Report

Business Resilience Arrangements and Planning – Spring Update

Edinburgh Integration Joint Board
18 May 2018

Executive Summary

1. This report includes an update on the Edinburgh Health and Social Care Partnership's integrated business resilience arrangements.

2. The draft overarching plan incorporates 'live case study' recommendations from Partnership Managers and staff, following this winter's weather response.

3. Although the Partnership's resilience management strategy provides a framework for the organisation to continue the delivery of services during an incident that could potentially have an impact on the loss of premises, ICT, staff or key suppliers, it is designed to be flexible. This will improve the Partnership's resilience against disruption and improve its ability to recover from any such disruption, whilst protecting the welfare and safety of both service users and staff.

4. This report also includes Edinburgh Integration Joint Board members' request at the meeting of 15 December 2017 to elaborate on business resilience considerations in respect of independent contractors and how these arrangements would link in with the localities.

Recommendation

5. The IJB is asked to note progress made on its integrated resilience management strategy.

6. The IJB is asked to consider and comment on the draft "Tactical Resilience Plan" attached at Appendix 1.

Background

7. At the IJB meeting of 15 December 2017, the Partnership detailed its intention to implement an integrated business resilience management system to ensure the continued delivery of safe and effective adult health and social care services.

8. The Partnership created an early overarching resilience plan in January/February 2018 by using both the Council and NHS Lothian's resilience plans as models. However, before it could be further developed

and shared with service areas for consultation, the short but eventful winter episode of severe snow and icy conditions later in the month created a unique opportunity to look at incident readiness and response through a live case.

9. Resulting debriefs were very well attended, with an unprecedented high level of engagement from various service managers and staff across the Partnership. As a result, the initial draft was amended to reflect staff feedback, based on the principles of 'what had gone well' and 'what needed improvement'. A 'Tactical Resilience Plan' was agreed as a more practical and operational approach.

Main report

10. The Partnership's Tactical Resilience Plan is part of the overall management system that establishes, implements, operates, monitors, reviews, maintains and improves business continuity.

11. All staff are expected to support and adhere to the plan and ensure that it becomes part of the way the Partnership achieves its resilience goals and priorities.

12. The plan's framework is designed to be flexible so that it can address risks and safety issues while promoting multi-agency cooperation, which is a vital but difficult management challenge.

13. In the coming months, a series of resilience workshops will take place to develop service areas' individual operational resilience plans that will be modelled on the Tactical Resilience Plan.

Independent contractors and resilience arrangements in Localities

14. During the procurement process, various aspects of potential suppliers' strength and robustness are assessed, e.g. their technical capability and capacity to undertake the work, their financial strength, health and safety measures and business continuity processes.

15. As part of the procurement planning, a 'Business Continuity Assessment in Procurement Procedure' is the assessment tool used by service areas and procurement to determine whether a contract falls under the definition of an 'essential activity' and falls under the category of high risk. The document provides business continuity management specification wording and details of the assessment that will be undertaken. The Council's Resilience Team maintains a list of all suppliers that are deemed to provide essential activities.

16. In the event of an incident, the Tactical Resilience Plan contains a 'Checklist for Managing the Loss of Key Suppliers'. It includes consulting independent contractors' business continuity/resilience plans for pre-arranged alternative arrangements.

Next Steps

17. Overall, this year's severe winter weather increased staff awareness, and managers are gaining a stronger understanding of where risks lie and where resilience management is key.

18. This positive trend will be enhanced when the new Head of Operations is in post (4 June) as this post will provide tighter oversight of the five service areas operational resilience plans.

Measures of Success

19. There is improved transparency and consistency of resilience plans throughout the Partnership.

20. Finalised call-out lists are updated and tested regularly.

21. Training workshops are completed by the end of 2018.

22. Business impact analysis are completed by the end of 2018.

23. Staff feel engaged and aware of the Partnership's resilience arrangements.

Key risks

24. The absence of a developed business resilience plan, tailored to the unique needs of the Partnership's services could have negative operational, reputational, and financial consequences.

Financial implications

25. There are no direct costs associated with the plan.

Implications for Directions

26. Integrated business resilience arrangements will link with Direction 1 – Locality working (ref: EDI_2017/18_1).

   Purpose: to work with local organisations and people to increase resilience and improve health and wellbeing at a neighbourhood level.

Equalities implications

27. The Partnership Resilience Group is mindful of its duties under the Equality Act 2013, which requires it to consider the needs of all individuals – staff and clients – and how they may be affected when developing the Partnership's resilience plans and procedures.

28. In addition to complying with the public sector duty, the group will also uphold the UK Human Rights Act (1998) in delivering services. This requires that account is taken of a range of factors, including the dignity of individuals receiving treatment; prioritisation of treatments; and transparency in relation to decision-making.

29. In the context of the Equalities and Human Rights legislation, the Partnership Resilience Group must undertake an appropriate level of impact assessment of key plans and protocols to ensure they do not perpetuate inequalities.

30. The proposed plans will also consider the following legislation:

   • Health and Safety at Work Act 1974
   • Data Protection Act 1998
   • The Civil Contingencies Act (2004)
   • Information Sharing Interagency protocols
   • Public Health etc. (Scotland) Act 2008
   • Public Bodies (Joint Working (Scotland) Act 2014
   • Counter-Terrorism and Security Act 2015

31. An integrated business resilience plan should remove any disproportionate impact on staff and service users on the grounds of race, sex, disability, age, sexual orientation or religious belief.

Sustainability implications

N/A.

Involving people

32. Staff often have the knowledge and experience required to establish strategies that will work and they will be called to implement the framework of plans and checklists when an incident occurs.

33. Individuals in key positions need to understand their roles and responsibilities. People need to be aware of what is expected of them, so that the remainder of the organisation needs to be aware of the protocols that are to be implemented and why.

34. To be effective and gain support, the Partnership Resilience Group will engage with staff by providing regular email updates, organising workshops and carrying-out test exercises.

Impact on plans of other parties

N/A.

Background reading/references

N/A.

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Appendices

Appendix 1	Partnership Tactical Resilience Plan (Draft)

Tactical Resilience Plan

Edinburgh Health and Social Care Partnership
Draft v 1.5

April 2018

Working together for a caring,
healthier, safer Edinburgh

1. Table of Content

1. Purpose of the Tactical Resilience Plan

The Edinburgh Health and Social Care Partnership's vision is:
"People and organisations working together for a caring, healthier, safer Edinburgh."

The Edinburgh Health and Social Care Partnership (the Partnership) policy is to develop, implement and maintain a resilience management strategy that ensures essential health and social care functions are available and that the Partnership can maintain acceptable levels of service and consistency in support of its vision. The Partnership will take all reasonable steps to ensure the organisation can respond appropriately and continue to deliver key processes in the event of a disruption.

The Tactical Resilience Plan (TRP) describes the necessary steps towards a tactical response for maintaining essential services/functions during an incident (disruption to service, unusually complex situation or high levels of demand).

The TRP will extend across the whole organisation and cover all its teams. All staff are expected to support and adhere to the TRP and ensure that it becomes part of the way the Partnership achieves its goals and priorities.

The Partnership will work with its Council and NHS Lothian partners to ensure that resilience related policies, strategies and plans are updated on a regular basis, or when there are significant changes to the way the Partnership meets its goals, or because of business continuity actions arising from a disruption.

1.1. Aim

The plan defines the strategic and tactical capabilities for the Partnership to plan for and respond to major business interruptions. The plan will enable the Partnership to continue its business prioritised activities at an acceptable predefined and agreed level. To achieve this aim, the Partnership will adopt a system of Resilience Management.

Resilience Management – The process by which the Partnership will maintain and recover its business and operational effectiveness against risks and threats that may materialise as serious emergency incidents.

The Partnership will:
   a. respond to disruptive incident (incident management)
   b. maintain delivery of essential activities/services during an incident (business continuity); and
   c. return to 'business as usual' (recovery).

1.2. Plan Scope

The plan covers the following Partnership service teams:

- North East Locality
- North West Locality
- South East Locality
- South West Locality
- Hospital and Hosted Services

1.3. Plan Review and Monitoring

The plan will be reviewed annually by the Partnership's Senior Management Team or in the event of a major change to the Partnership's structure, objective or activities. Monitoring and managing amendments of the plan will be the responsibility of the Partnership's Resilience Team.

Individual service teams' operational resilience plans will be completed by their respective management team with the guidance and support of the Partnership's Resilience Team. The plans will be signed off by a Head of Service or Senior Manager at least annually or whenever a variation is required.

2. Activation and Escalation

An incident can be detected several ways, including via staff at the affected premises, Customer Hub, the media, notification from Council or NHS Lothian response teams, partner agencies or other networks.

This plan covers the alerting process, activation mechanism, roles and responsibilities of the incident Manager, Incident Management Team, guidance relating to command, control and recovery.

This plan is flexible and meant to be used as generic guidance in response to an emergency incident or business interruption.

2.1. Specific Potential Risks

The response to an emergency incident does not necessarily or automatically translate into the activation of the TRP. Incidents may cause temporary or partial interruption of activities with limited long-term impact.

Below are the potential risks to the Partnership could face.

- Loss of staff

- Loss of information technology and telecoms

- Loss of facilities/utilities and buildings

- Loss of third party providers (independent contractors)

- Severe weather

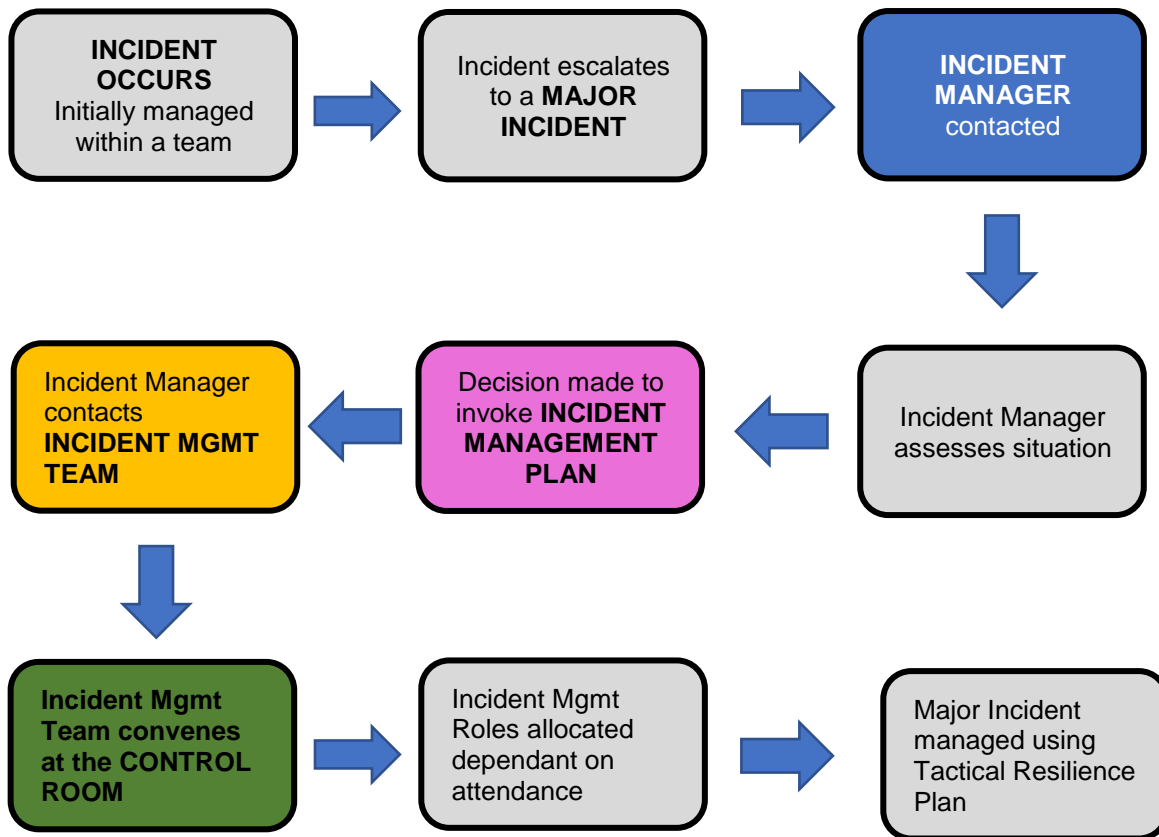- Infectious diseases (e.g. Pandemic Flu)

- Terrorist related event

Four checklists (see Appendix 1) have been developed based on four key scenarios below.

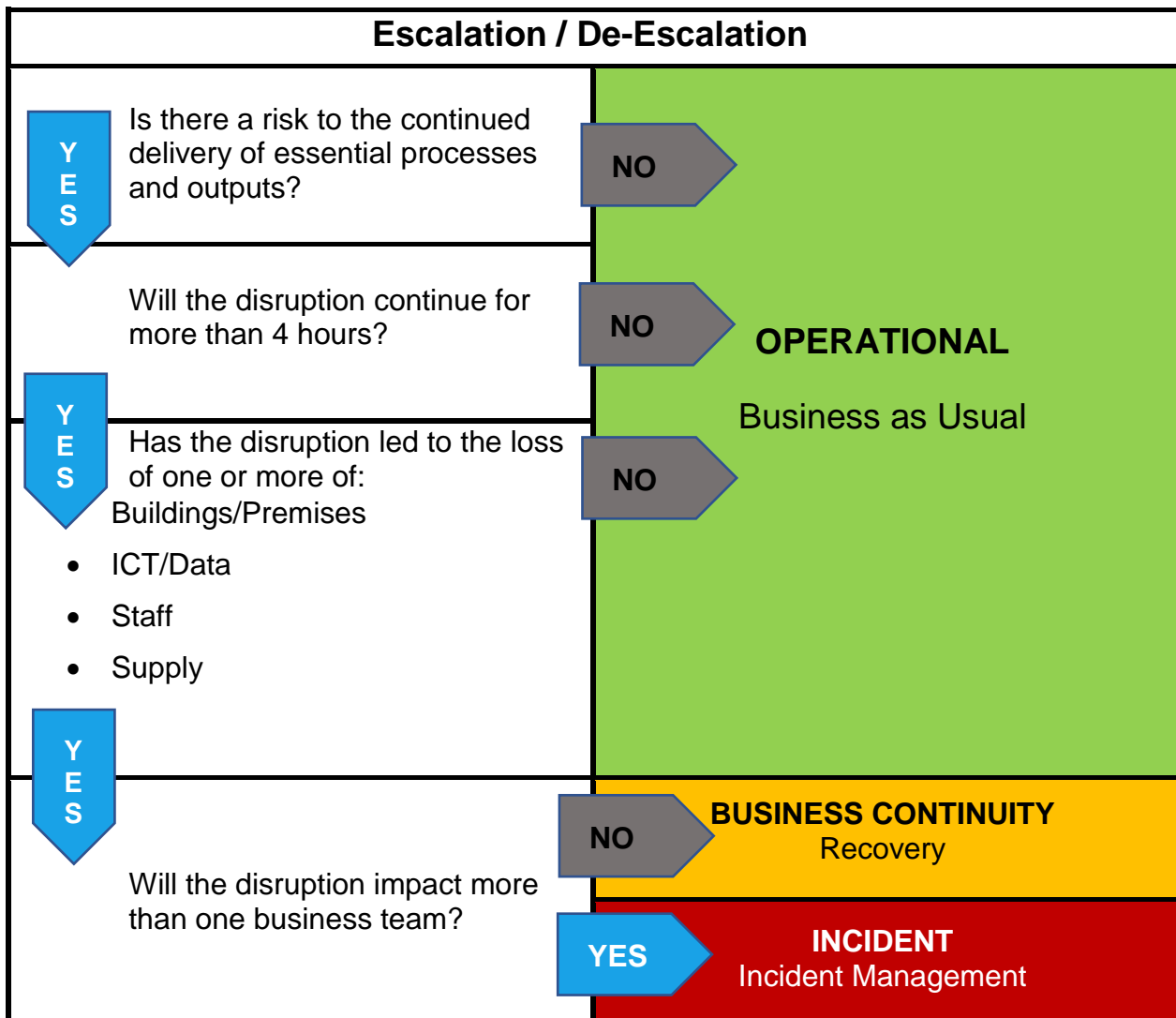| **1. Premises (or alternative working arrangements)** |
|---|
| The provision of a safe and secure working environment is a critical factor in ensuring services are delivered effectively. Any disruptive incident that threatens the integrity of a building or working premises, e.g. fire, flood or structural stability must be dealt with rapidly to restore normality. |
| **2. Staff Absence/Welfare** |
| Ensuring that staff are considered and kept informed during an incident is of primary importance. This could include dealing with staffing issues and concerns, transportation, counselling or liaison regarding bereavement matters. There is also the need to establish skills where it is necessary to ask staff to work flexibly from non-essential activities to maintain the agreed essential activities in the service. |
| **3. ICT and Telephony Issues** |
| This focuses on issues relating to either re-establishing IT systems or setting them up at a recovery site. This would include ensuring that all work stations are set-up correctly, with critical phone numbers, that applications are available, and liaising with facilities colleagues. |
| **4. Key Suppliers** |
| This team focuses on issues related to the Partnership's supply chain and the arrangement of alternative suppliers. |

Action cards for each of these potential risks are set out in Appendix 1

In the event of a business continuity incident, the Partnership's Chief Officer has ultimate responsibility for either authorising staff to be sent home or to another location. In the absence of the Chief Officer, the Chief Nurse or Head of Operations can make these decisions.

The process for activation is:

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┌──────────────────┐      ┌──────────────────┐      ┌──────────────────┐
│ INCIDENT         │      │ Incident escalates│     │ INCIDENT         │
│ OCCURS           │  →   │ to a MAJOR       │  →   │ MANAGER          │
│ Initially managed│      │ INCIDENT         │      │ contacted        │
│ within a team    │      │                  │      │                  │
└──────────────────┘      └──────────────────┘      └──────────────────┘
                                                              │
                                                              ↓
┌──────────────────┐      ┌──────────────────┐      ┌──────────────────┐
│ Incident Manager │      │ Decision made to │      │ Incident Manager │
│ contacts         │  ←   │ invoke INCIDENT  │  ←   │ assesses situation│
│ INCIDENT MGMT    │      │ MANAGEMENT       │      │                  │
│ TEAM             │      │ PLAN             │      │                  │
└──────────────────┘      └──────────────────┘      └──────────────────┘
        │
        ↓
┌──────────────────┐      ┌──────────────────┐      ┌──────────────────┐
│ Incident Mgmt    │      │ Incident Mgmt    │      │ Major Incident   │
│ Team convenes    │  →   │ Roles allocated  │  →   │ managed using    │
│ at the CONTROL   │      │ dependant on     │      │ Tactical Resilience│
│ ROOM             │      │ attendance       │      │ Plan             │
└──────────────────┘      └──────────────────┘      └──────────────────┘
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The Incident Manager determines the level of response using the decision tree tool below:

Escalation / De-Escalation		
YES ↓ Is there a risk to the continued delivery of essential processes and outputs?	**NO** →	
Will the disruption continue for more than 4 hours?	**NO** →	**OPERATIONAL** Business as Usual
YES ↓ Has the disruption led to the loss of one or more of: Buildings/Premises • ICT/Data • Staff • Supply	**NO** →	
YES ↓ Will the disruption impact more than one business team?	**NO** →	**BUSINESS CONTINUITY** Recovery
	YES →	**INCIDENT** Incident Management

In all major/serious incidents, appropriate colleagues must be notified of an incident. Contacts are listed in the Partnership's Incident Contact Directory and are also available as Call Lists from both the Council's and NHS Lothian's respective emergency resilience contact lists.

2.2. Incident Control Room Options

- Astley Ainsley Hospital – Canaan Park – Meeting Room
- Waverley Court room 1.10 (April 2018 – in development)
- Council Incident Control Room – City Chambers – level 2.1
- Waverley Gate – Level 5

2.3. Alerting Process for Staff and External Agencies

If a member of staff becomes aware of a situation that may have a significant impact on the delivery of services, i.e. greater than the normal challenges of daily business, they should notify their line manager, team leader or senior manager.

If the incident cannot be managed locally or at operational level, the most senior manager should escalate to the Incident Manager.

The Incident Manager will escalate any incident to the Chief Officer or deputy (see page 6) who will then decide whether to activate the plan and the Incident Management Team. The composition of this team will depend on the type and scale of the incident and its potential impact on the organisation.

Staff
Operational Managers will communicate to their staff by the following methods:

Business hours – 8.30am to 5.00pm
Managers will verbally or via email communicate information to staff on site or by telephone/mobile to those away from the office. Both methods will result in a follow up communication via email.

Out-of-Hours
The Incident Manager or their deputy will contact the Senior Management Team and they will then be responsible for their team members and communicate information relating to the incident/business interruption. This should be followed up by an email. Should a senior manager be on leave, the deputy will need to be contacted.

External Agencies/Business Partners
On being alerted, the Incident Manager should liaise with appropriate external agencies as listed below:
- The Council's Resilience Unit Team
- NHS Lothian's Emergency Planning Team

Full contact details for key staff and external agencies are available in Appendix 3.

If the incident is of sufficient impact, it is important that the Incident Management Team is convened as soon as possible, whether this is at the Incident Control Centre or a virtual meeting via teleconferencing. Details of how to initiate a telephone conference is attached in Appendix 4.

2.4. Objectives

To ensure the delivery of prioritised activities during a business continuity or emergency incident, all activities identified under this category require immediate recovery.

(currently in development – to be composed through service areas business impact assessments)

Essential Service Activities	Staff Groups Covered	Team	Locations

3. Command and Control

3.1. Incident Management Team

The suggested membership of the Incident Management Team is:

- Chief Nurse (Resilience Lead)
- Operations Manager (Resilience Co-ordinator)
- Head of Operations
- Partnership Communications Officer
- Council Resilience Officer
- NHS Lothian Business Continuity Officer
- Business Support (Loggist)
- Emergency Social Care- Social Direct representative

3.2. Roles and Responsibilities

The roles and responsibility action cards are available at Appendix 5.

The Incident Management Team (IMT) is to:
- evaluate the extent of the situation and the potential consequence to business continuity
- provide the Partnership Chief Officer and stakeholders with reports of the scale of impact on normal services the incident has had
- consider the frequency, location and membership of IMT meetings
- maintain a decision log based on the response to the incident
- authorise the recovery procedure in order to maintain strategy prioritised activities
- liaise with users and stakeholders who may be involved with the incident

- order or obtain new or replacement equipment to deliver essential services if required

- maintain a log of costs incurred to maintain the services

- establish the return to normal working

The role of the loggist:

A debrief, inquiry or legal proceedings may occur after any incident and the recording of data and collection of information should be designed to assist in preparing the subsequent report on the actions taken by the Partnership. The Partnership needs to ensure all decisions taken by the Incident Management Team are accurately recorded by a loggist.

For this reason, the Incident Management Team should ensure:
- their decision/actions are recorded/logged by the loggist at each of the team's meetings

- when mobile phones are used and decision are not recorded, the content of the conversations should be written in the decision log where possible or alternative means of communication used to ensure these can be recorded

- the completed log sheets and any original documentation should be kept securely as it may be required in any subsequent debrief or inquiry; these log books need to be retained for XX years and then may be destroyed

- all notes of meetings held by the IMT should be recorded/logged as they are being made to ensure their accuracy.

Template action logs and agendas are available at Appendix 3.

3.3. Emergency Pack

There are two emergency packs. Once based at Astley Ainsley Hospital and one at Waverley Court. Each pack contains:

To be included

3.4. Communications Plan

During a prolonged period of business disruption, the Incident Manager in collaboration with the Council's Communication Officer (Health and Social Care liaison) will communicate with and update external partner organisations through various appropriate methods, depending on the situation.

The Partnership recognises that staff may receive the same information twice from different sources (Council and/or NHS Lothian). As such, the Partnership will make every effort to align/coordinate communications with its business partners to ensure consistency and avoid confusion.

4. Response and Recovery

Once a business continuity or emergency incident has been declared, the Incident Management Team must devise a recovery response to cover the following timescales:

- 4 Hours
- 24 Hours
- 48 Hours
- 7 Days

Following an incident, the Partnership may need to undertake several organisational recovery activities, which may include (but may not be limited to) some or all of the following.

- Identifying appropriate support mechanisms, which can be made available to staff and their families, recognising that staff may be affected directly by the incident through death, illness or disability
- Staffing and resources to address the new environment
- Physical reconstruction of facilities
- Reviewing key priorities for service provision and restoration
- Financial implications, remunerations and commissioning agreements
- Routine annual performance targets
- Equipment or restocking of supplies

4.1. Recovery from Incidents

Recovery should be considered from the beginning and not left until the Response phase is over. For example, as people plan to run down or cease services to create capacity to deal with the emergency, it makes sense that they should also plan how to start them up again.

Recovery planning may be affected by the circumstances at the end of the emergency e.g. premises may be damaged, utilities may not function normally immediately, staff may not be able to work normally. The aftermath of the incident may also increase workload e.g. the need to monitor affected people or provide psychological support and there is likely to be a backlog of work resulting from the postponement of non-essential work.

4.2. Recovery Process

The process covers the following:

- Preventing the escalation of the impact of the emergency, i.e. restoring services as quickly as possible, prioritising those that are most important to the organisation.

- Restoring the well-being of individuals, infrastructure, etc.

- Restoring targets, governance arrangements, financial management.

- Considering opportunities created by the emergency, e.g. for identifying and implementing improvements.

- Recording information to ensure lessons learned and experiences are available for the future. The process will need to be phased in a sustainable way taking account of the needs of the workforce, who themselves may need to recover from the incident.

- Numbers of members of staff available to return to work at any time.

- A phasing period to allow the resumption of normal services, depending on the residual skills and resources available.

- Provision of psychological support to staff.

- Recruitment at a potentially difficult time.

- Ensuring all buildings are adequately cleaned, sanitised and otherwise made ready for the resumption of services.

- Dealing with depleted supplies and necessary maintenance or replacement of facilities/equipment.

A Director of Communications and Patient Insight will communicate with and update external partner organisations through various different appropriate methods depending on the situation. The Communications Team will lead on the Communications Plan and Process.

4.3. Leading and managing the recovery process – Partnership Arrangements

Recovery will be included on the agenda of the Partnership's Incident Management Team. The guiding principle will be to prioritise the re-introduction of services, depending on the impact on the organisation. The re-introduction of performance targets must recognise that there may be a loss of skilled staff and their experience. Also, people who have been working under acute pressure for prolonged periods are likely to require rest and continuing support.

Examples of additional issues that may need to be managed as part of the recovery process.
- High levels of staff absence – potential bereavement or exhaustion

- Staff anxious, confused and worried (psychological impact)

- Consequences of risks being taken

- Consequences of civil disorder, e.g. vandalism to premises

- Consequences of disruption to daily life in some incidents – education, transport, utilities, etc., as other organisation try to restore normality

- Financial consequences of pandemic

- Disruption of internal infrastructure, IT, facilities, cleaning

4.4. Activation of the Recovery Arrangements

The Incident Management Team will determine the time for the decision of the Partnership's "stand down" from emergency procedures. This decision will not necessarily coincide with receipt of notification of stand down by other agencies, including the Council or NHS Lothian if the incident is more widespread.

The following should be considered:
- All staff who have been asked to stand by awaiting further instructions should be informed that the incident is over

- Before stand-down, the Incident Manager will nominate an individual to continue to monitor any ongoing issues following the incident

- Following stand-down, the Incident Manager will arrange debriefing sessions and support for staff involved in the incident where needed. The content of the debrief will be set by the Incident Manager and the session will be facilitated by the Partnership's Resilience Co-ordinator/ Lead.

- The Incident Manager will ensure that counselling support is available for staff throughout the incident (where possible) and afterwards.

Following an incident, the Partnership management will meet to discuss how to deal with the backlog created by the incident, reviewing recovery arrangements outlined in the Partnership's TRP, and any service suspension that may affect the Partnership's ability to operate and continue to meet targets.

Additional staffing may be required to cover the backlog whilst operating a normal service to current service users.

4.5. Handover Procedures

In a prolonged incident, it may be necessary for additional members to be brought in to cover the roles of the Incident Management Team. These are identified as deputies, and if unavailable, additional senior management can be called from the Incident Management support list. Adequate time must be given to the handover to ensure all actions completed thus far are communicated to the covering team. This should be provided in the form of a briefing, which includes the key issues and actions covered until this point.

4.6. Stand Down Procedure

The Incident Manager in agreement with the other members of the Incident Management Team and appropriate operational managers and staff will decide when to stand down.

After ensuring that the business continuity or emergency incident has been resolved, the Incident Manager will be responsible for activating the cascade of the stand down message to all staff and agencies, using communication cascade call trees. Prior to the stand down being agreed, it is essential that all recovery issues and actions are agreed and
activated to assist in the return to normal working arrangements.

4.7. Post Business Continuity or Emergency Incident Actions

1) Ensure internal debriefs are conducted as soon as possible after the incident led by the Resilience Lead or Co-ordinator.

2) Contribute and participate in any NHS Lothian or Council de-briefs if required to do so. (Take the decisions and actions log to confirm accuracy of reported actions.)

3) Reports

   a. Obtain relevant logs/reports from staff

   b. Complete and submit de-brief forms

   c. Write a short incident report include learning points and recommendations

   d. Circulate lessons learned to Incident Management Team for assimilation into the revised Partnership TRP.

4) Implement Recovery Plans for areas where non-essential work was suspended to redeploy staff into essential services where necessary. Operate a system to deliver the backlog of work along with current workload issues to assist in the return to normal working.

Contact

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5.   Appendices

Appendix 1	Checklist Cards – ICT, Staff and Premises
Appendix 2	Incident Management Team Meeting – Action Cards
Appendix 3	Initial Meeting of Incident Management Team – Agenda
Appendix 4	Teleconference Instructions
Appendix 5	Contact List

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Appendix 1 – Checklists

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Checklist
Managing the Loss of ICT
(e.g. email, telephony, etc.)

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Having been alerted, you need to consider what actions need to be taken. Use this card as a checklist, but keep an accurate record of messages received or given on your personal log sheet.

1	On being alerted, confirm current situation with the caller and take note of CGI Helpdesk reference number (Council system) or NHS Lothian IT Helpdesk reference number.
2	Incident Manager/Loggist: • Commence preparation of Incident Log • Identify activities immediately affected by the disruption • Review key functions at regular intervals as listed in the department/service BIA, to ensure all essential services are continuing • Where there is disruption to service delivery/functions, inform the appropriate Senior Manager
3	Incident Manager: • Assess key risks and the likely duration of the incident • Assess damage to actual Partnership assets and inform Resilience Business Partners (Council or NHS Lothian) (dependent on fault) • Identify what mitigating actions are currently in place • Work with respective ICT CFOs (Council or NHS Lothian) • Agree alternative work arrangements/arrange for non-essential staff to support the prioritised activities or agree with management/HR what action to take (e.g. take annual leave, paper based activities) • Inform all staff – initiate call cascades • Liaise with Communications Team to alert key stakeholders and other interested parties
4	Resources • Incident Manager to liaise with Chief Officer regarding extra resources required (e.g. staff/equipment) • Incident Manager to assess damage to Partnership assets and inform Chief Officer
5	Health and Safety / Risks • Ensure the health and safety of all staff is always upheld • Implement action plan to address arising health and safety risks
6	Recovering considerations and actions • Consider restoration timescales for suspended activities • Post Incident Debrief • Prepare post incident report and document lessons learnt and policy review • Communication with interested parties on 'return to normal'
7	At the end of the incident • Document all the discussions and actions and file according to records retention policy

Checklist
Managing the Loss of Staff

Having been alerted, you need to consider what actions need to be taken. Use this card as a checklist, but keep an accurate record of messages received or given on your personal log sheet.

1	On being alerted, confirm current situation with the caller.
2	Incident Manager/Loggist • Commence preparation of Incident Log • Identify activities immediately affected by the disruption • Ascertain current staffing levels and identify staff available • Assess current risks and actions being taken to mitigate these
3	Line Managers • Ascertain current staffing levels and identify staff available • Assess current risks and actions being taken to mitigate these

4	Incident Manager
	• Identify each service area's time sensitive activities at that moment
	• Get authorisation from Chief Officer/Senior Manager for staff to work at home or at an alternative location
	• Receive clarification from Chief Officer/Senior Manager/HR on:
	   o Part-time staff to work additional hours/accrue time in lieu as required
	   o use of annual leave if/as required use of overtime if/as required
	   o use of interim staff
	• In all above, liaise with the finance department and Chief Finance Officer

5	Health and Safety • Incident Manager to assess the potential duration of the incident and arrange for alternate staff to take over at an agreed time if incident is prolonged
6	Recovering considerations and actions • Consider interim staff use until situation stabilises • Consider overtime until all non-essential/suspended activities have been fully restored
7	At the end of the incident • Deliver hot debrief for the staff involved • Prepare post incident report • Consider if situation is short or long term, if long term, consider contract reviews, and recruitment

Checklist
Managing the Loss of Premise

1	On being alerted, confirm current situation with the caller.
2	Incident Manager/Loggist: • Commence preparation of Incident Log • Identify activities immediately affected by the disruption • Review key functions at regular intervals as listed in the service BIA, to ensure all essential services are continuing • Where there is disruption to service delivery/ functions, inform the appropriate Senior Manager/Head of Service
3	Incident Manager • Assess key risks and the likely duration of the incident • Assess damage to actual Partnership assets and inform Chief Officer • Identify what mitigating actions are currently in place • Inform the Chief Officer or Deputy on call • Inform Council and/or NHS Lothian resilience teams. • Agree alternative work arrangements/arrange for non-prioritised staff to support the prioritised activities or take annual leave • Inform all staff – initiate call cascades • Liaise with Communications Team to alert key stakeholders and other interested parties
4	Resources • Incident Manager to liaise with Chief Officer/Chief Finance Officer regarding extra resources required; i.e. staff/equipment • Incident Manager to assess damage to actual Partnership assets and inform Chief Offer/Chief Finance Officer
5	Health & Safety / Risks • Ensure the health and safety of all staff is always upheld • Implement action plan to address issues arising
6	Recovering considerations and actions • Consider restoration timescales for suspended activities • Post Incident Debrief • Prepare post incident report and document lessons learnt and policy review • Communication with interested parties on 'return to normal'
7	At the end of the incident • Document all the discussions and actions and file according to Records Retention Policy

Checklist
Managing the Loss of Key Supplier

1	On being alerted, confirm current situation with the caller.
2	Incident Manager/Loggist: • Commence preparation of Incident Log • Identify activities immediately affected by the disruption • Review key functions at regular intervals as listed in the department/ service BIA, to ensure all essential services are continuing • Where there is disruption to service delivery/functions, inform the appropriate Senior Manager
3	Incident Manager: • Assess key risks and the likely duration of the incident • Assess damage to actual Partnership assets and inform Resilience Business Partners (Council or NHS Lothian) (dependent on fault) • Identify what mitigating actions are currently in place (check contract's business continuity plan) • Agree alternative supplier arrangements/ arrange for non-essential staff to support the prioritised activities or agree with management what action to take • Inform all staff – initiate call cascades • Liaise with Communications Team to alert key stakeholders and other interested parties
4	Resources • Incident Manager to liaise with Chief Officer regarding extra resources required (e.g. staff/equipment) • Incident Manager to assess damage to actual Partnership assets and inform Chief Officer
5	Health and Safety / Risks • Ensure the health and safety of all staff is always upheld • Implement action plan to address arising health and safety risks
6	Recovering considerations and actions • Consider restoration timescales for suspended activities • Post Incident Debrief • Prepare post incident report and document lessons learnt and policy review • Communication with interested parties on 'return to normal'
7	At the end of the incident • Document all the discussions and actions and file according to records retention policy

Appendix 2 – Action Cards

ACTION CARD 1
INCIDENT MANAGER

NOMINATED PERSONS	ROLES
	To receive calls from Partnership Senior Management Team regarding any incident
	To conduct a further risk assessment if required
	To escalate the incident as appropriate
	Undertake the role of Resilience Response Lead
	To act as a spokesperson for the service at strategic meetings (on request by the Chief Officer)

1	On being alerted to an incident, confirm details of current situation with the notifying manager.
2	Obtain further information • Ascertain steps being taken to mitigate impact • Liaise with notifying manager on how best to resolve the situation • Put in place plans to receive updates until incident resolves • Close the log once management of the incident has been completed
3	Declare Business Continuity/Emergency Incident if necessary • Business Continuity/Emergency Incident declared • Business Continuity/Emergency Incident (Standby)
4	Undertake role of Incident Manager • Commence Incident Log to record all information relating to this incident
5	Alerting others – request activation of call out cascade
6	Request activation of Incident Management Team • Utilise Tactical Resilience Plan for generic response • Prepare first agenda for the Incident Management Team
7	Chair initial meeting of Incident Response Team • Appoint Loggist/Business Support • Ensure an accurate decisions and Actions Log is kept of meetings
8	Inform key stakeholders as appropriate
9	Health and Safety • Assess the potential duration of the incident and the requirement for another deputy to take over responsibilities at an agreed time
10	At the end of the incident • Stand Down instructions • Liaise with appropriate stakeholders • Inform staff / take advice from Communication Team.

| | | • Hot debrief Hand the log book to the Resilience Lead once the incident has closed and you are no longer the manager if this is a prolonged incident |
| | | • Recovery Process |

ACTION CARD 2
INCIDENT MANAGEMENT TEAM

Having been altered, you now need to consider what actions need to be taken.
Use this action card as a checklist, but keep an accurate record of messages
received or given on your personal log sheet.

1	On being alerted to an incident, confirm details of current situation with incident manager • Obtain services Operational Resilience Plans • Commence Incident Log and update throughout incident
2	Communicate the details of your incident to your service/ department staff • Inform staff to obtain staff Action Card • Provide regular information to staff and ensure staff provide regular update to you
3	Impact assess the incident on the essential functions of your service or department • Collate information with staff with regards to your department • Identify steps being taken to mitigate the effects
4	Prioritise essential functions within your department • Review key functions at regular intervals as listed in the department/ service BIA, to ensure all essential services are still running • Where there is a disruption to service/functions being delivered, inform Service Resilience Officers
5	Communication • Communicate with Service Resilience Officers as requested to keep them updated of how the incident develops • Inform Incident Manager of any resource requirements, e.g. staff or equipment
6	Health and Safety • Assess the potential duration of the incident and the requirement for another person to take over the responsibilities at an agreed time
7	At the end of the incident • Hand the log book to the Resilience Lead once the incident has closed and you are no longer the manager if this is a prolonged incident • Liaise with the Resilience Lead re: attending a debriefing of incident • Consider Hot debrief for your staff

ACTION CARD 3
STAFF

Having been altered, you now need to consider what actions need to be taken.
Use this action card as a checklist, but keep an accurate record of messages received or given on your personal log sheet.

1	On being alerted to an incident, confirm details of current situation with incident manager • Obtain service Operation Resilience Plan if required to do so by your line manager
2	Impact assess the incident on essential functions you perform • Collate information as requested by or with your manager relating to your service or department • Identify any disruption that is likely to your key functions • Identify steps that are being taken to mitigate the effects
3	Prioritise essential functions within your department • Review and prioritise key functions to be carried out at regular intervals with agreement of your manager as listed in the service/locality Business Impact Assessment, to ensure all essential services continue. • Where there is a disruption to service delivery/functions, inform the service lead and Resilience Officer/Co-ordinator as directed
4	Communication • Communicate with your manager regularly or as requested and keep them updated on how the incident is affecting your key function
5	Resources • Inform your manager of any additional resource requirements, e.g. staff or equipment
6	Record Keeping • If requested to do so, obtain a log book from the Resilience Plan and complete as necessary • Hand the log to your service Resilience Officer/ Incident Manager once the incident has closed or you are no longer working
7	Health and Safety • Assess the potential duration of the incident and the requirement for another person to take over the responsibilities at an agreed time
8	At the end of the incident • Liaise with the service Resilience Officer re attending a debriefing of incident

ACTION CARD 4
BUSINESS SUPPORT/LOGGIST

NOMINATED PERSONS	ROLES
	To maintain an accurate combined log of messages received by incident managers
	To maintain an accurate combined log of decisions and actions taken by incident managers

1	Agree roles and immediate action with Incident Manager
2	Ensure that all managers are keeping accurate individual logs
3	Compile a combined log of messages sent and received
4	Compile a combined log of decision and actions agree by the Incident Management Team
5	Ensure all complete logs are signed and date and that pages are numbered
6	Health and Safety • In agreement with the Incident Team Manager, assess the duration of the incident and the requirement of another loggist to take over responsibilities at an agreed time, a new loggist should sign and date a new log sheet
7	At the end of the incident • Hand the log book to the Resilience Lead/Incident Manager once the incident has closed or you are no longer acting as a loggist • Liaise with the Resilience Lead/Incident Manager re attending a debrief of the incident

Appendix 3 - Initial Meeting of the Incident Management Team

Agenda

Incident	
Venue/Time	

1. Confirm the chair and identify who will log issues and agreed actions for the meeting.

2. Create a common understanding of the emergency and the impact on the Partnership

3. Agree and prioritise the matters for urgent decisions

4. Agree tasks and who will lead on them

5. Establish communication and information links with other command levels

6. Consider the media strategy and messages to staff and other stakeholders

7. Identify and prioritise the strategic/tactical risks

8. Consider longer term operational issues

9. Agree frequency of meetings if future meetings necessary

10. Agree authorisation of expenditure

11. Any Other Business.

12. Date and Time of Next Meeting

Key Objectives:
- **Coordinate the response (to mitigate impacts and prevent escalation)**
- **Support the emergency and health services**
- **Ensure staff welfare**
- **Warn, inform and reassure (staff and the public)**
- **Coordinate the return to normality**

INTIAL MEETING OF THE INCIDENT MANAGEMENT TEAM
Agenda

Date	Time	Decision/Action Taken	Owner	Update

Appendix 4 – Teleconference Instructions

Not for Publication

Appendix 5 – Contact List

Not for Publication