# Continuity Planning Tool

This template is provided as a tool to help the development of a continuity plan. The template provides examples of the types of major incidents that might occur in dental practice and might affect the provision of a service to patients.

Please note that the details contained in this template are included as a guide and this is not intended to be a comprehensive list of all major incidents that could be encountered and all measures to reduce the impact of such incidents. By providing suggested actions and questions to consider, this template is intended to help dental teams plan ahead for an incident, identify resources necessary both in the short term and in the long term, and identify team members who are responsible for specific actions. After considering these actions and questions now before an incident occurs, it is advised that each dental team then writes a continuity plan for each major incident, which can be implemented if necessary.

## Actions for All Major Incidents

Some broad actions that are applicable to all major incidents are provided below; these are divided into those that can be done now to help prepare for a major incident and those that can be implemented following an incident. It is important that actions included in a continuity plan are adapted so that they are specific for your dental practice and it is clear who does what (e.g. they identify people by name, where possible, and include the storage place or contact details for documentation or resources). Examples of points to adapt are provided in [blue text].

### Actions to consider now before an incident occurs

Compile and maintain an up-to-date list of relevant contact details and documentation, and ensure there is easy access to these in the event of a major incident (e.g. keep in an emergency box). See separate tables below for details.

Where possible, obtain resources (short term and/or long term) required in the event of a major incident, and ensure there is easy access to these following such an event (e.g. keep in an emergency box).

Where possible, set up back-up systems and assign a person(s) responsible for these.

If it is not possible or not practical to obtain resources prior to an incident, identify the resources required and where these could be sourced if an incident occurred, and keep this information in an accessible place.

Decide which members of staff are responsible for which actions when an incident occurs, and ensure actions included in the final continuity plan are clear and concise.

### Actions that can be included in a continuity plan [amend as required for your practice]

Alert the member of staff [include name] who has been assigned to deal with major incidents.

Assign someone to field enquiries and to record what is happening (e.g. actions taken, decisions made and reasons for actions and decisions) so the member of staff who is managing the situation is free to do so.

Identify the extent of the problem and how long the problem will last.

If necessary, inform the practice insurance company, utility provider or equipment supplier without delay. [include contact and account details.]

Decide on the level of service that the practice can provide, and whether a back-up system requires to be employed. [include details of each back-up system.]

Implement short-term measures. [List what these are for each type of incident.]

Inform those people who are affected (e.g. staff and patients) and let them know of alternative arrangements, if required. [Include who is responsible for maintaining a list of contact details and where this is kept.]

Change the answer phone message to inform patients of any change in service, if required.

If the problem is long term, obtain resources required and implement back-up systems.

Review the situation regularly and maintain communication with the dental team.

## Actions Specific to Individual Incidents

To help identify what needs to be done now to inform a continuity plan and minimise the impact of specific incidents, the following tables list questions that dental teams can ask of their own practice. A ‘notes’ box is included in the tables to record your answers to the questions or any other comments. These notes can then be used to write your continuity plan. Some suggested actions that are specific to individual incidents and can be included, together with the general actions listed above, in a continuity plan are provided under each table. These can be adapted so that they are specific for your dental practice (e.g. identify people by name, where possible, and include the storage place or contact details for documentation or resources) and it is clear who does what.

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| Utility Failure – Electricity | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| Loss of power | Do you have a standby generator?  If yes:   * Does it work? * When was it last checked? * When was it last serviced? * Is it powerful enough? * How much more equipment do you have now compared with when it was first installed? * Where is the proof of maintenance? * Who is responsible for maintenance and testing?   Is an uninterrupted power supply (UPS) fitted to all critical machines? If not, why not? |  | Electricity supplier: [Name] and [Tel. No.]  Practice electricity account No.: [Number]  Details of standby generator are kept in [XXX]  Proof of maintenance is kept in [XXX], and [Name] is responsible |
| Lighting | What is the minimum light level required?  Do you have torches or battery-powered lighting accessible for the short term?  Is emergency lighting kept charged? |  | Supplier of small generator and lighting set: [Name ] and [Tel. No.]  Torches/emergency lighting kept in [XXX] |
| Heating | Is the heating dependent on electricity?  If yes, what alternative heat sources, space heaters, etc., could be used? |  | Supplier of alternative heat sources: [Name] and [Tel. No.] |
| Dental equipment  (see also section below on ‘Practice Equipment Failure’ and ‘Computer Failure’) | Is some critical equipment dependent on electricity (e.g. steriliser)?  Make an inventory of such equipment.  Are there any alternatives that could be used?  Keep details of equipment suppliers for longer-term outages. |  | Equipment suppliers: [Names] and [Tel. Nos]  Inventory of equipment and alternatives kept in [XXX] by [Name] |
| Level of service | Decide which services are likely to have to be withdrawn, based on answers to above questions.  If services are withdrawn, who will be affected and who will need to be informed?  Who is going to contact patients and staff? |  | List of telephone numbers for all staff kept in [XXX] by [Name] (NB: computers might not be functioning)  Information about appointments is kept in [XXX] by [Name] (NB: computers might not be functioning) |
| Additional actions that can be included in a continuity plan for managing an electricity failure [amend as required for your practice]  * Identify the extent of the problem and cause, if possible, by: * checking if more than one circuit is affected; * checking the trip-switches and fuse box; * checking if neighbours are affected. * If necessary, inform the practice electricity provider without delay. * Switch off or unplug sensitive equipment to protect from a power surge. * Keep a light switched on to indicate return of power. * Keep fridges closed, and take a note of timings of electricity failure and reinstatement of power. * Implement short-term measures or obtain resources; for example: * obtain a small generator and lighting set, and torches; * obtain alternative heat sources, if required. * When power returns: * check systems that depend on timers (e.g. heating, security) and reset if necessary; * obtain advice from central pharmacy supplies about storage of medicines. | | | |

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| Utility Failure – Gas Failure or Leak | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| Gas appliances, and possibly heating | Do you know where the gas can be shut-off?  What gas appliances do you have?  Who is responsible for maintaining and testing gas appliances?  Where are user manuals kept?  What alternative heat sources, space heaters, etc., could be used?  Who is going to contact patients and staff? |  | Gas supplier: [Name] and [Tel. No.]  Gas service engineer: [Name] and [Tel. No.]  Practice gas account No.: [Number] |
| Additional actions that can be included in a continuity plan for managing a gas failure or leak [amend as required for your practice]  * Open windows if there is a smell of gas. * Identify the extent of the problem and possible cause by checking if any gas appliances have been left on or if their pilot light has gone out. * Switch off gas appliances. * Contact the practice’s gas service engineer, if necessary. * If there is a smell of gas that is not associated with a local appliance: * turn off gas at the mains; * inform the practice gas supplier without delay; * consider evacuation of the premises; * do not switch on or off lights or electrical appliances (spark hazard); * do not use mobile phones (ignition hazard). * If there is a gas supply failure: * check the likely outage time; * implement short-term measures (e.g. obtain alternative heat sources), if required. * When the problem is fixed, refer to the user manual for appliances or systems for restarting. | | | |

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| Utility Failure – Telephone | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| Telephones | Are the telephones dependent on the power supply?  If yes, can a UPS be fitted? (NB: this will not last long)  Would practice mobiles be sufficient to deal with the problem in the short term?  Keep mobile phones charged and adapters to hand.  Keep battery phones charged and additional batteries to hand.  If mobile phones are not adequate, how many phones are required?  Who is going to contact patients and staff? |  | Telephone provider: [Name] and [Tel. No.]  Practice telephone account No.: [Number]  Electricity supplier: [Name] and [Tel. No.]  Practice electricity account No.: [Number]  Telephone equipment provider: [Name] and [Tel. No.] |
| Additional actions that can be included in a continuity plan for managing a telephone failure [amend as required for your practice]  * Identify the extent of the problem by checking if all extensions are affected and if fax machines are affected. * Obtain sufficient phones to deal with the problem or redirect calls to functioning lines or an alternative service provider (e.g. NHS24). * Dedicate one line (or mobile phone) for priority calls and those related to restoration of the service. * Ensure the incoming line is staffed. | | | |

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| Utility Failure – Water | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| Drinking water, water used in treatment rooms | Can you do without water in treatment rooms?  Can bottled water be supplied to cover requirements?  How can you obtain the bottled water?  Should appointments be cancelled? |  | Water supplier: [Name] and [Tel. No.]  Practice water account No.: [Tel. No.] |
| Toilets | Is there a header tank for toilets?  If yes, how long can it last?  Can this be filled from a tanker from the service supplier? |  | Water supplier: [Name] and [Tel. No.] |
| Additional actions that can be included in a continuity plan for managing a water supply failure [amend as required for your practice]  * Check if drinking water and water in treatment rooms are affected to identify if the mains supply is affected. e.g. legionella testing * Obtain back-up water if available and sufficient for short-term use. * Check with the practice water supplier if they can fill your header tank for the toilets. | | | |

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| Computer Failure | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| PCs, server | How many PCs are in use?  Where are they used?  Which are the critical machines?  Is a UPS fitted?  Do you have any laptops in the practice?  If yes, are they charged and ready to go?  Identify an alternative service or server (NB: this could take several days to set up)  Who is responsible for ensuring that all computers are serviceable and regularly serviced?  Can you use a manual system? |  | Software Supplier Helpdesk Tel. No.: [Number] |
| Intra/internet email | How can you recover service? |  |  |
| Appointments system | Can you go back to a manual system?  If so, how do you do this and how quickly can it be done? |  |  |
| Back-up | What back-ups do you have and who is responsible for ensuring back-ups are completed?  Can you use a fully manual service?  Plan how this would work.  Do you have a fire-proof safe?  Consider a suitable location for the fireproof safe and the legal implications of ‘off-site’ storage.  How can you retrieve information?  Who organises retrieval?  Who holds the safe key/combination and what happens if they are sick? |  |  |
| Additional actions that can be included in a continuity plan for managing a computer failure [amend as required for your practice]  * Identify the extent of the problem by determining how many computers are affected. * Obtain help from the practice software supplier helpdesk, if necessary. * In the short term, use laptops if this is sufficient to cover the problem until it is resolved. * If the problem is long term, implement a manual back-up system, and obtain resources required. | | | |

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| Practice Equipment Failure | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| All equipment | Compile a list of equipment owned by your practice, that includes:   * whether equipment is portable and battery powered, portable and mains powered or fixed mains powered; * the serial number; * date came into practice; * maintenance requirements; * date last serviced/calibrated, if required.   Who is responsible for the equipment, including who holds the record book for all equipment and ensures maintenance of equipment?  Do you have sufficient back-up equipment?  Where would you source back-up equipment from? |  | List of equipment is kept in [XXX] by [Name]  [Name] is responsible for maintenance of all equipment  Equipment suppliers: [Names] and [Tel. Nos] |
| Additional actions that can be included in a continuity plan for managing an equipment failure [amend as required for your practice]  * Identify what equipment is not functional and the extent of the problem. * Contact the equipment supplier(s), if necessary. * Identify whether there is sufficient back-up equipment. * Source alternative equipment, if required. * Cancel appointments if necessary. | | | |

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| Shortage of Staff because of Adverse Weather or Staff Illness | | | |
| **Items affected** | **Questions/actions to consider now before any incident occurs** | **Notes** | **Contact numbers required** |
| Patients with appointments | What is the minimum staff level required to provide a service?  Do you have contact details for agency staff?  Who should you contact to get assistance with road clearance? |  | List of telephone numbers for all staff kept in [XXX] by [Name]  Information about appointments is kept in [XXX] by [Name]  Agency for Locum staff: [Name] and [Tel. No.]  Contact for road clearance: [Tel. No.] |
| Patients requiring emergency care | Can dentists visit patients at alternative premises?  Can patients visit alternative practices/services and dentists for emergency treatment? |  | Neighbouring practices: [Tel. Nos]  Health Board: [Tel. No.] |
| Additional actions that can be included in a continuity plan for managing a shortage of staff [amend as required for your practice]  * Determine the minimum staff level required to provide a service. * Identify whether other staff can cover, and employ agency staff, if necessary. * Make alternative arrangements with neighbouring practices or the Health Board, if necessary * Inform those patients with appointments of cancellations or alternative arrangements, if required. * Inform patients of the reduced service, if necessary. | | | |

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| Total Loss of Premises (e.g. the dental practice burns down) | | | |
| In the following table, actions to be taken following a total loss of premises are listed, together with a list of contact details and other information to obtain now before an incident occurs. | | | |
| **People affected/to be notified** | **Action required following an incident** | **Team member responsible** | **Contact numbers required** |
| Insurance company | Contact the insurance company [Name] by phone. |  | Insurance company: [Tel. No.]  Practice Account No.: [Tel. No.] |
| All staff | Contact all staff by phone. |  | List of telephone numbers for all staff (i.e. both clinical and non-clinical) kept in [XXX] by [Name.]  Backup list kept in [XXX] by [Name.] |
| Patients with appointments | Contact patients either by phone or by radio announcement via Health Board |  | Information about appointments is kept in [XXX] by [Name.]  Health Board: [Tel. No.] |
| Software/backup company | Contact provider to retrieve backup copies of records and patient contact details |  | Software company: [Tel. No.]  Backup company: [Tel. No.]  Practice Account No.: [Tel. No.] |
| Patients requiring emergency care | Make alternative arrangements for emergency patient care with neighbouring practices or the Health Board. |  | Neighbouring practices: [Tel. Nos]  Health Board: [Tel. No.] |
| NHS Board/Primary Care Division | Contact the Primary Care Contractor Organisation (PCCO) manager [Name] by phone. |  | PCCO manager:[Tel. No.]  Practice Reference No.: [Number.] |
| Remaining patients | Contact all other patients by radio announcement, social media or by an advert in a local newspaper if appropriate and time allows.  If a radio announcement or social media is used, seek assistance from the communications department within the Health Board.  Consider longer-term information for patients. |  | Communications Department of Health Board: [Tel. No.]  Local newspaper: [Name] and [Tel. No.] |
| Post Office | Contact the Post Office by phone and inform them of the circumstances, and alternative delivery addresses if they are to be used. |  | Post Office: [Tel. No.] |
| Supplier companies | Contact companies to inform them of changes in deliveries |  | Supplier [Name] and [Tel. No.]  Supplier [Name] and [Tel. No.]  Supplier [Name] and [Tel. No.] |
| Laboratories | Contact laboratory [Name] to inform them of changes to collection and pickup requirements |  | Laboratory [Name] and [Tel. No.] |
| Telephone Company | If necessary, ask your telephone company to redirect calls to NHS24 and inform NHS24. |  | Telephone provider: [Name] and [Tel. No.] |
| NHS24 | Contact NHS24 by phone as it will have an impact on out-of-hours services. |  | NHS24 Tel. No.: 0141 337 4501 (Central Office) |
| Additional actions that can be included in a continuity plan for managing a total loss of premises [amend as required for your practice]  * Identify whether alternative premises will be required in the longer term, and the resources that would be required. | | | |

**Version history**

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| **Date** | **Version No.** | **Summary of change(s)** | **Updated by** | **Next review date** |
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