**Business continuity policy**

1st Healthcare identifies 2 main areas of disruption that may affect the service of care to the young people it is responsible for. They are disruptions to the business or disruptions to the care for a young person/s. A continuity plan has therefore been developed to offer best -fit responses or solutions to unforeseen or likely situations. Please refer to our infection control policy for measures to deal with various forms of disease led business disruptions

**Disruptors to business**

1. **Weather /natural acts of God**These are extreme events that have limited options in terms of practical response. The continuity plan suggests a prioritised response which starts with health and safety. Management will ensure staff coordinate measures to comply with advice from emergency services, knowing when an evacuation is required or when to keep all concerned secure within the units.
2. **Compulsory move from building**In cases such as dangerous exposure to chemical /biological hazards, flood, fire or building failure that makes the unit uninhabitable, We will make use of its holding rooms in its units located in different parts of South London. These are attic or small rooms left unoccupied to cater for emergency temporary accommodation, there are a total of 4 at present. We have an arrangement with 2 estate agencies to secure short notice flats/houses which is usually communicated to management every 2 -3 weeks on what is available for suitable occupancy. These are also occupancy ready for long term or short - term tenancy in the event of a need for emergency unit set ups in other local areas across London and the south east. In these sorts of disruptions to the business, the area manager will assess the risks and make a decision on an immediate removal of staff and residents from the affected unit.
3. **ICT issues**Since the introduction of our care management system, all care documents and files are created and made accessible remotely. Young people’s profile documents and reports are accessed and updated on the cloud -based system which is secure and backed up should there be a server performance issue or technical failures that may cause the loss of data amongst other technical issues. The cloud based system has a hard copy back - up to cover this risk. Should there be a loss of internet connectivity, the reports and documents can be accessed as downloads and archived as saved files. Documents are still subject to printing and storage in a different but secured location.
4. **Financial resources**In cases where there is extensive delay in payments by a commissioning local authority, 1st Healthcare retains access to contingency funds which is usually built up as 10% of payments received from previous billing.

The company also has a financing arrangement with its bank with an extensive overdraft to meet fixed costs so as not to be overly reliant on prompt payment expectations. There exists financial reserves which have been retained from the original start up budget enough to cover direct costs up to 11 months or more.

In extreme cash flow issues 1st Healthcare will arrange factoring invoice financing with it’s registered provider who accepts service invoices as guaranteed payments for a 4% charge in interest. Funds available covers up to £ 15,000.

1. **Absence of key management**The general management structure is set for replacement contingencies in the event of unforeseen absences due to various personal circumstances, unplanned commitments or any event that causes immediate unavailability. Each person that is a part of the core management team has another skilled individual who is able to carry out the senior person's role temporarily as cross - cover. Each member of the management team will be able to manage dual roles to cover the absence of another member of the core team. It is for this reason staff development plans cover further skills exposure and management training on a continuous basis.

**Disruptors to service**Here we look into events or situations that may impede the continuation of care services to the individual young people within our units. There are options in place constantly under review to ensure the service of care faces minimal or no interruptions by making resources available to mitigate the situation.

**1.Allegations against staff**

The possibilities of this event occurring is rather high, owing to the very nature of the care provision, as such, there is a robust response to such a situation. In the case of disruptive allegations against staff by a young person or more, an internal investigation is immediately put into place once the member of staff at the centre of the allegation is notified.  In some other cases, owing to the nature of the allegation, the commissioning local authority or LADO is notified. A thorough investigation will follow. This form of disruption is countered with the immediate introduction of replacement bank staff with work shift ROTA’s adjusted to ensure the care provision carries on until the investigation is concluded.

**2.Staff unavailability**

In situations of unplanned and sudden shortage of staff, we will again access initially it’s list of bank staff that work on a part time arrangement or staff that are on call to cover emergency shifts. The company is also signed up to recruitment agencies who have ready staff available to the company at very short notice.

1st Healthcare is also an active member of a care group (Social Care Alliance) in association with other care homes who operate their service delivery identical to ours. There is a staff sharing arrangement where staff are able to float work between member care homes. Some already work different shifts between the care homes. They would still require an up to date DBS Check which is in line with the safer recruitment policies the company practices.

**3.Safeguarding issues**

This is also another possible event that may occur due to the nature of the service as a whole. 1st Healthcare provides structured care for young people with various issues of safety - domestic abuse, CSE, local harassment, gang affiliation /exploitation, or organised crime.

In the event where these safeguarding issues present themselves at a later period into the placement duration, the need for contingency has always been present. There are resources to place the young person either in a secure stand - alone with 24 - hour staff support or in a secured shared accommodation out of borough. At any time, there is always 2 vacant and resourced holding rooms to house the young person until a move to a more permanent unit is available.

**4.Diseases and contamination**

While this event is quite rare, it can be quite an issue in terms of disruption to service. Where there is a risk of infecting others with communicable diseases measures are there to isolate the young person afflicted with the disease. This may be in the form of housing the person in a temporary accommodation or following NHS recommended quarantine procedures in cases of serious infection. If the contagion happens to be staff, they are sent home to recover immediately.

**5. Stability of placement**

There will be moments when a young person cannot continue to receive care within our units due to escalated challenging behaviour or a medical condition, there may also be a breakdown in the placement if the young person in question poses a risk to the other residents. 1st Healthcare is a specialist provider of care to young people with challenging behaviour or emotional burden but In some cases, there is a greater need to remove the young person away from other residents when the risk impact is too high. Again, arrangements will be made to move the young person to a solo unit which can be arranged with the partner estate agent within a very short time, while this is put in place, extra staff will cover shifts and lone working will be temporarily halted.