

NORTHERN IRELAND PRACTICE AND EDUCATION COUNCIL FOR NURSING AND MIDWIFERY

Business Continuity Plan

May 2017

Review date: May 2018

Any request for the document in another format or language will be considered

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1. INTRODUCTION

NIPEC's corporate Business Continuity Plan (BCP) provides the framework within which the organisation can continue to deliver an appropriate level of service to our service users in the event of any disruption.

This plan takes into account all aspects of NIPEC's business, i.e. processes, personnel, external contacts, infrastructure and technology, and prioritises them into phases within which they need to be recovered by. The various natures of disruptions have been taken into account while doing this. Although it is not possible to accurately predict all incidents that may occur the plan has identified the most probable causes of disruption (Table 1 refers). By following this plan and what it outlines, a full recovery of NIPEC's services should be achieved, preventing complete failure and reducing the negative impact a disruption can have.

This plan contains checklists based on the pre-determined possible levels of disruption. These checklists inform staff and the Department of Health how NIPEC will ensure the continuance of its services and progress to the eventual restoration of normal services. To remain effective and fit for purpose, the plan will be regularly updated in response to current identified threats.

2. SCOPE

This is a generic document which details the actions and processes required to maintain the operation of NIPEC's services during times of disruption. It indicates roles, responsibilities, accountabilities, actions and decision processes that should be followed and achieved when this plan is activated.

3. AIM

The aim of this plan is to ensure that NIPEC can recover its services in a timely manner.

4. OBJECTIVES

- To identify the risks faced by NIPEC
- To prevent or reduce identified risks that could affect NIPEC
- To mitigate the effects of those risks once they have occurred
- To allow critical services to continue until the disruption is over
- To set achievable recovery aims to enable a phased, efficient and fast recovery to normal level of service.

5. PLAN AUDIENCE

This plan is intended for staff that has a role to play in a business continuity response to a disruption affecting normal service levels.

6. PLAN DISTRIBUTION

This plan will be held on NIPEC's server which is accessed by all staff and appropriate staff who have a role within the plan will be given a hard copy for reference purpose.

7. PLAN OWNERSHIP

The Chief Executive has ultimate responsibility for planning and management of NIPEC's business continuity arrangements. However, responsibility for planning has been delegated to the Head of Corporate Services.

8. ABOUT NIPEC

NIPEC plays a particular role in supporting the vision and objectives of the Chief Nursing Officer, Department of Health, in the continued pursuit of excellence in the delivery of nursing and midwifery services to the population of Northern Ireland. Health and social care is delivered by nurses and midwives throughout Northern Ireland in a wide range of diverse settings comprising the statutory, independent and voluntary sectors. NIPEC seeks to support the best practice of nurses and midwives in all contexts through supporting their practice, education and development.

Nurses and midwives aim to deliver high quality, person-centred care, which influences the health and well being of the population. NIPEC values its relationship with nurses, midwives and key stakeholders, and works in partnership with them to assist them in achieving their objectives and aspirations.

At all times NIPEC encourages practice that is ethically sound and reflects the requirements of the regulatory body for nurses and midwives¹, which is mandated in *The Code: standards for conduct performance and ethics for nurses and midwives* (2008)². NIPEC is committed to the promotion of continuous professional development and to a culture of lifelong learning, to enable nurses and midwives to maximize their contribution to the health and well-being of patients and clients, regardless of the role being undertaken.

9. RISK ASSESSMENT

Risk assessment is used to identify the most cost effective ways to reduce the impact and likelihood of them occurring or remove the risk completely. Therefore, risk assessments are seen as part of NIPEC's daily business.

As identified in Table 1, there are a number of risks that could occur and trigger a disruption to the services provided by NIPEC. It is therefore, important to put in place risk reduction strategies. Table 1 shows some of the techniques currently in place to do this and NIPEC will continue to consider what else can be done to reduce risk further.

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¹ The Nursing and Midwifery Council (NMC)

² www.nmc-uk.org

Table 1: Risks to NIPEC

Risk	Impact	Mitigation
Influenza Pandemic outbreak	Loss of staff due to illness, caring responsibilities, fear, bereavement	NIPEC Pandemic Influenza Plan
	Disruption to work plans	DHSSPS Pandemic
	Disruption to corporate services infrastructure	Influenza Plan
	Staff at increased risk – contact with symptomatic persons	
Lack of adequate number of staff in the event of a disaster	Disruption to service	NIPEC policies inc. sickness, flexible working, education and training
Severe Weather	Loss of access to Headquarters	Severe weather warnings
	Lack of ability to travel	passed onto staff to raise staff awareness
	Staff loss – staff unable to get to work	Flood warnings etc
	Loss of utilities	awareness
	Loss of telecommunications and IT	
Loss of, or access	Disruption to normal service delivery	Fire evacuation plans
to building	New ways of working	Facility recovery plans
Loss of IT and telecommunications	· ·	BSO, ITS / NIPEC recovery plans
systems		BSO ITS back up of server
Loss of National telecommunications systems	Inability to communicate via telephone or internet	BT disaster recovery plan
No cash in Bank	Disruption to finance system	Cash flow forecast completed to ensure NIPEC remains solvent

10. DISRUPTION LEVELS

There are three levels of disruption that have been identified for NIPEC. The circumstances of disruption may vary but the scale will be as denoted, therefore, the actions will remain the same despite the cause of the disruption. The actions and decisions at each level of response for 24 hrs, 24 – 48 hrs, up to 1 week and up to 2 weeks after the event are set out in Appendices A-D.

Levels of disruption are defined as follows:

Level 1

This is a disruption occurring in either the 'Corporate Services' or 'Professional Services' areas resulting in a loss of 20% of staff in either area.

These events are generally of short duration and a response would be led by the designated officer:

- The Head of Corporate Services and/or the Corporate Services Manager as applicable for the 'Corporate Services' areas or
- The Senior Professional Officers and/or the Chief Executive for the 'Professional Services' areas.

Level 2

This is a disruption occurring in either the 'Corporate Services' or 'Professional Services' areas resulting in loss of 40% of staff in either area.

These events can result in building loss, staff absenteeism and substantial loss of equipment and records. The corporate response is likely to be coordinated by the designated officers:

- The Head of Corporate Services and the Chief Executive for the 'Corporate Services' area
 or
- The Senior Professional Officers and the Chief Executive for the '*Professional Services*' areas.

Level 3

This is an event occurring causing disruption to the whole of NIPEC services **or** a corporate loss of 60% of staff.

These events can result in building loss, mass staff absenteeism or substantial loss of equipment and records. Where there is an event causing multiple service areas to be disrupted, or where all of the services are affected (say, for example during an influenza pandemic), co-ordination will be passed to the Senior Team³ with the Council kept informed via the Chair of the Council. It is likely that a number of recovery teams will be convened to look at specific issues (e.g. communications, IT and telecommunications, corporate issues), rather than individual managers trying to manage the problem in isolation.

Whilst the aim of the plan is to minimise the impact of a disruption, it is possible that parts of the service may need to be delayed, suspended or delivered by alternative means in order to maintain these elements. It should be noted that whilst the plan increases NIPEC's level of resilience significantly, NIPEC could be faced with a situation that results in some services becoming compromised. In this case, the Senior Team may have to look again at the services and reprioritise them, taking into account the situation and the information available at that point in time.

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³ Senior Team refers to (Chief Executive, Head of Corporate Services and Senior Professional Officers)

11. ROLES AND RESPONSIBILITIES

During a disruption affecting NIPEC, a number of people internally and externally will be required to assist with the response. The following table gives a brief outline of the internal personnel who will be involved in a business continuity response.

Team/Person	Normal Role	Disruption Level	Responsibilities
Head of Corporate Services	Normal roles and responsibilities	1, 2, 3	Co-ordination of the business recovery
Senior Professional Officers	apply		Notification upwards when business recovery
Corporate Services Manager			plan is unable to be delivered
			Maintain communication with staff, Senior Team and service users
Senior Team		2, 3	Co-ordination of the response
			Alerting Council and DHSSPS of disruption
			Agreeing with Stakeholders where services are delayed, scaled down or suspended
			Overview for staff welfare
			Maintain communications links

Where the disruption results in the attendance or assistance from the emergency services or external stakeholders, the Senior Team will determine the need to appoint specific liaison officers.

12. STAFF

Cover arrangements for the Chief Executive are normally be agreed one year in advance and published on the member's area of NIPEC's website. In the event that this plan is activated, staff generally will not have any direct involvement in the response, unless stated in Appendix E. Those not directly involved should wait for directions from their line manager.

Staff must remain contactable throughout the disruption because they may be required to help at any point. Staff must keep NIPEC up-to-date with personal contact details, via the Personal Assistant to the Chief Executive, to enable contact during periods of disruption.

In the event that NIPEC is unable to use/access or is required to evacuate its accommodation at Centre House for a longer than normal period of time, i.e. more than 30 minutes, staff should assemble/relocate to the Health and Social Services Board's restaurant, 12-22 Linenhall Street, Belfast, and await further instructions from their line manager.

13. ACTIVATION

Recovery will be activated in a level 1 or 2 situation by the managers in the areas affected. The Senior Team will be advised, or if the disruption occurs out of hours, the Chief Executive will be informed.

14. RECOVERY OF SERVICES

Recovery is the process of returning the affected service(s) to normality and it is the responsibility of the Manager to ensure this happens as smoothly as possible for their work area. Recovery issues need to be considered early on in the response by the managers and the Senior Team, as appropriate, to allow for a successful continuance of services and an appropriate phased recovery of other work areas until normality is reached, with minimal negative impact to key stakeholders.

With specific regard to the recovery of IT services, NIPEC has a Service Level Agreement (SLA) with BSO ITS. In addition, BSO ITS has an IT Incident Management Process (see Appendix G) which would result in BSO ITS liaising with NIPEC regarding areas such as emergency responses, backup, restore and recovery procedures for IT equipment, and system and network software.

Signed:		 Date:	
	Chief Executive		

Level One Disruption: Immediate Actions Checklist

Action				
	First 24 hours	24 to 48 hours	Up to 1 Week	Up to 2 Weeks
Designated Officer to assess the situation				
Situation is determined by the Designated Officer to be a Level 1 by: Only one service area is affected, or 20% of staff not at work.				
ACTIVATE THIS PLAN for a level one event				
Designated Officer will take the lead in the recovery plan implementation and keep a full record of actions taken (Appendix F) to facilitate structured management of the event and gather as much information as possible, keeping this up to date for future reference				
 Designated Officer will investigate: Which aspect of the service is affected? How many workstations are affected? Which equipment is lost or damaged? Decide if operations can be continued from same work stations/office? How many staff are affected? What are likely effects on service delivery? 				
 Designated Officer will carry out the following actions based on earlier findings: Locate alternative resources, in the same building if possible, that can be shared Identify essential items of equipment that need immediate replacement and obtain them Identity any areas of work that can be temporarily transferred to other sources. Identify any possible suspensions of services. 				
Designated Officer should begin service recovery actions				
Review organisation's response to the event as a whole and the creations of lessons document to help identify changes that may make the business continuity plan more effective				

Level Two Disruption: Immediate Actions Checklist

Action				
	First 24 hours	24 to 48 hours	Up to 1 Week	Up to 2 Weeks
Designated Officers to assess the situation				
 Designated Officers identify a Level 2 disruption by: Substantial building damage resulting in several areas being unfit for occupation Substantial loss of equipment and records affecting a number of services Full redeployment within the remaining property is not feasible Some recovery of records and equipment could be possible, or 40% of staff not at work. 				
ACTIVATE THIS PLAN for a level two event				
Designated Officers will take the lead in the recovery plan implementation				
 The following will be investigated: Which aspect of the service is affected? How many workstations are affected? Which equipment is lost or damaged? Can operations be continued from same work stations/office? How many staff is affected? What are likely affects on service delivery? 				
 Designated Officers will carry out the following actions based on earlier findings: Identify business critical and/or essential NIPEC services and actions needed to ensure continuance of these Identify named officer to record actions taken (Appendix F) to facilitate structured management of the event and gather as much information as possible, keeping this up to date for future reference Identify and obtain all required resources, as identified, and deploy them where needed Designate staff to call key stakeholders and service users that may need to know of the 				

 situation Ensure IT and communications systems are in place as appropriate Send staff home that are not needed at this point and ask them to remain contactable Relocate necessary staff to a suitable identified alternative work areas. 		
Once critical areas are stable the recovery of each service area should begin by coordinating this response with the staff		
During the implementation of service recovery the following policies may need to be consulted, depending on the cause of the disruption and impacts being experienced: HR Policy Welfare Policy Engagement and Communications Strategy Pandemic Influenza Plan.		
Designated Officers should establish that the building is safe for return by assessing the damage and work needed and begin making arrangements for these repairs		
Meetings should be held with key staff to assess the progress of recovery and needs of each service to help improve rate of recovery		
Staff sent home should be contacted by using the cascade system to inform them of the progress		
Review Organisation's response to the event as a whole and the creations of lessons document to help identify changes that may make the business continuity plan more effective		

Level Three Disruption: Immediate Actions Checklist

Action				
	First 24 hours	24 to 48 hours	Up to 1 Week	Up to 2 Weeks
Senior Team to assess the situation				
 Senior Team identify a Level 3 disruption by: Substantial building damage resulting in building being unfit for occupation Substantial loss of equipment and records Attendance or assistance from the emergency services, or 60% of staff not at work. 				
ACTIVATE THIS PLAN for a level three event				
Senior Team will take the lead in the recovery plan implementation				
 The following will be investigated: Which aspects of the service/s are affected? How many work stations are affected? Which equipment is lost or damaged? Can the operations be continued from the same work stations/ office? How many staff is affected? What are the likely affects on service outputs? 				
 Senior Team will carry out the following actions based on earlier findings: Identify business critical and/or essential NIPEC services and actions needed to ensure continuance of these Identify named officer to record actions taken (Appendix F) to facilitate structured management of the event and gather as much information as possible, keeping this up to date for future reference Identify and obtain all required resources, as identified, and deploy them where needed Designate staff to call key stakeholders and service users that may need to know of the situation Ensure IT and communications systems are in place as appropriate 				

 Send staff home that are not needed at this point and ask them to remain contactable Relocate necessary staff to a suitable identified alternative work areas. 		
The Senior Team should hold a progress meeting with key staff and brief them of the impact		
During the implementation of service recovery the following policies may need to be consulted, depending on the cause of the disruption and impacts being experienced: • HR Policy • Welfare Policy • Engagement and Communications Strategy • Pandemic Influenza Plan.		
Meetings should be held with key staff to assess the progress of recovery and needs of each service to help improve rate of recovery		
Staff sent home should be contacted by using the cascade system to inform them of the progress		
Once critical areas are stable the recovery of each service area should begin by coordinating this response with the staff. The Senior Team will coordinate this response along with key staff. (This may not occur until 48 hours after an event of this scale – If situations allow, start this process as soon as possible)		
Review Organisation's response to the event as a whole and the creations of lessons document to help identify changes that may make the business continuity plan more effective		

Key actions for a prolonged response

1 - 2 weeks	2 weeks onwards
Regularly review progress, identify and address problems with the response	Regularly review progress, identify and address problems with the response
Review the temporary work areas to ensure they are still able to provide what is required, address any outcomes	Work with DHSSPS personnel to decide the future of the site
Review and address current ICT needs	Begin a rebuilding project in consultation with DHSSPS
Review and address current staffing requirements	Keep staff who may not be required at this stage up to date
Keep staff who may not be required at this stage up to date	If appropriate, maintain media liaison to keep public informed
Keep key stakeholders, external organisations and contacts up to date	Review Organisation's response to the event as a whole and the creations of lessons document to help identify changes that may make the business continuity plan more effective
If appropriate, maintain media liaison to keep public informed	
Assess and address the need for staff support and welfare	
Review organisation's response to the event as a whole and the creation of a lessons learned document to help identify changes that may make the business continuity plan more effective	

KEY CONTACT SHEET

NIPEC main switchboard - 0300 300 0066

Contact	Office Number (direct line)	Mobile Number	Useful Information
Prof. Carol Curran	(028) 9536 1181	07789 550627	Chair
	(028) 9536 1186		
Angela McLernon	(028) 9536 1167	07798 892486 or	Chief Executive
		07590 203673	
Deirdre Meleady	(028) 9536 1181	07884 362775	PA to CE
Edmund Thom	(028) 9536 1173	07789 208824	Head of Corporate Services
Cathy McCusker	(028) 9536 1168	07776 152582	Senior Professional Officer
Angela Reed	(028) 9536 1169	07825 140410	Senior Professional Officer
Karen Murray	(028) 9536 1170	07435 768957	Senior Professional Officer
Frances Cannon	(028) 9536 1172	07435 768935	Senior Professional Officer
Janet Hall	(028) 9536 1178	07771 630303	Corporate Services Manager
BSO main switchboard	0300 555 0113		
Liam McIvor	(028) 9536 3864		Chief Executive, BSO liam.mcivor2@hscni.net
Alphy Maginness	(028) 9536 3585		Chief Legal Adviser, BSO
Paddy Hanna	(028) 9536 3883		HR Manager (NIPEC link), BSO
Andrea Henderson	(028) 9536 3722		Assistant Director of Finance (NIPEC link), BSO
Maxine Patterson	(028) 9536 2643		Head of Payments, Shared Services, BSO
Mark Scott	(028) 9536 2605		Client Systems Manager, BSO ITS mark.scott@hscni.net
Stephen Muldoon	(028) 9536 2332		Technical Project Manager, BSO ITS stephen.muldoon@hscni.net
ITS Help desk	(028) 9536 2400		
Prof. Charlotte McArdle	(028) 9052 0562	Annette Irvine PA	Chief Nursing Officer charlotte.mcardle@health-ni.gov.uk
Jemima Keyes	(028) 9052 0792		Nursing Advisor (Sponsor Branch contact) jemima.keyes@health-ni.gov.uk

Contact	Office Number (direct line)	Mobile Number	Useful Information
Heather Stevens	(028) 9052 2388		Director of Human Resources
	(028) 9052 2680		heather.stevens@health-ni.gov.uk
			doreen.wallace@health-ni.gov.uk
Bob Brown (from 1/9/17)	(028) 7161 1194 (028) 7134 5771	(028) 7161 1247 Katrina Quinn PA	Executive Director of Nursing, Western HSC Trust
Angela McVeigh	(028) 3861 3979	(028) 3861 3979 Karen Taylor PA	Executive Director of Nursing & AHPs, Southern HSC Trust
Nicki Patterson	(028) 9055 3147	Ext 6518 Debbie Cousins PA	Executive Director of Nursing, Primary Care & Older People, South Eastern HSC Trust
Eileen McEneaney	(028) 9442 4513 (028) 2563 3763	(028) 9442 4513 Lynne Duplock PA	Acting Executive Director of Nursing & User Experience, Northern HSC Trust
Brenda Creaney	(028) 9504 0126 (028) 9096 0035	(028) 9504 7012 Audrey Whiting PA	Executive Director of Nursing, Belfast HSC Trust
Mary Hinds	(028) 9536 3505	Elizabeth Thompson PA	Executive Director of Nursing, Midwifery and AHPs, PHA
HSCB main switchboard	0300 555 0115		
Patricia Crossan	(028) 9536 3293		Corporate Business Manager
Una Doyle	(028) 9536 3361		Corporate Business Officer
PHA main switchboard	0300 555 0114		
PCC main switchboard	0800 917 0222		
Maeve Hully	(028) 9536 1708		Chief Executive
Sean Brown	(028) 9536 1707	07900 240222	Head of Development & Corporate Services
Danielle Hanvey	(028) 9038 7000		Causeway Asset Management
Daniene Hanvey	07553 367026		(landlord agents)
Paula Jones	(028) 9052 3809		Assets & Estate Management Branch
Kieran Mason	(028) 9052 3804		Central Procurement Division, DFP
Helpdesk	(028) 9081 6666		DFP Maintenance/ Works Section

Contact	Office Number (direct line)	Mobile Number	Useful Information
Maureen Murphy	(028) 9064 3211		Managing Director, Aurion Learning
Roger Telford	(028) 3832 4691	07710 448251	Informatics Science & Technology r.telford@ictni.com
Anne McKee	(028) 9038 7036	07816 144333	Operations Manager, Island Cleaning Services
NIE	03457 643 643		In the event of a loss of power supply
Power NI	03457 455 455		All other power supply queries
NI Water	03457 440088		'Waterline' for emergencies

LOG SHEET

Date	Time	Information /Decisions/ Actions	Initials

BSO, ICT Incident Management Process

1. INTRODUCTION

1.1 Purpose

The objective of the Incident Management process is to restore normal service operations as quickly as possible and minimize the adverse impact on business operations, ensuring that the best possible levels of service quality and availability are maintained.

1.2 Scope

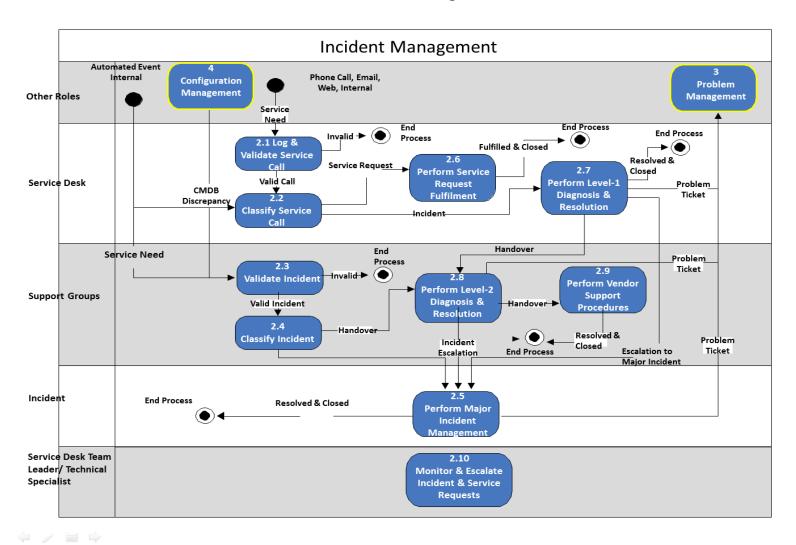
The scope of Incident Management covers all services delivered by and on behalf of BSO ITS to its customers.

1.2.1 This procedure covers:

INCIDENTS	Individual incidences of software, hardware, communications or other operational failure of those products supported by BSO ITS.
SERVICE REQUESTS	Requests for support under the Software Support, Technical Support and Technical System Management services
CUSTOMER FEEDBACK	Cases where a customer complains that a promised service or product was not delivered as agreed. This can be in respect of the timeliness of the delivery of the product or service, or its quality. Also cases where a customer wishes to compliment the service provided. Both complaints and compliments can be in writing, or made verbally during discussions with Product Managers Business Managers, or other personnel engaged in Delivery and Support activities.

2. **PROCEDURE**

The flow chart below shows how incidents are managed.



2.1 Incident Escalation

Incidents not resolved within the target times dictated by the agreed priority are escalated through line management as shown in the tables below.

	URGENCY				
IMPACT	Low	Normal	High	Critical	
Individual	Low	Medium	Medium	High	
Group	Low	Medium	High	High	
Facility	Low	Medium	High	Critical	
Organisation	Medium	High	Critical	Critical	
HSC Service Wide	Medium	High	Critical	Critical	

Note: By default all calls have a Priority of Medium, i.e. (Urgency is Normal, Impact is Individual)

			Infra WARNING	ESCALATION			
PRIORITY RESPONS			e-mail sent to:	SLA Breach	1 st escalation	2 nd escalation	3 rd escalation
	Officer & Officer &		Current Officer & Group	Current Officer & Group	Product / Team Manager	Service Delivery Manager	
Critical	1 hour	2 hours	1.5 hours	2 hours	1.5 hours	4 hours	8 hours (1 day)
High	4 hours	8 hours (1 day)	6 hours	8 hours (1 day)	6 hours	16 hours (2 days)	24 hours (3 days)
Medium	8 hours (1 day)	40 hours (1 week)	30 hours	40 hours (1 week)	30 hours	80 hours (2 weeks)	120 hours (3 weeks)
Low	16 hours (2 days)	160 hours (4 weeks)	120 hours (3 weeks)	160 hours (4 weeks)	120 hours (3 weeks)	240 hours (6 weeks)	320 hours (8 weeks)

Note: Once a call breaches its SLA, the call priority cannot be changed.

- **2.1.1** Level 1 escalations are passed on to the **Current Responsibility Group** at 75% of the target fix time.
- **2.1.2** Further escalations, according to the Escalation Level, to the Line Manager responsible for the incident's **Current Responsibility Group**.
- **2.1.3** On receipt of a Level 1 escalation the Current Responsibility Group shall take action to resolve before Target Fix Time.
- **2.1.4** All escalations are handled automatically by **Infra.**
- **2.1.5** On receipt of a Level 2 or Level 3 escalation the Line Manager concerned shall endeavour to discover why the incident remains unresolved. Receipt of the escalation, and detail of the subsequent investigation and its results, shall be recorded against the incident as Action Text in the Infra call.
- **2.1.6** Level 4 escalations shall be passed to the Assistant Director of ITS in the form of a monthly report listing the relevant incidents as follows:

Priority - Critical: At end of month in which incident first reported

Priority - High: At end of month in which incident first reported

Priority - Medium: At end of month + 1 in which incident first reported

Priority - Low: At end of month + 2 in which incident first reported

The Assistant Director of ITS shall acknowledge receipt of the report by signing and dating it and shall then request that the Service Delivery Managers provide explanations for late resolution of each incident. The report makes provision for the recording of this information.

2.1.7 Records showing the receipt and subsequent investigation and results shall be retained for no less than three months after successful resolution of the escalated incident.

2.2 Customer Feedback

- 2.2.1 Customer Complaints shall always be accorded priority High.
- **2.2.2** Any Customer Complaint shall be acknowledged in writing to the customer concerned within 2 days of receipt. If resolution of the complaint is also likely within 2 days then this acknowledgement may be combined with the written explanation described in 2.2.3 below.
- 2.2.3 The resolution of any Customer Complaint should include a written explanation of any investigation carried out and any actions taken as a result of the complaint. This should be forwarded to the customer as soon as possible after resolution. The customer will be invited to express either satisfaction or dissatisfaction at the action taken. At this stage the Infra call may be marked as 'Resolved' but shall normally only be marked as 'Closed' on receipt of an acknowledgement from the complainant that the action taken was satisfactory. Where there is no response from a complainant after 1 month the incident may be marked as 'Closed' and an appropriate comment recorded as Action Text.
- **2.2.4** Customer Compliments received in writing should be copied to the relevant Business Manager and the Quality Manager for information. Similarly, customer compliments received verbally should be detailed in an e-mail and copied to the relevant Business Manager and the Quality Manager for information.

3. **INCIDENT ANALYSIS**

This shall be carried out at three levels

3.1 Service Management Review

3.1.1 A review of any Customer Complaints received during the preceding period shall be carried out as part of the six-monthly **Management Review Meeting** described in the **Management Review** procedure.

3.2 Service Delivery Manager Review

3.2.1 This shall involve a quarterly review of the number of incidents, support requests and complaints logged at Product and Customer level with a view to identifying any shift in the 'norm' that requires further investigation.

3.2.2 This review shall also consider BSO - ITS general performance during the preceding six months in respect of incident resolution times with particular reference to escalation levels.

3.3 Product Manager Review

- 3.3.1 This shall involve a monthly analysis of the number of incidents and their type logged against the products for which the Product Manager has responsibility. The analysis shall aim to identify unusual fluctuations during the preceding six months and seek explanation for their occurrence. This information can be viewed on SharePoint via the link 'SLA Performance'.
- 3.3.2 A second element of incident analysis shall involve the product manager in identifying any repeating incidents or complaints whether they be from the same Customer or from many Customers. This analysis should enable appropriate action to be taken to prevent any unnecessary recurrence of the same or similar incident.

NIPEC Disaster Recovery Team

Name	Position	Phone (Office)	Phone (Mobile)
Edmund Thom	Head of Corporate Services (IT lead)	(028) 9536 1173	07789 208824
BSO ITS Support Desk	BSO ITS	(028) 9536 2400	-
Stephen Porter	Head of Business Systems & Business Management	(028) 9536 2243	07891 517645
Stephen Muldoon	Technical Project Manager	(028) 9536 2332	-
Paddy Carville	ICT Infrastructure Services	(028) 9536 2204	