

Contingency Policy

What do we mean by Contingency?

We mean here a set of circumstances including emergencies which may occur and as a result Deafblind Scotland would take steps as a Service Provider to maintain a Guide/Communicator Service to deafblind people.

Policy Statement

Deafblind Scotland exists to work with and for deafblind people in Scotland. Deafblind Scotland is committed to a high standard of service delivery to deafblind people and is striving to improve services to deafblind people, including Deafblind Scotland's own Guide/Communicator Service. The Guide/Communicator Service is underpinned by the Guide/Communicator **Code of Practice**, and is further characterised by its flexibility.

Guide/Communicator Service

All attempts are made to deliver assignments of the Guide/Communicator Service as and when these are booked by and for deafblind people, friends, family or advocates on their behalf. All Service-users receive a Guide/Communicator Service Information Pack outlining the commitment by Deafblind Scotland to deafblind people. Within this is contained a protocol for booking Guide/Communicators; it is explained that last minute bookings are difficult to organise because of prior scheduling of Guide/Communicators who are a sizeable but still limited workforce. Deafblind Scotland will aim to cover medical assignments first, as Medical appointments are viewed generally as a priority.

Where a Guide/Communicator is unable to fulfil an assignment the office will aim to cover this assignment with another Guide/Communicator, and so on until the assignment may be covered. Where this is unsuccessful, Deafblind Scotland may invoke the policy and the flexibility of utilising office staff as Guide/Communicators. All office staff undergo training in Communication and Guiding Skills to equip them with the knowledge and practical skills in working with deafblind people. This provides a second line Guide Communication workforce should it need to be deployed.

The Guide/Communicator Service strives to cover all booked assignments where possible. Occasionally it will occur that this may not be possible; in this instance Deafblind Scotland may try to re-schedule the appointment.

Holiday Contingencies

On public holidays when there is an abridged service, priority is given to:

- Those deafblind people who are most vulnerable, living alone. There is a 'most vulnerable' list based on those living alone and with complex needs in relation to health or communication.
- Medical appointments

- Other emergencies which may occur

When the office is closed and there is a problem with the service, or in the event of the guide/communicator not having arrived, the service-user has an out of hours number to contact. For other emergencies the service-user should contact out of hours social work or the emergency services.

Emergency Contingencies

In the event of a severe shortage of Guide/Communicators to deliver services Deafblind Scotland will adopt a utilitarian approach of supporting as many deafblind people as possible with an abridged number of hours as opposed to providing a normal level of hours to just a few. However those most vulnerable will be prioritised.

Infectious Diseases

In the event of an outbreak of an infectious disease Deafblind Scotland will take full advice from appropriate Health sources and where advised deliver an abridged service until matters improve accordingly again prioritising those most vulnerable. See (Appendix 1) contingency measures.

Petrol Shortages

During the petrol strike in 2000, Deafblind Scotland procured recognition from Social Work that as deafblind people are especially vulnerable and therefore Guide/Communicators were essential car users to ensure a curtailed service to some deafblind people.

The Guide/Communicator Service monitors individual contingencies as and when these arise, and lessons from and solutions to such events discussed within the service. Deafblind Scotland generally would monitor other contingencies and work with Social Work and other emergency services to ensure that the needs of deafblind people could be best met during such events. Resources would be shared as required and expectations that local authorities and NHS would ensure ready access to specialist resources such as PPE. Steps would be taking to request this support from public bodies who fund the service.

Deafblind Scotland Contingency Arrangements

Fire/evacuation

Deafblind service-users in the community

In the event of a fire/evacuation, Guide/communicators whilst escorting deafblind service-users in the community shall follow the fire/evacuation advice and procedure of the relevant host venue, e.g. Colleges, hospitals, shops, residential home or public transport.

In the event of a fire in the deafblind person's own home, where there is unlikely to be a formal procedure, the first priority must be to get everybody out safely. Particular attention must be paid to occupants with disabilities and every assistance given in order to facilitate a quick and safe exit.

The Guide/communicator will contact emergency services where this has not been already done, and follow the procedure and advice of these upon arrival.

It is the Guide/communicator's responsibility to maintain their own safety. However, if it is reasonably feasible to maintain basic safety of the deafblind person, then this should be carried out whilst ensuring no jeopardy to himself or herself or the service-user.

Whilst supporting a deafblind service-user within Deafblind Scotland premises, the following is relevant:

Fire Safety equipment will be regularly tested and maintained, and records kept.

Fire evacuation procedures will be carried out annually and details recorded.

Details of fire risk assessments, which take into account deafblind persons, will be available locally.

In the event of fire, all buildings (offices/shops/etc) will be immediately evacuated, and a staff member will dial 999

It will be the responsibility of the Fire Warden to ensure that the area has been completely evacuated.

All staff and visitors should assemble at the assembly point indicated on the fire regulations notice.

It will be the responsibility of the Fire Warden to ensure that all staff and visitors have been accounted for.

Fire exits and escape routes will be kept clear at all times.

FIRE PROCEDURES – MAIN OFFICE (1 Neasham Drive)

In the event of a fire the fire wardens will activate the alarm (if it hasn't been already activated by another member of staff. All staff will be issued at Induction Fire Emergency Plan for their perusal.

The first priority must be to get everybody out safely. Particular attention must be paid to disabled occupants and every assistance given in order to facilitate a quick and safe exit.

Fire escape routes are detailed below and everyone should leave the premises in an orderly manner by the quickest possible route. Do not take time to collect personal belongings.

On leaving the premises, you should gather at the Assembly Point, which is indicated below.

The Fire Brigade should be summoned, by dialling 999 as soon as a fire is detected. It does not matter whether the fire has apparently been put out.

If you think anyone is still on the premises you should inform the Fire Brigade immediately. The fire alarm is only to be reset by a member of the fire brigade, the alarm can be silenced by a fire warden if deemed appropriate. No attempt should be made to fight the fire unless it is safe to do so.

The premises should not be re-entered until it has been declared safe to do so.

FIRE ESCAPE ROUTES:

The recognised escape routes are through the main door or through the two fire escape doors on the east of the building in the stairwells. Always use the stairs in an emergency, do not use the lift.

Those unable to use the stairs should wait for assistance at the Fire Refuge Points located at the top of each stairwell.

The route to the fire escapes are marked with illuminated green signs that hang from the ceiling. All signs have an arrow indicating the direction of the quickest exit route. Each fire escape door has a green 'push bar to open' sign to facilitate a quick and easy exit.

If exiting through the front door push the green emergency exit button on the right side of the corridor wall to open the security doors.

Personal Emergency Evacuation Plans

Staff who would find it difficult to exit the building safely during an emergency will meet with their manager to complete an 'Emergency Evacuation Assessment'. Then if required a 'Personal

Emergency Evacuation Plan' will be put in place for each individual.

ASSEMBLY POINT:

Bottom of the main carpark

LOCATION OF FIRE EXTINGUISHERS:

Upstairs

Main Office Kitchen – CO2

Back Stairwell – Foam Spray and Carbon Dioxide

Front Stairwell – Foam Spray and Carbon Dioxide

Downstairs

Main Entrance – Foam Spray and Carbon Dioxide

Kitchen – Powder and Fire Blanket

Front Stairwell (beside fire exit) – Water and Carbon Dioxide

Back Stairwell (beside fire exit) – Water and Carbon Dioxide

Fire Evacuation – Charity Shop

If an employee or volunteer discovers a fire they should immediately activate the nearest fire alarm or alert the fire. Fire warden will then start to evacuate the building.

Fire Wardens

Current fire warden:
Sandra McNab

In the event of a fire the fire warden will activate the alarm or alert the employees/ volunteers and customers (if it hasn't already been activated), ensure that the building is evacuated safely and call the fire brigade/emergency services using a safe line.

If it is safe to do so a fire warden may attempt to extinguish a fire.

The fire warden will collect the staff and volunteer sign in sheets and take a roll call once safely outside and gathered at the Fire Assembly Point.

The fire warden is also responsible for liaising with the fire brigade and notifying them of any missing persons.

Fire Alarms

N/A

Fire Escape Routes

The recognised escape routes are through the main shop door or through the back door.

Assembly Point

On exiting the building everyone should assemble at the Fire Assembly Point at the corner of Freeland's Place (outside Thai Café)

LOCATION OF FIRE EXTINGUISHERS

Front Shop beside the till – Foam Spray

Back Shop beside the recycle cage – Foam Spray and
Carbon Dioxide

Back Shop - Kitchen – Fire Blanket

In the event of a service-user becoming injured/requiring hospital admission:

In the event of a deafblind service-user becoming injured/requiring hospital admission, the guide/communicator shall contact the appropriate emergency services or if able to do so and the injury is minor, transport the deafblind person to hospital.

The guide/communicator shall inform their line manager as soon as this becomes opportune.

The guide/communicator will remain with the deafblind service-user to provide the deafblind service-user with appropriate communication and information support whilst in the medical setting, until otherwise advised by their line manager.

The guide/communicator will advise medical staff on the most appropriate communication method any information and communicate with hospital staff if appropriate.

The guide/communicator will communicate any relevant information to member's family, if this is the service-user's expressed wish.

The guide/communicator will take note of visiting hours and other relevant information, including when the deafblind service-user next requires communication and information support from the service.

The guide/communicator will keep their line manager informed of any relevant details for appropriate advice in order to support the deafblind person.

Cessation of the care service:

It is Deafblind Scotland's policy to procure a Guide/communicator service for all those deafblind people who require and wish one. Deafblind Scotland has rarely if ever had a service withdrawn from a service-user.

Occasionally a funding agency will no longer fund a service, in which case, Deafblind Scotland would encourage the funding agency to write to the service-user to explain the reasons for the termination of this funding.

Deafblind Scotland would monitor the situation, and seek to re-instate the service if this is deemed necessary, by contacting the funding agency, or seeking alternative methods of funding this service.

Deafblind Scotland would remind Local Authorities of their duty of care responsibilities where appropriate.

In the event of persistent and sustained poor behaviour by the deafblind service-user Deafblind Scotland may consider terminating a service. Poor behaviour would include:

- Inappropriate touching
- Breakdown of the working relationship with more than one Guide/communicator
- Refusing to co-operate with safe working practices
- Physically threatening behaviour

In the longer term, a service-user may be in need of more comprehensive medical and social services support, of which Deafblind Scotland's Guide/communicator service could only play a component support role.

In such an instance it may be deemed appropriate that the service-user would still be provided with communication and information support whilst the individual was in a period of convalescence, advanced specialist support or treatment.

If a service-user was to go out of care service and not return

- Deafblind Scotland's client group are dual sensory impaired adults living in their own homes in the community. As such they are responsible adults and would not be deemed to have left Deafblind Scotland's care service, rather their own homes. However some service users are more vulnerable than others. In such instances Deafblind Scotland would co-operate in any way possible with all relevant social and policing agencies to help support the location of the individual and to maintain the deafblind individual's safety and security, where this was the relevant issue.
- It is not Deafblind Scotland's policy to maintain profiles and photographs of its deafblind membership.

(Appendix 1)

| | <u>Infection diseases.</u> | <u>Impact</u> | <u>Preventative/reactive measures</u> |
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| 1. | <p>Inability to deliver contracted services due to sickness as a result of pandemics such as Coronavirus. Of a level between 20-50%.</p> | <p>Vulnerable adults could be left without access to vital supports</p> | <p>Where a guide/communicator is unable to fulfil an assignment the office will attempt to cover this assignment with another guide/communicator, until the assignment is covered. Where this is unsuccessful, DbS may invoke the policy of utilising office staff as guide/communicators. All staff undergo training in Communication and Guiding Skills to equip them with the knowledge and practical skills in working with deafblind people.</p> <p>Where a Service User was confirmed as having an Infectious Disease or was symptomatic if testing is unavailable where containment and isolation is required, service provision will be reviewed and steps taken to ensure the protection of both the Service User and members of Staff. NHS guidance would be applied including use of PPE and periods of self isolation supported. Advice will be sought from appropriately trained professionals working in Infection Control. Service would only be withdrawn for the safety of staff and other service users if service user was deemed to be safely in the care of appropriate and adequate formal or informal carers or was being taken into a hospital setting. This situation would be kept under regular review and every effort would be made to ensure those with most complex communication needs continued to have communication support as long as was considered safe or reasonable.</p> <p>In the event of a pandemic occurring reducing staff availability by 20% - 50%. DbS will undertake measures of ensuring services to our most vulnerable adults are prioritised. Thereafter, all Service Users immediate support needs will be prioritised to meeting essential needs for daily living, for example, shopping, housing repairs, medical appointments and medication. Service would be provided in-line with social distancing and self-isolation Government Guidance. Service staff will not support service users to breach this. In the case where this occurs and the health and safety of an individual is of concern then this will be deemed a reportable incident. The service user will be advised that this may be the case.</p> |

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| | | | <p>DbS has procedures in place which allow authorised staff to access all IT systems and database including care management system remotely.</p> <p>DbS has agreed processes where calls will be diverted off site as necessary if required to ensure service continuity.</p> <p>A limited daily phone and email line will be made available to service users who are in self isolation to enable social and emotional support is available to give service users reassurance.</p> <p>Frontline staff will have access to line managers and thereafter senior managers at all times during working outs for support and advice.</p> <p>All staff must report sickness absence in a timely manner no later than one hour before service delivery time to support reallocation of work.</p> |
| 2. | Service Delivery during holiday periods | Vulnerable adults could be left without access to vital supports | <p>On public holidays when there is an abridged service, priority is given to:</p> <p>Those deafblind people who are most vulnerable, living alone; medical appointments; Other emergencies which may occur.</p> <p>When the office is closed and there is a problem with the service, or in the event of the guide/communicator not having arrived, the service-user has an out of hours number to contact. For other emergencies the service-user should contact out of hours social work or the emergency services.</p> <p>DbS holiday year runs from January – December, staff are required to follow Terms & Conditions for requesting annual leave and ensure holidays are spread evenly throughout the year. Monitoring processes are in place to ensure no influx of holidays at a particular time. Further measures include reduced activities during peak holiday periods and where necessary DbS may invoke the policy of utilising office staff as guide/communicators.</p> |

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| | | | If necessary, and in line with parameters of employment law, DbS would uphold their right to cancel annual leave in exceptional circumstances such as a pandemic. |
| 3. | Infectious diseases | Potential of cross contamination and risk of illness to vulnerable/sick or elderly adults and the workforce. | <p>In the event of an outbreak of an infectious disease DbS will take full advice from appropriate Health sources and follow all NHS guidance and where advised deliver an abridged service focusing on most vulnerable until matters improve accordingly.</p> <p>All members of Staff will be updated with advice and guidance from appropriate Health sources including Health Protection Scotland and reissued with DbS Infection Disease Policy. Daily contact will be maintained with all frontline staff who are lone working and as above access provided to a line managers and senior manager thereafter at all times during working hours.</p> |
| | Winter Flu Planning | Impact | Preventative/reactive measures |
| 1. | Potential outbreak of Winter Flu Viruses at Training Centre amongst employees/guide communicators. | <p>Reputational impact/service closure. So far as is reasonably practicable under the Health and Safety at Work Act 1974 ensuring a safe working environment for all employees in line with Scottish Government restrictions and guidance and legal obligations.</p> <p>Potential cross contamination between employees/member s/service users.</p> | <p>Employees are fully updated with relevant Policy & Procedures/operational Risk Assessments in line with Government Guidelines in accordance with infectious diseases. Levels/measures in place to help eliminate outbreak of Winter Flu. Limited opening of centre by skeleton staff and Office based employees default to working from home to minimise cross contamination of infection between staff. Employees encouraged to obtain Flu Vaccination to maximise uptake of Scottish Governments flu vaccination programme for workers in Social Care environments.</p> <p>Suitable levels of stock and supply of Personal Protective equipment available at all times. All employees to use PPE appropriately and comply with relevant guidelines.</p> <p>Minimise employee movement between service users and implement use of staff</p> |

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| | | Operation and business risk increases. | <p>bubbles to ensure minimal disruption to services provided.</p> <p>Ensure employees do not undertake work if experiencing symptoms of a more serious infection such as a high temperature and obtain Covid 19 testing if appropriate.</p> <p>Ensure that employees who are required to self isolate or experience winter full symptoms are not financially penalised.</p> |
| 2. | Potential Outbreak of Winter Flu viruses. Service User/membership | <p>Inability to deliver contracted services due to sickness.</p> <p>Vulnerable adults left without access to vital support.</p> <p>Potential of cross contamination.</p> <p>Reputational impact/service closure.</p> | <p>Full information and advice in accessible formats from appropriate Health and Government Sources following up to date guidance.</p> <p>Comply with regulatory bodies ie Care Inspectorate and Scottish Social Services Council (SSSC) on dealing and reporting any incidents as required.</p> <p>Suitable levels of stock and supply of Personal Protective equipment available at all times. All employees use PPE appropriately and comply with relevant guidance.</p> <p>Employees encouraged to obtain Flu Vaccination to maximise uptake of Scottish Governments flu vaccination programme for workers in Social Care environments.</p> <p>Minimise employee movement between service users and implement use of staff bubbles to ensure minimal disruption to services provided.</p> <p>Ensure employees do not undertake work if experiencing symptoms of a more serious infection such as a high temperature and obtain Covid 19 testing if appropriate.</p> |
| 3. | Potential Outbreak – Winter Flu Charity Shop | Reputational impact. So far as is reasonably practicable under the Health and Safety at Work Act 1974 ensuring a | Employees/volunteers are fully updated with relevant Policy & Procedures/operational Risk Assessments in line with Government Guidelines, in accordance with Covid-19 and infectious diseases. Levels/measures in place to help with elimination/engineering controls and administration controls |

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| | | <p>safe working environment for all employees/volunteers in line with COVID-19 and legal obligations.</p> <p>Potential cross contamination between employees/members of the public/volunteers specifically extremely vulnerable/shielding group.</p> <p>Operational and business risk increases.</p> | <p>whereby limiting the hazard/virus and the impact of an outbreak within the Charity Shop.</p> <p>Involvement of 3rd party charity retail association in line with Revolve – Zero Waste Scotland to support implementation of Infection Prevention and control measures.</p> <p>Employees and volunteers who are eligible are encourage to obtain Flu Vaccination to maximise uptake of vaccine.</p> |
| | Brexit Planning | Impact | Preventative/reactive measures |
| 1. | Brexit Planning | <p>Supplies of PPE</p> <p>Supply chain disruption of essential medication, food supplies, sensory impairment equipment and sundries (hearing aid batteries)</p> | <ul style="list-style-type: none"> • Maintain inventory of PPE supplies and weekly review of stocks • Order supplies well in advance • Ensure contingency stock of PPE is maintained • Utilise PPE Hubs for additional stock if required • DbS maintain vigilance to new information regarding issues with supply chains • Alert deafblind members of any issues identified regarding vital supplies • Support deafblind members to source supplies as necessary |