

**NHSBT Board**  
July 2016

**Business Continuity Review**

**1. Status – Public**

**2. Executive Summary**

The Business Continuity Team has a mission to provide leadership, advice and support to deliver a world leading Business Continuity Management System (BCMS) for NHSBT, supporting the wider NHS in its emergency response arrangements, and providing a high degree of assurance around the security and sustainability of the organisation's key products and services.

This paper updates the Board on the objectives for 2015-16 and outlines the progress against objectives set for 2016-17.

**3. Action Requested**

The Board is asked to:

- note the progress against 2015-16 objectives;
- note the progress against the 2016-17 objectives;
- note issues and developments in Business Continuity.

**4. Purpose of the paper**

This paper updates the Board on the objectives for 2015-16 and outlines the progress against objectives set for 2016-17. It also notes the main business continuity risks and incidents.

**5. Background**

- 5.1. The last update to the Board was in November 2015, at which time the British Standards Institute (BSI) audit against ISO22301 (the international standard for business continuity) had not been completed.
- 5.2. The Business Continuity programme has included certification to ISO22301, which provides an externally auditable standard of our BCMS, provides assurance to the Department of Health, our customers and other stakeholders and meets our regulatory obligations. As a part of this programme all of our main sites (blood and DTS centres and the ODT Stoke Gifford site, although the Stoke Gifford Site remains outside the scope of the ISO22301 certification) have been assessed for business continuity risk, taking into account internal risks, risks in the environment and the activity on each site. Our highest risk locations are Filton and Liverpool due to the concentration of activity on each site.
- 5.3. Business Continuity is reviewed by the Executive Team biannually and the Governance and Audit Committee bimonthly. The Executive Director lead for Business Continuity meets with the Assistant Director of Governance and Resilience and the Head of Business Continuity to review the Business Continuity Management System quarterly.

5.4. Activity in 2015-16 centred on the expansion of the ISO22301 certified BCMS, the review of existing plans supporting critical product supply and implementing a training and exercise programme. The Executive Team agreed that the workplan for 2015-16 would be as follows:

- Achieve full site ISO22301 certification for the remaining NHSBT centre, i.e. Cambridge, by Q3 (BSI Audit November - December 2015).
- Conduct a scoping exercise during Q1 to bring the following within scope of the BCMS and ISO22301 certification:
  - Key fixed donor centres (including the West End Donor Centre, Birmingham New Street and Manchester)
  - All warehouses
  - Organ Donation and Transplantation
  - The eye banks in Bristol and Manchester that came into NHSBT's remit on 1st April 2015.
- Review the national cold room failure plan and the national reprovisioning plan for blood (last reviewed following the Filton flood in 2012) by Q4
- Develop a mass casualty response plan tested as appropriate with external partners by Q4
- Conduct a live simulation crisis exercise for the National Emergency Team (NET) by Q4
- Develop a cadre of trained loggists from existing staff who can support senior managers during critical incidents
- Scope and define the system for the BC support for other blood services (In line with UK Forum timetable).

## **6. Progress against 2015-16 Objectives**

6.1. All of the objectives for 2015-16 were met with the exception of participating in a multi-agency mass casualty exercise, where we were dependent upon NHS England to coordinate the event. This has not occurred due to other priorities in that organisation.

6.2. The Business Continuity audit by BSI has taken place and had a successful outcome. The certification now covers all blood and DTS centres and all fixed blood donation centres. The scoping exercise excluded the possibility of including eye banks and ODT within the scope of ISO22301 certification for 2015-16, due to the impending location changes for ODT and the Bristol eye bank.

6.3. Inspectors found a number of minor non-conformances as follows:

- Failure to report all activations of the BCMS (i.e. an incident had occurred and a Critical Incident Manager contacted, but no record of the incident had been made in QPulse).

- Failure to maintain a formal and documented evaluation process for determining continuity and recovery priorities, objectives and targets.
  - Failure to document all of the the organisation's activities, functions, services, products, partnerships, supply chains, relationships with interested parties, and the potential impact related to a disruptive incident in Cambridge.
  - Failure to retain documented information as evidence of the nature of non-conformances, any subsequent actions taken, and the results of the corrective action in Cambridge.
- 6.4. There were a number of observations and opportunities for improvement, but no non-conformances were outstanding from the November 2014 audit.
- 6.5. In response to these non-conformances BIAs and support documents have been amended and training packages have been reviewed.
- 6.6. The Cold Room Failure plan was consulted upon, reviewed and changes made. These changes were exercised in Exercise Calefaction, and learning points from the first major exercise of this type are being incorporated into a new review.
- 6.7. The development of a new mass casualty plan, which will focus on changes that enable coordination with NHS England and other NHS organisations in the event of a large scale terrorist attack similar to the events in Paris in 2015, has been delayed. This is because the Emergency Preparedness, Response and Resilience department of NHS England has had other priorities during the year, such as managing the response to the junior doctors' industrial action.
- 6.8. Loggist training has been developed and provided to nominated individuals.
- 6.9. Other training continued as normal although, like in other disciplines, challenges with the training platform had an impact on mandatory training compliance.
- 6.10. The Business Continuity Team has run 43 exercises across all levels of management.
- One National Exercise for the Executive Team and National Emergency Team (Exercise Red Trident)
  - 3 Stock Holding Unit exercises - Exercise Calefaction (cold room failure)
  - 24 Local Emergency Team exercises - Exercise Tumbleweed
  - 15 antidote service exercises - Exercise Paracelsus

## **7. Objectives for 2016-17**

- 7.1. The objectives for 2016-17 are:

- Retention of the ISO22301 certification in full with external audit.
  - Refreshed and tested BC Plans for the following DTS departments
    - Stem Cell Services
    - Red Cell Immunohaematology
    - Histocompatibility and Immunogenetics
  - A mass casualty response plan tested as appropriate with external partners
  - A further ET level NET exercise
  - A structured approach for greater understanding of supply chain risks to include
    - Assessment of critical suppliers for both consumables and services
    - A rationale for determining assessment requirements
    - A method for assessing supplier risks
    - An annual programme of supplier audits / assessments
  - ISO22301 certification for the eye banks
- 7.2. Work is on track for the ISO22301 recertification audit in November 2016, working on the non-conformances, observations and opportunities for improvement noted in the audit report.
- 7.3. Work is also underway on the exercises for the named DTS departments and the national exercise.
- 7.4. Certification for the eye banks has begun with risk analyses and business impact analyses undertaken, but until the Bristol eye bank is relocated to Filton in August 2016, more detailed work is on hold.
- 7.5. The Head of Business Continuity is working with procurement colleagues to establish the role of Business Continuity in the procurement of critical consumables and services.
- 7.6. The development of a mass casualty plan that integrates with the management of the rest of the NHS during an event such as the Paris shootings or the Brussels Airport bombing is still being delayed due to competing priorities in NHS England.

## **8. Business Continuity Risks and Issues**

- 8.1. Business Continuity and Estates are working together to create a combined risk register. This serves two purposes. Firstly, many of the risks are similar (e.g. flooding) and this prevents duplication and prevents the confusion of different scores resulting from the slightly different perspectives of the functions. Additionally, both business continuity and estate based risks are experienced predominately in specific geographies, and combining these registers allows the Business Continuity and Estates functions to engage at local level.

- 8.2. The risk posed by single points of failure at the Liverpool site is not specifically addressed on the register. This is because the risks of these single points of failure are the subject of a specific paper on single points of failure in Liverpool is due to be considered by the Executive Team and Board in the autumn, and differing views of the risks are being considered.
- 8.3. Recent IT projects, such as the Data Centre Migration project, have emphasised the organisation's already well-understood dependence on IT systems. The major development of IT systems as part of the Core Systems Modernisation and ODT Hub programmes add to the previously understood risks in the short term. Business Continuity and Disaster Recovery need to be built into these systems rather than bolted on retrospectively, and as such the Business Continuity Team will continue to offer support to the programmes. When the full extent of these risks are understood, they will be added to the register.
- 8.4. There have been a number of incidents that have brought learning points that need to be considered. Some of these, such as the combining of the Critical Incident Manager and Incident Response Manager roles, have been considered in the redraft of the MPD539, the Command and Control Plan, which will be brought to the Executive Team for information. However, other issues for consideration include some of NHSBT's infrastructure, such as power resilience, which is the subject of a meeting between the Assistant Directors for Estates and Governance and Resilience, from which a plan will be brought forward.
- 8.5. There have been a number of generator-related power issues in the Filton site, and this is being reviewed jointly by the Business Continuity team and the Estates and Facilities Team. Lessons learned from incidents and exercises will be incorporated into this review, and will affect other sites in NHSBT's estate.

## **9. Business Continuity Incidents**

- 9.1. There have been a number of incidents across the estate since the last update to the Board. None has disrupted delivery of product or service and have not required the escalation to Director level.

### **Author**

Richard Rackham  
Assistant Director, Governance and Resilience

### **Responsible Director**

Huw Williams  
Director DTS