

Emergency support framework: discussion questions for adult social care services (May 2020)

The conversation with your inspector will focus on four areas, and the discussion prompts will help them to answer some questions to understand whether you need support with anything. Your inspector may not need to cover all the questions as things may already be clear, so you don't need to spend time preparing for them.

As the emergency situation changes, the questions for inspectors and the data indicators that we look at will evolve, so we will update them as needed.

1. Safe care and treatment

1.1 Had risks related to infection prevention and control, including in relation to COVID-19, been assessed and managed?

- How do you keep up to date with current Infection Prevention and Control (IPC) guidance/practices?
- Have your existing IPC arrangements been reviewed and amended in response to the pandemic – have you needed to make any changes?
- How are changes in guidance and processes being communicated to staff?
- How is COVID-19-related training being provided?

1.2 Were there sufficient quantities of the right equipment to help the provider manage the impact of COVID-19?

- Are you able to get hold of supplies of PPE and equipment?
 - are these of an appropriate standard?
 - are you able to get hold of enough PPE to meet your needs?
 - if no, what could be improved?
- Do you know where to get PPE supplies and information?

1.3 Was the environment suitable to containing an outbreak?

- What environmental issues have you identified in relation to managing the pandemic? (e.g. people moving around a care home, social distancing and access to hand gel in a DCA office?)
- What changes have you made to the layout / environment to manage environmental safety? For example:
 - alternative use of premises and areas
 - additional signage
 - ensuring COVID positive / non-COVID people using your service avoid contact with each other where possible.

1.4 Were systems clear and accessible to staff, service users and any visitors to the service?

- Where changes were needed so that the service could provide care to both people with and without COVID-19 symptoms or confirmed diagnoses:
 - how do you share information about health and safety risks with staff, people using your service and any visitors?
 - how do you ensure staff, people using your service and visitors understand the arrangements (e.g. signage, accessible information, information on your website)?
 - how have you supported vulnerable people and those with communication requirements i.e. accessible information needs?

1.5 Were medicines managed effectively?

- Has COVID-19 impacted your ability to manage medicines? e.g.
 - sufficient medicines in stock?
 - medicines stored/transported safely?
 - future supply of medicines assured?
 - service users' prescriptions are assured?
- Have you encountered any challenges when working with your local healthcare professionals, including community pharmacies?

1.6 Had risk management systems been able to support the assessment of both existing and COVID-19 related risks?

- How are your existing systems coping with assessing new risks presented by COVID-19, as well continuing to review existing risks?
- Have you taken any new action in response to new and emerging risks, including but not limited to those posed by COVID-19?
- Have there been any significant events related to COVID-19? If yes, how is learning from these being identified and shared?

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?

- If the pandemic has affected your ability to staff the service, what action have you taken to manage this?
- Have you been able to make sure that people get care and support from workers with the right knowledge and skills?
- How are you making sure that new staff and any volunteers have been safely recruited and appropriately inducted?
- How are you ensuring that staff are still able to work in a way that respects and maintains people's dignity?
- How are you proactively supporting staff who may be at increased risk of getting COVID-19 (including: Black, Asian and Minority Ethnic (BAME) colleagues, older colleagues, pregnant women, returnees, people with underlying health conditions)?

2.2 Were there realistic and workable plans for managing staffing levels if the pandemic leads to shortfalls and emergencies?

- Do you have plans for responding to unforeseen and critical staff shortages?
- How would you escalate concerns if you were unable to provide a safe service?
- Have you engaged with local system arrangements and agreements for staff sharing and other contingencies?
 - do you have confidence in the arrangements?
 - if you've used them, are they proving effective?

3. Protection from abuse

3.1 Were people using the service being protected from abuse, neglect and discrimination?

- How are you managing restrictions that might deprive people of their liberty? (Note: not just relating to managing COVID-19)
- How do you ensure that people's diversity and human rights are recognised and respected?
- Has the pandemic affected your ability to protect people?
- How have you enabled people to stay in contact with family and friends? (methods, frequency.)

3.2 Had the provider been able to properly manage any safeguarding incidents or concerns during the pandemic?

- Have your local safeguarding arrangements and systems remained effective?
- How have you identified and supported particularly vulnerable people during the pandemic? (e.g. older isolated people, victims of domestic abuse, children who are at risk etc).
- How would you escalate any concerns?

4. Assurance processes, monitoring and risk management

4.1 Had the provider been able to take action to protect the health, safety and wellbeing of staff?

- How are you supporting and protecting the health and safety of staff during the pandemic?
- How have you managed challenges to staff wellbeing during the pandemic?
- What changes have you made to ways of working to support your staff and ensure their safety?
- How do you make sure staff are provided with suitable emotional support (e.g. counselling)

4.2 Had the provider been able to implement effective systems to monitor and react to the overall quality and safety of care?

- How are 'business as usual' processes and systems being managed?
- Has the pandemic impacted your ability to monitor the overall quality of care?
- Are there any unique pressures that are challenging your usual systems?
- How are you keeping up to date with relevant standards and guidance relating to the delivery of care during the pandemic?
- Have you been able to develop effective contingency plans relating to COVID-19?
- Have any areas of improvement been identified and actioned

4.3 Is the provider able to support staff to raise concerns during the pandemic?

- Have you put any extra measures in place to support and encourage speaking up?
- How are you ensuring that leaders are accessible to staff and service users when needed?
- How have you managed to promote team working, for example, team meetings?
- Have any areas of improvement been identified and actioned?

4.4 Had care and treatment provided to people been sufficiently recorded during the COVID-19 pandemic?

- Has the impact of the pandemic affected the ability of staff to keep records?
- Do staff get the information they need to provide care and support?
- Has the impact of the pandemic led to changes in how records are kept and shared?
- Are you experiencing any barriers to sharing or accessing information with other providers?

4.5 Had the provider been able to work effectively with system partners when care and treatment is commissioned, shared or transferred?

- How effectively is information being shared across the system?
- Is planning and partnership working effective? e.g.
 - effective hospital discharges?
 - coordinating care with other partners (e.g. GPs, district nurses, LAs, etc.)

Indicators we will use to assess risk

Your inspector will use their knowledge of your service and will look at some specific indicators for the data that we hold to help decide what risk you are facing. These will evolve as the situation changes and we will update them as needed.

Residential care (predictive modelling):

- **Registration:** regulated activities; location ownership type; location service user age; location max service user; provider size; provider registration change count; nursing vs residential homes.
- **Notifications and enquiries:** safeguarding incidents; complaints; abuse; police call-outs; DoLs notifications; injuries; deaths; unexpected deaths; whistleblowing.
- **Registered manager:** registered manager needed/not needed; registered manager days absent in 12 months prior to inspection; registered manager yearly absent rate over lifetime of location.
- **Local Indicators:** CCG complications with diabetes; local authority; region; unemployment (%); ASCOF indicators relating to adults with learning disabilities; total hospital admissions based on 5 conditions.
- **Demographic:** Percentage of resident population over 85; postcode population size.
- **HES data:** e.g. pressure sores; pneumonia; accidents/injury; dehydration; heart failure and the remaining diagnosis groups.
- **Other:** history of inadequate/requires improvement rating; length of time location open in days; mean FSA rating over 24 months prior to inspection.

Community care (risk modelling):

- Registered manager (Y/N)
- Current overall rating
- Months since rating published or months since registered (if a service has not been rated)
- Rating change
- Safe rating
- Effective rating
- Caring rating
- Responsive rating
- Well-led rating
- Number of complaints in past 12 months
- Number of whistleblowing reports in past 12 months
- Regulatory status (In breach or compliant)
- Count of red and amber ASC Insight flags
- Count of notifications in past 12 months
- Provider Information return data