

# Business Continuity Plan Homeless Health

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## Homeless Health Service Business Continuity Plan

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# Homeless Health Service Business Continuity Plan

## 1. Background

BrisDoc must ensure that the highest level of service to patients is maintained regardless of what might happen to clinical/non clinical procedures or the infrastructure or facilities at our GP Practice.

BrisDoc views its operational model and its operational bases, in terms of core functions, for example Information Management and Technology and Patient Access, in conjunction with plans for the restoration and support of utilities and services, without which the core business functions would not be able to continue. Examples of these are: Gas, Water, Electricity, Fire alarms, Security system, IT system, Telephone / Communications, PCC Buildings Services.

The Action plans defined in this document identify the risk of events and how they will be responded to.

Plans are distributed to supporting managers and key staff as required. Copies of this document are held at the practice and centrally at BrisDoc's Head Office and intranet radar. The plan is reviewed annually or as a result of a service change and amended and redistributed as described in the Plan Location section below.

## 2. Introduction

The purpose of this document is to define the actions plans that need to be carried in the event of one of the following scenarios:

Limited Fire damage, building useable

Total Fire damage

Flood/Storm Damage

Theft

Failure of utility – phone, gas, water, electricity

Failure of server or computer network

Heating failure in winter

Major disease outbreak

Non-clinical data safety

Or other event where the building becomes unusable for a period of time.

## 3. Staff Training and Awareness

It is important that all staff members are made aware of the Plan and are familiar with the contents and their own related duties and responsibilities. The Plan should be tested by those persons who would undertake those activities if the situation being tested occurred in reality.

The test procedures should be documented and the results recorded. This is important to ensure that feedback is obtained for fine tuning the Plan. Equally, any changes or amendments

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to the Plan must be fully tested. Staff should also be kept abreast of such changes in so far as they affect their duties and responsibilities.

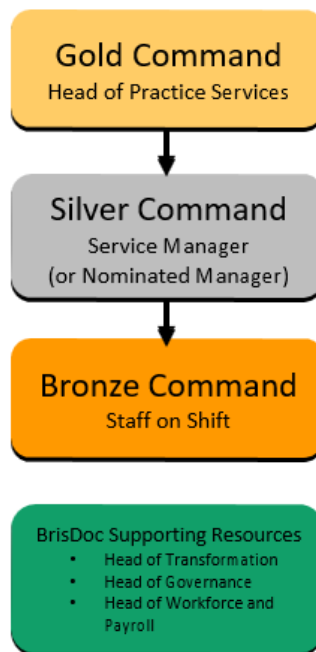
### 4. Responsibilities

The Head of Practice Services has overall accountability for continuity of all service provision reporting to the Managing Director, in line with contractual requirements. Accountability for overall service continuity may be delegated to the Service Manager or Designated Lead.

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All BrisDoc Staff are responsible for contributing to service continuity in the event of a disruptive event.

BrisDoc will adopt the nationally recognised 'operational, tactical, strategic' command framework which corresponds to the emergency services' 'bronze, silver, gold' structure as explained below;



Operational (bronze) command refers to those responsible for managing the main working elements of the response to an incident. They will act on tactical command.

This Role will be taken by all staff on shift or additional supporting resources e.g. Head of Transformation, Head of Governance, Head of Workforce and Payroll or Riverside supporting resources during the time of the incident as required.

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Tactical (silver) command is responsible for directly managing the organisation's response and/or health economy in response to an incident. They develop the tactical plan which will achieve the objectives set by strategic command utilising the content of this document as appropriate.

This Role will be taken by the Service Manager or by the Designated Lead should the Service Manager be unavailable (due to sickness, leave or training) during the time of the incident.

Strategic (gold) command has overall command of the organisations resources. They are responsible for liaising with partners to develop the strategy and policies and allocate the funding which will deal with the incident. They delegate tactical decisions to their tactical commanders.

This Role will be taken by BrisDoc's Head of Practice Services during the time of the incident.

### Information Cascade

#### In service operating hours

In the event of a disruptive incident occurring in hours, staff working will need to be notified of the incident and any alternative working arrangements. Any staff due to come onto shift will need to be notified of any alternative arrangements before they arrive or changes to working practices when they get to work.

Staff will be notified as per the communications cascade detailed below in Table 1.

The Service Manager is nominated as the first point of contact out of hours for any incident affecting the practice building – such as fire or flood – and will therefore be responsible for initiating the cascade. Each member of staff identified as being responsible for notifying other personnel will need to hold contact details for those for whom they are responsible. All members of staff should ensure that the Service Manager holds current contact details.

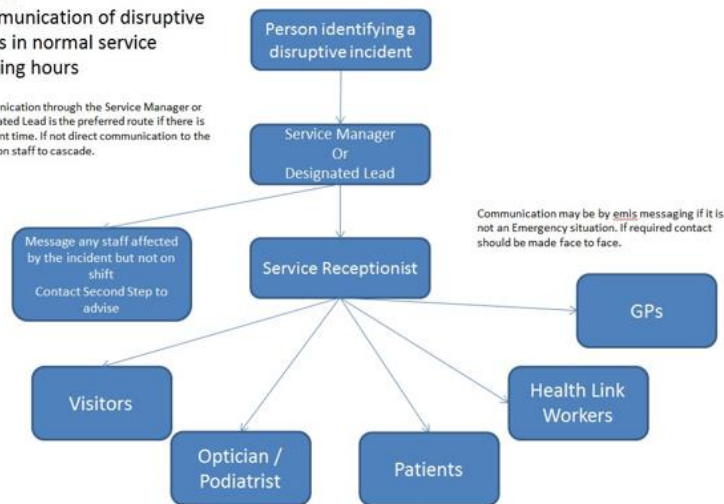
In hours, where any member of staff becomes aware of (or the potential for) a disruptive incident this should be communicated immediately to The Service Manager or designated lead, firstly ensuring that the incident is contained where possible and there is no risk of harm to other staff or patients. The same order of notification should be followed.

Staff will be notified of an incident occurring using NetMaster or the group WhatsApp. All current contact details are kept on NetMaster and this can be accessed remotely if required. All members of staff should ensure that their contact details held on RotaMaster are current and correct.

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**Table 1**  
Communication of disruptive events in normal service working hours

Communication through the Service Manager or Designated Lead is the preferred route if there is sufficient time. If not direct communication to the reception staff to cascade.



### Outside normal operating hours.

In the event of a disruptive incident occurring out of hours, Riverside staff will need to report the incident to their site manager. If the incident will impact on the delivery of the HHS service the Riverside on site manager will notify the HHS Service Manager or designated lead and discuss the expected time of disruption and alternative working arrangements. The Service Manager and designated lead will need to ensure that Riverside Management have up to date contact details.

Staff will be notified as per the communications cascade detailed below in Table 2.

The Service Manager or designated lead can log onto NetMaster remotely and cascade the information to all HHS staff or use the group WhatsApp group or email if easier. All current contact details are kept on NetMaster and this can be accessed remotely if required. All members of staff should ensure that their contact details held on RotaMaster are current and correct.

### 5. Plan Location

This plan will be located on BrisDoc's Intranet (Radar) and as a hard copy Business Continuity Folder in the Business Continuity Box located within the practice reception area.

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### 6. Incident Reporting & Post Incident Review

Business Continuity Incidents will be reported and reviewed via GP Teamnet learning Event Process

### 7. Maintaining the Business Continuity Plan and Review

The business continuity plan is maintained by BrisDoc's Head of Transformation in conjunction with the Service Manager. The plans will be reviewed and signed off by the Managing Director.

Plans will be reviewed annually or as a result of an incident of change in service areas of review with include;

Validate compliance with the Business Continuity Management policies and standards when used;

Review the Business Continuity solutions in light of use and current service;

Validate the organisations Business Continuity plans in light of use and current service;

Verify that appropriate exercising and maintenance activities are taking place;

Highlight deficiencies and issues and ensure their resolution.

### 8. Action Plans

It is the responsibility of all staff on duty on the day of the incident to follow and manage the action plans as below.

Responsibilities will be assigned as described in section 4 above. Lead responsibility will be assigned to the most senior person on duty. This will normally be the Service Manager or assistant in their absence. If the incident relates to clinical issues and concern the lead GP or Nurse should assume responsibility.

Other staff should take instruction as necessary but should use some common sense to issues relating to health and safety and security.

Each action plan is intended to be used by the command structure as appropriate and should serve as a reference point in light of the situation that has arisen that required activation of these plans.

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### LIMITED DAMAGE, BUILDING USEABLE ACTION PLAN

Threat	Impact On Organisation If Threat Occurs	Action
Limited Damage, Building Usable	Medium	<p>Staff should inform the Service Manager or the Designated Lead.</p> <p>Inform Landlord (Riverside) of the problem consulting Landlord (Riverside) Emergency Continuity Plan for contacts.</p> <p>Cordon off the damaged area and re-site patient, staff areas as necessary. Consider using SMS facility if available to inform patients if there are any service effecting issues.</p> <p>Inform BrisDoc Head of Transformation if this has affected the PC's and their use.</p> <p>Inform the Insurance Company, see contacts section.</p> <p>Ask Landlord (Riverside) to contact fire system supplier to attend to check all fire points, alarms and equipment.</p> <p>Inform Head of Primary Care Services at the ICB</p> <p>Reschedule booked appointments as necessary to reduce traffic into the surgery.</p> <p>Place sign outside surgery (see Appendix H) to inform patients of best access point for practice and instructions and signposting to new operational area.</p> <p>Advise patients that limited service only available. Advise other services available, such as dialing NHS111; contacting their own GP surgery, other urgent care centre's (Southmead Hospital, South Bristol Urgent Care Centre, Yate Minor injury unit). Offer telephone advice from a nurse.</p> <p>Inform BRI A&amp;E and SBCH (South Bristol Community Hospital) of limited service available at the Homeless Health Service.</p> <p>Inform NHS111 that we are on 'RED' alert. Update DoS <a href="https://www.pathwaysdos.nhs.uk">https://www.pathwaysdos.nhs.uk</a> - Tel 0117 2401115.</p> <p><b>Communications Checklist ( see Appendix A for details)</b></p> <ol style="list-style-type: none"> <li>1) BrisDoc's Managing Director or On Call Director.</li> <li>2) Landlord (Riverside) and security/fire system supplier</li> <li>3) Patients possibly via SMS and signage using emis</li> <li>4) BrisDoc Head of Transformation</li> <li>5) Insurance Company</li> <li>6) Head of Primary Care Services see contacts</li> <li>7) NHS 111</li> <li>8) Updated DOS</li> <li>9) Referring and support services BRI A&amp;E, SBCH</li> </ol>

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TOTAL DAMAGE, BUILDING UNUSABLE ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Total damage, building unusable	<b>High</b>	<p>As above plus:</p> <p>Place signs as near as possible to surgery advising patients of other NHS services available. Advise of bus routes and other transport options to the South Bristol Community Hospital and Southmead and Yate Minor Injuries Department</p> <p>Speak to local practices to see if consulting space available at local surgeries.</p> <p>Reciprocal agreement in place with:</p> <ul style="list-style-type: none"> <li>• Broadmead Medical Centre (0117 954 9828)</li> </ul> <p>Set up consulting area in alternative space (if unaffected by disaster) for immediate and necessary care of patients who were non-contactable. Some rooms cannot be used for patient examination as there are no washing facilities.</p> <p>If equipment available, unaffected rooms may be able to be set up within Riverside or within the local Broadmead Baptist Church. Ring to enquire (0117 929 1387).</p> <p>Please see appendix F for maps showing the Broadmead Baptist Church and to alternative surgery.</p> <p>If unavailable then speak to Bristol ICB to see if they can offer any assistance (0117 9766600).</p> <p>Inform the Head of Information Governance at the SWCSU of the damage and to what extent, i, (0300 5610400)</p> <p>If patient records unretrievable, contact the primary Care Support Agency.</p> <p>Inform LMC to see if they can offer advice and assistance (0117 9702755)</p> <p><b>Communications Checklist ( see Appendix A for details)</b></p> <ol style="list-style-type: none"> <li>1) BrisDoc's Managing Director or On Call Director.</li> <li>2) Landlord (Riverside) and security/fire system supplier</li> <li>3) Patients possibly via SMS text from EMIS</li> <li>4) BrisDoc Head of Transformation</li> <li>5) Insurance Company</li> <li>6) Head of Primary Care Services see contacts</li> <li>7) NHS 111</li> <li>8) Update DOS</li> <li>9) Referring and support services BRI A&amp;E, SBCH</li> <li>10) Head of Governance</li> </ol>

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THEFT ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
<b>Theft</b>	<b>Low/ Medium</b>	<p>Contact local police (New Bridewell or Trinity Rd Police Station)</p> <p>New Bridewell Police Station, Rupert Street, Bristol BS1 2QH - Tel: 0845 4567000</p> <p>Trinity Road Police Station, St Philips, Bristol BS2 ONW – Tel: 0845 4567000</p> <p>Inform Avon SWCSU of the PCs and printers that have been stolen.</p> <p>Inform Insurance Company.</p> <p>Contact Riverside's Security Company to review incident and security procedures in place.</p> <p><b>Communications Checklist ( see Appendix A for details)</b></p> <ol style="list-style-type: none"> <li>1) Police</li> <li>2) Avon SWCSU</li> <li>3) Insurance Company</li> <li>4) Riverside Security Team</li> <li>5) BrisDoc's Managing Director or On Call Director.</li> </ol>

PHONE FAILURE ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
<b>Phone</b>	<b>Medium</b>	<p>The surgery has a Bistec telephone system. A maintenance contract is in place with Bistec.</p> <p>Contact details for the surgery phone system support is on contacts list below.</p>

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### GAS/HOT WATER FAILURE ACTION PLAN

Threat	Impact On Organisation If Threat Occurs	Action
Gas	Low	<p>The consequences are no hot water at any time of year, and no heating in winter. A kettle is to be put in the nurse area to ensure that water can be heated for hand washing at all times.</p> <p>Reduce Ulcer dressing appointments to a minimum</p> <p>Check use of hand sanitiser kit and deploy additional if required.</p> <p>Contact Riverside site manager if there is a problem with gas supply as Landlord (Riverside) manage our utilities within the practice.</p>

### ELECTRICITY FAILURE – ACTION PLAN

Threat	Impact On Organisation If Threat Occurs	Action
Electricity	Medium	<p>Will involve loss of lights, loss of heating, loss of hot water (boiler will go off), loss of computers, loss of surgery telephone system, loss of equipment such as ECG.</p> <p>Contact Landlord (Riverside) if there is a problem with electricity supply as Riverside manage our utilities within the practice. Landlord (Riverside) maintenance on <b>0117 924 6415</b></p> <p>Clinicians will need to handwrite notes and enter them onto the clinical system at a later date.</p> <p>Emergency lighting is available</p>

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WATER FAILURE ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
<b>Water</b>	<b>Medium</b>	<p>Contact Landlord (Riverside) if there is a problem with water supply as Riverside manage our utilities within the practice. Landlord (Riverside) maintenance on <b>0117 924 6415</b></p> <ol style="list-style-type: none"> <li>1. Close off patient toilets.</li> <li>2. If patients or staff need to use the toilet they can use the Riverside client or staff toilet if available.(Patients would need to be escorted at all times if using the staff toilet)</li> <li>3. Ensure alcohol hand cleaning solution in all rooms.</li> <li>4. Avoid doing invasive procedures unless absolutely necessary. Cancel all dressings</li> <li>5. Bloods – all patients booked in for bloods in next few days need to be reviewed by GP. Blood taking services to be cancelled unless absolutely necessary or as directed by GP.</li> <li>6. Lists to be reviewed for booked invasive procedures such as smears/minor ops, these to be cancelled for the next 48hrs and then each day the same process to be undertaken.</li> <li>7. If the duration of the problem looks to extend, we will need to review these guidelines daily</li> <li>8. Liaise with company providing our water cooler and arrange for daily delivery of their bottled water until service reconnected</li> <li>9. When water comes back on, we will need to know if the level of contamination means hand washing between patients is compromised. Do not do any invasive procedures until we have been informed by Bristol Water or Landlord (Riverside) that the water is safe to drink and wash hands.</li> <li>10. Instigate deep clean if necessary.</li> </ol>

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LIGHTING FAILURE ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Lighting Failure	Medium	If the lighting fails, the emergency lighting will come into operation. Contact Riverside for support

WATER OR SEWAGE LEAK ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Water or sewage Leak	Medium	<p>Should a member of staff identify a water leak, they should immediately advise (with as much detail as possible) the Service Manager.</p> <p>The area should be cordoned off the area.</p> <p>The Service Manager needs to identify whether the leak is likely to cause a danger to life or power failure i.e. if near electricity</p> <p>Subject to this evaluation either the Power failure or Evacuation Action Plan may need to be invoked as matter of urgency</p> <p>Contact Landlord (Riverside) on <b>0117 924 6415</b></p> <p>Follow Action Plan for building un-usable.</p>

HEATING IN WINTER FAILURE ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Heating Failure In Winter	Low/ Medium	<p>Contact Landlord (Riverside) if there is a problem with gas supply as Riverside manage our utilities within the practice. Landlord (Riverside) maintenance on <b>0117 924 6415</b>.</p> <p>Borrow electric heaters from staff if possible, purchase heaters as required from local stores.</p>

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EVACUATION ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Any incident that requires evacuation	Medium	<p>If a member of staff identifies that an incident that may require <u>evacuation</u> they should <del>utilise</del> the alarm lanyard and call for help.</p> <p>Staff, visitors and patients should be made aware that it is necessary to evacuate the building. This will be using the Fire Alarm system or being verbally advised by BrisDoc staff. Staff should be reminded, where to gather post evacuation.</p> <p>Any consulting clinician will take responsibility of the patients and their carer and relatives who are in the consulting room.</p> <p>Reception staff and site security will take responsibility for the patients in the waiting room.</p> <p>Visitors will be the responsibility of the person they are visiting.</p> <p>Staff, visitors and patients will exit the building using the signposted Fire exits.</p> <p>It is expected that all BrisDoc staff should assist those who need help during an evacuation, particularly any visitors or patients, whilst not putting themselves at risk</p> <p>The meeting point is in King's Square. If this is unsuitable then the meeting point used will be across the main road.</p> <p>The designated lead will check that all the rooms (clinical and non-clinical) and toilets are vacated on both floors if it is safe to do so.</p> <p>Where possible all the doors should be closed as the designated lead leaves the floor. <b>THE DOORS SHOULD NOT BE CLOSED IF THE INCIDENT IS A GAS LEAK.</b></p> <p>All PCs should be logged off if safe to do so</p> <p>The receptionist should perform a 'roll call' asap following evacuation by consulting the signing in book, the visitor sheets and/or the patient log book.</p> <p>The receptionist will be the point of contact for the Landlord (Riverside) lead.</p> <p>The receptionist will be the first point of contact with the appropriate authority <u>i.e.</u> estate lead, police, fire brigade.</p> <p>If any staff/patients/visitors are identified as 'missing', please alert the relevant on site authority asap.</p> <p>The receptionist will need to ascertain as quickly as possible how long the building may continue to be inaccessible.</p>

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		<p>Notify referring services</p> <ul style="list-style-type: none"> <li>· NHS111</li> <li>· South Bristol Walk in Centre.</li> <li>· Bristol Community Health</li> </ul> <p>The designated lead will contact the Head of Transformation at BrisDoc Head Office.</p> <p>Subject to advice from the relevant authority, designated lead will decide the appropriate action that will follow an <a href="#">evacuation</a>. The options open to them include:</p> <ul style="list-style-type: none"> <li>· Return and resume work.</li> <li>· Advise staff to go home as shift end is approaching and the next shift will be advised of the relocation plan.</li> <li>· Advise staff of an alternative plan and next steps as decided.</li> </ul> <p>If advised to return to site, please check that all equipment that may have been affected by the incident is working and reset if necessary.</p>
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FAILURE OF SERVER, COMPUTER NETWORK OR N3 SERVICE ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Failure of Server, Computer Network or N3	Medium	<p>Virus protection and firewalls are provided and maintained as appropriate by the SWCSU and EMIS.</p> <p>The local domain and server are protected by UPS devices, should the server go down due to power, support would be sought from the SWCSU to shut down the servers. (0300 5610400)</p> <p>If there is a complete system down contact SWCSU (0300 5610400) and EMIS immediately. (0330 0241270)</p> <p>If it turns out to be network failure, inform the SWCSU (0300 5610400) immediately and request high priority, see Contacts section. For escalation path refer to Information Asset Register, which is located in shared drive.</p> <p>Clinicians will be required to hand write notes for entry into records when system is back up and running. Manual working forms can be found in the manual working box in the multi-purpose room. Forms are appended in Appendix C.</p> <p>There is also a backup IT Support Service that can be called for additional support if necessary 0117 370 8800. Although not directly involved in the IT management at the practice they can offer valuable advice and support with IT queries.</p>

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MAJOR DISEASE OUTBREAK ACTION PLAN		
Threat	Impact On Organisation If Threat Occurs	Action
Major Disease Outbreak	Medium/ High	<p>See pandemic flu plan.</p> <p>There are several problems to contend with: high demand for appointments; low staff numbers due to sickness; shortage of medical supplies due to deliveries being affected</p> <p>Non urgent appointments to be cancelled, patients who report flu like or other related symptoms should be given a telephone consultation with the GP and not asked to attend surgery.</p> <p>Notices to be put on the door asking people only to attend the surgery if necessary. If they are suffering from flu like or other related symptoms then to telephone the surgery.</p> <p>Pandemic box to be distributed amongst clinicians and staff <u>i.e.</u> Masks, aprons, alcohol gel etc.</p> <p>Consider using setting up reception via external window access as per C19</p> <p><b>Try to separate streams of patients by utilizing the alternative consulting room (Covid Room)</b></p> <p>Advise patients telephoning the practice to remain where they are and arrange a clinician call back rather than inviting them into the surgery where they can spread infection.</p> <p>After any infectious disease outbreak where contagious patients have attended the surgery, arrange a deep clean from our cleaning services.</p>

### 9. MANUAL OPERATION AND DATA SAFETY

There is much data necessary for the smooth running of the practice e.g. forms, standard letters, guidance and advice documents etc. Wherever possible, users should be encouraged to keep these on the 'shared folder' on the server rather than on individual PCs. This has the advantages of being backed up every night, being available to the user at every PC, being available to others, and still being there if their PC is replaced either at routine or breakdown replacement.

Where critical data is kept on a single PC e.g. payroll, accounts, it must be backed up twice

If the system fails it is important that there are robust processes in place to ensure continuity of care and accurate record keeping

1. In the event of Emis web access being unavailable, staff need to prioritise patients attending the day. As a walk-in service with non-bookable appointments this should not be too problematic.
2. Patients phoning in for appointments should be advised of the situation and that only patients requiring immediate and necessary care by a doctor on the day will be seen.
3. Patients phoning in the morning requiring a same day appointment should be asked to come to the surgery to be assessed or be put on the manual telephone triage queue.



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4. Reception should agree with the afternoon duty Doctor, what time patients should be told to come to the surgery and an afternoon surgery list created.

5. Patients attending the Surgery will be put on the surgery list as they arrive with the time of arrival and given a number ticket. The ticket number will be noted on the surgery list.

When the Nurse/Doctor is ready to call a patient in they call in number '1'. That patient hands the Nurse/Doctor their ticket. When the consultation has finished the Nurse/Doctor will call the next number in until all patients have been seen.

6. If possible, registered patients need to have their manual notes pulled from the patient data cupboard and given to the doctor prior to their appointment time. These need to be filed after use.

7. All manual notes need to be entered onto EMIS when up and running

8. Patients requesting a repeat prescription should be advised of the situation and be asked to call back in 48hours. Patients who insist they need their prescription earlier should

have the details completed on the prescription request form, making sure a contact

phone number is available. The doctor should ring the patient to discuss and prepare a hand written script as necessary.

At the end of each morning all Lloyd George notes, details of phone calls and prescription requests should be returned to reception. These will be filed in date order and locked away.

When the system is repaired all contacts will be recorded from the documentation. The hard copies will be filed in the patient's paper records.

## 10. Civil Unrest

### INTRODUCTION

Homeless Health Service (HHS) is a GP surgery with a small registered list of patients. The service mainly works as a walk in centre. The Medical Centre is within the Compass Centre in 1 Jamaica Street, Bristol, BS2 8JP. HHS is a service under the umbrella of BrisDoc Healthcare Services Ltd. Resilience planning is managed in conjunction with the local Public Health team, NHS Bristol, Landlord (Riverside), BrisDoc and ourselves.

### LIMITATIONS

HHS has to operate within the constraints of its location. Landlord (Riverside) have set security rules in relation to opening and these need to be considered with any planning of this sort.

### SCOPE

During a situation of civil unrest, HHS would always try to support the local community in providing medical support for minor illness or injury within the limitations as set out above. We also have valuable links with the local OOH Service.

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### OPERATIONAL PLAN

- Public Health will engage with HHS should any planned event be scheduled that may cause additional demands on the urgent care services in Bristol.
- HHS will be aware of the situation and risks assess the anticipated impact on the service.
- HHS will liaise with Landlord (Riverside) and Riverside to ensure that they are aware and have assessed the situation with regards to security arrangements and centre opening.
- HHS will communicate with service users / stakeholders if any significant impact expected.
- ↗ Service users will be contacted via a SMS messaging campaign and posters within the surgery and on outside swing boards.
- ↗ Stakeholders will be contacted via email, fax, and telephone as appropriate.

### ZERO TOLERANCE

HHS will always make every effort to protect their staff. We will be happy to see service users who respect our staff and behave in a civil and respectful way. Any incidents of aggressive behaviour, whether this be physical or verbal, racial or discriminatory will be handled under our zero-tolerance policy and security and / or police will be called.

Should the civil unrest be such that our staff are felt to be danger, the practice will be closed with notices put on main doors to notify service users to this effect.

### RIVERSIDE SECURITY STRATEGY

HHS is protected under the Riverside security team and operates in conjunction with Riverside business continuity plan.

If civil unrest appears such that the Centre feel the need to manage the flow of people in and out, Riverside will shutter down all entrances bar one and a security guard will be posted at this door. Clients to the Centre and patients of the practices will be directed in and out of the store by this Guard. The store is well signed and this should cause minimal disruption to service users.

Should there be a planned event, Riverside will review the security need and have additional security staff on call or available on site.

Should the situation become unmanageable the Centre will be closed completely to protect the Centre and the practice.

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### 11 RECOVERY TIME OBJECTIVE FOR ESSENTIAL SERVICES

In a disruptive incident (an event affecting the operation of the practice) it may not be possible to maintain/restore all activities immediately. The practice therefore needs to

identify in advance what are its critical functions which must be maintained in order to ensure that resources for the response and recovery are targeted and used effectively.

In the event of a disruptive incident Homeless Health Service will endeavour to maintain its critical functions as listed in Table below. The practice will seek to restore all other services according to the order of priority detailed in the table. Where it is likely that services will have to be reduced or suspended, the Service Manager will communicate this to the relevant

CCG contact as listed in Appendix A.

The decision to reduce or suspend services will be taken by the practice's Incident Management Team, in consultation with the CCG.

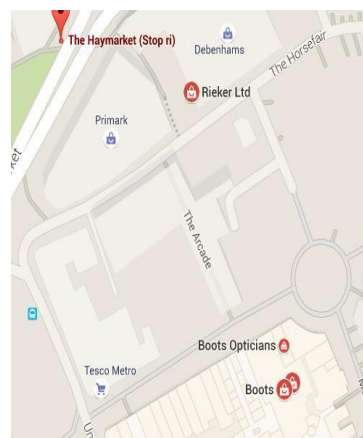
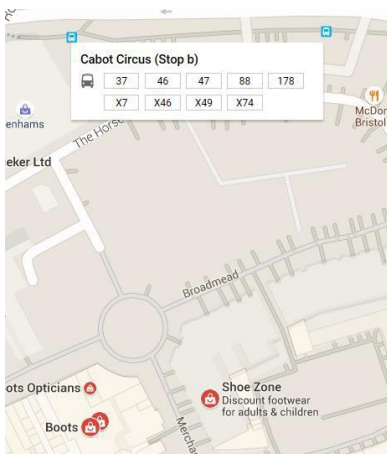
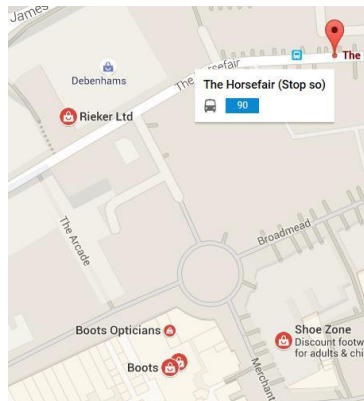
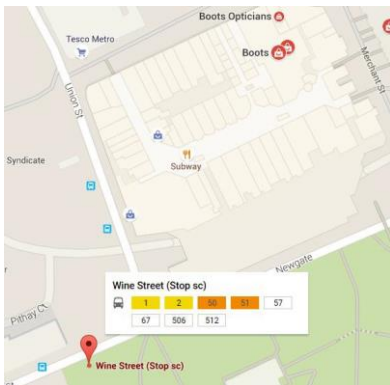
Priority	Service	Recovery Time Objective
H	Operations – Clinical Services comprising: <ul style="list-style-type: none"><li>✓ Telephone Answering</li><li>✓ Triage</li><li>✓ Face-to-Face Appointment</li></ul>	2 hours
H	Information Storage	4 hours
H	Clinical and staff rotas	1 day
M	Legal / Contractual	1 week
M	Finance	1 week
M	Medicines Management	1 day
L	Essential (mandatory) Training	1 week
L	Alternative Premises within NHS infrastructure	1 week <sup>1</sup>

<sup>1</sup> Needs to be reviewed in the context of the move to new premises and the collocation with other services

## Homeless Health Service Business Continuity Plan

### 12. LOCAL BUS SERVICE ARRANGEMENTS TO ALTERNATIVE URGENT CARE FACILITIES

SERVICE	BUS ROUTE	WHERE TO CATCH
SOUTH BRISTOL COMMUNITY HOSPITAL	50 / 51	WINE STREET
	75 / 76	HAYMARKET
	90	THE HORSEFAIR
SOUTHMEAD HOSPITAL	76	HAYMARKET
YATE MINOR INJURY UNIT	47 /48/ X46 / X49	BUS STATION OR CABOT CIRCUS



## Homeless Health Service Business Continuity Plan

### Appendix A Contacts

<b>PCSE</b>	0333 0142884	
<b>SWCSU</b>	0300 5610400	Other computer problems not software
<b>LMC</b>	0117 970 2755	
<b>Bristol ICB</b>	0117 976 6600	Head of Information Governance
<b>Bristol ICB</b>	0117 976 6600	Head of Primary Care
<b>NHS111</b>	0117 240 1111	NHS111 Supervisor
<b>Directory of Services (DOS)</b>	0117 2401115	Pathways update
<b>Insurance Company</b>	01438 739731	RSA Policy No. MIA/SUR/P/02836
<b>BRI ED</b>	0117 3422710	
<b>South Bristol Community Hospital</b>	0117 923 0000	
<b>Broadmead Medical Centre</b>	0117 954 9828	
<b>EMIS</b>	0330 024 1270	Our site 13793
<b>Brisdoc Head of Transformation</b>	07753 447068	Deb Lowndes
<b>Brisdoc Head of Governance</b>	0117 937 0900	Sarah Pearce
<b>Photocopier</b>		
<b>Riverside number</b>	<b>0117 924 6415</b>	<b>Tim Day</b>
<b>Avon and Somerset Police</b>	101	
<b>South Bristol Community Hospital</b>	0117 3429692	Urgent care centre
<b>Broadmead Baptist Church</b>	0117 929 1387	

Commented [DD(4)]: Needs checking

## Homeless Health Service Business Continuity Plan

### Appendix B Manual process form

DETAILS OF VISIT OR ADVICE REQUEST IN EVENT OF A SERVER FAILURE (form)

Patient Name: Patient DoB:

NHS number if known:

Patient Address

Patient Phone Number

Date & Time patient phoned surgery

Advice or Visit request?

Time passed to Dr and name of Dr: Passed by:

-----  
Time Dr called patient

Details of consultation:

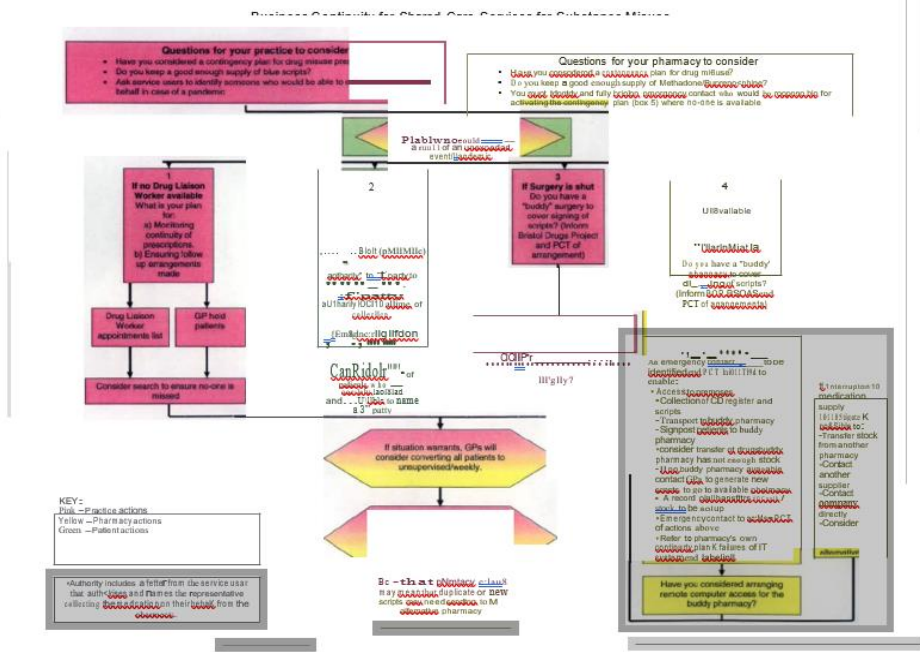
Treatment received:

Prescription issued:

Dr name and signature:

# Homeless Health Service Business Continuity Plan

## Appendix C

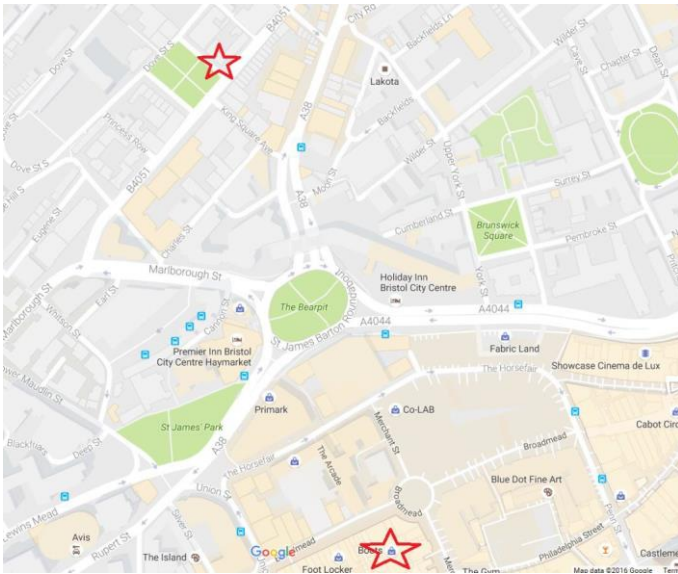


## Appendix D assembly points for evacuation



# Homeless Health Service Business Continuity Plan

## Appendix E Alternative premisses map





Homeless Health Service Business Continuity Plan

**Appendix F Practice closure notice**

Homeless Health Service

**TEMPORARY CLOSURE**

There has been an incident that makes it impossible to use this building

Please call

**0117 937 0900**

for further information on the planned reopening times.

Alternative Urgent Care Services

Bristol Royal Infirmary A&E department

South Bristol Community Hospital Hengrove

Southmead Hospital A&E department

Yate Minor Injuries Unit.

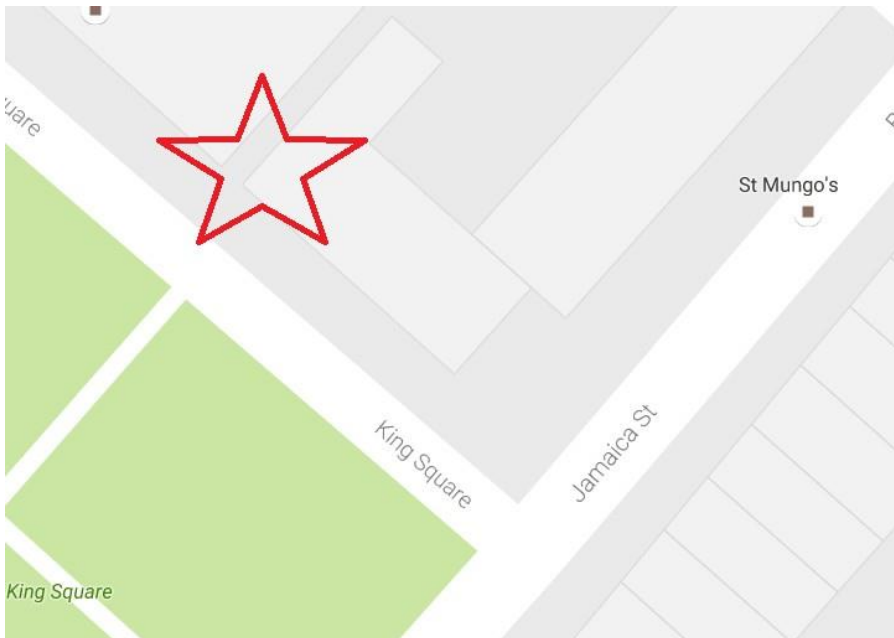
## Homeless Health Service Business Continuity Plan

### Appendix G Practice changed access notice

## Homeless Health Service

This access point is temporarily  
closed.

Please access the Surgery  
using the Emergency Exit on  
the left-hand side of the  
building.



## Homeless Health Service Business Continuity Plan

### 13. Change Table

Date	Reviewed and amended by	Revision details	Issue number
November 2018		Updates in line with changes in organisational structure and minor tweaks.	
November 2023		names updated i.e St Mungo's to Riverside	