****

**Business Continuity and Planning Policy**

**[Date of Issue]**

|  |  |
| --- | --- |
| Policy Lead: | [Policy Lead] |
| Version No. | 1 |
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# Introduction

[Company Name] is committed to ensuring that it has the capability for an effective response in times of crisis, which protects the health and safety of its clients and safeguards the interests of its key stakeholders, as well as its reputation.

The business continuity plan will enable [Company Name] to plan and respond to a disruption or crisis that affects the continuity of the business and enable it to restore normal services as soon as possible.

[Company Name] will inform the CQC under regulation 18 if they are not able to provide the regulated service and/or if a client is at risk of not having their needs met [Regulation 18: Notification of other incidents | Care Quality Commission (cqc.org.uk)](https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-18-notification-other-incidents#full-regulation)

# Policy Statement

The Business Continuity Plan seeks to ensure that [Company Name] can continue to provide services for their clients in the event of an emergency, other disruption, or crisis in line with the statutory responsibilities set out in the Health and Social Care Act 2012.

# Scope

**[EDIT/DELTE ACCORDING TO BUSINESS TYPE]**

**[DELETE/EDIT - SOLE WORKER]** Currently [Company Name] hasone staff member who is also the Director/Company Owner, who will adhere to all the procedures contained in this document. References to “staff” will become relevant when additional staff are employed by [Company Name].

**[DELETE/EDIT - Small Company]** [Company Name] is a small company with a small pool of staff. [Company Name] may plan to recruit more staff in the future.

This policy and the procedures apply to all staff, volunteers and contracted workers.

[Company Name] are required to have a Lead responsible for guiding and supporting all staff when dealing with the Business Continuity Plan and processes.

**The Business Continuity Lead is:** [Business Continuity Lead Name]

**Contact number:** [Business Continuity Lead Contact Number]

[Company Name] will have a on call duty manager that can be contacted to request assistance and support for health and safety twenty-four hours a day.

**The contact number is:** [On Duty Manager Contact Number]

# Roles and Responsibilities

**The Managing Director/Board** **is/are** responsible for:

* Ensuring that adequate emergency and business continuity plans are in place.
* **[Delete MD and RM are the same person]** Supporting the Registered Manager with the implementation of the plan into practice.
* Negotiating contracts/agreements with third parties to support in the case of an emergency.
* Networking with other local providers of similar services that can be called upon to assist in an emergency.
* Obtaining the details of any Emergency Plan the Local Authority already has in place that is applicable.

**The Registered Manager** is responsible for:

* Ensuring that business continuity plans are incorporated into practice, routinely reviewed and tested, where possible.
* Ensuring that staff understand the actions to take in the case of an emergency or crisis situation.
* Ensuring emergency procedures provide effective methods for raising the alarm and for calling for emergency services where required.
* Arranging procedures to ensure adequate first-aid treatment in the event of a health or medical emergency.
* Maintaining staffing numbers at a level sufficient to cope with any unforeseen incidents.

**Staff** are responsible for:

* Being aware of this policy and what to do in the event of an emergency / unplanned event and how to take appropriate action.
* Never panicking and following the set procedures calmly and carefully.
* Using appropriate methods to raise the alarm in any emergency situation.

[Company Name] will take all relevant details from the client on registration including next of kin and GP details in case the business continuity plan has to be implemented in the future.

# Notification and Escalation

The following can be found in the appendices to aid with notification and escalation, these are to be updated regularly as and when company changes occur.

[Appendix 1: Log of Business Continuity Incident](#_Appendix_1:_Log)

[Appendix 2: Internal and External Staffing Resource](#_Appendix_2:_Internal)

[Appendix 3: Essential Services](#_Appendix_3:_Essential)

[Appendix 4: Minimum Resource Requirements](#_Appendix_4:_Minimum)

[Appendix 5: Emergency Response Checklist](#_Appendix_5:_Emergency)

[Appendix 6: Actions and Expenses Log](#_Appendix_6:_Actions)

[Appendix 7: Relocation of Premises](#_Appendix_7:_Relocation)

[Appendix 8: After Action Review](#_Appendix_8:_After)

The following table includes contact numbers for services that may be of use in a business continuity event **[Update/add applicable services to table below]**:

|  |  |  |
| --- | --- | --- |
| **Service** | **Use** | **Contact Number** |
| Ambulance | Emergencies | 999 |
| Fire Service | Emergencies | 999 |
| Police | Emergencies  Non-emergency matters | 999  101 |
| Floodline | Information service | 0845 988 1188 |
| NHS Direct | Non-emergency but urgent/out of hours medical advice | 111 |
| [Insert or delete extra as needed] |  |  |

**Communication**

In the event of a business continuity incident, [Company Name] will ensure that any clients, stakeholders and staff are notified of any service changes. Where the incident and service changes will have an impact on the wider health system, this notification will include what actions are being taken to address this impact and mitigate the risk.

The Business Continuity Lead should ensure that all staff are notified using the internal staff directory in [Appendix 2](#_Appendix_2:_Internal).

**[For larger organisations – otherwise delete]** Due to the number of staff who require contacting in a business continuity event, [Company Name] will implement a cascade plan as per the diagram below:

**[Insert Cascade Diagram]**

Where a business continuity incident affects the services being delivered by [Company Name] whether in the short, medium or long-term, clients will be notified through numerous means, including **[amend the following as appropriate]**:

* Use of additional administrative staff to assist in calling clients to explain the situation during the incident.
* Change the voicemail message to notify callers of the incident and what is being done.
* Updating the Company website to notify users of the incident and its impact.

Contact numbers for key stakeholders can be found below **[amend and complete table as appropriate]**:

|  |  |  |
| --- | --- | --- |
| **Type of Stakeholder** | **Contact Name** | **Contact Number** |
| Local Authority |  |  |
| GP Practices |  |  |
|  |  |  |
|  |  |  |

# Risk Assessment

Risk assessments for potential business continuity incidents will be undertaken in line with [Company Name]’s Governance and Risk Policy, with medium-high scoring risks being continually monitored through the central Risk Register.

**Surge and Escalation**

[Company Name] will also undertake risk assessments of likely surge/escalation events, such as winter flu and other infectious disease outbreaks. [Company Name] will work to mitigate these risks and ensure it can respond to incidents that result in a surge or escalation of client needs.

# Essential Services

In the event of a business continuity incident affecting [Company Name]’s ability to deliver any or all of its services, an understanding of the maximum acceptable period of disruption is essential for prioritising their restoration. This refers to time critical services that must continue to ensure delivery of client care and client safety.

A table listing [Company Name]’s essential activities, as well as the maximum period these activities could not function for can be found in [Appendix 3](#_Appendix_3:_Essential). The resources required to maintain these services can be found in [Appendix 4](#_Appendix_4:_Minimum).

# Temporary Closure

If clients are at risk and care cannot be provided by [Company Name] other local companies will be contacted to see if they can help, see [Appendix 2](#_Appendix_2:_Internal). The Local Authority will be contacted immediately using out of hours numbers if necessary to request additional support/reallocation of client care packages.

Client and staff safety is paramount, Council safeguarding details and referral forms can be found within the Safeguarding Policy, if required. If required, the emergency services will be contacted.

# Staff Levels

There is a risk that [Company Name] could experience a reduction in levels of staff, due to, for example, pandemic, illness, failure of transport networks, industrial action, adverse weather conditions, technical issues or unforeseen circumstances, meaning that client’s risk not having their needs provided.

To mitigate this risk, [Company Name] have a network of internal and external workers who can be contacted at short notice to be able to ensure that continuity of service to meet the needs of the business, refer to the database, [Appendix 2](#_Appendix_2:_Internal).

[Company Name] will continue to recruit and build the database located in [Appendix 2](#_Appendix_2:_Internal) with resources to enable a full and efficient workforce so the needs of the client can continue to be met in the event of a staff crisis.

Staff will notify the manager or on call manager if they are unable to come to work. The manager will then commence the role of contacting staff listed on the database to see if they can work. If staff and/or volunteers/Independent sources are unavailable, the manager may prioritise the client’s needs based on their care requirements. The same plan will be followed if staff do not arrive at work; staff well-being must be checked on within one hour of them not arriving at work, and if there are safety concerns the police are to be contacted.

Some staff issues will be preempted such as factoring in predicated extreme weather conditions or planned travel disruptions. In this case staff case load may be changed so the needs of the client can be met, additional staff may be called on.

[Company Name] also have agreements with the following staffing agencies **[Update/add applicable services to table below]**:

|  |  |  |
| --- | --- | --- |
| **Name of Staffing Agency** | **Staffing Type** | **Contact Number** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# External Stakeholders

[Company Name] relies on the following external stakeholders/suppliers to deliver its service and has the following alternative solutions should these ever be required:

|  |  |  |  |
| --- | --- | --- | --- |
| **Supplier** | **Provides** | **Contact** | **Alternative in Case of Supplier Failure** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Information Technology

At [Company Name], our client, staff and central monitoring data are stored on encrypted, cloud based third party system(s).

[Company Name]’s critical IT information is listed in the table below **[Complete the table below]**:

|  |  |  |
| --- | --- | --- |
| **Critical IT Software, Hardware or Information System** | **Where is it located**  **(e.g., cloud)** | **What is it used for**  **(e.g., client records/data storage)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

No person identifiable data is stored directly onto computer/device hard drives. This ensures that access to information necessary to the role is not restricted to specific devices and, as such, if our computers are damaged or stolen, we are assured that client confidentiality will be secure and that we are able to remain operational at short notice, or at another location as needs be.

Cloud-based system(s) enable our data to be backed up each day to ensure minimal data loss in the event of a system breakdown or network failure.

**The IT LEAD is:** [IT Lead Name]

**Telephone accessibility**

[Company Name] uses portable devices with cloud-based systems for telephone accessibility. This minimises the risk of telephone provider system failures where inbound calls and/or outbound calls cannot be made.

We also have portable mobile phones in use which enable us to maintain continuity of services at all times. Wherever possible, contact with all staff and clients will be maintained during service disruption with the use of a mobile phone.

Additionally, we will have access to portable USB charging devices to enable 24-hour access to phones if required.

**[Company Name]’s Telephone Provider is:** [Insert name of telephone provider]

**Contact Number:** [Telephone Provider Contact Number]

1. **Emergency Alerts**

Emergency Alerts is a UK government service that warns if there’s a danger to life nearby. In an emergency mobile phones or tablets will receive an alert with advice about how to stay safe. These emergency alerts are issued by the emergency services or government departments, agencies and public bodies that deal with emergencies. Alerts may be issued about severe flooding, fires or extreme weather. An alert will include a phone number or a link to the GOV.UK website for more information.

Upon receipt of an alert staff should follow the instructions in the alert and notify the Business Continuity Lead so that appropriate business-wide actions can be taken in accordance with this policy.

# Severe Adverse Weather

Severe adverse weather in the form of floods and heatwaves have become more common in England over the last few years and although milder winters have become commonplace [Company Name] will also plan for harsher winters to ensure consistency of the service.

**Harsh winter**

[Company Name] would consider a harsh winter to involve more than two months of severe weather. Prolonged severe weather can impact staffing levels, result in fuel and food shortages and potentially utility failure.

The main threat to life in this period results from a cold property, therefore, where possible, educational information should be provided to clients on the importance and methods of heating their home. Cold properties increase the risk of heart attack, stroke, breathing problems, flu, depression and falls in the vulnerable and elderly population.

**The Registered Manager is responsible for:**

* Monitoring Met Office alerts and ensuring that staff are notified when there is the potential for adverse cold weather.
* Ensuring that appropriate action is taken in line with the level of alert.

In the event of a harsh winter [Company Name] will follow the applicable/relevant parts of Adverse Weather and Health Plan Protecting health from weather related harm (2023) <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1155633/Adverse-weather-health-plan-2023-v2.pdf>

**Flood**

[Company Name]’s headquarters is not known to be on a recognised floodplain. However, the following will still be implemented in relation to the headquarters and where practicable and within reason, clients’ homes also.

The Registered Manager is responsible for monitoring for potential adverse weather and checking the government website for flood alerts.

The Registered Manager should also sign up for flood warnings using the government website as follows <https://www.gov.uk/sign-up-for-flood-warnings?_ga=2.189070827.1776948566.1628017650-241336117.1628017650>.

There are three levels of flood warning:

* **Prepare** – If a Flood Alert - Prepare affecting [Company Name]’s headquarters is issued the following processes should be followed:
  + **Registered Manager** will:
    - Maintain contact with the Flood Alert phone line to ensure swift response if the alert changes.
    - If staffing is likely to be affected, contact other services nearby but that are likely to be unaffected by flooding to arrange support.
    - Arrange for sandbags to be delivered for headquarters.
    - Assess safety of staff already on visits and/or of the visits due to be undertaken and risk assess the necessity of the visit to the client.
    - Consider whether client’s due for visits have family or friends near by that can assist in the event of non-attendance.
  + **Staff** will
    - If on a visit assess the safety and vulnerability of the client.
    - If on a visit and the client can move to a relative or friend nearby likely to be unaffected by flooding, assist with packing an emergency bag, including emergency medication bags.
    - Assess whether there is sufficient food for the client in case they were to become stranded in the residence – escalate to the on call duty manager if not.
    - Ensure that those with disabilities are located on the ground floor to ensure a quick evacuation can be achieved.
    - Support the Registered Manager as needed.
* **Act Warning** – If a Flood Warning is issued following a prepare warning, the following processes should be followed:
  + Divert the phone line to the Senior Management Team.
  + Evacuate any staff at headquarters to nearby suitable place of safety or their homes.
  + Turn off the gas, water and electricity.
  + **[Delete if records are all electronic]** Ensure that any paper records or equipment that can easily be moved are relocated to a high place. Records must still be securely held in a locked cupboard to protect confidentiality.
  + Staff present at a visit should ensure the safety of themselves and the client and remain in constant communication with the Senior Leadership Team to ensure the client is safely relocated by either family, friends or emergency services, as appropriate.
* **Survive Warning** – If a Severe Flood Warning – Survive warning is issued the following should be undertaken:
  + Contact the Local Authority immediately for assistance where available.
  + Follow advice from emergency services on whether it is safe to evacuate both headquarters and staff with clients on visits.
  + If not safe to evacuate, move all persons and any emergency equipment, medicines and client records upstairs or to a high place.
  + Where clients are evacuated from their home or place of residence, the Registered Manager will maintain contact with relative and relevant individuals until it is safe for them to return to their home or place of residence. Services will continue at the clients temporary residence as far as reasonably practicable. Where this is not possible the Local Authority will be notified.

**Heatwave**

A Heatwave is triggered as soon as the Met Office forecasts that there is a 60 per cent chance of temperatures being 29oC throughout the day and 15oC at night on at least two consecutive days. A heatwave poses significant risk to the elderly and the infirm, those using certain medication and those who have underlying health conditions. This plan has been created in line with UK Health Security Agency’s, Hot weather and health: guidance and advice (2023).

**The Registered Manager** is responsible for:

* Monitoring Met Office alerts and ensuring that staff are notified when there is the potential for a heatwave. Alerts can be signed up for here: [Met Office: Weather-Health Alerting system registration form](https://forms.office.com/pages/responsepage.aspx?id=mRRO7jVKLkutR188-d6GZn06Ss-xPLpCuYeyOZ-eFiFUMEVIMDRTOE5FVzFFM0NXNjFMWUlWMkJVMCQlQCN0PWcu).
* Ensuring that appropriate action is taken in line with the level of alert.
* Following the Government’s Hot weather and health: guidance and advice, where applicable <https://www.gov.uk/government/collections/hot-weather-and-health-guidance-and-advice>.

Where a client becomes unwell because of the heat then arrangements should be made for them to be seen by a doctor. If it is suspected that someone has heatstroke, staff should call 999 immediately. While waiting for the ambulance, they should follow the instructions of the call handlers and:

* take the client’s temperature
* if possible, move them somewhere cooler
* encourage them to drink fluids if they are conscious
* sponge with cool (not cold) water.

# Key Premises Details

In relation to [Company Name]’s headquarters, the premises are rented/owned by the Company and the landlord/[Company Name] is responsible for all the utilities and services at the headquarters.

The following people have access to keys to the premises:

* [Insert names]

An alarm is in place at the premises and the alarm panel is located **[insert location]**.

**[For rented premises]** In the event of utility failure, as well as the below, the Landlord of the premises should be contacted immediately to inform them of the situation and in case contractors are required.

Care staff should familiarise themselves with the utilities and location of meters and stop cocks in the client’s residence in case of emergency.

**Electrical Issues (Power Failure)**

Call **105** - It’s free of charge and will put you through to the [local network operator](https://www.powercut105.com/findoperator.aspx) who can give you help and advice.

* The Registered Manager will ensure that all staff have access to a torch in the eventuality of a power cut.
* Check the trip switches in the fuse box. If this does not rectify the fault, contact the supplier, and report the failure. For management purposes, ask if they can give an estimated length of time the power will be off for.
* Notify the Registered Manger immediately of any power failure at either the headquarters or a client’s residence.

The fuse board at Company headquarters is located: **[Insert fuse board location].**

The electricity supplier for Company headquarters is: **[Insert name of electricity supplier]**.

**Gas Issues (loss of Gas Supply)**

If you smell gas or think there may be a gas leak

* Turn off the gas at the meter.
* Put out any naked flames, if safe to do so and have the appropriate firefighting means.
* Open windows.
* Call the 24-hour gas emergency number on: **0800 111 999.**
* Notify the registered Manager immediately of any loss of gas supply at either the headquarters or a client’s residence.

The gas meter at Company headquarters is located: **[Insert gas meter location]**.

The gas supplier for Company headquarters is: **[Insert name of gas supplier]**.

**Water Issues (Loss of Water Supply)**

* If water is leaking turn off the water – Locate the stopcock and turn it clockwise. If you are unable to turn off the water, turn off the electricity**.**
* Use towels and buckets as needed to prevent further damage.
* Contact landlord/a local plumber if required.
* Notify the Registered Manager immediately of any loss of water supply at either the headquarters or a client’s residence.
* Consider bottled water if required and hand sanitiser for hygiene.

The water stopcock is located: **[Insert water stopcock location]**.

The water supplier for the premises is: **[Insert name of water supplier]**.

If you are unsure who the clients water supplier is this can be found on <https://www.water.org.uk/advice-for-customers/find-your-supplier/>.

# Relocation of [Company Name]’s Headquarters

In the event of loss of headquarters [Company Name]’s Management Team will continue to work remotely from their own homes.

# Transport Issues

[Company Name] Recognises that staff may need assistance getting to work due to certain unforeseen situations, petrol shortages or transportation issues occurring, in these instances Line Managers/the Registered Manager should:

* Contact local transportation services to pick up staff using the company account.
* If appropriate, see if staff are able to car share.

If there is a fuel shortage in the United Kingdom, this can have an effect on the Company’s services. As we serve vulnerable and ill clients according to the UK law, we would be given priority on accessing fuel for our vehicles.

# Pandemic

In the event of pandemic, due to the risks of infection spread and staff shortages, face to face meetings between staff will be discouraged and should take place over phone or video call wherever possible.

When providing care for client’s, staff must adhere to the pandemic guidelines regarding personal protective equipment (PPE) and keep themselves, and the people they are caring for, safe. The Registered Manager will ensure that all guidelines are followed and that all staff have enough PPE as per GOV UK guidance.

# Fire

Please refer to [Company Name]’s Fire Safety Policy for full information.

Fire drills within [Company Name] headquarters must be completed at least every six months.

The fire drills will be led and arranged by the landlord of the premises/[Insert Name][Company Name], who will also be responsible for all fire plan and evacuations.

The local fire brigade will be liaised with as necessary regarding best plans for fire prevention.

In case of a fire, the safety of staff and clients is of absolute priority and should only be used to protect life and facilitate safe escape, not to actively fight the fire.

Fire extinguishers in headquarters are located as follows:

* [List fire extinguishers by type and locations]

No one is expected to extinguish the fire and 999 should be telephoned immediately.

Staff should make themselves aware of any firefighting equipment that clients may have in their own home.

**The Fire Safety Lead is:** [Fire Lead Name]

# Insurance

[Company Name] has the following insurance policies to ensure continuity of operations and to assist in the recovery of a disaster:

* General Liability Insurance– Covers claims made by members of the public against [Company Name]. These claims could be for bodily injury, illness or property damage caused by the business.
* **[List any other applicable insurance]**

# Reporting an Incident

When a business continuity incident occurs, the process detailed within [Company Name]’s Incident Management Policy should be followed and the Registered Manager notified. Please refer to [Company Name]’s Incident Management Policy.

**The Incident Reporting Lead is:** [Incident Management Lead Name]

Following the incident, the After Action Review template in [Appendix 8](#_Appendix_8:_After) should be completed within two weeks of the incident to ensure that any areas for improvement can be identified along with what went well. It should involve the person(s) involved in the incident so that their feedback and experience can inform this Business Continuity Plan. See [NHS England Business Continuity Debrief Template](https://www.england.nhs.uk/wp-content/uploads/2023/04/part-4-a-business-continuity-debrief-template.pdf) for further information.

# Monitoring

Incidents will be discussed at any team meetings and will be an agenda item for management meetings. The implementation of the plan will be reviewed, and changes will be made if required.

# Related Policies

* Governance and Risk Policy
* Health and Safety Policy
* Incident Management Policy
* Safeguarding Policy

# Legislation and Guidance

**Legislation**

* Health and Social Care Act 2012

**Guidance**

* NHS England, NHS Commissioning Board Business Continuity Management Framework 2013

<https://www.england.nhs.uk/wp-content/uploads/2013/01/bus-cont-frame.pdf>

* NHS England Business Continuity Plan

[NHS England » Business continuity](https://www.england.nhs.uk/ourwork/eprr/bc/)

* NHS England Emergency Preparedness, Resilience and Response (EPRR) Business Continuity Management Toolkit, [NHS England » Emergency Preparedness, Resilience and Response (EPRR)](https://www.england.nhs.uk/ourwork/eprr/)
* HM Government, Business Continuity Management <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/137994/Business_Continuity_Managment_Toolkit.pdf>
* HCPA, Business Continuity Planning

<https://www.hcpa.info/guideline/cpa/>

* Adverse Weather and Health Plan Protecting health from weather related harm (2023) <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1155633/Adverse-weather-health-plan-2023-v2.pdf>
* GOV UK Hot weather and health: guidance and advice, where applicable

<https://www.gov.uk/government/collections/hot-weather-and-health-guidance-and-advice>.

# Review Summary

|  |  |
| --- | --- |
| Version | 1 |
| Last amended | [Date of Issue] |
| Reason for Review |  |
| Were changes made? |  |
| Summary of changes |  |
| Target audience | Care staff and Managers |
| Next Review Date | [Date of Review] |

# Appendix 1: Log of Business Continuity Incident

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date of Incident** | |  | **Time of Incident** |  |
| **Additional Persons Involved** | |  | | |
| **Additional Persons Informed** | |  | | |
| **Outcome of Incident** | | | | |
|  | | | | |
| **Overall Actions Taken** | | | | |
|  | | | | |
| **TIME 24HR CLOCK** | **Ongoing Log of detail/event/action taken** | | | |
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# Appendix 2: Internal and External Staffing Resource

**Internal Staff Contact Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Job Title** | **Office Contact** | **Mobile Contact** | **Home Contact** |
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**Independent/External Support**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Job Title** | **Office Contact** | **Mobile Contact** | **Home Contact** |
|  |  |  |  |  |
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# Appendix 3: Essential Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Essential Activity** | **Maximum Acceptable Service Disruption:**  **Red – up to 24hrs**  **Amber – up to 72hrs**  **Green – up to 5 days** | **Responsible Person** | **Minimum Staffing Required by Role (e.g., Nurse, HCA, Admin)** |
| **1** | *(e.g., medication administration, specialist services, moving and handling visits)* |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** | **[Insert more rows if required]** |  |  |  |

# Appendix 4: Minimum Resource Requirements

|  |  |  |
| --- | --- | --- |
| **Area of Requirement** | **Minimum Resource/Equipment Requirements** | **Alternatives/Back Up in Case of Failure** |
| **Premises** | *For Example:*   * *Key requirements to operate out of main premises (consider utilities, IT, equipment etc)* * *Equipment requirements* | *For example:*   * *Alternate possible premises* * *Consider short, medium and long term alternatives* |
| **Information Access** | *How is information stored?* | *What are the alternative ways of storing/accessing information?* |
| **Technology** | *For example:*   * *IT Equipment* * *Phone/fax* * *Other online systems* | *What are the back up options if these fail?* |
| **Equipment** | *Include equipment/consumables required to operate essential services.* |  |
| **Supplies to Maintain/Restore Service** | *Include key supplies (cross reference with table in Section 10 ‘External Stakeholders’.* |  |
| **Stakeholders to Maintain/Restore Service** | *Include key stakeholders (cross reference with table in Section 10 ‘External Stakeholders’.* |  |
| **Staff to Maintain/Restore Service** | *Include key staff required to ensure essential services can be undertaken.* |  |
| **Seasonal Variation in Priority Activities** | *Highlight any seasonal variation in activities which needs to be recorded (e.g., Year end activity).* |  |

# Appendix 5: Emergency Response Checklist

This page should be used as a checklist during the emergency.

|  |  |
| --- | --- |
| **Task** | **Completed**  **(date, time, by)** |
| **Actions within 24 hours:** |  |
| Start of log of actions and expenses undertaken (see Appendix 6, Action and Expenses Log). |  |
| Liaise with emergency services (see above in policy Section 5: Notification and Escalation). |  |
| Identify and quantify any damage to the organisation, including staff, premises, equipment, data, records, etc. |  |
| Assess the key priorities for the remainder of the working day and take relevant action. |  |
| Inform staff what is required of them. |  |
| Identify which critical functions have been disrupted. |  |
| Convene those responsible for recovering identified critical functions, and decide upon the actions to be taken, and in what time-frames. |  |
| Provide information to:   * Staff * Suppliers and clients * Insurance company |  |
| Publicise the interim arrangements for delivery of critical activities. Ensure all stakeholders are kept informed of contingency arrangements as appropriate. |  |
| Recover vital assets/equipment to enable delivery of critical activities.  The essential equipment/resources/information that need to be recovered where possible are ultrasound machines and IT equipment. |  |
| **Daily actions during the recovery process:** |  |
| Convene those responsible for recovery to understand progress made, obstacles encountered, and decide continuing recovery process. |  |
| Provide information to:   * Staff * Suppliers and customers * Insurance company |  |
| Provide public information to maintain the reputation of the organisation and keep relevant authorities informed. |  |
| **Following the recovery process:** |  |
| Arrange a debrief of all staff and identify any additional staff welfare needs (e.g. counselling) or rewards. |  |
| Use information gained from the debrief to review and update this business continuity management plan. |  |

# Appendix 6: Actions and Expenses Log

This form should be used to record decisions, actions and expenses incurred in the recovery process. This will provide information for the post-recovery debriefing and help to provide evidence of costs incurred for any claim under an insurance policy.

|  |  |  |  |
| --- | --- | --- | --- |
| **Date/Time** | **Decision/Action Taken** | **By Whom** | **Costs Incurred** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Appendix 7: Relocation of Premises

|  |  |  |
| --- | --- | --- |
| **Alternative Premises Arrangements** | **Contact Details for Premises** |  |
| * Address * Scope/layout of premises * Any concerns about location |
| **Communication Requirements** |  |
| **Actions Required to move Services to the New Location** | | **Complete (Y/N)** |
|  | |  |
| **Resources Required to move Services to New Location** | | **Available (Y/N)** |
|  | |  |

# Appendix 8: After Action Review

This After Action Review should be completed within two weeks of the incident and is aimed to be a constructive method of identifying lessons learned that can be actioned and improved for future events. It should involve the person(s) involved in the incident so that their feedback and experience can inform this Business Continuity Plan.

See [NHS England Business Continuity Debrief Template](https://www.england.nhs.uk/wp-content/uploads/2023/04/part-4-a-business-continuity-debrief-template.pdf) for further information.

|  |  |
| --- | --- |
| **Name(s) of Person(s) Involved in Review** |  |
| **Name(s) of Person(s) Involved in Initial Incident** |  |
| **Date of Review** |  |
| **Date of Incident** |  |

|  |
| --- |
| **Overview of the Incident** |
| * *Timeline of incident* |
| **What Should have Happened in Line with the Business Continuity Plan?** |
| * *What went well?* * *What did not go well?* * *Are there any gaps areas for improvement in the Business Continuity Plan* |

|  |  |  |  |
| --- | --- | --- | --- |
| **Lesson Learned/Area for improvement Identified** | **Action Required** | **Date for Completion** | **Responsible Person** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |