

Provider Business Failure Plan

For Regulated and Unregulated Care and Support Providers in Croydon

March 2023 - VERSION 3.0

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Document Control

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Interdependencies and linked plans (Plans / documents that may impact on your business continuity plan or processes)

PLAN	OWNER
Adults Placement, Brokerage & Market Management Business Continuity Plans	London Borough Croydon
Pan London Safeguarding Policy	London ADASS/ CSAB
Provider Concerns Policy	Safeguarding Unit

Contents

1.0 INTRODUCTION			
1.1	Background		
1.2	Risk mitigation requirements		
1.3	Aim of continuity plan		
1.4	Objectives of continuity plan		
2.0 PL	AN ACTIVATION		
2.1	Trigger criteria		
2.2	Other local authorities		
2.3	Activation of plan		
3.0 ROLES AND RESPONSIBILITIES			
3.1	Incident manager		
3.2	Incident management		
3.3	Incident response team (roles and responsibilities)		
4.0 C	DMMUNICATIONS		
4.1	Incident notification		
5.0 ACTIONS & CONTINGENCY MEASURES			
5.1	Initial notification and dynamic RAG assessment		
5.2	Incident Response Meeting		
6.0 APPENDIX			
1	Decision Tree		
2	Key contact lists		
3	Initial notification and dynamic RAG assessment		
4	Incident Strategy Meeting Agenda & Meeting Minute Template		
5	Action considerations for possible Business Failure		

1. Introduction

This Business Failure Continuity Plan for Regulated Care and Unregulated Care Providers in Croydon ensures that the care and support needs of service users using those services continue to be met in the event of an unplanned business failure. The business failure plan relates to Croydon-based regulated businesses providing regulated care activities i.e.

- Regulated support in the home, services provided by domiciliary care agencies
- Regulated residential care homes
- Regulated nursing care homes
- Regulated Supported Living
- Unregulated Supported Living
- Day services as appropriate

This plan details Croydon Council's response to an imminent provider failure; and as such the plan should be read in conjunction with the Care Act 2014: business failure regulations, duty to co-operate regulations and cross-border continuity of care regulations.

1.1 Background

- 1.1.1 Section 48 of The Care Act (2014) imposes a temporary duty on local authorities in the event that a regulated provider becomes unable to provide a regulated activity to an individual due to a business failure. This duty applies regardless of whether the individuals care is funded by the local authority or not. This temporary duty is engaged where the following criteria are met:
 - 1. The provider must be a registered care provider
 - The provider must be unable to carry out the particular activity. Where the provider is able to continue the activity despite business failure the duty will not be triggered.
 - 3. The activity that the provider is unable to carry out must be a regulated activity
 - 4. The inability to carry out the activity must be due to the provider's business failure
- 1.1.2 'Business Failure' is defined in the Care and Support (Business Failure)
 Regulations 2014 and references to business failure in this document should be construed accordingly.
- 1.1.3 The Act states that a local authority must 'for so long as it considers necessary' meet the needs for care and support which were being met immediately before the business failure occurred. The local authority is not required to continue to the services that were previously provided and has discretion as to how it will meet those needs, though this should be agreed with the individual where possible. The duty applies as soon as a local authority becomes aware of a business failure, and applies to both adults in need and their carers. In discharging this duty, local authorities are not

required to carry out a needs or financial assessment or make a determination of eligibility. Other placing authorities will be informed of the business failure and encouraged to review their placed clients with a view to making informed decisions on the future of the placement in line with the business failure.

- 1.1.4 Local authorities have the power to charge for the cost (except for the provision of information or advice) in meeting the person's care and support needs. Where the person is ordinarily resident in another local authority's area, the local authority discharging its temporary duty may recover its costs from the former. However, the duty does not extend to those persons in receipt of NHS funded Continuing Healthcare the duty in these cases remains with the NHS as the local authority does not have the power to meet needs which are required to be met by the NHS. The local authority must take all reasonable steps to reach agreement with these interested parties.
- 1.1.5 Under sections 53-57 of the Care Act, the Care Quality Commission (CQC) is responsible for overseeing the operation of the certain groups of registered providers, which includes assessing their financial sustainability. Care providers will fall under the CQC regime where they are providing regulated services as follows:

Residential and nursing care home providers who operate:

At least 2,000 beds in England i.e. a significant size of provider; or between 1,000 - 2,000 beds with at least 1 bed in 16 or more local authority areas i.e. significant scale regionally or nationally; or between 1,000 - 2,000 beds where capacity in at least 3 local authority areas is more than 10 per cent of the total capacity in each of those areas i.e. a significant concentration in a local or geographic area.

Non-residential / domiciliary care providers who provide:

- At least 30,000 hours of care in a week anywhere in England; or at least 2,000 people with care in a week anywhere in England; or at least 800 people with care in a week anywhere in England and the number of hours of care divided by the number of people cared for must is more than 30. For example, if 900 people receive care in a week then more than 27,000 hours of care must be provided in that week for the criteria to be satisfied.
- 1.1.6 The CQC will publish the names of all regulated care providers who meet the above criteria and will share data as required with the relevant local authorities. Care providers will remain on the CQC list for a minimum of 12-months unless removed earlier through a decision made by the Secretary of State.

1.2 Risk mitigation

1.2.1 The continuity of care to service users throughout a business failure will be of prime importance for all organisations involved – consequently, ASC & Commissioning services will ensure that the following actions are universally applied for all regulated businesses providing regulated activities in the borough:

- Regulated care providers registered in the London Borough of Croydon are responsible for informing Croydon Council in the event of a planned or unplanned closure. In the event of a planned closure then the provider must give Croydon Council a minimum of 6-months' notice prior to the planned closure date.
- All regulated care providers are required to maintain business continuity plans, sharing a copy with the Quality and Market Management Team.
- Care providers are required to maintain (and supply Croydon as required) with a 'register' of service users either placed or receiving support from the provider in the event of a planned or non-planned closure the register will detail all named individuals placed with or using the service; details of next of kin or representative, details of placement or service category; name and contact details of the funding authority; or confirmation if the service user is a self-funder.
- Regulated care providers will also supply Croydon Council with an up-todate employee or establishment list, in the event on an unplanned or imminent business failure.
- Financial health checks are undertaken by the Financial Lead Resources
 Department on those regulated care providers who are not subject to the
 CQC market oversight duties.
- Seek legal advice as required, prior to taking action.

1.3 Aim of continuity plan

- 1.3.1 The aim of this plan is to ensure the care and support needs of all service users can continue to be met in the event of an immediate business failure by a regulated care provider registered in Croydon undertaking regulated care activities.
- 1.3.2 This plan sets out the roles and responsibilities of Croydon Council in the event of a business failure. The types of failure covered in the plan include imminent closure or cessation of a services; cancellation of registration through a Care Quality Commission (CQC) enforcement action; immediate closure caused by fire or flood etc.
- 1.3.3 For Planned Business Closures Croydon Council's temporary duty will not be triggered in this event. However, the Council would expect to receive sufficient notice of six months advising them of all planned closures.

1.4 Objectives of continuity plan

- 1.4.1 The objectives of this plan are as follows:
 - To outline the trigger criteria to activate the response plan;
 - To establish appropriate response teams following the notification of a business failure:
 - To set out the roles and responsibilities of those detailed in the plan;
 - To describe communications in terms of notification and ongoing working;
 - To set out the contingency measures that will guide the incident response;

- To provide a key contact list that can be referred to in the event of an incident occurring
- To safeguard people using services when an incident occurs to ensure continuity of care and support

2. Plan Activation

2.1 Trigger criteria

2.1.1 The plan will be activated if any of the following criteria is met:

	The council is notified of the imminent business failure of a regulated or
1	unregulated care provider registered as operating in the London
	Borough of Croydon.
	The council is advised of the immediate suspension, closure and

- The council is advised of the immediate suspension, closure and deregistration of a regulated care provider by the CQC e.g. on the grounds of health and safety or assessed risk to service users.
- The council is notified of a major and immediate unplanned business interruption e.g. a significant fire or flood, and where the care providers' own business continuity plan is unable or has failed to address the resulting service impact.
- The council is advised that there is an imminent risk to people using services and action will need to be taken to safeguard those people e.g. alternative care and support provision.

2.2 Other local authorities

- 2.2.1 In the event of Croydon Council being notified by another local authority of a regulated provider business failure in their area (and Croydon has individuals placed with the provider) then the Quality and Market Support Manager and appropriate social work team manager are be allocated to support the closure process.
- 2.2.2 The Quality and Market Support Manager and appropriate social work team manager will attend all host authority meetings relating to the business failure.

2.3 Activation of the plan

2.3.1 The following people have responsibility for activating this plan:

4	 Director of Adult Social Care Commissioning, Policy & Improvement
1	Corporate Director of Adult Social Care and Health
	 Director of Adult Social Care Operations (Deputy DASS)
2	 Head of Service for Strategic Commissioning & Improvement
	 Head of Adults Placement, Brokerage & Market Management
	Head of Adult Safeguarding & Quality Assurance
	Head of 18-65 Disability Services
	Head of Business & Service Compliance

•	Head of Adult Mental Health & Substance Misuse	
•	Head of Localities	
•	Head of Provider Services	
•	Strategic Commissioning Manager (OP&Carers)	
•	Strategic Commissioning Manager (LD&Autism)	

2.3.2 The above table is based on a command order of chain and shall be activated dependant on people's availability.

Strategic Commissioning Manager Mental Health

3. Roles and Responsibilities

3.1 Incident manager

3.1.1 The following people have the responsibility for overall management of the incident:

1	•	Head of Adults Placement, Brokerage & Market Management		
	•	Head of Service for Strategic Commissioning & Improvement		
	•	Head of Adults Placement, Brokerage & Market Management		
	•	Head of Adult Safeguarding & Quality Assurance		
2	•	Head of 18-65 Disability Services		
2	•	Head of Business & Service Compliance		
	•	Head of Adult Mental Health & Substance Misuse		
	•	Head of Localities		
	•	Head of Provider Services		
	•	Strategic Commissioning Manager OP & Carers		
	•	Strategic Commissioning Manager LD & Autism		
3	•	Strategic Commissioning Manager Mental Health		
	•	Quality and Market Support Manager		
	•	Market Facing Safeguarding and Quality Assurance Officer		

3.1.2 The above table is based on a command order of chain and shall be activated dependant on people's availability.

3.2 Incident management

3.2.1 The highest in seniority as listed above will take the role of Incident Manager. In their absence, the role will be undertaken by the second or third in seniority. They have the following responsibilities:

1	Review initial incident log and carry out a dynamic RAG on the incident to decide on if there are any critical decisions to be made.
2	Convene an incident strategy meeting within 24 hours of notification and inform Comms and/or Press team as required. If RED rated (Critical) then meeting within 4 hours
3	Devise action plan and allocate tasks / duties to incident team members
4	Set clear time-scales for action

5	Seek legal advice as required
6	Keep Director and Heads of Service, Cabinet Members (in ASC, Commissioning) fully briefed
7	Ensure all meetings / decisions recorded for audit purposes
8	Maintain incident log for all requests, decisions and actions

3.3 Incident team

3.3.1 The following are the key incident team members and their responsibilities:

ROLE	RESPONSIBILITIES
Head of Service for Strategic Commissioning & Improvement	 Responsible for all commissioning decision making Responsible for ensuring commissioned services are working to required contractual arrangements
Head of Adults Placement, Brokerage & Market Management	 Provide support and advice on any workforce related issues Main point of contact with provider
 Head of 18-65 Disability Services Head of Adult Mental Health & Substance Misuse Head of Localities Head of Provider Services Head of Business & Service Compliance 	 Responsible for all care and support decision making Ensure all identified care and support needs are appropriately met Communicate with all individual service users and families
Head of Adult Safeguarding & Quality Assurance	 Responsible for responsible for protecting the confidentiality of people's health and care information and making sure it is used properly. Responsible for the Provider concerns process if implemented in co-ordination with provider failure policy Secure appropriate continuity of care Main point of contact with provider
Market Facing Safeguarding Quality Assurance Officer	 Liaise with placing authorities where a resident/ service user is funded by another borough/ Health authority Co-ordinate provider concerns comms, if in place in co-ordination with provider failure policy Co-ordinate comms to ADASS
 Strategic Commissioning Manager (OP&Carers) Strategic Commissioning Manager (LD&Autism) 	 Action and oversee required contractual arrangements Secure appropriate continuity of care

Strategic Commissioning Manager Mental Health	
Service Manager- Adults Placements & Brokerage	 Oversee Placement and Brokerage capacity within the borough in the event of alternative provision required
Quality and Market Support Manager	 Monitor service arrangements to ensure continuity of quality of care Visit services as and when required to ensure continuity of service. Working with providers to support relevant improvements required/ agreed.
Finance Manager	Monitor and oversee financial implicationsMake decisions on financial support offer
Public Health Professional	Monitor and oversee Public Health requirements
Head of NHS Continuing Care	 Will lead and co-ordinate all actions relating to NHS funded users Will attend/ send a nominated individual with authority to make discissions at meetings to discuss the provider failure

4. Communications

4.1 Incident notification

4.1.1 In the event of an incident, the following **people** and **organisations** must be alerted of a regulated or unregulated care provider failure with immediate effect (or as a result of an emergency) and must be briefed on the situation and potential impact and risks:

1	Corporate Director of Adult Social Care and Health
2	Director of Adult Social Care Operations (Deputy DASS)
3	Director of Adult Social Care Commissioning, Policy & Improvement
4	Head of NHS Continuing Care
5	Head of Adult Safeguarding & Quality Assurance
6	Inspection Manager – Care Quality Commission (CQC)
7	Head of Service for Strategic Commissioning & Improvement
8	Head of Adults Placement, Brokerage & Market Management
9	Market Facing Safeguarding & Quality Assurance Officer

10	Head of 18-65 Disability Services
11	Head of Adult Mental Health & Substance Misuse
12	Head of Localities
13	Head of Provider Services
14	Head of Business & Service Compliance
11	Quality and Market Support Manager
12	Strategic Commissioning Manager OP & Carers
13	Strategic Commissioning Manager LD & Autism
14	Strategic Commissioning Manager Mental Health
15	Head of Resident Contact
16	Press Office

5. Actions and Contingency Measures

5.1 Initial notification and dynamic RAG assessment (Appendix 3)

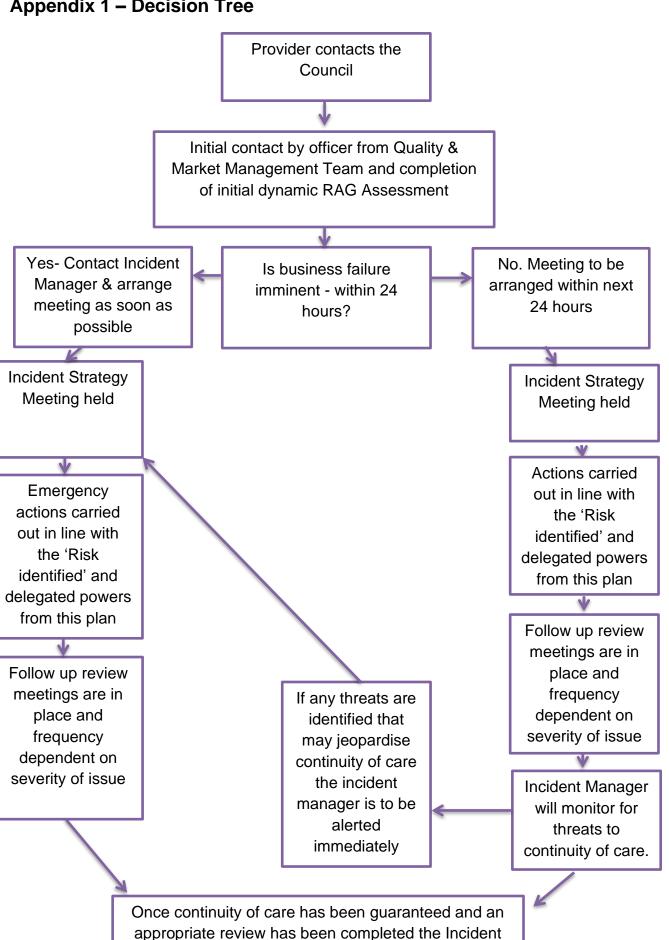
- 5.1.1 The officer who receives the initial contact will carry out an initial assessment below with the provider to work out whether the issue constitutes the following:
 - RED- Critical failure and action required within 24 hours
 - AMBER- Serious failure and action required within 72 hours
 - GREEN- Possible business continuity failure and action required within 1 week.
- 5.1.2 In the answer box there are some pre-populated boxes to aid staff on some of the key headings
- 5.1.3 After the initial assessment has been carried the officer who has carried out the assessment will contact a Senior Manager who will assume the role of 'Incident Manager'. They will contact the list of Senior Managers in section 3.1 and the contact details provided in Appendix 2.
- 5.1.4 The initial officer will start the process as identified in the Appendix 1 Decision Tree
- 5.1.5 If the initial risk assessment highlights a possible failure within 24 hours (RED-Critical) then a meeting will be held within 4 hours of the notification and risk assessment being carried out.

5.2 Incident Strategy Meeting

5.2.1 The agenda (Appendix 4) will be used for the Incident Strategy Meeting, chaired by Head of Adults Placement, Brokerage & Market Management. An Agenda and Meeting Minute Template is provided in Appendix 4:

6.0 Appendix

Appendix 1 – Decision Tree



Response Team will end the incident

Appendix 2 – Key Contact List

1. Incident Response Team

INCIDENT RESPONSE TEAM CONTACTS					
NAME	JOB ROLE	CONTACT			
	Head of Service	Work:	21179		
Leanne Bobb	for Strategic Commissioning &	Mobile:	07729 622898		
	Improvement	Email:	Leanne.bobb@croydon.gov.uk		
	Head of Adults Placement,	Work:	21453		
Stephen Hopkins	Brokerage & Market	Mobile:	07874 601548		
·	Management	Email:	stephen.hopkins@croydon.gov.uk		
	Service Manager-	Work:	21298		
Kaye Carter	Adults Placements & Brokerage	Mobile:	07436 032 597		
		Email:	kaye.carter@croydon.gov.uk		
Kirsty Scarlett	Quality and Market Support Manager	Work:	21337		
		Mobile:	07734 002213		
		Email:	kirsty.scarlett@croydon.gov.uk		
		Work:	21561		
Sean Olivier	Head of Localities - Older People	Mobile:	N/A		
	·	Email:	Sean.olivier@croydon.gov.uk		
	Head of 18-65	Work:	21164		
Azuka Agbai	Disability Services	Mobile:	07742 405466		
		Email:	azuka.agbai@croydon.gov.uk		
	Head of Service	Work:	0203 2280404		
Valentine Nweze	Adult Mental Health Social Care	Mobile:	07742 405323		
		Email:	Valentine.Nweze@slam.nhs.uk		
Nick Sherlock	Head of Safeguarding &	Work:	21320		

	Quality Assurance	Mobile:	N/A
			nick.sherlock@croydon.gov.uk
	Service manager – Adult	Work:	21600
Ernest Johnson	Safeguarding &	Mobile:	N/A
	Quality Assurance	Email:	ernest.johnson@croydon.gov.uk
	Market Facing	Work:	21432
Melanie Gamsu	Safeguarding Quality	Mobile:	07732 074095
	Assurance Officer	Email:	melanie.gamsu@croydon.gov.uk
	Strategic	Work:	21045
Claire Fletcher	Commissioning Manager - (Older People and Carers)	Mobile:	N/A
		Email:	Claire.Fletcher@croydon.gov.uk
	Strategic Commissioning Manager- Mental Health	Work:	22900
Shirley Moyes		Mobile:	N/A
		Email:	Shirley.Moyes@croydon.gov.uk
	Strategic		21699
Cris Green	Commissioning manager (Disabilities & Autism)	Mobile:	N/A
		Email:	Cris.Green@croydon.gov.uk
	Director of Public Health Croydon	Work:	22722
Rachel Flowers		Mobile:	07939 502 403
		Email:	Rachel.Flowers@Croydon.gov.uk
	Head of Resident Contact	Work:	22455
Lisa Wheatley		Mobile:	N/A
		Email:	Lisa.Wheatley@Croydon.gov.uk

2. Key Partners & Other Key Contacts

KEY PARTNERS & OTHER KEY CONTACTS					
NAME	JOB ROLE		CONTACT		
	Care Quality	Work:	03000 61 61 61		
Helen Wells	Commission (CQC) Inspection	Mobile:	07467 001 497		
	Manager	Email:	Helen.Wells@cqc.org.uk		
	Care Quality	Work:	03000 61 61 61		
Hannah Cooper	Commission (CQC) Inspection	Mobile:	07393006375		
	Manager	Email:	Hannah.Cooper@cqc.org.uk		
	Head of Finance –	Work:	27234		
Mirella Peters	Adult Social Care & Health	Mobile:	N/A		
	пеан	Email:	mirella.peters@croydon.gov.uk		
		Work:	020 3668 1899		
Rachael Colley	Head of NHS Continuing Care	Mobile:	N/A		
		Email:	rachael.colley@swlondon.nhs.uk		
		Work:	60036		
Press Office	Comms Team	Mobile:	N/A		
		Email:	Press@croydon.gov.uk		
			020 8555 1200		
London Fire Brigade		Mobile:	N/A		
3		Email:	FSDCroyBromSutMert@london-fire.gov.uk		
	Trading Standards	Work:	28539		
Trish Burls	Trading Standards, Food and Safety	Mobile:	07458 077879		
	Manager	Email:	trish.burls@croydon.gov.uk		
	Environmental Health (team	Work:	28257		
HMO Team	covering	Mobile:	N/A		
	unregistered supported living)	Email:	hmo@croydon.gov.uk		

APPENDIX 3 – Initial Notification and dynamic RAG assessment

Subject	Answer
Provider Name	
Service Name	
Service Address	
Type of provision	
Date & Time of initial contact	
from provider	
Method of Communication	
Officer carrying out assessment	
Date & time of officer	
assessment	
Initial Dynamic risk assessment	
RAG rating	
Question	
What is the risk that you have	 Staffing
identified? (Remove those not	Financial
applicable)	 Public Health/Infection Control
	 Regulatory/Business Continuity Failure
	 Safeguarding Concerns
	 Building defect/ incident
	 Unforeseen/unplanned failures
Have you instigated your	
Business Continuity Plan	
(BCP)?	
Please can you email	
carequality@croydon.gov.uk	
with your BCP	
Will the measures from your	
BCP mitigate the risk of partial	
or total provider failure?	
How many Croydon residents	
will be affected?	
How many other funding	
authority residents will be	
affected?	
How many private residents will	
be affected?	
Have you contacted the CQC?	
Have you contacted placing	
authorities?	
Can you provide the following:	
An up-to-date service	
user register	
An up-to-date employee	
or establishment list	

•	Individual care or health
	plans and risk
	assessments- if
	applicable at this stage

Appendix 4 – Incident Strategy Meeting Agenda & Meeting Minute Template

Agenda template;

No.	Agenda Item	Detail
1	Summary of Concerns	Incident Manager summarises concerns. Consideration of size of home/provision and business continuity plan
2	 i. Exploration of current staffing levels Management a. Clinical leadership b. Care management leadership Carers Facilities management – kitchen, cleaning etc. ii. Immediate staffing intervention Clinical leadership brought into home –	
	Infection Control Safeguarding Regulatory Failure Health and Safety	

3	Service User Safety iii. Current infection levels iv. Analysis of infection: • Positive/negative floors • Equipment stocktake • Staff and equipment movement • PPE v. Immediate management of infection • PPE order • Deep clean • Response to clinical concerns	
4	Financial & Sustainability i. Current occupancy/service user numbers ii. Current rates iii. Provider sustainability payment iv. Tenancies ended – provider/ landlord	
5	Comms i. With home ii. With other councils/ CCG iii. Relatives and family – Virtual meetings iv. Reactive press lines from ASC prepped and approved by Director v. Members vi. Letter to ADASS to share with other authorities	
6	Post-incident contingency response work streams	Based on the above dependent on situation
7	Frequency of next meetings	Frequency of meeting related to serious of situation

Minute template;

No.	Agenda Item
1	Summary of Concerns
2	Staffing
3	Service User Safety
4	Financial & Sustainability
5	Comms
6	Post-incident contingency response work streams
7	Frequency of next meetings

Appendix 5 – Action considerations for possible business failure

01 - 111	Financial	Regulatory	Building defect/ incident	Public Health/Infection
Staffing	failure	Failure	including unforeseen unplanned	Control/Health & Safety incident
Registered Manager	Financial Failure	De-Registration	Full Closure of home	Enforcement notice on food safety
-Management cover	(Within 7 days)	of Manager	-Move all residents to vacant beds	-Kitchen closure due to infestation, home
from provider	-One off payment	-Review all service	within Care UK services as first option.	to introduce alternative food supplier to
organisation	to provider to	users with a view	- Identify homes from void/vacancies list	deliver hot meals.
-Management cover	reduce immediate	to moving	to support immediate moves.	IPC Outbreak
from a staffing agency	risk to residents	- Review	- Discussion with Extra Care services	-Outbreak of infectious disease to be
General Care Staff	-Take legal view	alternative options	about possible emergency admissions	supported by PH colleagues for guidance
-Care staff cover from	on any contract	from in-house	-Move all residents to a vacant bed	on managing the outbreak
provider organisation	termination and	services	within another service	Legionella Outbreak
-Care staff cover from	payment issues	- Provider to recruit	-Deploy current care staff in the	Consider moving residents to another
staffing agency	-Meeting with	temporary agency	relocation	setting if legionella risk is not immediately
-Care staff support from	Section 151 officer,	registered	-Passing on information, escorting	removed
a homecare provider	corporate director	manager	service users, etc	
Kitchen Staff	and cabinet	De-Registration	-Ensure formal handover of service	
-Kitchen staff cover	member	of Service	users, their files and other records	
from provider	Financial Failure	-Review all service	takes place including medication and	
organisation	(within 1 month	users with a view	treatment details.	
-Kitchen staff cover	-Review all service	to moving	-Provider to activate business continuity	
from staffing agency	users with a view	-Review with CQC	plan.	
- Alternative meal	to moving	on a risk basis to	Partial Closure	
provider to be sourced	immediately	decide on timeline	-In partnership with the provider, assess	
Nursing Staff	-Confirm where	to move residents.	number of residents, if any, need to be	
-Nursing staff cover	responsibility rests		relocated temporarily to another service	
from provider	for assessing any		within the Borough as per the above	
organisation	Self-Funding or		measures.	
-Nursing staff cover	other Local		-Provider to activate business continuity	
from staffing agency	Authority service		plan.	
-Discussion with health	users with a view			
colleagues on	to temporarily			
temporary/bank staffing	increasing fees			
to support	Meeting with			
	Section 151 officer,			
	corporate director			
	and cabinet			
	member			
	Financial Failure			
	(within 3 months)			

-Review all service	
users with a view	
to moving	
immediately	