

CQC Emergency Support Framework Question Checklist

Assessment Area 1

Safe Care & Treatment

1.1 Had risks related to infection prevention and control, including in relation to Covid-19, been assessed and managed?	Completed Y/N
<ul style="list-style-type: none"> • Did you have a baseline to start with – current audits/standards? • Were infection control standards documented – such as cleaning schedules? • Was health protection guidance followed throughout? • Was the schedule 4 document used to guide the use of PPE? • Did you assess stock of PPE, ensuring you had access to what was needed? • How did you monitor the standards being followed, ensuring staff followed the guidance? • Did staff receive infection control training? • Were staff supported to barrier nurse people when required? • Was the cleaning schedule altered to show an increase in cleaning, including equipment? • Was a risk assessment put into place and regularly reviewed? • Were governance systems flexible, to ensure that audits adapted to current precautions? • Were people restricted from entering the service? • Were screening processes in place for staff. • How were agency staff screened and supported when in the service? 	
1.2 Were there sufficient quantities of the right equipment to help the Provider to manage the impact of Covid-19?	Completed Y/N
<ul style="list-style-type: none"> • Was an assessment carried out of what stock was in the service? • Was the schedule 4 guidance followed? • Were updates reviewed and implemented? • Were orders regularly made to obtain PPE, that followed the guidance set? • Were staff trained in the application of PPE? • Were links made to health protection and local commissioners regarding PPE stock. • Was there consideration for other equipment levels: <ol style="list-style-type: none"> 1. Cleaning equipment 2. Personal care equipment 3. Hoists/stand aids 4. Individual slide sheets/handling belts 	

1.3 Was the environment suitable to containing an outbreak?	Completed Y/N
<ul style="list-style-type: none"> • Was an assessment carried out to consider what precautions should be carried out within the environment? • Was this information added to a risk assessment? • Were families and visitors stopped from visiting the service? • Were handwashing facilities clearly marked and accessible? • Were people able to isolate? • Was consideration made for an isolation area, if needed? • Was consideration made for ensuring a reduction in group activities? 	
1.4 Were systems clear and accessible to staff, service users and any visitors to the service?	Completed Y/N
<ul style="list-style-type: none"> • Were service users given a clear explanation and information in a format that supported them? • Were service users clear (where possible) of why their friends and family were not visiting? • Were other formats of communication offered, such as the use of technology? • Were families, friends and visitors contacted and informed that the service was closed to external visitors and given a clear explanation? • Were staff kept up to date with developments? • Were staff provided with support and training? • As staff entered work, was there a documented screening process? • Were staff aware of when not to come to work and who they should inform? • Were observations carried out on service users and how frequently? • Was there a process in place to flag concerns to the medical team about deteriorating health? • Was there clear documentation of this? • Was information provided to people when updates happened? • Was this documented in the risk assessment? • Was clear PPE guidance made available? • Was personalised care considered in the way information was provided? • Was consideration made for people's capacity and how to support individuals who were unable to understand the impact of COVID-19? 	

1.5 Were medicines managed effectively?	Completed Y/N
<ul style="list-style-type: none"> • How were medication rounds reviewed and altered to support standards in the service? • Was PPE used effectively in the administration of medication? • Was a risk assessment implemented when two staff were needed to administer medication or medication had to be given invasively? • Were care plans update to show any changes that had been made? • Were you working closely with the doctor and pharmacy to ensure guidance is followed, such as the re-use of medication? • We're training processes reviewed and competencies carried out remotely or at a distance? • Were staff supported to administer medications from original packs? • Were medication audits completed to ensure standards were being met? 	
Had risk management systems been able to support the assessment of both existing and Covid-19 related risks?	Completed Y/N
<ul style="list-style-type: none"> • Have current risk assessments been reviewed and updated? • If these relate to specific people, have care plans been updated? • Has a COVID-19 risk assessment been put into place? • Have measured raised in the risk assessment been put into place? • Have risk assessments been shared with the staff team? 	

Assessment Area 2

Staffing Arrangements

2.1 Were there enough suitable staff to provide safe care and treatment in a dignified and respectful way during the Covid-19 pandemic?	Completed Y/N
<ul style="list-style-type: none"> • Prior to Covid-19 were you fully staffed? • What was your staff ratio and why? • Are you using a dependency tool to assist and guide this? • Did you adjust your staffing levels? • If yes, what adjustment and why? • Did you furlough any staff and why? • Have you had staff who must isolate for 12 weeks? • Have you had staff off work with symptoms of COVID-19? • Are return to work interviews carried out? • Is health protection guidance followed in practice regarding staffing/isolation of staff? • Were agency staff used? • If yes, how many, and what shifts did they cover? • What induction did agency staff have and how did you ensure they met the same standards as the services team? • Has the provider been supportive of increasing staffing numbers if needed? 	

2.2 Where there realistic and workable plans for managing staffing levels if the pandemic leads to shortfalls and emergencies?	Completed Y/N
<ul style="list-style-type: none"> • Does the risk assessment cover staffing and the impact on staff numbers? • Have any staff been able to work from home? • Have meetings been carried out remotely if needed? • What contingency plans have been put in place to plan for shortfalls? • Have you considered a long term planned if several staff are off work? • Have you considered: <ol style="list-style-type: none"> 1. Agency usage – using the same agency staff where possible 2. How to cover 1:1 care 3. Continuing to recruit staff? 4. Staffing for emergencies, such as taking a service user to hospital 5. Flexible approaches to shift patterns 6. Role changes – such as support staff stepping in to cover certain roles 	

Assessment Area 3

Protection from Abuse

3.1 Were people using the service being protected from abuse, neglect, and discrimination?	Completed Y/N
<ul style="list-style-type: none"> • What percentage of staff had completed their safeguarding training? • Was there evidence of staff understanding what safeguarding meant and who to report to? • Was information provided in different formats regarding raising a safeguarding? • Were spot checks and observations still carried out? • Were management audits still completed? • Was training kept up to date, using remote/online training? • Was any change made to the policy over this time? • If yes, was it shared with the staff team? • Was care provided still personalised, and considering of people's preferences and choices? • What impact was there on the safety of the service and did you do about this? • Were safeguarding alerts still made? • If yes, what were they regarding and what action was taken? 	

3.2 Had the provider been able to manage any safeguarding incidents or concerns during the pandemic?	Completed Y/N
<ul style="list-style-type: none"> • Where safeguarding alerts were made, was there documentation to show these were tracked and acted on? • Were incident forms completed? • If yes, were these reviewed and acted on? • Were actions learnt from in the service, and if so how? • Did you change the way concerns were raised, if yes how? • Did you consider the Accessible Information Standard, if yes, how? • Were there any increased trends noted? • If yes, were these acted on and changes embedded into practice? • Were you transparent and reporting to external agencies as and when required? • Were there any barriers and how did you overcome them? • Were safeguarding and CQC informed? 	

Assessment Area 4

Assurance Processes, monitoring and risk management

4.1 Had the provider been able to take action to protect the health, safety, and well-being of staff?	Completed Y/N
<ul style="list-style-type: none"> • Were staff screened on accessing work? • Were staff given guidance to follow about symptoms? • Were staff able to access testing? • What precautions were put in place to protect staff? • How was staff members mental health supported throughout this time? • Did staff have access to resources and were signposted to agencies that could offer support? • Did staff receive regular communication and updates? • Were staff provided with extra support if needed? • Was a senior member of the team on call at all times? • Was PPE available at all times, if not what did you do about it? • Were staff trained in: <ol style="list-style-type: none"> 1. How to apply PPE correctly 2. Handwashing techniques 3. Infection control 4. Barrier nursing 	

4.2 Had the provider been able to implement effective systems to monitor and react to the overall quality and safety of care?	Completed Y/N
<ul style="list-style-type: none"> • Were audits in place prior to COVID-19? • If yes, what audits were completed? • Did the audit process change? • If yes, how? • What extra audits were put into place and why? • What extra documentation, such as cleaning records were put into place and why? • Was an action plan carried out and actions completed? • How did the provider keep up to date with changes in guidance? • How did the provider obtain feedback and react to concerns? • Was the risk assessment updated regularly? • Was feedback taken on board and acted on? 	
4.3 Is the provider able to support staff to raise concerns during the pandemic?	Completed Y/N
<ul style="list-style-type: none"> • What reporting processes were in place? • Have these changed? If so how? • What access did staff have to the management team? • Did this include out of hours? • How were staff able to raise concerns day to day? • How did they get reassurance that concerns were taken on board? • Were they offered any external support? • How were they given feedback about the work they were doing now? • How were people that were not able to work supported? • How did up to date communication get shared with the whole team? 	
4.4 Had care and treatment provided to people been sufficiently recorded during the Covid-19 pandemic?	Completed Y/N
<ul style="list-style-type: none"> • Were care plans updated to reflect peoples care needs? • Were daily notes written and reviewed? • When external health professionals contacted the service and provided updates on service user care, were these acted on and documented? • Were service users risk assessments updated and did this information relate to the care plan? • Were service users' observations carried out, if not why? • If yes, how often and were these documented? • Were any changes made to MAR chart documentation and why? • For anyone moving into the service, was a preadmission assessment carried out? • Were care plan audits completed and what if anything did, they find? • Were gaps identified acted upon? 	

<ul style="list-style-type: none"> • For those with symptoms or diagnosed with COVID-19 what extra documentation was completed? • Were records shared when a service user was admitted to hospital? 	
4.5 Had the Provider been able to work effectively with the system partners when care and treatment is commissioned, shared or transferred?	Completed Y/N
<ul style="list-style-type: none"> • Did you have strong links with partners prior to COVID-19? • Did these develop, if so how? • Did you need to access any news links, if so who and why? • Did you feel that information was provided to you and how did you act on it? • How did you share information from the service to external agencies? • When someone was admitted to the service, was a preadmission assessment completed? • Were transfer documents received? • When someone was admitted to hospital was transfer information sent with them? • Were COVID-19 tests completed prior to discharge from hospital? • How was this risk assessed? • What actions were put into place to reduce the risk? • Were you able to keep external agencies up to date? 	

** Have notifications file to hand during the call and a summary of your up to date symptom and testing tracker (Contact helen@care4quality.co.uk if you need a copy of a symptom tracker)

** Ensure that your processes around care of a deceased are in line with the current government guidance <https://www.gov.uk/government/publications/covid-19-guidance-for-care-of-the-deceased/guidance-for-care-of-the-deceased-with-suspected-or-confirmed-coronavirus-covid-19#responders>

Call Notes:

