Review Sheet

Last Reviewed 16 Sep 2025

Last Amended 16 Sep 2025

This policy will be reviewed as needs require or at the following interval: Annual

Business Impact:	MEDIUM — Changes are important, but urgent implementation is not required, incorporate into your existing workflow.
Reason for this Review:	Scheduled review
Changes Made:	Yes
Summary:	This Business Continuity Policy and Procedure provides guidance and support on the measures and requirements in place at Corton House. It has been reviewed with a minor change as a result of feedback with regards to managers absences. Underpinning Knowledge and Further Reading reference links have also been checked and updated.
Relevant Legislation:	• The Care Act 2014 • Care Quality Commission (Registration) Regulations 2009 • Civil Contingencies Act 2004 • Equality Act 2010 • The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 • Health and Safety at Work etc. Act 1974 • UK GDPR • The Supported Accommodation (England) Regulations 2023 • European Union (Withdrawal) Act 2018
Underpinning Knowledge:	• Author: NHS England, (2023), Business Continuity [Online] Available from: https://www.england.nhs.uk/ourwork/eprr/bc/ [Accessed: 16/09/2025] • Author: The Care Quality Commission, (2025), Regulation 15: Premises and equipment [Online] Available from: https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-15-premises-equipment [Accessed: 16/09/2025] • Author: The Care Quality Commission, (2025), Events that Stop a Service Running Safely and Properly – Notification form [Online] Available from: https://www.cqc.org.uk/guidance-providers/notifications/events-stop-service-running-safely-properly-notification-form [Accessed: 16/09/2025] • Author: GOV.UK, (2024), Infection Prevention and Control in Adult Social Care Settings [Online] Available from: https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-settings [Accessed: 16/09/2025] • Author: DHSC, (2024), Adult Social Care Winter Letter 2024 to 2025 [Online] Available from: https://www.gov.uk/government/publications/adult-social-care-winter-letter-2024-to-2025 [Accessed: 16/09/2025] • Author: The Care Providers Alliance, (2025), Business Continuity Planning [Online] Available from: https://careprovideralliance.org.uk/business-continuity [Accessed: 16/09/2025] • Author: Digital Social Care, (2024), Unlock the Benefits of Digital in Care [Online] Available from: https://www.digitalsocialcare.co.uk/data-security-protecting-my-information/better-security-better-care/ [Accessed: 16/09/2025] • Author: CQC, (2025), Regulations for service providers and managers - Regulation 20: Duty of candour [Online] Available from:

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	https://www.cqc.org.uk/guidance-providers/all-services/regulation-20-duty-candour [Accessed: 16/09/2025]
Suggested Action:	• Encourage sharing the policy through the use of the QCS App
Equality Impact Assessment:	QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law.

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1. Purpose

1.1 To ensure that Corton House is able to continue the running of the service in the event of an emergency situation or business disruption, whether it is predicted or unforeseen, to minimise the impact of any disruption and restore the service back to its normal way of operating as swiftly as possible.

The current plan is formed to be reflective on current national key themes:

- Part 1 - General
- Part 2 - Data Security & Cyber Protection

1.2 To provide a structured toolkit approach to business continuity planning, to enable Corton House to deal with any business continuity event in an organised manner which allows lessons to be learnt from adverse events.

1.3 To ensure that Corton House is prepared for any incident that potentially may disrupt the service; this includes managing the impact of pandemic, flu, coronavirus and adverse weather as well as any internal and organisational incidents, including those involving information technology.

1.4

Key Question	Quality Statements
SAFE	QSS3: Safeguarding
SAFE	QSS1: Learning culture
WELL-LED	QSW5: Governance, management and sustainability
WELL-LED	QSW6: Partnerships and communities

1.5 Relevant Legislation

- The Care Act 2014
- Care Quality Commission (Registration) Regulations 2009
- Civil Contingencies Act 2004
- Equality Act 2010
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Health and Safety at Work etc. Act 1974
- UK GDPR
- The Supported Accommodation (England) Regulations 2023
- European Union (Withdrawal) Act 2018

2. Scope

2.1 Roles Affected:

- All Staff

2.2 People Affected:

- Residents

2.3 Stakeholders Affected:

- Family
- Advocates
- Representatives

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- Commissioners
- Local Authority
- Business Operating Partnerships

3. Objectives

3.1 To ensure that Corton House has a tested plan in place that keeps Residents, staff and visitors safe and the business operating smoothly. This is by a process of:
- Planning
- Monitoring
- Testing
- Reviewing

3.2 To ensure that any local and national guidance or regulatory requirements in relation to business continuity are reflected in the plan at Corton House and that action is taken, where required, to mitigate any risks; this includes any associated government guidance.

3.3 To identify any risks to the business, ensure that plans are in place to reduce these risks and to test and update the plan regularly to make sure it is up to date and works effectively.

4. Policy

4.1 The Registered Manager, Jason Parker, and Nominated Individual, Terry Cotton, of Corton House, have overall management responsibility for this policy and procedure. This is in line with the Policy Management Policy and Procedure at Corton House.

4.2 Corton House recognises that it has a duty to its Residents, staff, commissioners and anyone who is involved with it, to ensure the care and support it provides continues to be delivered at acceptable levels during a disruptive incident. Incidents may be caused by problems with IT, telephones, the building or external environment (such as weather), public health incidents such as coronavirus or flu pandemics or terrorism incidents. Through effective planning and testing of our BCP we aim to:
- Ensure the welfare of our staff, Residents and visitors
- Maintain clear communication during any disruption
- Reduce the frequency and impact of significant operational disruptions
- Continue to deliver safe, reliable, high quality care
- Fulfil any contractual obligations
- Maintain public and Resident confidence and the reputation of Corton House

4.3 Corton House will prepare the business to respond to disruptions by:
- Understanding what the key areas of the business are that potentially may be disrupted and which must continue
- Learning from past incidents where the ability to provide care has been impacted
- Identifying what risks Corton House is likely to face and the impact of those risks
- Planning how to reduce the risks
- Testing how effective the plan is
- Ensuring that staff understand the role they have when the service is disrupted
- Communicating the plan
- Keeping the plan up to date
- Collaborate with Norfolk County Council and health partners to ensure a joined up approach to business continuity

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4.4 In the event of an emergency incident, Corton House will have a clear escalation plan in place that will be communicated to all staff and which is accessible quickly.

The emergency plan forms part of the business continuity planning at Corton House.

4.5 Responsibilities

- Corton House will have a named individual who will take the lead on ensuring that a business continuity plan is created, reviewed and updated. They will have responsibility for the tracking of issues that might affect the business of Corton House and Residents and reporting to the senior management so that action can be taken. This person is Tom Greenhill at Corton House
- The Senior Leadership Team will review the BCP at regular intervals agreed by Corton House to identify any new or potential risks and to identify any lessons learned as part of continuous improvement
- The General Manager has the authority and responsibility for ensuring that Corton House complies with legal and policy requirements and that Corton House is prepared to respond to an incident should this occur
- All staff have a responsibility to understand their role within the plan and ask for further support where this is not clear
- All staff will notify Tom Greenhill of any risk or mitigation to a risk that they are aware of that is not necessarily documented

5. Procedure

5.1 Understanding what Business Continuity Plans are at Corton House

Business Continuity Management means identifying those areas within Corton House that are important so if an incident arises, steps are taken to reduce the impact on the service.

The creation of a BCP means that once the areas have been identified, the plan will detail what needs to be done to keep the service operating and get Corton House back to 'business as usual', as quickly as possible. Areas that must be considered are Information Technology, (phones, computers, rostering, care planning, electronic medication management systems etc.) supplies, buildings and staff.

For help with writing a business continuity plan, please refer to the Care Provider Alliance Business Continuity Planning Guidance.

5.2 Plan Objectives

The objective of the Business Continuity Plan at Corton House is to:

- Provide a clearly defined course of action
- Provide a timely and orderly recovery of the business
- Identify a ‘Business Continuity Team’
- Identify business-critical functions and define what needs to happen if these functions are impacted
- Undertake specific risk assessments on the most likely causes of disruption to services (threats/risk)
- Undertake a Business Impact Analysis for each activity undertaken within the company/organisation to help determine what business continuity arrangements are required
- Identify those who must be notified and kept informed of the incident that disrupts the business
- Keep a log of the incident so that it is clear what happened and when
- Understand lessons learned and feedback into the business continuity planning cycle

5.3 Creating, Planning, Sharing, Testing, Reviewing and Learning from the BCP

Corton House will create a BCP in the following way. Corton House will:

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- Decide who the Business Continuity Lead is. They will be responsible for writing, checking and maintaining the plan as well as assembling a team to help write the plan. At Corton House, this will be Tom Greenhill
- Consider things that could disrupt the service. Corton House must consider what is most likely to occur and, if it does, what is going to have the biggest impact on the business. This will help Corton House agree on what the biggest risks are
- Consider what can be done in advance to eliminate or minimise the risks. The plan will also consider what to do if, despite planning, the incident still arises
- Share the plan. The BCP is owned by the General Manager and Tom Greenhill will ensure that all teams understand the plan and know what to do if an incident arises. Corton House will, as part of winter planning, share the plan with Norfolk County Council and the CQC and Health commissioners (if appropriate) to highlight how the business is prepared for the winter season, such as COVID-19, flu outbreaks and any other incidents that may arise
- Implement these actions, practice or test the plan at Corton House to make sure it works, study the plan and update it where required. Corton House will do this regularly, particularly during any periods of outbreaks of infectious diseases. As a minimum, this should be yearly. However, during the winter season, the frequency of review will be increased. Staff can refer to the Pandemic Policy and Procedure for guidance on what to include in the BCP to manage the pandemic
- As part of the review process, a lessons learnt review should be carried out following each BCP event

The whole process is called the Planning Cycle referred to as Plan, Do Study, Act (PDSA).

5.4 Placement of the Plan

The Registered Manager, their Deputy, the Business Continuity Lead and General Manager must all receive copies of the plan.

In addition, copies will be placed in locations where it can be easily accessed.

The BCP will be included in quality meetings and staff meetings so that staff understand it and are aware of their roles and responsibilities.

5.5 In an Actual Emergency:

- Start an Emergency Response Checklist and complete as necessary
- Start, and complete as necessary, an Action Plan in order to record and keep track of all actions taken, instructions given, and instructions received
- Refer to the BCP in order to identify actions to be taken

5.6 Duty of Candour

Corton House will ensure that, when required, Jason Parker will complete any regulatory notifications appropriate to the nature of the event.

The Duty of Candour regulation also defines ‘notifiable safety incidents’ and specifies how registered persons must apply the duty of candour if these incidents occur.

5.7 Emergency Plans

Corton House will need to consider the following list of Emergency Plans of public agencies which may exist and which may have an impact on the premises:

- Flood Plan
- Off-site **C**ontrol **of** **M**ajor **A**ccident **H**azards
- Pandemic

Tom Greenhill will contact Norfolk County Council's Emergency Planning section and ask for details of any local emergency plans that they need to be aware of, deleting any that are not appropriate. Tom Greenhill will also ensure that all staff are aware of any appropriate procedures to take and insert relevant details into the BCP plan.

5.8 BCP Tools

- Part 1 - General BCP Template

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- Part 2 - Data security and Cyber Protection BCP Template

In addition, these useful tools are also provided in the Forms section to enable Corton House to manage any BCP event in line with National Guidance and the governance process of Corton House:

- Risk Assessment
- Action Plan
- Embedding Checklist
- Key Contacts List
- Identification of Vulnerable Residents
- Resident Priority Needs Categorisation
- Logging a Business Continuity Incident
- Impact Analysis & Risks Log
- Lessons Learnt
- Meeting Agenda
- Testing Pack
- Test Action Plan

6. Definitions

6.1 Business Continuity Plan (BCP)

- Business continuity planning is the process of creating systems of prevention and recovery to deal with potential threats to a company. In addition to prevention, the goal is to enable ongoing services before and during the execution of disaster recovery

6.2 Control of Major Accident Hazards (COMAH)

- COMAH stands for: **C**ontrol **o**f **M**ajor **A**ccident **H**azards where there are specific regulations that came into force on 1 April 1999 (Amendment) Regulations 2005
- https://www.hse.gov.uk/comah/
- These regulations apply to major hazard sites (industrial sites) that manufacture, process or store dangerous chemicals and substances in quantities that could pose a risk to workers, people in the vicinity of the site, and the environment in the event of a major accident. These ‘major accidents’ include fires, explosions or incidents in which dangerous substances are released. Major accidents are rare but can occur at sites ranging from large petrochemical plants to chemical storage warehouses. COMAH sites usually apply mainly to the chemical industry, but also to some storage activities, explosives and nuclear sites, and other industries where threshold quantities of dangerous substances identified in the Regulations are kept or used

7. Key Facts - Professionals

Professionals providing this service should be aware of the following:

- Corton House has a Business Continuity Plan in place so that it is prepared for any incident that disrupts the smooth running of the service
- Corton House will communicate any necessary detail of the plan and ensure that the plan is tested
- Where required, notifications to the Care Quality Commission will be submitted in line with regulatory requirements
- Corton House has a named individual responsible for creating, sharing and reviewing the BCP. This is Tom Greenhill

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- During the winter season, Corton House will regularly review the BCP to ensure that it can prepare for any challenges posed by infectious diseases such as COVID-19, flu, adverse weather or any other incidents

8. Key Facts - People Affected by The Service

People affected by this service should be aware of the following:

- Corton House has your safety and wellbeing at the heart of the service
- We will ask your views from time to time to check if there is anything you wish to talk about in relation to the plan that may help or if you have any questions in relation to the plan
- You are always welcome to give your ideas through the comment box, in person, or through an advocate or representative at any time
- Sometimes things can happen which are beyond the control of Corton House, such as extreme weather, frozen pipes or illness of staff
- Corton House has a plan in place to help stop the effects of emergencies and other situations that can disrupt the service
- We check the plan regularly and make sure we think of everything that could happen and how we will manage it safely
- Corton House has a plan in place to prepare for how outbreaks of infectious diseases such as COVID-19, flu, or any other infections may affect the care and support you receive. This plan will make sure you continue to receive safe, reliable care at all times

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Further Reading

The Emergency Planning Society:

https://www.the-eps.org/

QCS Blog - What are power blackouts and how to prepare for them?

https://www.qcs.co.uk/what-are-power-blackouts-and-how-to-prepare-for-them/

Outstanding Practice

To be "outstanding" in this policy area you could provide evidence that:

- There is evidence of learning from other disruptions outside of your service; they may not be directly related to a social care setting
- There is evidence of collaboration with other services in the area feeding into joint planning and systems to do this
- Regular testing of the Business Continuity Plan takes place and any actions from it are addressed to ensure continuous improvement of the service
- The wide understanding of the policy is enabled by proactive use of the QCS App
- Prompts and action cards are developed for individual roles to assist with completing tasks in an emergency

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Forms

The following forms are included as part of this policy:

Title of form	When would the form be used?	Created by
Part One: Business Continuity Plan - General - AB02	As part of the Business Continuity Plan Toolkit. The template contains examples that can be edited to reflect the needs of your business.	QCS
Part Two: Business Continuity Plan - Cyber - AB02	As part of the Business Continuity Plan Toolkit. The template contains examples that can be edited to reflect the needs of your business.	QCS
Business Continuity Risk Assessment - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Business Continuity Action Plan - AB02	To document any actions required by the BCP process.	QCS
Embedding Checklist - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Key Contacts List - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Identification of Vulnerable Service Users - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Service User Priority Needs Categorisation - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Logging A Business Continuity Incident - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Business Continuity Event Impact Analysis and Risks Log - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Business Continuity Event: Lessons Learnt - AB02	As part of the Business Continuity Toolkit.	QCS
Business Continuity Planning Meeting Agenda - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Business Continuity Plan Testing Pack - AB02	As part of the Business Continuity Plan Toolkit.	QCS
Business Continuity Test Action Plan - AB02	As part of the Business Continuity Plan Toolkit.	QCS

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Title of form	**When would the form be used?**	**Created by**
Preparing for an Emergency - Business Grab Bag - AB02	To support the preparation of a grab bag of essential items in the event of evacuation	QCS

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Part One: Business Continuity Plan - General - AB02

Please complete the table below:

Policy Ref No:	
The Business Continuity Lead Responsible:	
Date of next review:	

Version History				
Version Number	**Author:**	**Job Title:**	**Date Approved:**	**Approved By:**

Distribution List				
Copy Number:	**Name:**	**Location:**	**Distributed How?**	**Date:**

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		Risk Grade	**Low**	**Medium**	**High**	**Very High**
Impact						
5	Catastrophic	**5**	**10**	**15**	**20**	**25**
4	Significant	**4**	**8**	**12**	**16**	**20**
3	Moderate	**3**	**6**	**9**	**12**	**15**
2	Minor	**2**	**4**	**6**	**8**	**10**
1	Limited	**1**	**2**	**3**	**4**	**5**
		Low	Medium Low	Medium	Medium High	High
		< 6%	6 - 20%	22 - 50%	51 – 80%	>80%
		1	2	3	4	5
		Likelihood				

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General	Impact x Likelihood = Risk Grade				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Electricity failure				Ensure essential systems are connected to an Uninterruptible Power Supply (UPS) Register with an energy supplier as a priority customer. Ensure energy security is in place for the service. Risk assess how power blackouts/possibility of power failures may affect the service due to energy shortage or affordability of supply (cost of living). Risk assess Residents who may be at risk due to equipment failures. Regularly review and update risk assessments for power failures. Ensure batteries for equipment are charged with spares also charged. Where there are frequent power outages, an emergency generator is in place. Extra blankets, stocks of bottled water, food that does not need cooking in stock.	
Gas failure				Register with a gas supplier as a priority customer. Extra blankets, stocks of bottled water, food that does not need cooking, in stock. Emergency plan in place for gas leak. Regular maintenance and safety checks of gas installations	

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Burst Pipe (internal)/Water Failure (external)				Register with the water supplier as a priority customer. Regular inspection and maintenance of plumbing systems Stocks of bottled water and food that does not need cooking, in stock. Evacuation plan in place.	Specify arrangements for temporary water supply if needed.
Climate Control (Heating, A/C)				Regular maintenance schedule in place for Heating, ventilation, and air conditioning (HVAC) Contact number for suppliers is communicated to staff. Ensure windows and doors are properly insulated Extra blankets available.	

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General	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Fire				Fire Risk Assessment in place. Evacuation Plan in place. Staff trained on Fire Management on induction with refresher training annually. Fire action displayed throughout home. Resident dependency levels assessed and individual Personal Emergency Evacuation Plans in place. Fire equipment tested regularly. Fire drills carried out and documented. *Staff aware of the location of the onsite and offsite fire evacuation location -* *Corton Road*	Carry out regular fire safety audits, drills.
Structural damage to the building (s)				Evacuation plan in situ. Regular maintenance of premises carried out. Maintenance contracts updated to ensure maintenance checks are carried out routinely. Back up plans if key equipment fails (e.g. lifts, laundry or catering equipment) in place. Up-to-date records of suppliers and maintenance numbers, including out of hours maintained.	Have in place a contingency plan for temporary relocation - Emergency evacuation.
Security				Outside of premises well maintained. Exit, entrance and windows secure and well maintained. CCTV in place in line with UK GDPR. Police contacted where security concerns pose an immediate threat. Ensure staff are aware of security procedures	Conduct regular security drills.

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Extreme Weather				Adverse weather policies and procedures in place. Regular external checks carried out on premises to reduce risk of debris/structural damage. Trees assessed and maintained by a specialist tree surgeon. Maintain an emergency weather kit	Regularly review and update weather-related policies.

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General	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Industrial Accident (External)				Control of Major Accident Hazards (COMAH) site identified in locality and plan obtained and appended. https://www.hse.gov.uk/comah/ Staff understand roles and responsibilities if incident declared. Regularly review and update the COMAH plan.	
Fuel shortage Potential staff shortages due to difficulty travelling Potential disruption to heating or cooking facilities				Review shift times to enable increased use of public transport. Meet with staff to identify if other transport can be used – e.g. bikes. Encourage car sharing and responsible use of fuel. Staff overnight accommodation set up. Work with Local Authority to discuss concerns and identify alternative solutions. Energy suppliers made aware of the nature of the service and recorded as high priority. Identify priority fuel allocation.	
Industrial strikes, train strikes, bus strikes Potential staff shortages due to difficulty travelling Increased traffic on the roads causing delays				Staff who will be impacted are identified. Establish clear communication channels with staff during strikes Alternative transport agreed, e.g. taxis. Car share set up.	

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General	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Supply of Medicines				Avoid stockpiling. Medicines dispensed as usual without reducing the dosage. Where this support is provided, earlier ordering for some items arranged with the pharmacist. Escalation routes identified in the event of supply disruption. Identified alternative suppliers if required. Pharmacy contacted for reassurance on how they are managing the availability of the medicine stocks. Issues escalated to community pharmacist. Local Authority notified of concerns. Capacity tracker updated.	Consider the creation of a list of alternative medications with prescribers/GPs.

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Pandemic Influenza/COVID-19 Potential for Increased care need for Residents Potential for staff shortages due to illness Vaccine shortage PPE Stock				Review visiting arrangements and communicate to all affected by a change. Residents encouraged to have vaccines/boosters. Vaccination/Booster programme agreed with GP/Pharmacy. Staff supported to access vaccine/boosters – aiming for 100% uptake. Residents' health needs categorised for priority vaccination in event of vaccine shortage. Infection Control Policy in place and communicated. Regular review of infection control policies during pandemic situations Staff trained in RESTORE2™ if applicable. Hand hygiene audit carried out at frequent intervals. PPE used in line with national guidance. Current guidance followed regarding reducing transmission and procedures followed. Carry out risk assessment on PPE. Undertake regular stock takes. PPE obtained from regular wholesaler.	

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General	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Pandemic Influenza continued Potential for increased care need for Residents Potential for staff shortages due to illness Vaccine shortage				Staff trained and updated on IPC, PPE. Staff not permitted to work with COVID-19/flu symptoms. If applicable, staff temperature checked before each shift as a minimum. Staff movement between premises and locations is risk assessed and avoided where possible to do so. Exclusivity clause agreed with agency supplier. Capacity tracker utilised and updated daily. Testing is carried out on all staff and Residents in line with guidance Identify and work with Named Clinical Lead from Primary Care Network to provide clinical advice. Read and understand all appropriate guidance within the relevant social care frameworks/networks. Where appropriate, agree the need for oximeters. Staff trained on how to use them and apply clinical decision making to measurements using RESTORE2™.	

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Highly Infectious Disease (not COVID-19)				Risk assessment undertaken to highlight Residents who have additional risk factors. Risk assessment undertaken to highlight staff who have additional risk factors. Contact made with local Health Protection Team for advice. GP contacted to manage clinical symptoms. PPE utilised. Infection Control Policy adhered to. In line with any current guidance, isolation of individuals/cohorting of staff and Residents in situ.	Review and update infectious disease policies and procedures regularly.

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General	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Post Brexit Awareness				Amend where needed to reflect elements that may still be under negotiation or re-negotiation following the election of the new Government. Regularly review supplier contingency plans See Fuel Shortage. See Food Shortage. Suppliers should be asked if they have contingency plans where applicable in the case of disruption, e.g. food suppliers/medicines/medical devices. Maintenance of machinery or equipment, (e.g. lift services) carried out before Jan 2021. Continue to review workforce and recruitment plans to identify staff impacted by EU Workforce Settlement Scheme and immigration measures such as 'eVisas' and ensure recruitment pipeline includes any shortfalls or recruitment issues.	Monitor Government guidelines for updates.
Terrorism Attack				Hold scenario planning training with staff to ensure clear guidance in place (e.g. evacuation procedures, roles and responsibilities in an emergency, key emergency contacts, communication plans with staff, clients, public, press). Conduct regular risk assessments review for potential threats Liaise with Local Resilience Forum.	
Major Civil Disturbance				See Terrorism	

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Food Shortage - Panic Buying				All suppliers asked for contingency plans in the case of disruption. Where applicable, set up regular food order flag with supplier as a priority. Identify Residents with special dietary needs to ensure sufficient supplies to manage any disruption. Work with Local Resilience Forum (LRF).	
Regulatory Compliance/Non Compliance Regulatory Issues				Keep up to date with regulatory change - Register for newsletters and updates. Regular staff training on compliance changes. Maintain a compliance calendar for key obligations. Where applicable - Use cloud-based systems for regulatory records and reporting. Designate a compliance officer for oversight during disruptions. Implement interim measures to mitigate operational impacts (e.g. legal counsel, alternate suppliers). Maintain an audit trail for all regulator interactions.	Conduct regular compliance audits/mock inspections. Update staff training on regulatory requirements. Build relationships with regulators to streamline communication. Schedule and review risk assessments/action plans related to ongoing issues. Develop and test contingency plans for worst-case scenarios. Regularly update and gain feedback from stakeholders to maintain trust.

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Registered Managers Absence for more than 28 days				Contingency plans will be put in place in the event of the absence of Jason Parker, to ensure the continuation of the service.	• Notifications will be made to the Care Quality Commission about any planned or unplanned absences of Jason Parker from Corton House that is for a continuous period of 28 days or more • Corton House will explain how the service will be run during the period of absence and when Jason Parker will return from a significant absence.

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Part Two: Business Continuity Plan - Cyber - AB02

		Risk Grade	Low	Medium	High	Very High
Impact						
5	Catastrophic	**5**	**10**	**15**	**20**	**25**
4	Significant	**4**	**8**	**12**	**16**	**20**
3	Moderate	**3**	**6**	**9**	**12**	**15**
2	Minor	**2**	**4**	**6**	**8**	**10**
1	Limited	**1**	**2**	**3**	**4**	**5**
		Low	Medium Low	Medium	Medium High	High
		< 6%	6 - 20%	22 - 50%	51 – 80%	>80%
		1	2	3	4	5
		Likelihood				

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CYBER	Impact x Likelihood = Risk Grade				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**

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General Cyber / Data Security				Staff complete Data Security Training on Induction, and yearly refresher training. Data Security and Protection Toolkit completed and updated annually. NHSMail account utilised. Alternative access to email and shared data systems established. Digital Social Care guidance is followed and concerns escalated to NHSX Information Governance Team England where advice is required: https://digitalsocialcare.co.uk/ IGpolicyteam@nhs.net Internet stability assessed to ensure digital/remote health consultations can take place and the ability to access GP records is not disrupted to support the safe ordering of medication online. Stakeholder specifications in place for all new software purchased. Back up mobile phones in place to support landline outage. Data Security Policies in situ, with regular audits of IT security, back-ups, recovery arrangements. IT disaster recovery plan. Malware software updated regularly. Data Protection Lead role in place with clear responsibilities/accountabilities. Staff meetings have data security, safe use of email and internet on agenda. Ensure all software is up to date. A central record of suppliers that handle personal information, the products, services delivered, and contact details is held. A record is held of all IT system, IT/Assistive technology suppliers that they have confirmed they have business continuity plans and cyber security certification in place. Furthermore, this information is reviewed at contract renewal.	Conduct regular phishing simulation exercises.

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CYBER	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
QCS App Failure				IT disaster recovery plan in place. Regular testing of Business Continuity Plans Identify any issues in order to plan and prevent events. Ensure QCS mobile app is downloaded by all staff so that policies are available at all times offline. Implement multi-factor authentication (MFA)	
Virus Phishing Event Hacking Event				Regular system checks take place via IT providers. Any suspicious emails/activity are reported to our IT provider for further actions if required. Staff have annual training on Data Security and Cyber Protection.	
Power Surge				Critical systems should be protected by surge protectors. Regular checks of electrical installations and wiring takes place as part of good governance systems and any issues are reported and resolved.	
Equipment Theft/Loss				All IT equipment is password protected. Any loss or theft is reported and systems are in place to block access. Refer to the Computer, Email and Internet Usage Policy and Procedure. Refer to the Mobile Phone and Portable Device Use Policy and Procedure.	
Landline system Failure				Separate fixed wired phones are available if it is an electrical issue. Mobile phones are used as an alternative to landline phones in the event of a system failure.	

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Mobile Network Failure				Fixed landline phones are used as an alternative to mobile phones in the event of a system failure. Email/Use of Internet is also used as an alternative to landlines.	

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CYBER	**Impact x Likelihood = Risk Grade**				
Threat Area	**I**	**L**	**Grade**	**Control Measures**	**Further Actions**
Care Planning Software issue				IT disaster recovery plan in place. Regular testing of Business Continuity Plans Identify any issues in order to plan and prevent events. Implement multi-factor authentication (MFA)	
ROTA Software Issue				IT disaster recovery plan in place. Regular testing of Business Continuity Plans Identify any issues in order to plan and prevent events. Implement multi-factor authentication (MFA)	
Payroll System Failure				IT disaster recovery plan in place. Regular testing of Business Continuity Plans Identify any issues in order to plan and prevent events. Implement multi-factor authentication (MFA)	
Electronic/Data Security Breach				In the event of a Data Breach the Data Security and Protection Toolkit (DSPT) Policy and Procedure details reporting procedures that would need to take place following a breach. Regular testing of Business Continuity Plans Identify any issues in order to plan and prevent events.	

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Business Continuity Risk Assessment - AB02

Within a service, there will be many risks that could have a major impact on the service's ability to provide the required outcomes. It is, however, not always possible to mitigate these risks and, therefore, it is important that the service examines these risks in detail in advance. The risk evaluation matrix is a simple approach to measuring risk by defining measures of consequence (severity) and likelihood (frequency or probability) using a simple 1-5 rating system. This allows the construction of a risk matrix which can be used as the basis for identifying risk. The risk score is Impact x Likelihood. Details of the risk evaluation matrix are given below.

Impact (Severity) is the actual or potential outcome of an event/risk/hazard occurring. The table below sets out 5 levels of impact and must be used to allocate a score to the actual or potential outcome of an event/risk/hazard.

Likelihood (Frequency or Probability) is the likelihood of the event/hazard/incident occurring or reoccurring. The table below sets out 5 levels of likelihood and must be used to allocate a score to the likelihood of the event/hazard/incident occurring or reoccurring.

A final risk rating should be calculated using the following matrix which places the emphasis on impact:

		Risk Grade	**Low**	**Medium**	**High**	**Very High**
Impact						
5	Catastrophic	**5**	**10**	**15**	**20**	**25**
4	Significant	**4**	**8**	**12**	**16**	**20**
3	Moderate	**3**	**6**	**9**	**12**	**15**
2	Minor	**2**	**4**	**6**	**8**	**10**
1	Limited	**1**	**2**	**3**	**4**	**5**
		Low	Medium Low	Medium	Medium High	High
		< 6%	6 - 20%	22 - 50%	51 – 80%	>80%
		1	2	3	4	5
		Likelihood				

Organisations should assess the impact and likelihood of incidents disrupting the delivery of routine services to effectively mitigate the impacts of these.

This risk assessment can be a standalone service risk document or sit as part of the plan. The Business Continuity Plan should ensure that this is signposted if it is a separate document. An example is also given below. The templated Business Continuity Plan has key themes to consider with mitigating actions. You will need to determine if these are relevant to your business and the impact and likelihood of them arising as this is unique to your service. You will also need to include any areas unique to your service, your contracts, your staff or your local area.

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e.g. *At flood risk; having a small staff base; being in an old building with less resilient* infrastructure, etc.

The list in the template is not exhaustive.

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		Risk Grade	Low	Medium	High	Very High
Impact						
5	Catastrophic	5	10	15	20	25
4	Significant	4	8	12	16	20
3	Moderate	3	6	9	12	15
2	Minor	2	4	6	8	10
1	Limited	1	2	3	4	5
		Low	Medium Low	Medium	Medium High	High
		< 6%	6 - 20%	22 - 50%	51 – 80%	>80%
		1	2	3	4	5
		Likelihood				

Risk	**Impact x Likelihood= Risk Grade**			**Mitigating actions**	**Lead**
	I	L	Grade		
Example: Home at risk of flooding from local river	*2*	*4*	*8 High Risk*	*Sign up for environment agency flood warning service.* *Ensure alternative premises in place.*	*Registered* *Manager*

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Business Continuity Action Plan - AB02

Business Continuity Action Plan					
Issue	**Actions required**	**Priority**	**By Whom**	**By When**	**Complete**

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Embedding Checklist - AB02

Checklist	Yes	No	N/A	Supporting Information
Has an Equality Impact Assessment screening been completed?				
Has the review taken account of the latest guidance/legislation?				
Has legal advice been sought?				
Has HR advice been taken?				
Have training issues been addressed?				
Are there other HR-related issues that need to be considered?				
Has the policy been reviewed by the staff forum/teams?				
Are there financial issues, and have they been addressed?				
What engagement has there been with Residents/members of the public in preparing this plan?				
Are there linked policies and procedures?	X			PPE, Coronavirus, Pandemic, Recruitment, Safeguarding, Risk Assessments, Emergency Communication, Adverse Weather, Heatwave, Infection Control policies
Has the Managing Director approved the plan?				
Who (internally) has approved this plan?				
Has an implementation plan been provided?				
How will the plan be shared?				
Will an audit trail demonstrating receipt of policy by staff be required? How will this be done?				
Have data protection implications been considered?				
What engagement has there been with Residents in preparing this policy?				
Has the plan been shared with the Local Authority?				
Has the plan considered the Government Winter Plan / statement				

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Key Contacts List - AB02

Key Contacts			
Business Function	**Name**	**Position**	**Email, Business Phone Numbers**
Provider	Head office		
	Manager		
Electrician			
Gas Engineer			
Plumber			
Drains			
Appliances			
Mains Electricity			
Mains Gas			
Mains Water			
Environmental	DFE		
NHS	GP		
	Hospital		
Police			
Fire			
Pharmacy			
Local Authority	Main		
	Safeguarding		
	Duty Team		
CQC	Main		
	Inspector		

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Identification of Vulnerable Service Users - AB02

An incident, whether internal to Corton House or affecting the local area, has the potential to impact Residents who may be deemed as vulnerable. There is a requirement on homes to assess vulnerable Residents and consider relevant actions to mitigate the risk to them. How the vulnerability is defined will vary depending on the incident and should be a dynamic decision considering the impacts of the incident and how it will affect those considered vulnerable. Once Residents are identified, specific actions need to be considered.

The tool below may help to manage challenges to service provision by having a pre-defined list of Residents who have been prioritised based on their vulnerability and needs. This can be useful when preparing for winter. The tool is not suitable for calculating fees or reviewing care.

The tool can be adapted to reflect your own Residents.

Rating	Priority	Criteria
Red	**1**	Residents who require complete support, i.e. washing, dressing, assistance to meet nutritional needs, assistance with toileting, medication administration, those with cognitive impairment, visual or hearing impairment, clinically vulnerable to infectious disease such as COVID-19/flu, those who may require 2 staff members to mobilise or those who have restricted movement.
Amber	**2**	Complete support required (as above) but less support is required. They may be in the age category that puts them at risk of as a result of an infectious disease such as COVID-19 / flu but no medical vulnerabilities. Can manage with minimal support. No cognitive impairment.
Green	**3**	Residents are more able and capable of performing basic care routines for themselves (i.e. washing, dressing, etc.). Not clinically vulnerable to infectious disease such as COVID-19 / flu.

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Service User Priority Needs Categorisation - AB02

Rating Red Amber Green	Resident Priority Needs Categorisation		
	Resident Name	**Room Number**	**Brief description of needs**

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Logging A Business Continuity Incident - AB02

- Start a log as soon as the incident has started by completing the sheet below (use further sheets if the need arises)
- Log any actions taken, e.g. evacuation (who, where did they go), utility disconnected, etc. Decisions made and to make. State the date, time, contact details, type of event, scale, etc.
- Note any damage
- Call out key staff to convene management/incident team
- It is important to ensure that all information/decisions and actions are logged in the order they occur

Date:		**Business Interruption Log Sheet**	
Log Ref	**Time**	**Information / Decisions / Actions**	**Items Outstanding**

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Business Continuity Event Impact Analysis and Risks Log - AB02

Date of Disruption:		**Time:**	
Date of report:		**Time**	
Name and Job Title of Person Making the Report			
Name:		**Job Title:**	
Disruption Description: **(What, Why, Where, How)**		**Casualties and Physical damage**	
Immediate Risks:			
First 24 Hours:		**Estimated Impact and Risks to Service**	
First 3 days:		**Estimated Impact and Risks to Service**	
First 7 Days:		**Estimated Impact and Risks to Service**	
Over 7 Days:		**Estimated Impact and Risks to Service**	

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Business Continuity Event: Lessons Learnt - AB02

Attendee List and Role					
Name	**Name**	**Name**	**Name**	**Name**	**Name**

Summary of Event Being Reviewed (Description and Feelings)

What worked well (Evaluation & Analysis)

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What shortcomings were identified (Conclusion)

Managers Comments / Sign Off					
Lessons Learnt Action Plan		**Priority**	**By Whom**	**By When**	**Review Date**
Issue Identified	**Issue Identified**				
Signature:			**Date:**		

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Business Continuity Planning Meeting Agenda - AB02

Date:	
Attendees:	
Apologies:	
Meeting Held By:	

No.	Item	Actions	Priority	By Whom	By When
1	**Analysis of Impact** • Review Service Impact Analysis and risk sheets • Brief team on nature, severity and Impact of disruption • Identify information gaps • Review Resident priorities and Care Plans and develop action plans as appropriate, including a review process				
2	**Confirm Roles** • Agree roles and responsibilities of staff • If required, revise roles and determine if additional staff/deputies are required • Inform additional team members that they may be required • Stand down members not required				
3	**Confirm Key Contacts at Scene of Disruption** • Main points of contact for ongoing information updates				
4	**Logs** • Ensure team logs and personal business interruption logs are in place (written record of significant events throughout the crisis. Written record of all communications)				

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No.	Item	Actions	Priority	By Whom	By When
5	**Recovery Management** • Review recovery priorities • Determine support requirements				
6	**Welfare Issues** • Have members of staff, visitors or third parties been injured? • What is their location? • What immediate support and assistance is required? • What ongoing support and assistance might be required?				
7	**Communications** • Who should we inform? • Are professional public relations/media advisors required? • Determine which (if any) external regulatory bodies should be notified • Determine any internal communications that need to take place (other sites, affected services etc.)				
8	**Legal Perspective** • Determine what legal action or advice is required				
9	**Insurance Position** • Determine whether insurance cover is available and if so, how best to use the support it may provide				
10	**Next Meeting** • Date, time, agenda, place and attendees of next meeting				

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Business Continuity Plan Testing Pack - AB02

Date of Test:			
Location of Test:			
Type of Test:	Desktop	Practical	Other
Time Test Started:		**Time Test Complete:**	
Scenario:			

Attendees / Participants				
Name:	**Position / Role:**	**Role in test:**	**Sign:**	**Date:**

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Business Continuity Plan Test – Log of Responses	
Name:	**Comment / Recommendation / Action**

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Business Continuity Test Action Plan - AB02

Business Continuity Plan Test - Action Plan					
Issue	**Actions required**	**Priority**	**By Whom**	**By When**	**Complete**

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Preparing for an Emergency - Business Grab Bag - AB02

It may be useful to prepare a grab bag with essential items, in the event of your business premises being evacuated following an incident.

Any grab bag may be required at short notice, so should be kept in a secure and easily accessible place.

The following essential items will help your response:

- A copy of your business continuity plan (see www.civilcontingenciesservice.co.uk for more information)
- A copy of key contact information (staff/customers/suppliers, etc.) who may be affected by the evacuation
- Copies of any other essential documentation (insurance policy, etc.)
- Stationery (to record essential information)
- Building plans/map
- Torch (wind-up ideally; if not, include spare batteries)
- Portable radio (wind-up ideally; if not, include spare batteries)
- Company cards/spare cash
- Staff list and rota
- Resident list, Care Plan details

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