

Kingston  Chambers	Business Continuity Plan		Reviewed	
			Revised	
Adopted	April 2021	Next review	April 2023	

# Business Continuity Plan

## Introduction

This Business Continuity Plan is produced to overcome any unexpected disaster to the bricks and mortar of any of the sites used by Kingston GP Chambers (KGPC), key personnel or to any important systems that the organisation relies upon in its day-to-day operations.

## Plan Owner/Plan Location

This plan will be owned by the General Manager. Plan copies will be held at home by:

- The General Manager
- The Deputy General Manager
- All Service Managers and EH on-call managers
- The IT Manager

## Training

In order to maintain emergency and business continuity response arrangements within this plan, all staff will be made aware of the plan as part of their induction training and/or reminded of the policy at least annually at a staff meeting. If there are any significant changes to the plan that affect the way in which staff respond, these must be communicated to them as soon as possible.

## Emergency response to incidents affecting KGPC's provision of services:

### **Complete loss of a KGPC site – short term (5 days or less)**

KGPC operates from the following buildings:

**Kingston Health Centre**, 10 Skerne Road, Kingston, KT2 5AD (Extended Hours, Dementia Service, administrative offices)

**Surbiton Health Centre**, Ewell Road, Surbiton, KT6 6EZ (Extended Hours, Dermatology, Urology, Vasectomy)

**Merritt Medical Centre**, 60 Merritt Gardens, Chessington, KT9 2GY (Extended Hours, Diabetes)

**The Groves Medical Centre**, 171 Clarence Avenue, New Malden, KT3 3TX (Diabetes)

**Holmwood Corner Surgery**, 134 Malden Road, KT3 6DR (Extended Hours)

**The Village Surgery**, 157 New Malden High Street, KT3 4BH (Kingston Education Centre, administrative offices)

### **Administrative services**

All administrative staff have the facility to work from home, with the computer drives being available remotely to administrative staff via VNC. Should an administrative location become unavailable, where possible, staff will remain at home and log-into the system remotely and will continue with their usual working hours and role, as outlined in the Home Working policy.

Where a clinical site becomes unexpectedly unavailable, staff will take the following action to address the situation in the short-term:

### **Extended Hours:**

- The Service Manager or on-call manager must be contacted immediately, and will co-ordinate the response.
- Where possible, all patients booked into an appointment with a doctor at the unavailable site, will be moved to an alternative site. Where a patient is expecting to attend for a face to face appointment, a receptionist will contact them to inform them of the change of location.
- Where patients cannot be accommodated in remaining services, the doctor who was scheduled to work from the unavailable site will travel to one of the remaining sites in order to provide additional consultations from that site.

### **GPwER Services:**

- The Service Manager must be contacted immediately, and will co-ordinate the response.
- Where possible, all patients booked into an appointment with a doctor at the unavailable site will have their appointment converted to a telephone consultation, and will be contacted to inform them of the change. The clinician will then travel to an alternative KGPC site and carry-out the consultation from there.
- Where a patient needs a face to face appointment, they will be contacted to explain that the site is unavailable, and will be informed that they will receive an alternative appointment at a later date.

### **Kingston Education Centre**

- The KEC Manager or Co-ordinator must be contacted immediately, and will co-ordinate the response.
- All patients booked into a KEC appointment will be booked into an Extended Hours clinic and the patient will be notified of any change of appointment time/location. Where the patient needs to be seen before the Extended Hours Service opens, they will be referred back to their registered GP.
- All students on placement at KEC on the day that the building becomes unavailable will be directed to return home and spend the day engaging in personal study, either on their own projects, or using the IPL tools which are available on the student online portal.
- A decision will be made about whether the student's placement will continue, in consultation with their university. This will depend on how long the site is likely to remain unavailable, and whether it is possible for the students to be re-located to a shadowing opportunity within a practice. The KEC Manager will be responsible for liaising with the universities and making alternative arrangements for the students.

### **Complete loss of a KGPC site – long term (more than 5 days)**

Where it becomes apparent that a KGPC site will be uninhabitable long-term, the General Manager will take the lead on alternative plans, in liaison with the relevant external site managers, internal service managers and other key staff, and commissioners (contact details in [Appendix A](#)). Plans may include re-locating a service or staff to an alternative KGPC site or a new site, turning a face to face service into a telephone/video service, or suspending a service altogether.

Where a CQC-registered location becomes unavailable long-term, this must be reported to CQC as soon as practicable. The responsibility for informing CQC of the unavailability of a location falls to the Registered Manager (Anthony Hughes), but can be delegated to an alternative member of staff.

## **Loss of Computer system**

The loss of either computer hardware or the core software is dealt with by EMIS (see contact numbers in [Appendix A](#)) for software and Your Healthcare (see [Appendix A](#)).

Loss of hardware is covered by KGPC's Insurance policy, and the insurers must be notified of lost/stolen equipment as soon as practicable. Your Healthcare should be contacted to arrange for replacement computers to be sourced.

Where hardware or EMIS cannot be accessed, a decision will be made about whether clinical services can be carried-out in the absence of patient notes.

Where the decision is made that a clinical service can be continued without access to the clinical system, records of consultations will be made using the consultation template in [Appendix B](#). Prescriptions will be issued using FP10 hard copies, which each site has a stock of. Use of these prescriptions will be logged as outlined in the Prescription use and storage procedure.

Where the decision is made that this is not possible to carry-out consultations in the absence of patient notes, and EMIS access has only been lost at a single site, the arrangements listed under the "Complete loss of KGPC site" section should be followed.

Where hardware or EMIS access is lost across all sites, the service manager, in consultation with the General Manager, will develop a plan for repatriating all relevant patients back to their registered practice. The CCG will also be informed of the suspension of services.

## **Short notice unavailability of GPs and receptionists**

If an Extended Hours and KEC GP or receptionist cancels their booked session at short notice, the Extended Hours Service cancellation plan in [Appendix C](#) should be followed.

If a GPwER GP is unavailable at short notice, all patients should be contacted to have their appointment re-scheduled to the soonest possible alternative date.

## **Loss of Telephone System**

The telephone system is maintained by VTSL (see contact numbers in [Appendix A](#)).

In the event of a fault on the system, VTSL should be contacted immediately.

If the fault cannot be rectified quickly, arrangements can be made with VTSL for calls to be transferred to staff and doctors' mobile telephones.

## **Loss of Premises Amenities (including water, electricity, gas, automatic doors, fire alarms, lifts)**

Each site has an individual business continuity plan, put in place by the host practice. These are saved in [Appendix D](#).

## **Infectious Disease**

The management of infectious disease is covered in KGPC's Infection Prevention and Control policy. Details are replicated below for ease of reference:

Where a patient attends a site with a suspected highly contagious condition, staff must take prompt action to ensure that the risk of transmission to other patients or staff is managed. The risk management plan will vary depending on the condition and the method of transmission, and in some cases (e.g. COVID), specific processes will be in place; however, general principles apply as follows:

#### Infectious diseases spread by droplets in the breath (e.g. sneezing/coughing/talking)

- Where the patient's condition is known about prior to them attending the site, the patient should be either be scheduled to attend the site after other patients have left, or they should be directed to an isolation room immediately on arrival, avoiding contact with other patients and staff where possible.
- Where the patient's condition is only discovered on arrival at the site, they should be placed in an isolation room as soon as the condition is identified, and any areas they have come into contact with should be wiped down using antibacterial wipes/solution by a member of staff wearing full PPE (mask, apron, gloves, eye protection)
- Where there is a possibility that other patients may have contracted the condition due to contact with the infected patient, these patients should be advised of any action they need to take.
- Staff treating the patient to wear full PPE
- Patient should only remain on the premises for the minimum amount of time to enable clinical care to be provided
- A full wipe- down of the room(s) and equipment used by the patient must be performed after they have left the premises by staff wearing full PPE.

#### Blood borne Infectious diseases (e.g. HIV/Hepatitis B)

- Extra care should be taken when cleaning spillages of blood or other body fluids from patients with these types of infectious disease, including the wearing of full PPE and appropriate hand hygiene.
- Where possible, only staff that the service has evidence of having Hepatitis B immunity should carry-out procedures on patients where there is a risk of contact with blood (e.g. phlebotomy, minor surgery, cleaning up blood spillages).
- See section on Emergency Arrangements for action to be taken in the event of a needlestick injury where a patient with known or suspected blood borne infectious disease is involved.

#### Infectious diseases spread by contact with vomit/faeces/urine

- Spillages should be cleaned immediately and extra care should be taken, including wearing of full PPE and appropriate hand hygiene (see [Appendix E](#)).

#### Notifiable diseases

All clinical staff must be aware of their obligation to report notifiable diseases to NHSE. Information about reporting, including a list of notifiable diseases and a link to the reporting form are available [here](#).

#### Emergency response to wide-scale major incidents

NHS Commissioning Board Local Area Teams are responsible for harnessing and effectively utilising all providers of NHS funded care, including primary care services,

---

where needed to support the response to a wide-scale major incident. In addition, the RCGP believes that “GPs would have a professional responsibility to take whatever action they could in contributing to the emergency response whilst continuing to provide general medical care to the community within the limited conditions imposed by the nature of the incident”.

In line with the responsibilities outlined above, KGPC is committed to redeploying resources (both clinical and administrative) in order to support the response to a major incident.

Where this is necessary, the General Manager (or, where they are unavailable, their deputy acting on their behalf) will be responsible for direct liaison with commissioners in order to agree to the input required by KGPC. The degree to which KGPC staff will contribute to the response to a major incident will be agreed with careful consideration of the impact on the provision of KGPC services, and it will be for the General Manager (or deputy) to decide which services will take priority.

### **Medical Support at Rest, Evacuation and Survivor Centres**

In the NHS Guidance on Major Incidents, Primary Care organisations are identified as having a responsibility to provide medical support to Humanitarian Assistance Centres (HACs), on request.

In addition, it has been recognised that when people are caught up in a major incident, whether directly involved in the incident or as a secondary impact of being evacuated, that they will arrive at the centre without their medication. In these instances, KGPC may receive a request for GP support, to assist in the process of prescribing and supplying medications and providing further assessment and advice. Where this assistance is provided, staff supplied by KGPC will work to the SOP and guidance issued by the HAC co-ordinating team.

## Appendix A

	Name of supplier / contact	Contact number	Our Account No.
Software Supplier	EMIS	08451222333	28476
Hardware Supplier	Your Healthcare / IT helpdesk	08448944044	
Telecommunications	VTSL	0333 405 0000	
NHS England – South London Team		NHS England – South London Team Southside 105 Victoria Street London SW1E 6QT  For general enquiries <a href="mailto:nhs.cb.lon-sth-pcc@nhs.net">nhs.cb.lon-sth- PCC@nhs.net</a> <b>020 7932 1979</b>	H84061
Southwest London CCG		020 3941 9917	
Insurance Company	Chubb Ignite (policy number UKDAO050526118)	020 7173 7000	
<b>Key staff members</b>			
Penny Williams	General Manager	07812 079 191	
Anthony Hughes	Board Chair (Registered Manager)	07788 415 560	
Ann Cox	Deputy General Manager	07801 057 821	
Chris Warren	IT Manager	07533 789 337	
Marguerite McGrath	HR Manager	07875 046 144	
Laura Langton	Extended Hours Manager	07712 654 150	
Natalie Cosgrove	Extended Hours Administrator	07717 206 449	
Liz Klein	GPwER Administrator	07824 705 609	
Nick Cornish	KEC Supervisor	07951 928 299	
Nicole Lentini	Minor Illness Receptionist	07368 208 505	

Appendix B



Kingston Health Centre - BUSINESS CONTINUITY  
PATIENT CONSULTATION TEMPLATE

Clinician:  Signature:

Patient Surname:  Forename:  DOB:

Date:  Time seen:  Duration:

Presenting problem

Advice Given

Medication issued

Drug:	Quantity:	Dose:
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Serial number of FP10 prescription issued:

Follow Up? Yes  No  If yes, when?

Date consultation entered onto EMIS and sent to registered GP:

Name:

Signature:

Please continue overleaf as necessary.....

## Appendix C

### Staff cancellation plan Extended Access and KEC Services

#### GPs

##### Cancellation in advance (4 days or more)

In the event of a GP cancelling a session, the Service Manager will send out an email to all other GPs working in the service via RotaMaster advertising the shift.

##### Cancellation at short notice (3 days or less)

A message will be sent out to all GPs working in the service via RotaMaster and via email advertising the shift as soon as the cancellation comes in. Regular GPs who are flexible and help out when short staffed will also be contacted by phone (list of contact details of regular GPs listed below).

##### Cancellation on the day (weekdays)

Where a GP cancels their evening session on the day (e.g. due to sickness), efforts will be made to find a replacement (using the process above). A block will be issued to the EMIS booking system for appointments at the site in question until a replacement can be found. Where no replacement can be found, the service will be cancelled. Any patients already booked into the service will have their appointment transferred to an alternative service, and the patient will be informed of the change.

Where a GP cancels their KEC session on the day (or with very short notice on the previous day), the KEC supervisor will contact GPs on the list of regular GPs (listed below). Where no replacement can be found, the KEC supervisor will contact local practices to ask whether they can accommodate a student for the day, and students will be redeployed to any practices that agree. Where no alternative placement can be found, students will be instructed to undertake private study using the IPL resources on the online student portal.

##### Cancellation on the day (weekends)

The oncall manager should be contacted by the GP who is cancelling the shift.

The manager will call and inform receptionist on duty, who will put the EMIS session on hold. A text message via RotaMaster will be sent to check availability of all GPs. This should have the on-call manager's name and contact details on.

- ❖ If cover cannot be arranged, the following should take place for each site:

#### **Kingston Health Centre**

##### Where patients are being routinely seen face to face:

If the Saturday morning GP cancels, the building will remain open for other services to run and for patients to be able to walk in and book appointments in the service.

Where consultations are being carried-out remotely:



If the Saturday morning GP cancels, the building will remain open for other services to run and for receptionists to take phone calls (booking patients into appointments at other Extended Hours sites).

If the afternoon GP cancels, the building will close at 3pm with the receptionist on site working until 5pm. There will be a sign on the door to inform patients along with the contact details to allow them to book an appointment. Any patients already booked will need to be contacted and moved to other hub sites.

### **Surbiton Health Centre**

Receptionists will stay on site until 8pm to answer phones and deal with any patients who walk in. Staff will continue to book appointments at other Hub sites. Any patients already booked will need to be contacted and moved to other hub sites. Doors will be locked – VTSL should be called and phones switched to closed message where patients are informed to call 111.

### **Merritt Medical Centre**

Receptionists will not be required to work until 2pm. They can leave at 11am to allow for any walk-in patients to be redirected and for any pre-booked patents to be rescheduled. The building will close after the WAC staff leave. There will be a sign on the door to inform patients along with the service contact details to book an appointment.

### **Holmwood Corner Surgery**

Receptionists will not be required to work until 2pm. They can leave at 11am to allow for any walk-in patients to be redirected and for any pre-booked patents to be rescheduled. The building will close after the WAC staff leave. There will be a sign on the door to inform patients along with the service contact details to book an appointment.

### **Receptionists**

The on-call manager will send out urgent message via whatsapp groups to find replacement receptionist. If no alternative cover can be arranged the on-call manager will cover.

<b>GPs - Extended Access</b>				
Adel	Kartas	07917 106 661	<a href="mailto:adel.kartas@nhs.net">adel.kartas@nhs.net</a>	
Ashish	Paul	07722 189 069	<a href="mailto:apaul@nhs.net">apaul@nhs.net</a>	
Ban	Ratti	07939 136 427	<a href="mailto:ban@kochhars.com">ban@kochhars.com</a>	
Brankica	Polomcic	07913 118 214	<a href="mailto:branka@pmethods.com">branka@pmethods.com</a>	
Chris	Nagy	07789 503 771	<a href="mailto:chrisjamesnagy@gmail.com">chrisjamesnagy@gmail.com</a>	
Christopher	Niranjan	07939 586 675	<a href="mailto:christopher.niranjan@nhs.net">christopher.niranjan@nhs.net</a>	
Ian	Monk	07904 125 905	<a href="mailto:ian.monk@doctors.org.uk">ian.monk@doctors.org.uk</a>	
James	Kabza	07981 117 665	<a href="mailto:jameskabza@nhs.net">jameskabza@nhs.net</a>	
Jenny	Simper	07515 432	<a href="mailto:jennysimper@doctors.org.uk">jennysimper@doctors.org.uk</a>	







		981		
Kirstin	Schmidt	07792 186 360	<a href="mailto:kirstydattaschmidt@gmail.com">kirstydattaschmidt@gmail.com</a>	
Laura	Pollock	07971 163 346	<a href="mailto:laura.pollock@doctors.org.uk">laura.pollock@doctors.org.uk</a>	
Liam	O'Driscoll	07724 211 657	<a href="mailto:liam.o'driscoll@nhs.net">liam.o'driscoll@nhs.net</a>	
Lakshman	Jayanthan	07506 686 233	<a href="mailto:lakshman.jayanthan@nhs.net">lakshman.jayanthan@nhs.net</a>	<a href="mailto:lakshmanjayanthan@gmail.com">lakshmanjayanthan@gmail.com</a>
Manotheethan	Jegasothy	07973 303 002	<a href="mailto:manotheethan@yahoo.com">manotheethan@yahoo.com</a>	
Mary	Lourdusamy	07944 344 079	<a href="mailto:info@doctormary.uk">info@doctormary.uk</a>	Currently not doing clinics
Matthew	Beddoe	07855 271 348	<a href="mailto:matthew.beddoe@nhs.net">matthew.beddoe@nhs.net</a>	
Meera	Gowripalan n	07739 150 102	<a href="mailto:meera.gowripalann@nhs.net">meera.gowripalann@nhs.net</a>	
Mena	Jegatheesan	07837 076 480	<a href="mailto:m.jegatheesan@nhs.net">m.jegatheesan@nhs.net</a>	
Mike	Forsythe	07399 058 539	<a href="mailto:mikeforsythe1911@gmail.com">mikeforsythe1911@gmail.com</a>	
Miriam	Wenzel	07952 588 370	<a href="mailto:miriam_wenzel@hotmail.com">miriam_wenzel@hotmail.com</a>	
Mobin	Wajeed	07852 553 334	<a href="mailto:mobin_dr@yahoo.com">mobin_dr@yahoo.com</a>	
Muru	Jegasothy	07790 905 959	<a href="mailto:jega1@hotmail.co.uk">jega1@hotmail.co.uk</a>	Currently not doing clinics
Mussadiq Towfiq	Ahmed	07962 397 993	<a href="mailto:musaddiq.ahmed@nhs.net">musaddiq.ahmed@nhs.net</a>	
Sally	Monk	07946 760 278	<a href="mailto:sally.monk@nhs.net">sally.monk@nhs.net</a>	
Sanjay	Kumar	07921 627 861	<a href="mailto:drsanjaykumar1375@gmail.com">drsanjaykumar1375@gmail.com</a>	
Sathya	Ravel	07770 360 652	<a href="mailto:sathya.ravel@nhs.net">sathya.ravel@nhs.net</a>	
Shama	Naz	07969 391 959	<a href="mailto:shama.nazgp@gmail.com">shama.nazgp@gmail.com</a>	
Shwan	Beck	07865 686 663	<a href="mailto:shwanbeck@nhs.net">shwanbeck@nhs.net</a>	
Surina	Chibber	07960 274 221	<a href="mailto:s.chibber@nhs.net">s.chibber@nhs.net</a>	
Tamsin Marie	Simpkins	07853 243 130	<a href="mailto:tamsin.simpkins@nhs.net">tamsin.simpkins@nhs.net</a>	
Thiviya	Selvarajah	07853 180 052	<a href="mailto:thiviya.kugathason@nhs.net">thiviya.kugathason@nhs.net</a>	<a href="mailto:thiviya.rajah@gmail.com">thiviya.rajah@gmail.com</a>
Yasmin	Weeks	07976 824 646	<a href="mailto:yasmine.weeks@icloud.com">yasmine.weeks@icloud.com</a>	
Roselin	Boramakot	07930 311 880	<a href="mailto:roselin.boramakot@nhs.net">roselin.boramakot@nhs.net</a>	
<b>GPs - Urgent Treatment Centre (UTC) - Kingston Hospital</b>				
Ban	Ratti	07939 136 427	<a href="mailto:ban@kochhars.com">ban@kochhars.com</a>	

Hannah	Harris	07932 666 556	<a href="mailto:hannahharris@doctors.org.uk">hannahharris@doctors.org.uk</a>	
Neeraj	Gurjal	07769 967 700	<a href="mailto:neerajgurjal@nhs.net">neerajgurjal@nhs.net</a>	
Ashish	Paul	07722 189 069	<a href="mailto:apaul@nhs.net">apaul@nhs.net</a>	
Mobin	Wajeed	07852 553 334	<a href="mailto:mobin_dr@yahoo.com">mobin_dr@yahoo.com</a>	
Jenny	Simper	07515 432 981	<a href="mailto:jennysimper@doctors.org.uk">jennysimper@doctors.org.uk</a>	
Thiviya	Selvarajah	07853 180 052	<a href="mailto:thiviya.kugathason@nhs.net">thiviya.kugathason@nhs.net</a>	<a href="mailto:thiviya.rajah@gmail.com">thiviya.rajah@gmail.com</a>
Lakshman	Jayanthan	07506 686 233	<a href="mailto:lakshman.jayanthan@nhs.net">lakshman.jayanthan@nhs.net</a>	<a href="mailto:lakshmanjayanthan@gmail.com">lakshmanjayanthan@gmail.com</a>

<b>Receptionists</b>				
Dawn	Nicholson	07711 513 046	<a href="mailto:dawn.nicholson@nhs.net">dawn.nicholson@nhs.net</a>	Merritt Only
Gek(Rose)	Manwaring	07396 669 616	<a href="mailto:rose.manwaring@nhs.net">rose.manwaring@nhs.net</a>	Surbiton Only
Gemma	Symonds	07821 680 728	<a href="mailto:g.symonds@nhs.net">g.symonds@nhs.net</a>	Merritt Only
Gemma	Downs	07532 475 539	<a href="mailto:g.downs@hotmail.co.uk">g.downs@hotmail.co.uk</a>	Surbiton Only
Georgina	Lucas	07985 745 432	<a href="mailto:glucas97@outlook.com">glucas97@outlook.com</a>	Not currently working
Jane	Haynes	07808 700 120	<a href="mailto:jane.haynes5@nhs.net">jane.haynes5@nhs.net</a>	Merritt Only
Jordan	Bussey	07712 654 150	<a href="mailto:jordan.bussey@nhs.net">jordan.bussey@nhs.net</a>	KHC/Surbiton/Merritt
Katie	Taylor	07905 046 278	<a href="mailto:katietaaylor128@gmail.com">katietaaylor128@gmail.com</a>	Not working whilst Minor Illness is running
Karina	Wills	07552 018 837	<a href="mailto:karina.wills1@nhs.net">karina.wills1@nhs.net</a>	Surbiton Only
Lucy	Onslow	07534 028 382	<a href="mailto:lucy.onslow@nhs.net">lucy.onslow@nhs.net</a>	KHC/Surbiton
Nicola	Graham	07871 431 245	<a href="mailto:nicola.graham10@nhs.net">nicola.graham10@nhs.net</a>	KHC Only
Patricia	Sell	07985 243 834	<a href="mailto:patriciasell3@gmail.com">patriciasell3@gmail.com</a>	Surbiton Only
Stephanie	Campbell	07787 562 712	<a href="mailto:stephanie.campbell1@nhs.net">stephanie.campbell1@nhs.net</a>	KHC/Surbiton/Merritt
Suzanne	Clarke	07969 509 799	<a href="mailto:suzanne.clarke6@nhs.net">suzanne.clarke6@nhs.net</a>	Merritt Only
Tracy	Patterson	07885 797 945	<a href="mailto:keithrobert_day@yahoo.co.uk">keithrobert_day@yahoo.co.uk</a>	Surbiton Only
Valerie	Lucas	07933 125 666	<a href="mailto:vlucas63@outlook.com">vlucas63@outlook.com</a>	Surbiton Only
Evie	Kelly	07774 300 130	<a href="mailto:evie.kelly1@nhs.net">evie.kelly1@nhs.net</a>	Holmwood Only
Ann	Molloy	07986 968 947	<a href="mailto:ann.molloy@nhs.net">ann.molloy@nhs.net</a>	Holmwood Only
Linda	Fitzgerald	07732 493 462	<a href="mailto:linda.fitzgerald5@nhs.net">linda.fitzgerald5@nhs.net</a>	Holmwood Only
Karen	Pearce	07999 169 545	<a href="mailto:k.pearce1@nhs.net">k.pearce1@nhs.net</a>	Holmwood Only
Janie	Whitfield	07929 094 704	<a href="mailto:janie.whitfield@nhs.net">janie.whitfield@nhs.net</a>	Holmwood Only
Helen	Sheridan	07941 573 494	<a href="mailto:helen.sheridan2@nhs.net">helen.sheridan2@nhs.net</a>	Holmwood Only
Diane	Cahill	07968 588 810	<a href="mailto:diane.cahill@nhs.net">diane.cahill@nhs.net</a>	Holmwood Only
Amina	Bajwa	07957 385 170	<a href="mailto:amina.bajwa1@nhs.net">amina.bajwa1@nhs.net</a>	Holmwood Only
Nicola	Murdoch	07505 764 713	<a href="mailto:nicola.murdoch@nhs.net">nicola.murdoch@nhs.net</a>	Surbiton Only
Emma	Chambers	07841 450 677	-	

## Appendix D

Site-specific business continuity plans:

Surbiton Health Centre	  <b>Emergency-Business Continuity Plan SH</b> Tenant Handbook Issue date August 21
Kingston Health Centre	 2018 Disaster Recovery Plan - KHC.
Merritt Medical Centre	 Business Continuity Planning 2021 Merri
Holmwood Corner	 Business_Continuity_Plan_2020.docx
The Village	 Village Business Continuity and Disa

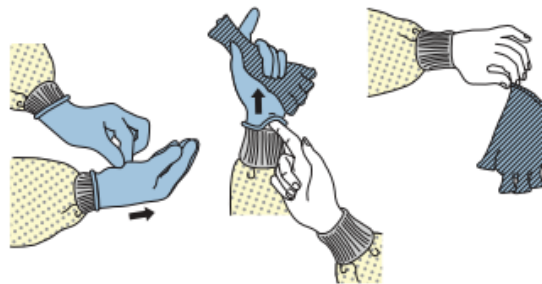
## Appendix E

### HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

#### 1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in an infectious\* waste container



#### 2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in an infectious\* waste container



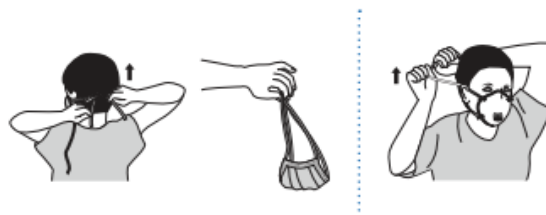
#### 3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in an infectious\* waste container



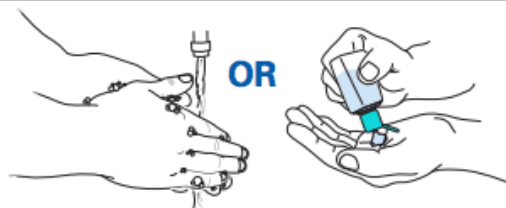
#### 4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in an infectious\* waste container



#### 5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE

\* An infectious waste container is used to dispose of PPE that is potentially contaminated with Ebola virus.



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE**



# The Right Way to Wash Your Hands



**Wet hands under running water**



**Apply soap and rub palms together**



**Spread the soap lather over the backs of hands**



**Make sure soap gets in between fingers**



**Grip fingers on each hand**



**Make sure to clean thumbs**



**Press fingertips into palm of each hand**



**Dry thoroughly with clean towel or paper towel**