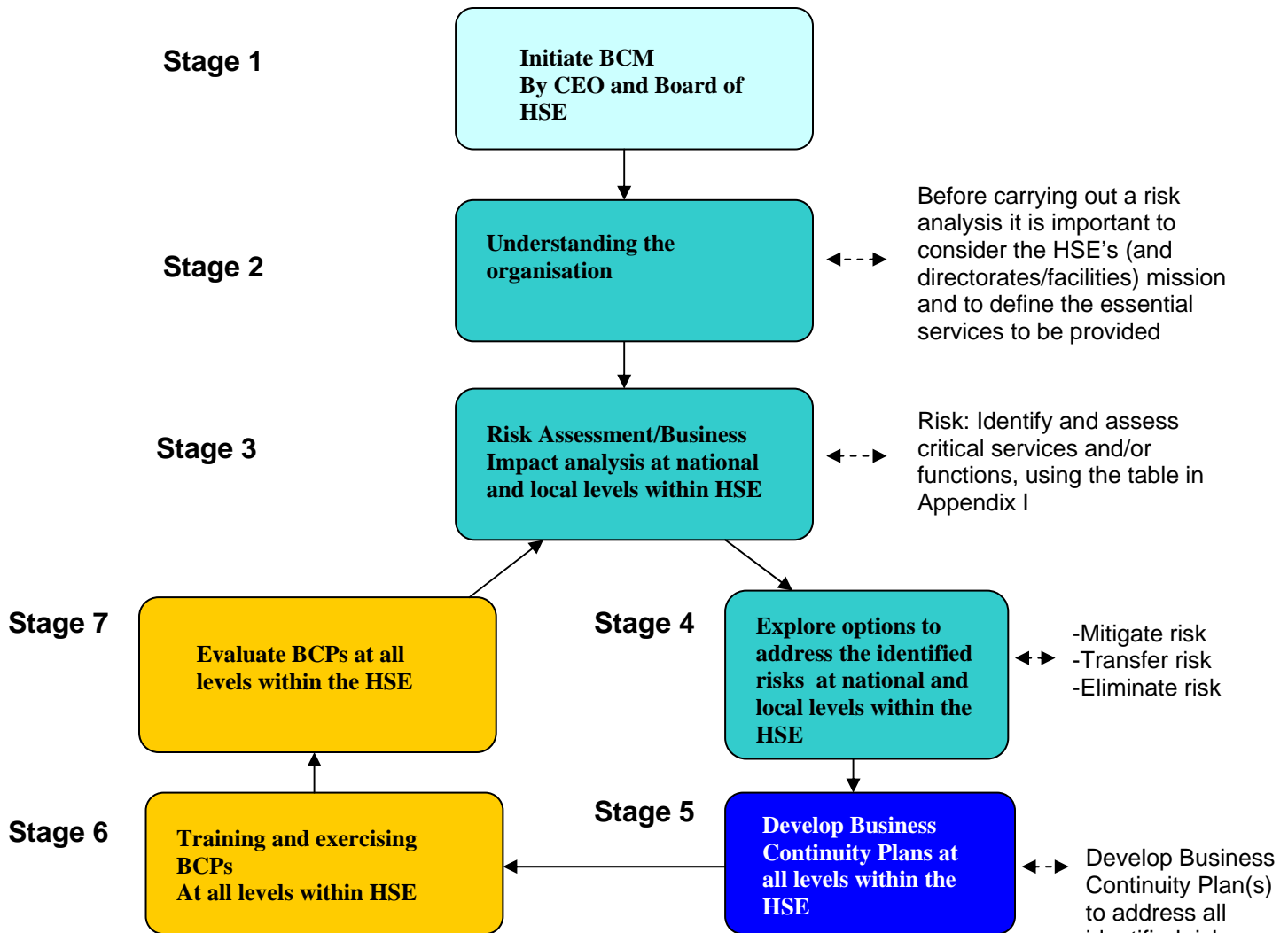


Fig. 1 Stages in Business Continuity Management Process (adapted Business Continuity Institute 2002)

Risk assessment has been identified in emergency planning and business continuity process documentation as the cornerstone of the process. Risk assessment ensures that national and local management draft Business Continuity Plan(s) that are proportionate to the risks as identified. Each directorate and/or facility is responsible for completing a 'critical services/functions' analysis (Stage 2 and 3) including a risk assessment to same.

Part of the process (Stage 5) is the development of a 'Business Continuity Plan' that identifies those critical services and/or functions, or part thereof, that due to the high risk involved cannot afford to be lost to the patient. These critical services and/or functions may include clinical services, general patient care services, support and/or utility services. The plan lists the actions (options), required to respond to the risks identified, as determined during Stage 4 of the process.

It is important that each directorate and/or facility within the HSE has ownership of the BCP that relates to the services it provides.

The separate document '*OQR033 Business Continuity Management; Guidance for Policy Implementation*' provides information on structuring a 'Business Continuity Plan'.

7.0 Roles and Responsibilities

7.1 Role of Chief Executive Officer

The Chief Executive Officer has overall responsibility for ensuring that the Health Service Executive has in place effective arrangements that enable continuity of services whatever the emergency or whatever financial- or other constraints that have been placed upon the services.

7.2 National Directors and/or Head of Service

National Directors and/or Head of Service are responsible for ensuring that:

- Directorates complete an analysis of the critical services and/or functions including risk assessment
- Completion of Business Continuity Plans, required as a consequence of the risk assessment, appropriate to the directorate
- Cascading of the Business Continuity Plans to the General Managers in their area
- Organising training in the Business Continuity Plan
- Exercising/testing of the Business Continuity Plan

7.3 NHO Network Managers and PCCC Local Health Managers

Network Managers and LHO Managers are responsible for ensuring that:

- Network General Hospitals and Local Health Offices (and other facilities within the LHO area) complete an analysis of the critical services and/or functions including risk assessment
- Completion of Business Continuity Plans, required as a consequence of the risk assessment, appropriate to the network or LHO area
- Cascading of the Business Continuity Plans to the General Managers in their area
- Organising training in the Business Continuity Plan
- Exercising/testing the Business Continuity Plan

7.4 General Managers

General Managers are responsible for ensuring that:

- Local facilities complete an analysis of the critical services and/or functions including risk assessment
- Completion of local Business Continuity Plans, required as a consequence of the risk assessment, appropriate to the facility
- Cascading of the local Business Continuity Plans to their staff
- Organising training in the local Business Continuity Plan
- Exercising/testing the local Business Continuity Plan

7.5 All staff

Staff are required to make themselves familiar with their roles, relevant to their work area, as set out in

- This Business Continuity Management Policy
- The Business Continuity Management; Guidance for Policy implementation
- National and local Business Continuity Plans
- Participate in the training and exercising of the local Business Continuity Plan as appropriate

8.0 Implementation of the policy

8.1 Ratification

Following consultation with all relevant stakeholders and following approval and sign-off by the Health Service Executive CEO and Board this Business Continuity Management Policy and its companion guidance document will be implemented throughout all Directorates within the HSE.

8.2 Communication

Following ratification, this policy and supporting guidance document will be distributed to- and circulated among all relevant staff in all Directorates of the HSE. All HSE National Directors are required to provide assurance to the HSE Management Team and Risk committee that these documents were distributed to all relevant staff within their directorate.

8.3 Local implementation

All HSE Directorates and all facilities within the directorates are to implement this policy using the guidance document for methodology of process or planning.

9.0 References

Business Continuity Institute (2008). *Business Continuity Management Good Practice Guidelines 2008*. Version 2008.1

Health Service Executive (2008). *OQR010 Developing and populating a risk register BPG*. 20081210 v4

Standards Australia/Standards New Zealand, *Australian/New Zealand Standard: Risk Management (AU/NZS 4360) 2004*

Standards Australia/Standards New Zealand, *Australian/New Zealand Standard: Risk Management Guidelines Companion to AU/NZS 4360:2004*

Emslie, Stuart. (2008). *Personal Communication with author*

http://hsenet.hse.ie/HSE_Central/Office_of_the_CEO/Quality_and_Risk/
(accessed 20/11/08)

Department of Health (2008) *NHS Resilience and Business Continuity Management Guidance*, Interim Strategic National Guidance for NHS Organisations

Appendix I: Risk Assessment method

a) Describing the risks identified using the Impact, Causal Factors and Context (ICC) approach

It is important that a brief description of each risk is provided that accurately and comprehensively ensures that the exact nature and magnitude of the risk is captured.

The 'ICC approach' to risk description

- Risk is inherently negative, implying the possibility of adverse impacts. Describe the potential **Impact** if the risk were to materialise.
- Describe the **Causal Factors** that could result in the risk materialising.
- Ensure that the **Context** of the risk is clear, e.g. is the risk 'target' well defined (e.g. staff, patient, department, hospital, etc.) and is the 'nature' of the risk clear (e.g. financial, safety, physical loss, perception, etc.)

Example: Premature discharge of patients (*context*) leading to death or poor outcome (*impact*) due to bed shortage (*causal factor*).

b) HSE Risk Matrix (Combining Impact and Likelihood)

	Negligible(1)	Minor(2)	Moderate(3)	Major(4)	Extreme(5)
Almost Certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Rare/Remote (1)	1	2	3	4	5

- The risk rating is calculated by multiplying the level of impact by the level of likelihood.
- High Risk (score 15 or higher)
- Medium Risk (score between 6 and 12)
- Low Risk (score less than 6)

c) Risk Assessment Exercise

Risk Description (using ICC approach)

Impacts/Vulnerabilities (list here)

Existing Controls (list here)

Likelihood Score (tick appropriate box)

Rare/Remote (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost Certain (5)

Impact Score (tick appropriate box)

Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme(5)

Risk Rating (Insert Number in Box below colour)

GREEN	AMBER	RED

Additional Controls Required (Business Continuity Plan)
