**USPG (19/20)**

**UNIVERSITY STRATEGY AND POLICY GROUP**

**SAFETY, ENVIRONMENT, SECURITY AND CONTINUITY**

**BUSINESS CONTINUITY POLICY**

**Introduction & purpose**

1. This document provides members of the University Strategy and Policy Group (USPG), and University Court, with the revised Business Continuity Policy.

**Background**

1. The consideration of this policy by senior managers and the relevant formal committee’s forms part of the risk management and governance processes.
2. The Policy may also be of interest to all staff, students and stakeholders.

**Contents**

1. The Business Continuity Policy

**Equality implications**

1. There are no equality implications associated with this report.

**Resource implications**

1. There are no resource implications associated with this report.

**Data classification**

1. This Policy is classified as *restricted* until it has been approved by Court. Once approved the report becomes *public.*

**Recommendations**

1. The University Strategy and Policy Group (USPG) is invited to review the proposed policy and endorse the policy for transmission to Court.

 **UNIVERSITY OF STIRLING**

**BUSINESS CONTINUITY POLICY**

**Introduction**

Business Continuity Management (BCM) is a process which allows an organisation to proactively identify and plan to minimise the impact of risks that may affect its objectives, operations and infrastructure. This increases resilience and places the organisation in a stronger position to continue its critical activities in the event of disruption, albeit perhaps at reduced capacity.

**Statement**

The University of Stirling takes Business Continuity Management seriously and is committed to do all that is reasonably practicable to maintain the University’s critical activities at a pre-determined level in the event of disruption. Through the development of robust Business Continuity Plans, the University will deliver a coordinated incident response, communicate effectively with staff, students and other stakeholders, maintain critical activities at acceptable levels, minimise the impact of any incident and resume business as usual as efficiently as possible.

BCM will be delivered in conjunction with the University’s Risk Management process. Risk Management aims to reduce risk to acceptable levels, however for some critical operational activities, Business Continuity Plans will be required to ensure that where a risk materialises, disruption is minimised and recovery is effective. Both Business Continuity Management & Risk Management contribute towards robust corporate governance.

BCM is a requirement for all Directorates and Faculties within the University. All Directorates and Faculties are responsible for ensuring that adequate Business Continuity Plans are in place and implemented for their area of responsibility.

**Aim**

To be a resilient organisation with robust BCM enabling the continued delivery of critical services that support the University’s strategic objectives.

**Objectives of the Policy**

* To support the continuous improvement of the Business Continuity Management System (based on ISO 22301:2019) which is reflective of the risks that the University faces and the potential impact on its critical services
* To support the development of the Business Impact Analysis (BIA) to identify and prioritise critical services.
* To support a risk-based approach to develop effective contingency strategies for critical services (as per BIA) for inclusion in Business Continuity Plans at both local and institutional level.
* To improve operational resilience
* To raise the profile of BCM and embed it in University culture so that it becomes an integral part of decision making.
* To raise awareness of the Business Continuity Management System (BCMS)

**Scope**

This policy applies to all Faculties and Directorates both on campus and at off campus University facilities.

**Implementation**

There are three key phases to implementation of Business Continuity within the University:

* Business Impact Analysisidentifies the critical activities, resources required and key timescales.
* Business Continuity Plansfocus on what actions need to be taken in order to maintain critical activities to an acceptable level within an acceptable timescale.
* Testing/Exercising of plans to ensure they are effective.

Further guidance on BIA’s and BCPs can be found in Appendix 1.

The Safety, Environment and Continuity department will provide guidance where required.

**Responsibilities**

Governance:Overall responsibility for Business Continuity Management rests with the University Court and the University Principal. Responsibility for the implementation of BCM rests with the Executive Director of Estates & Campus Services.

Leadership: The University Secretary is the lead for Business Continuity across the University. This involves:

* Being Champion at strategic level by endorsing and supporting the Business Continuity Management System.
* Assisting with raising the profile of Business Continuity at a strategic level
* Reporting on the BCMS and the state of preparedness to the University Court.

Implementation & management of the business continuity management systemisdevolved to the Head of Safety, Environment and Continuity (SEC). SEC will provide support and guidance on business continuity matters to Faculties & Service areas, whilst retaining an overview of the overall state of preparedness within the University, ensuring compatibility between plans and that University-wide operational risks are managed by the relevant area and addressed in institutional business continuity plans.

Deans of Faculties and Service Executive Directorshave responsibility to ensure that BCM is embedded within their areas of responsibility and that appropriate plans are in place to ensure continuity. They must also ensure that plans are communicated to all relevant staff and that the appropriate training and resources are provided to meet the plans requirements. Business Continuity Plans should be reviewed annually, or where a change necessitates, by Faculty Executive Teams and Directorate Senior Management Teams.

Major Incident Response Teamwill oversee and manage the University response to any referred major incident as defined in the Major Incident Response Plan.

Business Continuity Planning Group is chaired by the Deputy Secretary and is responsible for:

* Supporting and endorsing the BCMS and raising awareness of business continuity with the aim of embedding it within the culture of the University.
* Supporting continuous improvement of the system.
* Approving recommendations from SEC on business continuity practice, ensuring that there is a consistent approach to business continuity across the University..
* Receiving updates and status reports from relevant Directorates and Faculties before, during and after a business continuity incident.
* Considering and reviewing post incident reports.
* Supporting SEC in raising the profile of business continuity by ensuring that Faculties and Directorates are engaged.
* Monitoring progress on BC, and considering specific incidents which are likely to affect the University.

**Business Continuity Response Team**

In the event of an incident or disruption being notified to the Business Continuity Planning Group the group will normally assume the role of the Business Continuity Response Team. Larger scale incidents that are wide ranging or of severe impact may require the University response and recovery to be co-ordinated by the Major Incident Response Team.

The remit of the Business Continuity Response Team is to:

* Manage the University’s response during an incident.
* Continue to receive and monitor information on the impact of the incident and make decisions for a reasonable response.
* Initiate and co-ordinate communications to staff and students as required
* Ensure a record of meetings and responses is maintained throughout the duration of the incident

Business Continuity Representatives (Faculty/ Directorate)

The role of the Business Continuity Representative is to assist the Dean or Service Director and SEC in championing BCM by:

* Actively participating in the business continuity planning representing the needs and priorities of their faculty or directorate.
* Acting as a single point of contact within their faculty or directorate for business continuity management.
* Disseminating BCM information to their faculty or directorate and providing feedback from their directorate/ faculty to the BCPG.
* Contributing to their BC plan and supporting the implementation of it.
* Ensuring that their BC plan and any supporting documentation remains up to date.
* Participating in BC exercises.
* Participating in University level and participating/leading local business continuity/ incident debriefs
* Ensuring a deputy is in place.

All staff must be aware of the University’s business continuity process and the role or responsibilities that they have. They must also be aware of arrangements in their Directorate’s/ Faculty’s plans that may affect themselves or their teams. They must ensure that they keep themselves up to date during any incidents.

**Review**

Business Continuity progress will be reported on annually to Audit Committee. The BC Policy will be reviewed every 3 years.

Further information on the University’s Business Continuity Management System can be found in Appendix 1.

Appendix 1

**Business Continuity Management System**

The purpose of this document is to detail the Business Continuity Management System (BCMS) that is in place within the University. This document supports the Business Continuity Policy, and sets out in more detail how the policy will be implemented.

**1. Implementing the policy**

Each member of staff has responsibility for ensuring the continuity of operations within the University. This will range from having overall responsibility for Business Continuity or being a plan owner, through to staff knowing what will be required of them in the event of a BC plan being invoked.

**2. Business Continuity Management System**

There are several components to the BCMS that operates within the University. Where these components are completed timeously, the University will be able to deal with incidents in a well-rehearsed manner with each staff member knowing their roles and responsibilities.

**3. Business Impact Analysis**

**3.1** Business Impact Analysis are carried out within each Directorate & Faculty which record information regarding the critical activities being conducted. The resources required to conduct the activity; both at business as usual and at the minimal acceptable level will be detailed, as well as the timescales in which these levels need to be achieved following a disruption.

**3.2** The BIA also identifies interdependencies between activities, as well as the potential consequences should an activity not be restored within set timescales. This information aids decision making regarding the priority in which critical activities should be reinstated in the wake of a disruption. The BIA allows for any seasonal changes to the criticality of an activity to be taken into account.

**4. Risk Assessment**

Documented risk assessments within Faculties and Directorates should identify specific risks that may have a negative impact on critical activities. Appropriate mitigation measures will be identified, and if deemed necessary and practicable, will be implemented in order to reduce the likelihood of the risk occurring and/or the impact of the risk, should it occur.

**5. Business Continuity Plans & Response Structure**

**5.1** Each Faculty and Directorate will compile a Business Continuity Plan (BCP) which documents what actions must be taken in the event of an incident in order to restore/maintain each critical activity to its pre-determined minimal acceptable level, within the set timescale. The level of detail required within each Faculty & Service Area BCP will be based on the findings of their BIA. Once complete the BCPs should be sent to SEC to allow an institutional BCP to be complied. Any amendments or revisions to faculty or directorate plans should be shared with SEC at the earliest opportunity to allow the institutional BCP to be revised.

**5.2** Each Faculty and Directorate will have a nominated BCP owner who will be responsible for ensuring that the plan is updated and issued when required (see 6.4) and also the overall coordination of BC within the area/activities the plan covers.

**5.3** Whenever a Faculty or Directorate BCP is invoked, the Major Incident Response Team (MIRT) must be notified via the security control room so that an assessment of the overall University position can be maintained.

**5.4** Situations will arise that are beyond the scope of Faculty or Directorate plans. Incidents affecting multiple Faculties and/ or Directorates, or incidents that are of a severe or high profile nature may require a more coordinated University response. This will be provided by the MIRT utilising the Major Incident Response Plan and any relevant University BCPs. This will not remove the need for Faculty or Directorate BCPs to be invoked.

**5.5**  Faculty and Directorate Plans will usually be invoked by a member of that Faculty or Directorate’s Senior Management Team, although in some cases this authority may be delegated. It is at each Faculty’s or Directorate’s discretion as to whether additional BCPs are required at a divisional level.

**5.6** The MIRT will provide the University Secretary and other members of the University Senior Management Team with updates on the situation as required, and request support if necessary.

**5.7** It is usually preferential to invoke a plan and/or escalate a situation to the next level and then stand down that level of response if it is not required, than not escalate a situation at an early stage and later find that extra support is required.

Figure 1 shows the relationship between the various plans and levels of response within the University.

Figure 1 (not all Faculty or Directorate plans are represented on the chart)

Emergency Procedures Manual (Security Control)

**6. Exercise, Maintenance & Review**

**6.1** Once any BC plan has been written and signed off by the relevant senior member of staff, it must be communicated within the Faculty or Directorate. Plans should then be tested, and updated as necessary, in order to ensure that they work, and that staff are aware of their roles. All plans should be tested on at least an annual basis in order to ensure they remain current and that staff remain familiar with their roles. Plans will usually be tested by means of an exercise, which can range in complexity from a small group discussing the plan and ensuring it works in theory (a walk through), to a live play exercise in which the plan is implemented. Initially, plan walkthroughs and table top scenario exercises will be used to test the plans. However, as confidence and knowledge in the plans grows, so will the complexity of the testing, ultimately leading to live play exercises.

**6.2** Whenever a plan is invoked, it is important that the entire response is considered both in terms of good practice that was displayed and also any areas where improvement is required. This could be in relation to the plan itself, or people’s knowledge of the plan and how to implement it. In order to capture this information, a structured debrief should be held soon after any invocation of the plan. This will provide an opportunity for those involved in the response to raise any issues and any required actions to be agreed and progressed.

**6.3** BC plans should be reviewed if there is a significant change to an activity covered in the plan which may affect the way or the timescale in which that activity would be reinstated. Other triggers for a review of BC plans include, but are not limited to: change of staff, process, system, location, or a change to any part of the actions documented in the plan (e.g. secondary location no longer available).

**6.4** By following points 6.1, 6.2 & 6.3, plans will be reviewed, by Faculty Executive Teams and Directorate Senior Management Teams, and updated whenever the plan is invoked, whenever a change that may affect the plan occurs, and at least an annual basis if no changes or invocations occur. Whenever a plan is updated, it is the plan owner’s responsibility to ensure that each plan holder receives an updated copy and discards the old copy. The Head of Safety, Environment and Continuity should also receive a copy of any updates. Each plan should have both a date of issue and a version clearly marked on the front page.