**CQC Emergency Support Framework Question Checklist**

**Assessment Area 1**

**Safe Care & Treatment**

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| **1.1 Had risks related to infection prevention and control, including in relation to Covid-19, been assessed and managed?** | **Completed Y/N** |
| * 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. **Were there sufficient quantities of the right equipment to help the Provider to manage the impact of Covid-19?** | **Completed Y/N** |
| * 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:  1. Cleaning equipment 2. Personal care equipment 3. Hoists/stand aids 4. Individual slide sheets/handling belts |  |
| * 1. **Was the environment suitable to containing an outbreak?** | **Completed Y/N** |
| * 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. **Were systems clear and accessible to staff, service users and any visitors to the service?** | **Completed Y/N** |
| * 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. **Were medicines managed effectively?** | **Completed Y/N** |
| * 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** |
| * 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**

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| **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** |
| * 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** |
| * 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:  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**

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| **3.1 Were people using the service being protected from abuse, neglect, and discrimination?** | **Completed Y/N** |
| * 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** |
| * 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**

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| **4.1 Had the provider been able to take action to protect the health, safety, and well-being of staff?** | **Completed**  **Y/N** |
| * 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:   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** |
| * 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** |
| * 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 reassure 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** |
| * 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? * 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** |
| * 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](mailto: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>

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| **Call Notes:** |