

The Shrewsbury and Telford Hospital NHS Trust
TRUST BOARD – 26 JANUARY 2012
BUSINESS CONTINUITY COMPLIANCE STATEMENT

Executive Lead	Andrew Stenton
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Corporate Objective	C: Quality and Safety D: Learning and Growth
Goal	<p>C1. Ensure that we learn from mistakes and embrace what works well C2. Design care around patient needs C3. Provide the right care, right time, right place, right professional C4. Deliver services that offer safe, evidence-based practice C5. Meet regulatory requirements and healthcare standards C6. Ensure our patients suffer no avoidable harm</p> <p>D1. Learn to improve, innovate and cooperate continuously D3. Devolve responsibility and accountability and cooperate with each other D4. Adopt and develop a clinically led structure D5. Ensure that information management and technology works for us D6. Adopt behaviors that match our core values D7. Build service and redesign capacity and capability D8. Invest in a more flexible and responsive workforce</p>
Executive Summary	<p>The incidence of an emergency or severe disruption to Trust services is relatively rare. However, if an emergency or disruption occurs it could have a significant impact on the provision of health services within Shrewsbury and Telford Hospital NHS Trust.</p> <p>All NHS Organisations, as set out in the Civil Contingencies Act 2004 (CCA), are required to maintain plans to ensure they can:</p> <ol style="list-style-type: none"> 1. Continue to exercise their civil protection functions 2. Continue to perform their ordinary functions to a minimal acceptable level <p>The CCA places a statutory duty on Shrewsbury and Telford Hospital NHS Trust, as a Category 1 Responder, to have in place a plan (or series of plans) that set out the actions, roles and responsibilities for preventing, where possible, or recovering from disruptive incidents that have the potential to seriously impede the Trusts ability to provide its critical services.</p>
Recommendations	The Trust Board is asked to NOTE the Contents of this Annual statement.

Contribution to Inspection, Registration, Performance and Delivery

Risks and Assurance	Statutory requirement under the Civil Contingencies Act 2004
Contribution to Key Performance Indicators	Annual Statement required
Compliance with Clinical and other Governance Requirements	Annual Statement required to ensure compliance for CQC registration as a Cat 1 responder

Impact Assessment

Quality	To ensure compliance with Civil contingencies act 2004
Financial	Not applicable
Workforce	No additional Workforce, will aid the workforce planning during major Incident Control and Command
Legislation and Policy	Civil Contingencies Act 2004
Equality and Diversity	No issues to report
Communication and Marketing	Ensures Planning is in place for major Civil disruption management under the Civil Contingencies act 2004

Engagement and Decision-Making Process

This report is a Statement to the Board on Business Continuity

Business Continuity Management Compliance Statement

Regional compliance Audit

In March 2011 Shrewsbury and Telford Hospital NHS Trust completed the Regional Emergency Planning and Business Continuity Audit (2010/2011); this was a self completion audit tool to reflect resilience responsibilities outlined in four key documents:

- Legal requirements placed on Trusts by the Civil Contingencies Act 2004;
- Emergency Planning priorities in the NHS Operating Framework (2010/2011);
- The NHS Emergency Planning Guidance (2005)
- Core Standard 24 (C24);

The Audit tool comprised of 32 questions which were sub-divided into 93 issues that required a response.

The 5 high level themes audited were:

- Emergency Planning;
- Business Continuity;
- Training
- Governance
- Good Practice

The Self assessment audit process was completed by Peter Skitt DGM in March 2011.

Audit Outcome

Using the Red, Amber Green (RAG) rating System; the SHA gave the Trust an overall rating as GREEN with 7 areas of non-compliance which are in need of further development.

Ref.	Question or issues relating to non-compliance	Response	Further details provided	Audit commentary
1	Provide confirmation that the organisation has received and internally distributed the ERMA CONOPS Version 6.6 (and requested confidential disposal of former copies)	Received only	The V6 Con ops has been received and will be distributed with the new On call pack at end of Feb 2011	Was distribution and request for confidential disposal undertaken? Include gaps in action plans for 2011/12 to ensure Trust compliance.
16	Provide evidence that the organisation has local generic and/or specific business continuity arrangements in place:			
16J	How would plans operate within the context of industrial action (e.g. strike action and work to rule)?	Missing data	Missing data	Missing data - has this risk been planned for? Include gaps in action plan for 2011/12 to ensure Trust compliance.
17	Are business continuity plans based on risk and hazard assessments and able to mitigate disruption or loss:			
17B	of transport networks?	No	-	Include in action plan for 2011/12 to ensure Trust compliance.
24	Please confirm and evidence the following:			
24D	Date of/for the second 6 monthly communications test for 2010/11	Not Completed	Not known yet	
24F	Is a designated Emergency Planner Liaison Officer (EPLO)/Emergency Planner responsible for emergency preparedness in place?	Not in Place	For recruitment 2011	Include in action plan for 2011/12 to ensure Trust compliance.
24G	Is this a full time role?	Not in place	0	-----

Next Regional Audit

The next regional audit was due to take place in November 2011 where the Trust would need to demonstrate evidence of progress and complete the audit Cycle. Full prepared but still awaiting notification of Audit.

Current Position of the Trust January 2012:

7 non-Compliance areas:

- Ref (1) Internal distribution of CONOPS version 6.6 and confidential disposal of former copies; **(this has been completed)**
- Ref (16) Provide evidence that the organisation has local/or specific business continuity arrangements in place; **(new Business Continuity Policy and Strategy now approved to implement).**
- How plans operate within the context of industrial action e.g. strike or work to rule. **(A new industrial action plan is written and in the Board process)**
- Ref 17 and 17B are business continuity plans based on risk and hazard assessments and able to mitigate disruption or loss of transport networks. **(All the Hospitals Transport is provided by private providers who have contingency plans in place)**
- Ref 24D 24F and 24G date for communications tests **(the second test was completed in August next due in Feb 2012)** 24F and 24G Designated Emergency Planner in post full time **(Yes since May 2011)**
- Ref 26 Can you confirm that all of the Directors on your internal on call rota have undergone training prior to going on call; **(yes one to one training; a formal training needs assessment is to be conducted and programmed in after board approval)**
- Are your control room facilities with your organisation tested regularly **(used operationally in August for EDL March and November on Strike day. However, there needs to be a review of controls in the Trust).**

Current Position of the Trust (where we are at):

The Trust appointed an Emergency Planning and Resilience Manager Who is currently reviewing the Trust's Business Continuity Strategy and Emergency Preparedness;

The above post holder produced a new Shrewsbury and Telford NHS Trust Business Continuity Planning Policy and Strategy that was agreed and ratified at the Hospital Executive Committee in December 2011, and now being implemented throughout the Trust as a live policy.

The Next Stages for the Trust

When approved by the Board; the Implementation of the SaTH Business Continuity Planning Policy and Strategy which will move the Trust forward towards compliance with (BS NHS 25999) part 1 code of practice and part 2 specification.