Business Continuity and Emergency Planning Policy

Supportive Bridge Ltd | Community Support and Healthcare Staffing | Bradford, England

POLICY AT A GLANCE

- **Support must continue** through snow, floods, illness, power cuts, IT failure or the loss of our office.
- **People are prioritised, not shifts.** In an emergency we contact and support the highest priority people first, using the priority ratings in their support plan.
- **Every person has a priority rating** (1, 2 or 3) set at assessment and reviewed at every review.
- **Everyone knows who is in charge:** the Registered Manager leads, with a named deputy if they are unavailable.
- **Keep a paper copy.** Rotas, contact lists and key information are printed weekly so we can work without systems.
- **Never put a worker at risk** to reach someone. Use the phone, family, neighbours and emergency services instead.
- **Tell the council early.** If we cannot deliver, Durham County Council and the funding authority need to know straight away.

SERVICE DETAILS (fill in before issuing)

Registered Manager (plan owner)	
Nominated Individual	
Deputy / second in command	
Office phone	
Out-of-hours / on-call number	
Emergency meeting point / alternative work base	
Date issued	
Next review date	

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1. PURPOSE

1.1 This policy explains how Supportive Bridge Ltd ("Supportive Bridge", "we", "us") will keep supporting people when something disrupts our normal working, and how we decide who to reach first when we cannot reach everyone.

1.2 It reflects Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and our duty to cooperate with the local authority under the Care Act 2014 and the Civil Contingencies Act 2004.

1.3 The people we support are often frail, live alone, and have no one else coming. A disruption that would be an inconvenience to most businesses can be dangerous for them.

2. SCOPE

2.1 Supportive Bridge Ltd operates two arms, and this policy applies to both: our **healthcare staffing service**, supplying care and support workers to care homes, hospitals and other providers; and our **community support service**, where our own support workers visit adults and older people in their own homes, including council housing, on morning and evening shifts, to support them with daily living.

2.2 Supportive Bridge does **not** provide personal care. Personal care is a regulated activity under the Health and Social Care Act 2008 and we will provide it only if and when we are registered with the Care Quality Commission. Our support workers provide non-personal support such as companionship, meal preparation, shopping, domestic help, prompting, and support to get out and about. This policy is written to meet both local authority provider assurance requirements and the standards we will be assessed against at CQC registration.

2.3 This policy covers anything that stops us working normally, including severe weather, staff shortage, illness or an outbreak, loss of the office, IT or telephone failure, fuel shortage, utility failure, and the death or sudden absence of a key person.

2.4 Where we supply workers to client organisations, those organisations have their own continuity plans; we support them by telling them as early as possible if we cannot supply, and by prioritising bookings where the risk to people is highest.

3. PRIORITY RATINGS

3.1 Every person we support is given a priority rating at assessment, recorded on the front of their support plan and on the office priority list. It is reviewed at every support review and whenever their circumstances change.

Priority	Who	In an emergency
1: Critical	People who would be at serious risk within hours without support: they live alone with no other help, cannot get food or drink themselves, need time-critical medicines prompting, cannot get out of bed or to the toilet unaided, or have no means of calling for help.	Support must be delivered, by whatever means. If a worker cannot get there, the office contacts family, neighbours, the GP, district nurse, the council or 999.
2: Important	People who could manage for a short period with a telephone check and family support, but who would be at risk if support stopped for more than a day.	Telephone contact the same day, support delivered as soon as possible, family and other contacts involved.

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Priority	Who	In an emergency
3: Lower risk	People with family or other support nearby, who can manage safely for a day or two.	Telephone contact to explain, support rescheduled.

3.2 Priority is about risk, not about how long someone has used the service or who funds it. A rating is never reduced to make a rota work.

3.3 The support plan also records who else could help in an emergency: family, neighbours, a key holder, and the person's GP practice and district nursing team.

4. WHO DOES WHAT IN AN EMERGENCY

4.1 The **Registered Manager** leads the response and decides when this plan is activated. If they are unavailable, the named deputy takes over, and then the Nominated Individual.

4.2 On activation, the person leading will:

- assess what has happened and how long it is likely to last;
- get the priority list and the printed rota;
- decide which shifts can run, which must be covered differently, and which cannot run;
- allocate staff to Priority 1 people first;
- make sure every Priority 1 and 2 person is contacted;
- brief all workers by phone or text, and set a time to update them again;
- contact Durham County Council and any other funding authority where we cannot deliver;
- keep a written log of decisions, times and who was contacted;
- hold a debrief afterwards and update this plan.

4.3 Every worker has the office and on-call numbers, and must keep their own phone charged and switched on during a disruption. The office keeps an up-to-date staff contact list, printed weekly.

5. SEVERE WEATHER

5.1 Snow, ice, flooding and storms are the most likely disruption in County Durham.

- the office monitors Met Office warnings and plans ahead, contacting people and rearranging shift times before the weather arrives where possible;
- workers who cannot travel safely must ring the office. **No worker is ever expected to drive or walk in conditions they judge unsafe**, and no one will be penalised for that judgement;
- we reallocate shifts to workers who live nearest, group shifts geographically, and ask workers to walk short distances where it is safe;
- where a worker genuinely cannot reach a Priority 1 person, the office contacts family, neighbours, the GP, district nurse, the council's emergency duty team or 999;
- where possible, managers deliver support themselves;
- we tell people honestly what to expect, and ring them rather than leaving them waiting.

5.2 Workers must not take risks with their own safety to reach a shift. A worker who has an accident helps no one.

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6. STAFF SHORTAGE, ILLNESS AND OUTBREAKS

6.1 Where sickness, an outbreak or a sudden resignation leaves us short:

- the office offers additional shifts to existing and bank workers;
- managers and office staff who are trained and DBS-checked cover shifts personally;
- non-essential tasks and internal meetings are postponed;
- shift times may be moved, and lower priority shifts shortened or rescheduled, with the person told;
- we do not accept new packages while we cannot staff existing ones;
- where the shortfall will last more than a few days, the Registered Manager tells the funding authority in writing and agrees a plan with them.

6.2 In an infectious outbreak we follow our Infection Prevention and Control Policy and current UKHSA guidance, including allocating consistent workers, visiting affected homes last, and increasing PPE.

7. LOSS OF THE OFFICE, IT OR TELEPHONES

7.1 Our records and systems must be recoverable.

- electronic records are backed up automatically, with the backup held separately from the main system, and the restore process tested at least once a year;
- the office prints, at least weekly: the rota for the coming week, the priority list, the staff contact list, and emergency contacts for every person, and keeps them in a folder that can be taken out of the building;
- if the phone system fails, calls are diverted to the on-call mobile and the number is texted to all staff and posted on our website;
- if the office is unusable, we work from the alternative base named on page 1, or remotely, and tell staff, people we support and the council where to contact us;
- if the care records system fails, workers keep paper daily notes and MAR charts, which are entered into the system once it is restored;
- a cyber incident or ransomware is treated as a data breach as well as a continuity event; see our Data Protection Policy and the 72-hour ICO reporting requirement.

8. UTILITY FAILURE AND OTHER DISRUPTIONS

8.1 Where a person's home has no power, heating or water, the worker checks whether they are warm, safe and have food and drink, reports it to the office, and the office contacts family, the landlord or the council, and the utility company's priority services register. Where a person is at risk from cold, we escalate urgently.

8.2 A fuel shortage is managed by grouping shifts geographically, sharing transport, and prioritising Priority 1 people.

8.3 Where a key person dies or leaves suddenly, including the Registered Manager, the Nominated Individual takes charge, informs CQC once we are registered, and arranges interim management cover.

9. WORKING WITH THE COUNCIL AND OTHERS

9.1 Durham County Council has its own responsibilities for keeping care going in an emergency. We will:

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- tell them promptly, in the way the contract requires, where we cannot deliver commissioned support;
- give them accurate numbers of people affected and their priority ratings;
- cooperate with any local resilience arrangements, and take part in provider planning where invited;
- keep their emergency duty team number and the out-of-hours number available to office and on-call staff.

9.2 Social Care Direct can be reached 24 hours on 03000 267 979. In an emergency where someone is at immediate risk, we call 999.

10. COMMUNICATION DURING A DISRUPTION

10.1 People worry more about not knowing than about the disruption itself. We will:

- contact every Priority 1 and 2 person, and tell them honestly what is happening and when we expect to reach them;
- contact families where the person has agreed;
- update workers regularly, with a set time for the next update;
- post a notice on our website and record an outgoing message on the office phone;
- never promise a time we cannot meet.

11. INSURANCE AND FINANCE

11.1 We hold employers' liability, public liability and professional indemnity insurance, and business interruption cover where appropriate. Certificates are kept in the office and available to commissioners.

11.2 The Nominated Individual makes sure the company can meet payroll and essential costs through a short disruption, and reviews this as part of financial oversight.

12. TESTING, TRAINING AND REVIEW

12.1 This plan is tested at least once a year through a desktop exercise, for example "the office is flooded on a Monday morning in January". The exercise is recorded, along with what did not work and what was changed.

12.2 All workers are told about this policy at induction, know their priority-related duties, and know who to ring. The priority list is checked monthly by the Registered Manager.

12.3 The plan is reviewed every year, after every activation, and whenever our size, systems or the people we support change significantly.

13. LEGISLATION AND GUIDANCE

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, especially Regulations 12, 17 and 18
- Care Act 2014 and the Care and Support Statutory Guidance, including business failure and continuity duties
- Civil Contingencies Act 2004
- Health and Safety at Work etc. Act 1974
- UK General Data Protection Regulation and Data Protection Act 2018

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- UK Health Security Agency guidance on outbreaks in adult social care
- Met Office and UKHSA cold weather and heat health alerting
- CQC guidance on business continuity and on provider failure

14. RELATED POLICIES AND FORMS

Related policies: Missed, Late and Shortened Shifts; Lone Working; Health and Safety; Infection Prevention and Control; Safeguarding Adults; Support Planning and Risk Assessment; Data Protection and Confidentiality; Incident Reporting and Duty of Candour; Governance and Quality Assurance.

Forms: Priority List; Emergency Contact List; Business Continuity Action Card (Appendix A); Emergency Log (Appendix B); Weekly Printed Rota; Annual Test Record.

15. DOCUMENT CONTROL

Version	Date	Approved by	Role	Reason
1.0			Nominated Individual	New policy for local authority assurance and CQC registration

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APPENDIX A: BUSINESS CONTINUITY ACTION CARD

Print this page and keep it in the office grab folder, in the on-call bag and in each manager's car.

FIRST 60 MINUTES

1. Is anyone in immediate danger? Call 999.
2. Registered Manager takes charge (or deputy, then Nominated Individual). Say out loud who is leading.
3. Get the grab folder: priority list, printed rota, staff contacts, emergency contacts.
4. Work out: what has happened, how long, how many shifts affected, how many staff available.
5. Start with Priority 1 people. Who is reaching them, and by when?
6. Text all staff: what is happening, what to do, when the next update will be.
7. Start the Emergency Log. Write down every decision with the time.

NEXT FEW HOURS

8. Contact every Priority 1 and 2 person, and families where agreed.
9. Reallocate shifts: nearest workers, grouped geographically, managers covering.
10. Tell Durham County Council and any other funding authority where support cannot be delivered.
11. For anyone we cannot reach: family, neighbour, GP, district nurse, Social Care Direct 03000 267 979, or 999.
12. Update staff at the promised time. Update the website and phone message.
13. Check on your workers: are they safe, warm and able to get home?

AFTERWARDS

14. Confirm every person has been supported or safely accounted for.
15. Complete incident forms for any missed shift, and apply the Duty of Candour where anyone was harmed.
16. Debrief with staff, thank them, and offer support.
17. Record what worked and what did not, and update this plan.

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APPENDIX B: EMERGENCY LOG

Start this as soon as the plan is activated. Write down every decision, with the time. This is your record of what you did and why.

Event: _____ Date started: _____ Led by: _____

Time	What happened / decision made	Who was contacted	By whom

Stood down at: _____ All people accounted for: Yes / No Debrief held on: _____

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