

## ACCOMMODATION CARE SETTINGS CONTINGENCY PLAN

This plan details the three status levels of response in times of service disruption for providers delivering care in accommodation settings.

### STATUS LEVEL ONE: CONCERN Provider Contingency Response

Triggered by short term challenges including, but not limited to an inability to maintain usual staff levels due to staffing challenges leading to a requirement to adjust usual working practice.

The provider implements their own business continuity plans. This stage is provider led and operates on the basis that the provider and their care staff work most closely with the people they support and are well placed to understand need and manage risk.

This would include prioritising staff availability to deliver essential care. Additionally, providers may discuss with the Council's Contract and Quality Team not to accept new residents for a period.

As a minimum, this level of response would include:

- Provider to inform their Business Relationship Officer. (BRO)
- Seek to secure additional capacity from sub-contractors and/or agencies
- Review of rotas to maximise staff availability
- Prioritising essential care tasks
- Secure additional clinical support from Immedicare.
- Communication with relatives and essential care givers
- If in a position to accept new residents, give priority given to hospital discharge requests
- Provider can seek advice and guidance (to assist with their own decision making) from the BCA Registered Manager Group and/or the Contract and Quality Team in CBMDC

## **STATUS LEVEL TWO: CRITICAL - Provider/Council Collaborative Contingency Response**

**Triggered when level one issues continue beyond 48 hours, or the short-term staff situation is of a more substantial nature or other critical incidents occur – severe weather; major flood or power interruption, lift breakdown; serious IT infrastructure issues; sudden increase in needs – i.e. large infection outbreak**

**This level describes a collaborative response from providers and the Council to support in areas of greatest need.**

This is a collective response which may include:

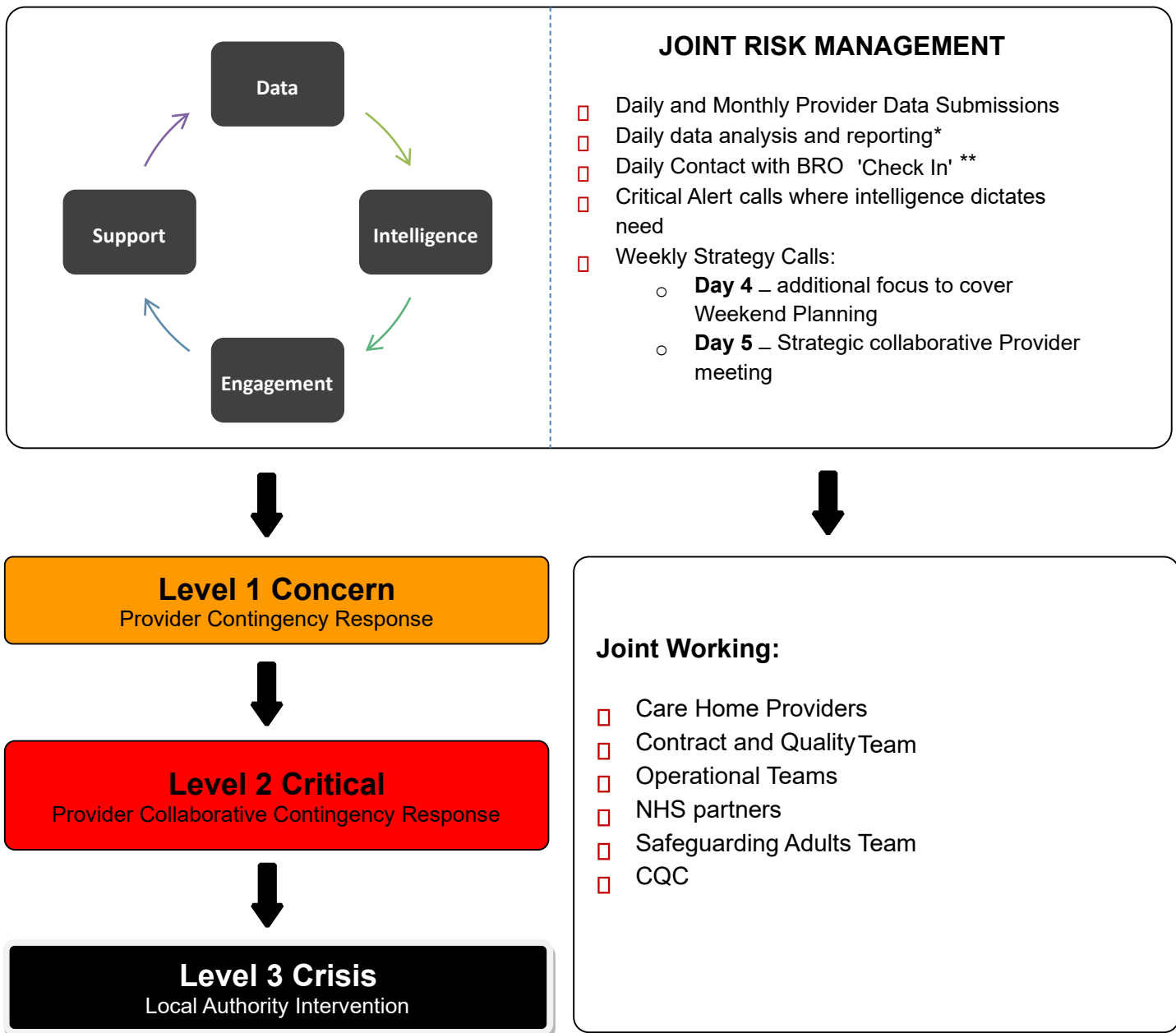
- All the above actions
- Council coordination of an MDT capacity alert meeting to support decision making
- Council to coordinate ongoing monitoring of the situation with the Provider
- Ongoing operational support may be required from council or other partners (4x4 vehicles, heaters etc)
- Providers supplying staff to a fellow provider – mutual aid – coordination support from Council Contracts & Quality Team and/or BCA. This could include supply/support from non-direct care staff including ancillary staff and administration staff to free up direct care capacity
- Authorisation for cross provider support is to be given by the Assistant Director, Commissioning & Integration.

## **STATUS LEVEL THREE: CRISIS - Council Intervention**

**This level describes additional actions that may be taken by the Council when risks to resident's safety and delivery of essential care cannot be managed in the setting.**

- Support from the Council's operational services – Given frontline staff will potentially be in the same or similar situation, this may only be possible where there is a significant risk to a person's wellbeing. Support may also include assistance with admin and coordination elements of service delivery.
- Additional capacity secured by the Council to directly work with and support a provider for a short period of time.
- Escalation through the System Silver Command Structure to seek additional support measures, including but not limited to staff assistance from NHS services.
- Move some residents to another setting either temporarily (respite) or permanently – decision making would be collaborative and would involve MDT.

## Accommodation Based Services Contingency Plan – Process Overview



### \* Data and analysis

Daily and monthly data submissions to inform specific risk and operational effectiveness through analysis and dashboard reporting

### \*\* Daily Calls 'check-in'

BRO to check-in with Providers and/or collaborative provider meetings (Registered or Deputy Managers)

### Purpose

- Review current pressures and understand current position in relation to Level 1 contingency
- Collaborative discussions to identify and share creative solutions across the county
- Identify where Level 2 contingency needs to be enacted

### **Critical Alert Call**

Intelligence led call for Provider, Social Work Team Leader, Contract and Quality team and In-house Care Home services come together to enact Level 2

#### Purpose

- Supportive check and challenge to ensure all options have been exhausted
- Identification of real-time solutions/opportunities to support providers in difficulty

### **Day 4 Strategy Call**

Collaborative meeting – Provider and Contract and Quality team to focus on forthcoming weekend and/or any holiday period

#### Purpose

- As per daily call but a focus on the forthcoming weekend
- Review current pressures and understand current position in relation to Level 1 contingency
- Collaborative discussions to identify and share creative solutions across the district Identify where Level 2 contingency needs to be enacted

### **Provider Meeting (Day 5)**

Strategic collaborative provider meeting with Contract and Quality team

#### Purpose

- Review of what is working well, what can be improved
- Forward look to the next week