

Policy

Business Continuity Management

NSWHP_PD_031

1. Purpose

To provide the overarching governance, scope and provisions for NSW Health Pathology (NSWHP) to establish, implement, monitor and maintain business continuity plans to minimise disruption that could otherwise compromise its capability to deliver core business objectives.

2. Background

NSWHP is committed to the safe, reliable, timely and quality delivery of pathology and forensic services. NSWHP staff are well-prepared and practised at responding to incidents and resultant disruption. It is critical that business continuity processes are formally recorded and used to plan for, respond to and manage disruptive events.

The Business Continuity Management framework is supported by NSWHP Strategic Leadership Team as the formal process to prepare for service disruption and to minimise and prevent compromise to service delivery. It guides the planning and preparation for disruptive events, including the implementation of proactive controls that prevent or lessen the frequency and severity of such incidents. This in turn enables NSWHP workplaces to resume business-as-usual activity as soon as possible.

3. Scope

Business Continuity Management is an essential requirement to support NSWHP operations. This policy is mandatory and applies to all NSWHP services.

4. Objectives

Business Continuity Management seeks to reduce the likelihood of, prepare for, respond to, and recover from disruptions when they arise, by providing a mechanism to:

- Deliver a systematic, transparent, organisation-wide approach to business continuity
- Enable NSWHP to provide critical services, regardless of a disruption
- Expedite and return to normal for the full recovery of business operations
- Provide clear guidance for the response and reporting of potential or actual disruptions
- Protect NSWHP from reputational, financial and political risks resultant from a disruption
- Adhere to industry best practice and international standards
- Use after action reviews to identify opportunities for improvement.

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5. Definitions

Term	Description
After action review	A debriefing process following an incident or activity by those involved with, or interested in, that incident and whose purpose is to learn from it. An after-action review involves describing what was intended to happen, what was actually accomplished, what mistakes were made, and how participation in similar events might be improved in the future. Source: NSW Health Services Functional Area Supporting Plan (NSW HEALTHPLAN), PD2024_029
Business Continuity	Capability of the organisation to continue delivery of products or services within acceptable timeframes at predefined capacity during a disruption (ISO 22301:2019).
Business Continuity Management (BCM)	The holistic management process that identifies potential threats to an organisation and the impacts to business operations that those threats, if realised, might cause. BCM provides a framework for building organisational resilience with the capability of an effective response that safeguards the interests of its key stakeholders, reputation, brand and value-creating activities (ISO 22301:2012).
Business Continuity Plan (BCP)	Documented information that guides an organisation to respond to a disruption, recover and restore the delivery of products and services (ISO 22301:2019).
Business Impact Analysis (BIA)	Process of analysing the impact over time of a disruption on the organisation (ISO 22301:2019).
Disruption	An unplanned, negative deviation from the expected delivery of products and services (ISO 22301:2019).
Hazard	A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.
Incident	An event that can be, or can lead to, a disruption, loss, emergency (ISO 22301:2019).
Incident Management Team (IMT)	Personnel responsible for the operational response to an incident and resultant disruption (refer to NSWHP Emergency Management Plan).
Maximum Acceptable Outage (MAO)	Maximum Acceptable Outage time (displayed in hours or minutes). The maximum amount of time a business-critical service or resource can remain unavailable before its loss starts to have an unacceptable impact on our customer (the patient), our goals, or reputation. Source: AS/NZS ISO 22301:2019 (Societal security – Business Continuity Management systems – Requirements).
Organisational Resilience	The ability of an organisation to absorb and adapt in a changing environment (ISO 22316:2017).
Risk	The chance of something happening that will have an impact (positive or negative) on an organisation's objectives. Risk is also defined in the Australian Standards as the effect of uncertainty on objectives (AS/NZS ISO 31000:2018).

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6. Stakeholders

NSWHP services work closely with NSW government departments and agencies, interstate jurisdictions and private industry providers.

NSWHP clinical services are typically co-located with other NSW Government facilities. This is likely to result in the identification of shared risks and hazards such as utilities failures, surge demand on resources or external threats impacting on a shared location. NSWHP will liaise with key agencies and partners to inform and align joint decisions, strengthen relationships and build capacity to minimise risks to service disruption.

Internal to NSWHP, strong stakeholder relationships between statewide clinical, forensic services, scientific and corporate components of the service are crucial to business continuity management and are supported by this policy.

Third party and private industry providers of products and services are crucial to business continuity. Where necessary, these relationships are formalised in contracts, service level agreements, memorandums of understanding and other instruments to ensure a clear and enforceable understanding of obligations and entitlements relevant to the delivery of critical services.

7. Legal and Policy Framework

This document conforms to international standards (ISO) for business continuity planning, including:

- ISO 22301:2019 Security and resilience - Business continuity management systems — Requirements
- ISO 22313:2020 Security and resilience - Business continuity management systems — Guidance on the use of ISO 22301
- ISO 22331:2018 Security and resilience - Business continuity management systems — Guidelines for Business Continuity Strategy
- ISO/TS 22317:2015 Business continuity management systems - Guidelines for Business Impact Analysis
- AS/NZS 5050:2010 Business continuity - Managing disruption-related risk

This document operates in accordance with NSW Government policies and procedures, including:

- State Emergency and Rescue Management Act (NSW) [1989](#)
- NSW State Emergency Management Plan ([EMPLAN](#))

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This document operates in accordance with NSW Health policies and procedures, including:

- PD2024_029 NSW Health Services Functional Area Supporting Plan (NSW HEALTHPLAN) ([PD2024_029](#))
- PD2022_023 NSW Health Risk Management - Enterprise-Wide Risk Management Policy and Framework ([PD2022_023](#))
- PD2020_047 Incident Management ([PD2020_047](#))
- PD2019_023 NSW Health Incident Coordination Framework ([PD2019_023](#))

This document operates in accordance with NSWHP policies and procedures:

- NSWHP_CG005 NSW Health Pathology Emergency Management Plan ([NSWHP_CG_005](#))
- NSWHP_PR_075 Notification and Escalation of an Emergency, Incident or Business Continuity Disruption Procedure ([NSWHP_PR_075](#))
- NSWHP_PR_021 Critical Incident Procedure ([NSWHP_PR_021](#))
- NSWHP_SD_077 NSWHP Enterprise Risk Management Framework ([NSWHP_SD_077](#))
- NSWHP Enterprise Risk Management Policy ([NSWHP_PD_034](#)) and
- NSWHP Risk Management Procedure ([NSWHP PR_026](#))

8. Business Continuity Governance Structure

Business Continuity is mandated by the NSWHP Chief Executive. This authority is delegated to the State Pathology Controller, who holds responsibility for its management at a strategic level.

The Emergency Management Unit supports the State Pathology Controller in managing business continuity planning, implementation, exercises, training and maintenance. The Emergency Management Unit also assists NSWHP in response and recovery activities and supports the broader NSW Health Functional Area as required.

To build operational level capacity and resilience, all senior NSWHP managers have the necessary delegation and responsibility to develop business continuity plans for their services. The Emergency Management Unit provides training and resources to assist in this process.

NSWHP staff are expected to positively contribute and actively engage in maintaining and improving business continuity planning.

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9. Tiered Structure of Business Continuity Planning

Business continuity planning is an interconnected process that ensures core organisational objectives, priorities and corporate values are consistent throughout the organisation and align with operational processes and activities.

1. **Strategic business continuity planning** is conducted at executive level and focuses on mitigating risks that could threaten the organisation's stability, continuity or reputation. Other strategic deliverables include, but are not limited to, establishing strategic business continuity priorities for the organisation, approving significant decisions or expenditure, managing communications with interested parties and approving external media statements.
2. **Tactical business continuity planning** focuses on the coordination and facilitation of priority processes and activities that, as a result of disruption to service delivery, are unable to be maintained at a localised operational level. Tactical level business continuity planning also includes the planning of support infrastructure such as IT, logistics, transportation and procurement that extend beyond localised operations.
3. **Operational business continuity planning** supports the continuity of local-level prioritised activities from the beginning of a disruption through to recovery. The plans are based on the agreed continuity solutions and identified resource requirements as identified in the business impact analysis stage.

10. Roles and Responsibilities

Position Title	Responsibilities
NSWHP Board	Ensure effective and comprehensive governance, risk management and compliance frameworks are in place to support the delivery of efficient, sustainable and high-quality services.
Chief Executive and Strategic Leadership Team (as per Delegations Manual – Appendix 1 Schedule of delegates - Level 1 & 2)	• Provide leadership, advocacy and resources to successfully embed business continuity awareness and practice in line with the organisation's culture, strategic goals, service delivery and processes. • Responsible for the provision of strategic (Organisational) information and resources to assist with assessment and decision making during a major incident, impacting multiple services across the organisation.
State Pathology Controller	Manages prevention, preparedness, response and recovery to incidents and directs the Emergency Management Unit in the coordination of statewide business continuity management.

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Position Title	Responsibilities
Emergency Management Committee	Chaired by the State Pathology Controller to oversee and advise on emergency management activities including the business continuity management program. Report and make recommendations to the Chief Executive as required.
Directors and Senior Managers (as per Delegations Manual – Appendix 1 Level 3 - Directors and Senior Managers and/or Level 4 - Managers)	- Tactical level business continuity owner, responsible for the effective coordination of resources to uphold service delivery when a disruption exceeds localised capacity. - Approve operational level business continuity plans and emergency procedures, considering surrounding laboratories as supporting resources for the provision of tactical level business continuity planning. - Remain familiar with business continuity plans and emergency procedures to ensure readiness in the event of a disruption. - Activate the business continuity plan to manage the service following a disruption as required and report the events as soon as practical via line management to the State Pathology Controller. - Liaise with relevant internal, NSW Health and NSW Agency partners and external stakeholders where necessary to sustain business outcomes. - Document strategic or operational risks in the NSWHP Risk Register.
Managers/Supervisors (as per Delegations Manual Appendix 1 - Level 4 - Managers and/or 5 – Coordinators)	- Operational level business continuity owner, responsible for ensuring that operational business continuity plans remain current, accurate and effective in accordance with this policy. - Remain familiar with business continuity plans and emergency procedures to ensure operational readiness in the event of a disruption. - Activate business continuity plan/s following a disruption as required and report the events as soon as practical via line management to the Emergency Manager. - Ensure all staff are familiar with the business continuity plan and participate in regular training exercises and undertake local exercises. - Document strategic or operational risks in the NSWHP Risk Register and develop treatment plans to minimise the risks.

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Position Title	Responsibilities
Emergency Management Unit	Develop and deliver an effective business continuity management program that is compliant with this policy and regulatory requirements. This includes the facilitation and coordination of business continuity plan development, endorsement, implementation, maintenance and reviews throughout the organisation. In partnership with the Business Continuity Plan Owners: • Plan, conduct and participate in scenario testing through exercises • Where support is required, assist in the coordination of the business response and recovery • Embed organisational resilience through leadership and supporting continual training and improvement initiatives. Maintain a centralised and readily accessible repository of business continuity information and resources. • Provide statewide BCP status reports to Emergency Management Committee.
All staff	Notify/escalate identified disruptions via line management. Understand and acknowledge their roles and responsibilities during the response and recovery phases of the business continuity plan. Respond appropriately to specific threats and evacuate from an incident site as required. Follow the NSW Health Incident Management Procedure and report all incidents and near misses in IMS+.
Third party providers /suppliers	Uphold service level agreements and notify NSWHP of any changes in their capacity or supply chain that may disrupt the availability and/or timeframes for service delivery.

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11. Business Continuity Plan Stages of Development

Business continuity is central to building and improving organisational resilience. The stages of development clarify the organisational strategic priorities and objectives, and then identify the critical services, processes, activities and resources that are necessary to sustain their delivery.

Business continuity planning includes the identification of risks and threats, the creation of response structures and plans to address incidents, as well as exercises, validation and continuous improvement activities to ensure plans remain current and staff familiarised.

11.1. Policy and Program Management

The initial step of business continuity planning involves the identification and prioritisation of critical services, processes, activities and resources that support an organisation's strategic priorities and the delivery of critical products and services.

11.2. Embedding business Continuity

Business continuity is a key capability, and needs to be integrated, coordinated and aligned with organisation-wide priorities and supported by executive leadership. The goal of embedding business continuity is to integrate organisational resilience into business-as-usual processes and procedures.

Collaboration is particularly important during this stage to realise the full benefits of a coordinated approach to building organisational resilience.

11.3. Business Impact Analysis

Business Impact Analysis (BIA) seeks to identify and prioritise critical services. It analyses the urgency of each activity undertaken by the organisation by assessing the impacts of a potential or actual disruption over time and evaluates how it impacts on the delivery of critical services.

NSWHP utilises a bespoke manager portal to collect BIA data, and a model driven application (MDA) to store all business impact analysis data. The BIA MDA tool streamlines the process for the collection, storage, management, and visualisation of data captured across all clinical and corporate services and is used to generate business continuity plans and provides real time access to data to support decision making during times of disruption.

11.4. Design solutions

The design and implementation stages of business continuity identifies appropriate solutions to disruptions with appropriate roles, authorities, skills, infrastructure and actions required to manage the business response and recovery. This information is then used to produce the business continuity plan.

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11.5. Implementation of the Business Continuity Plan

The drafting of operational level business continuity plans is undertaken by the delegated managers/supervisors in consultation with the NSWHP Emergency Management Unit to ensure cross-organisational business processes are fully realised and captured.

12. Validation

The purpose of exercising, testing and validating business continuity plans is to ensure that they remain current, accurate, effective and complete. This is an integral component of the business continuity planning process that also serves as a training and education opportunity for staff and managers in emergency management arrangements.

13. Endorsement of Plans

All business continuity plans must be exercised and validated before submission to the State Pathology Controller/delegate for endorsement. The plan will be recommended by the author, approved by the appropriate senior manager and director then referred to the State Pathology Controller/delegate for endorsement. Once endorsed, the plans will be published in the NSWHP Policy Library and relevant quality management system. Any previous versions must be rescinded (with local hardcopies to be destroyed and replaced with new versions).

14. Monitoring and Review of Plans

All plans should be reviewed and/or updated:

- At the conclusion of a disruption/incident/emergency or exercise in which the arrangements in this plan were, or could have been activated,
- Following changes to the services' operations, structure, business, or location,
- With changes in suppliers or service level agreements that impact business continuity planning, and/or
- Upon the following timeframes:

Activity for review	Accountability	Frequency of review
Business Continuity Management Policy	State Pathology Controller	Every three years, and as required
Business Continuity Management Procedures including templates	Emergency Manager	Every three years, and as required
Strategic, tactical and operational business continuity plans	Plan Owner	Annually, and as required

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15. Review

This policy will be reviewed by 31/03/2028.

16. Risk

Risk Statement	There is an opportunity to ensure that NSWHP will deliver timely services through effective business continuity planning which will minimise disruptions that would otherwise compromise NSWHP capabilities in delivering services. This policy has been developed to provide direction to NSWHP Board and staff in the development of effective business continuity plans. This policy is designed to ensure that the risks associated with the identification, reporting, monitoring, delivery of services are effectively managed with key mitigations and resolutions in place where one or more components of service delivery are impacted. Any unplanned event resulting in, or with the potential for, injury, damage or other loss to infrastructure/staff/visitors must be reported through IMS+.
Risk Category	Emergency Management

17. Further Information

For further information, please contact:

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18. Version History

The approval and amendment history for this document must be listed in the following table.

Version No	Effective Date	Approved By	Approval Date	Procedure Author	Risk Rating	Sections Modified
1.0	27/04/2021	SLT	13/04/2021	Claire Higgins, Disaster Coordinator	Medium	New Policy
2.0	10/02/2025	Michael Symonds, Director, Forensic and Analytical Science Service and State Pathology Controller	31/01/2025	Scott Pearce, Emergency Manager	Medium	Amended all sections to align with better practice, and current legislative requirements