First Option Healthcare (in administration)

Guidance for commissioning organisations

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Summary

First Option Healthcare Limited went into administration on 9 November 2026. The administrators are now reviewing the business. By law, they must set out their proposals for its future within eight weeks of their appointment, which means by 4 January 2027, unless creditors or the court agree to extend this. With Christmas coming, commissioners may consider the need to make plans now to ensure that all clients' care continues uninterrupted.

This guide is for organisations who commission First Option Healthcare's services, or the services of other providers who may be facing a similar situation. We hope it helps to explain what administration means and what you might want to think about now. If it would be useful, we are also here to help.

Source: https://www.thegazette.co.uk/notice/5249940

This guide gives general information only. It is not legal advice. Commissioners should obtain their own legal and contractual advice before making any decision.

What administration means

Administration is a formal insolvency process under the Insolvency Act 1986. Licensed insolvency practitioners, the administrators, take control of the company from its directors. Their job is to rescue the business if they can, or else get the best result for creditors.

- **The administrators are in charge.** Decisions on contracts, staff and services now sit with them, not with First Option's managers. Contact about contracts, payments and records should go to the administrators.
- **Creditors are held back.** A legal moratorium stops most creditors from taking action. This gives the administrators time to stabilise the business.

- **Services may carry on.** Administrators often keep services running while they look for a buyer, but only while this is safe and can be paid for.
- **Staff contracts.** The administrators have 14 days from appointment to decide whether to keep ("adopt") staff contracts. For First Option, that period ends around 23 November 2026.
- **Proposals within 8 weeks.** The administrators must send their plan to creditors within 8 weeks of appointment, so by around 4 January 2027. Administration normally lasts up to 12 months unless it is extended.
- **CQC registration stays in place for now.** First Option is still the registered provider. CQC will watch quality and safety closely.

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The administrators must aim for one of three outcomes, in this order:

1. **Rescue the company** so it carries on trading.
2. **Sell the business,** or parts of it, to one or more buyers. This could include selling contracts or care packages in particular areas.
3. **Close the business** and sell its assets to repay creditors.

Who is responsible for clients' care

- **NHS-funded care (ICBs).** The ICB is still responsible for meeting each client's assessed needs, for example under the NHS Continuing Healthcare framework, whatever happens to the provider.
- **Council-funded and self-funded care (local authorities).** Under the Care Act 2014, an administrator's appointment counts as "business failure". If services stop because of it, the local authority has a temporary duty to meet the care needs of adults in its area. This includes people who pay for their own care.
- **Joint packages, personal health budgets and direct payments.** These need clear agreement on who leads. People who hold their own contract with First Option through a direct payment or personal health budget may need extra help to arrange other care.

Possible implications

The main priority is making sure care carries on smoothly for people with complex needs. Uncertainty can be unsettling for any team.

Who is affected	Possible implications
Clients	Possible changes to visits or carers, which can be unsettling for people with complex needs. Being moved to a new provider at short notice if services stop.
Families	Worry about what happens next. Families may step in to cover gaps, which can lead to carer strain. More contact with commissioners looking for answers.
Nursing and care teams	Understandable uncertainty about what happens next, including concerns about the security of their pay arrangements. Contracts may be kept by the administrators, moved to a buyer, or ended through redundancy. If the business, or part of it, is sold as a going concern, TUPE is likely to apply and staff move across on their current terms.
Office and coordination teams	The same uncertainty, including about pay. Coordinators, schedulers and clinical leads are central to rotas, care planning and communication with clients, so it is worth planning for any changes in these roles.
Commissioners	A duty to keep care going safely. Gaps in capacity across several packages at once. Contract questions, such as notice, termination and payment for care already given. Care records, risk assessments and equipment may need to be handed over. Close joint working on safeguarding.

Planning for the Christmas period

- Staff take more leave over the holidays, and cover can be harder to arrange.

- Commissioning, social work and provider office teams have fewer people on duty over the bank holidays (25 and 26 December, and 1 January).
- Winter pressure on hospitals makes reliable care at home especially important.
- Several organisations commission First Option, so planning together will help everyone.

Steps you may want to consider

Now

[ ] **Map every client.** List each First Option package with its care hours, clinical needs, risk level, location and funding route. Mark those at highest risk, such as people on ventilation, with tracheostomies, or who live alone.

[ ] **Check the contract.** Review clauses on insolvency, termination, step-in, payment and exit. Take legal advice before acting.

[ ] **Secure records.** Ensure care plans, risk assessments, medication records and clinical notes can be shared safely if care needs to be moved to another provider.

[ ] **Talk to clients and families.** Give them a named contact, clear and regular updates, and a number to call if a visit is missed.

[ ] **Work with partners.** Share information with CQC, local authorities, other ICBs that commission First Option, and local safeguarding teams, so that everyone gives the same message.

[ ] **Have preliminary conversations with other providers.** Find out who can take on packages at short notice, and agree how a handover would work.

Before Christmas

[ ] **Check staffing arrangements.** Ask the provider or administrators for an update on staffing through December, so that you can plan with confidence.

[ ] **Confirm holiday rotas.** Ask for the provider's rotas for the Christmas and New Year weeks and check that every high-risk visit is covered.

[ ] **Set up escalation over the holidays.** Agree an on-call contact in your organisation and with any back-up provider for the bank holidays.

[ ] **Agree back-up plans for each high-risk client.** Agree in advance who would provide care if it were ever needed, so that you can act quickly.

[ ] **Brief discharge teams.** Tell hospital discharge teams about the situation so they can take it into account when planning discharges.

How Superior Healthcare can support

We understand this is a worrying time for everyone who relies on First Option or works for it. Our priority is the same as yours: making sure clients stay safe and well cared for. If you need help, we are ready to give it. We already work with many of the same ICBs and councils, so we know your processes, clinical governance and reporting.

What we can offer

- **Rapid care needs assessment.** Our Nurse Managers can assess a client's needs at very short notice, so that a package can be taken on quickly and safely.
- **Emergency cover.** Short-term cover for missed or at-risk visits, including over Christmas and New Year.
- **Planned transfer of care packages.** A handover of chosen packages, led by our clinicians and agreed with you, the client and their family.
- **Continuity of carers.** Where a client's team transfers to us, including under TUPE, our People Team will carry out the checks and support each person through the move. Clients keep familiar faces, and skills stay in the local workforce.
- **Clinical assurance.** A full clinical review and risk assessment for each client before, or soon after, transfer. Care plans are updated and any training needs are met.
- **Support for families.** A named contact for each family and clear updates throughout.
- **Working with the administrators.** If it would help, we are happy to work with you and the administrators on whatever arrangements you decide on.

How a transfer would work

1. **Within 48 hours:** agree priorities with the commissioner and start emergency cover for the highest-risk clients.
2. **Week 1:** clinical review of each client to be transferred, and contact with families.
3. **Weeks 1 to 2:** recruit or transfer staff, then check competencies and complete any training.
4. **Weeks 2 to 4:** phased handover, with shadow shifts where needed, followed by reporting to the ICB.

Timescales will depend on how many packages there are and how complex they are, and will be agreed with each commissioner. Where it is absolutely needed, for example if a client's care is at immediate risk, we can speed up the transfer and agree a shorter timeline with you.

Our capacity and track record

- Superior Healthcare has been regulated to provide care at home services since 2006. We have supported hundreds of clients and their families over the last twenty years.
- We are already a trusted provider to many ICBs, local authorities, case managers and deputies as well as private clients and Personal Health Budget holders.
- CQC rating: Good
- Areas covered: Kent, London, Essex, Sussex, Surrey, Hampshire and neighbouring counties.

Cover over Christmas and New Year

- Clinical on-call: Superior Healthcare runs a 24-hour clinical on-call service, staffed by our own team of clinical managers, 365 days a year
- Office cover on bank holidays: Superior Healthcare employs a dedicated out-of-hours team, supported by our Senior Coordinators and Operations Managers

Contact us

We would welcome an early conversation with any commissioner affected, even if you have not made any decisions yet. Planning early gives the best chance of keeping care going without interruption.

Photo	Contact details
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