

Emergency Support Framework – guidance to support answering framework questions

Independent Health Care: Learning Disabilities and Autism

May 2020

Support with answering ESF framework questions:

Independent health care: Learning Disabilities and Autism

This guidance supports the cross-sector COVID-19 Emergency Support Framework (ESF) Guidance and provides sector-specific supporting information.

This guidance covers Independent Health learning disabilities and autism services.

REMEMBER: the main way we will gather information from providers is through the conversation we have with them when working through the monitoring and engagement tool. Conversations should be supportive and, where appropriate, the inspector should signpost the provider to relevant external guidance and support.

There is no need to ask all the prompting questions – inspectors should use their judgement to determine which questions are relevant to the provider and what information supports them to answer the overarching question.

Requests for information or documentation will always be exceptional and should be agreed with an inspection manager.

Planning

Check the information we already hold about services when completing the planning tool (e.g. whistleblowing information stored in CRM). Also consider information from external sources, such as other stakeholders and healthcare professionals.

When using the ESF Monitoring and Engagement Tool

Always remember that the primary way to answer the questions is through conversation with the provider. The table below shows potential areas of discussion against the questions in the engagement tool.

Inspectors must not routinely ask for additional evidence and never request everything in this list. They should apply professional judgement to identify the evidence they need to answer a particular question, by exception.

1. Safe care and treatment – Regulation 12	
Overarching question (displayed in tool) and prompts	Additional information (only to be required by exception where required)
<p>1.1. Had risks related to infection prevention and control, including in relation to COVID-19, been assessed and managed?</p> <ul style="list-style-type: none"> • <i>How effective are infection prevention and control arrangements? How are routine processes and escalations working?</i> • <i>Have the arrangements been reviewed and amended in response to the pandemic?</i> • <i>What arrangements does the provider have in place to support them to keep up to date with current Infection Prevention and Control (IPC) Guidance? (see links at end of document for guidance)</i> • <i>How are changes in guidance and processes being communicated to staff and any necessary training provided?</i> • <i>What contingency plans are in place if arrangements fail?</i> • <i>How is the service safely handling specimens and disposal of waste?</i> • <i>How is IPC managed during restraint?</i> • <i>How is IPC managed in seclusion or segregation?</i> 	<ul style="list-style-type: none"> • Records of staff training in IPC and the use of PPE • IPC policy (updated to reflect COVID19) • Changes to business continuity plan in response to COVID-19 • Significant event reporting • Waste management arrangements • Where are issues raised - governance process?
<p>1.2 Were there sufficient quantities of the right equipment to help the provider deliver services while managing the impact of COVID-19?</p> <ul style="list-style-type: none"> • <i>Was appropriate equipment, by patient group, available for COVID-19 and non-COVID-19 areas?</i> • <i>What assurances does the provider have that staff were sufficiently</i> 	

<p><i>skilled to use equipment in COVID-19 and non-COVID-19 areas?</i></p> <ul style="list-style-type: none"> • <i>What is the provider's current level of risk in relation to access to equipment including personal protective equipment (PPE)?</i> • <i>What arrangements does the provider have in place to access PPE and do they know who to contact if they require additional support?</i> 	
<p>1.3 Was the environment suitable for delivering care while containing an outbreak?</p> <ul style="list-style-type: none"> • <i>Has the provider identified any risks within their environment in relation to managing COVID-19?</i> • <i>How has the provider managed these risks?</i> • <i>What changes has the provider made to the layout/environment in response to COVID-19? (e.g. becoming a hot site, alternative use of premises, additional signage, etc)</i> • <i>How are patients managed in the waiting, communal, and shared sleeping areas if there is a mixture of COVID-19 and non-COVID-19 patients?</i> • <i>How does the provider assure themselves that COVID-19 and non-COVID-19 patients, staff and visitors were routed safely through the hospital/service to prevent cross-contamination?</i> 	<p>Changes to (where required):</p> <ul style="list-style-type: none"> • Registration • COVID-19 notifications • Statement of Purpose
<p>1.4 How is access to the service being managed safely?</p> <ul style="list-style-type: none"> • <i>How is the service managing access to the service to ensure that high-risk patients are being identified and prioritised?</i> • <i>How is the provider supporting identified 'high risk' patients?</i> • <i>Are patients tested to determine their COVID-19 status and</i> 	<ul style="list-style-type: none"> • Evidence of changes made/ communication to patients • Monitoring processes, investigations and quality monitoring. • Complaints received and response processes?

<p><i>segregated and streamed through the hospital appropriately?</i></p> <ul style="list-style-type: none"> • <i>Where the provider has made changes to how they operate to manage COVID-19 and non-COVID-19 patients:</i> <ul style="list-style-type: none"> ○ <i>Is this clearly communicated to patients?</i> ○ <i>How does the provider ensure staff are aware of these changes?</i> ○ <i>How has the provider taken into consideration vulnerable people and those with communication requirements, e.g. accessible information?</i> • <i>What changes has the provider made to facilitate/improve access to their services in response to COVID-19, e.g. telephone assessments, video or online consultations?</i> • <i>How is the provider meeting the needs of patients who:</i> <ul style="list-style-type: none"> ○ <i>do not speak English?</i> ○ <i>do not have access to a computer, smart phone, tablet or telephone?</i> • <i>How does the provider ensure that patients have access to leave including S17 leave/therapeutic activities/visits from relatives/advocacy input?</i> • <i>How is the provider ensuring that people on waiting lists to access services are kept safe? How is the provider communicating with people on waiting lists so they are aware of current service delivery situations?</i> 	
<p>1.5 Are medicines managed effectively?</p>	<p>Overarching provider assessment and protocol in place to ensure adequate supplies and impact of lack of clinical</p>

<ul style="list-style-type: none"> • <i>Has COVID-19 impacted the provider's ability to manage medicines?</i> • <i>What steps have been and are being taken to ensure adequate and ongoing supplies of medicines are maintained? If they usually have a clinical pharmacy service, has this been maintained?</i> • <i>Have medicine support care plans been updated to include the risks presented by COVID-19? Does this include monitoring of the appropriate use of medicine to control patients' behaviour?</i> • <i>How are they providing monitoring and addressing patient physical health conditions without support from community or acute based services? INR monitoring, diabetic insulin, respiratory and cardiac.</i> • <i>What steps have been taken to ensure infection prevention and control are maintained when handling, administering and transferring medicines and associated paperwork?</i> • <i>What steps have been taken to track and action incidents related to medicines during the COVID19?</i> <p><i>Additional prompts depending on service needs and answer to initial question.</i></p> <ul style="list-style-type: none"> • <i>For patients routinely prescribed treatment through hospital specialist appointments, either remotely or through repeat prescribing how are these medicines now obtained to ensure continuity of treatment, e.g.</i> 	<p>pharmacy services on audits and incident reporting.</p> <p>https://www.sps.nhs.uk/articles/summary-of-covid-19-medicines-guidance-learning-disabilities/</p> <p>https://www.gov.uk/guidance/the-yellow-card-scheme-guidance-for-healthcare-professionals</p> <p>https://www.sps.nhs.uk/articles/administration-of-depot-antipsychotic-injections-during-covid-19-in-stable-adult-patients/</p> <p>https://www.sps.nhs.uk/articles/lithium-drug-monitoring-in-primary-care-during-covid-19-for-stable-patients/</p> <p>https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0381-nhs-covid-19-grab-and-go-lda-guidance-notes.pdf</p>
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<p><i>Clozapine, antipsychotic depots, lithium, methylphenidate?</i></p> <ul style="list-style-type: none"> <i>What system blocks (including legislation and guidance blocks) have you experienced or are experiencing which have impacted on managing medicines?</i> <i>Has the service got a system for collecting feedback from patients/advocates around medicines issues and what actions have they completed as a result? Were alternative forms of administration of medicines considered to reduce risk? Did this include patients own views?</i> 	
<p>1.6 How is the service identifying and managing patient risks, and how has that been affected by the COVID-19 pandemic?</p> <ul style="list-style-type: none"> <i>Are there systems in place to manage and review existing risks?</i> <i>Has the provider taken action in response to new and emerging risks, including but not limited to those posed by COVID-19?</i> <i>What are the provider's identified COVID-19 related risks? What measures is the provider taking to mitigate them? Are these listed on the provider's risk register?</i> <i>Have there been any significant events related to COVID-19 including deaths? If yes, how is learning from these being identified and shared? Have any deaths been notified to CQC?</i> <i>Is there a protocol for testing of suspected cases and communication around the COVID-19 status of patients transferring to the hospital from acute settings?</i> <i>Was the service managing risk in immuno-suppressed patients?</i> 	<ul style="list-style-type: none"> Log of significant events and examples of shared learning

<ul style="list-style-type: none"> • Was the service maintaining effective escalation protocols, such as NEWS2? • Were all patients requiring discussion at MDT discussed and decisions recorded? (Note new MDT streamlining guidance - complex patients must be discussed) 	
<p align="center">2. Staffing arrangements – Regulation 18</p>	
<p>2.1 Were there enough suitable staff to provide safe care and treatment in a dignified and respectful way during the COVID-19 pandemic?</p> <ul style="list-style-type: none"> • Has the pandemic affected the provider's ability to staff the service? • Has the provider been able to make sure that people get care and support from workers with the right knowledge and skills, including MDT input (OT, physiotherapy, speech and language therapy)? • On general learning disability and autism wards have staff had suitable training to meet their needs? • How is the provider supporting staff to deliver services where there have been significant changes to staffing arrangements? • If agency/bank staff were used, how did the provider ensure the right skill mix to deliver safe care and treatment to meet a range of patients' needs (e.g. restraint, LD, Autism, Older People)? • How is the provider making sure that new staff and any volunteers are suitably qualified? • Are there reasonable induction arrangements for new staff and volunteers? • Are staff still able to work in a way that respects and maintains people's dignity? 	<ul style="list-style-type: none"> • Evidence staffing arrangements and processes have been adapted in response to relevant national guidance

<ul style="list-style-type: none"> • <i>Has the provider made changes to recruitment and training processes in response to COVID-19, in line with relevant national guidance?</i> 	
<p>2.2. Are there realistic and workable plans for managing staffing levels if the COVID-19 pandemic leads to shortfalls and emergencies?</p> <ul style="list-style-type: none"> • <i>How has the pandemic affected the provider's ability to staff the service?</i> <ul style="list-style-type: none"> ➢ <i>What has this meant for patients who use the provider's services?</i> ➢ <i>What has the provider done to mitigate any impact on staffing levels?</i> ➢ <i>Where does the provider go to seek support?</i> • <i>Has the provider been able to engage with local system arrangements to share staff where required?</i> 	<ul style="list-style-type: none"> • Staffing plans and contingencies in response to COVID-19 • Plans for management of staffing issues

<p>3. Protection from abuse – Regulation 13</p>	
<p>3.1 Were people using the service being protected from abuse, neglect and discrimination?</p> <ul style="list-style-type: none"> • <i>Has the pandemic affected the provider's ability to protect people?</i> • <i>Are people's human rights being recognised and respected?</i> • <i>How is the provider avoiding unnecessary restrictions, e.g. blanket approaches, visiting?</i> • <i>How is the provider using the Mental Capacity Act to manage restrictions that might deprive people of their liberty? (Note: not just relating to managing COVID-19). See</i> 	<ul style="list-style-type: none"> • Details regarding any relevant significant events

<p><i>MCA/DoLS guidance links at the end of this document</i></p> <ul style="list-style-type: none"> • <i>Has the provider encountered any issues which may affect the equality, diversity and human rights of the provider's patients?</i> • <i>Does the provider have anyone in long term segregation or anyone who is frequently needing to be secluded due to distressed behaviours?</i> • <i>How is the provider ensuring patient and carer views of care and treatment are listened to during the pandemic?</i> • <i>How is the service supporting people to stay in contact with their families and friends?</i> • <i>Were patients and carers involved, where appropriate, in decisions about service, and given opportunity to feedback on the service received?</i> <p><i>Where applicable:</i></p> <ul style="list-style-type: none"> • <i>Does the provider have access to and are they following guidelines around Treatment Escalation Plans (TEPs), anticipatory care planning, Do Not Attempt Cardio-pulmonary Resuscitation (DNACPR) orders and individualised care plans?</i> 	
<p>3.2 Had the provider been able to properly manage any safeguarding incidents or concerns during the pandemic?</p> <ul style="list-style-type: none"> • <i>Have safeguarding arrangements and systems in the provider's locality remained effective (e.g. response time to safeguardings, speak up, advocacy)?</i> • <i>Has the provider identified any risks relating to their management of safeguarding issues, e.g. barrier to information-sharing with relevant stakeholders such as local authority?</i> • <i>How has the provider mitigated these risks?</i> • <i>What systems are in place to identify vulnerable patients during the</i> 	<ul style="list-style-type: none"> • Relevant evidence relating to any issues discussed

<p><i>pandemic, e.g. elderly isolated patients, domestic abuse victims?</i></p>	
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4. Assurance processes, monitoring and risk management – Regulation 17

<p>4.1 Had the provider been able to take action to protect the health, safety and wellbeing of staff?</p> <ul style="list-style-type: none"> • <i>How is the provider supporting and protecting the health and safety of staff during this period?</i> • <i>Are staff being adequately risk-assessed and placed in appropriate environments to protect their health and safety?</i> • <i>How is the provider managing staffing issues such as sickness and caring/childcare responsibilities?</i> • <i>What changes has the provider made to ways of working to support their staff and ensure their safety, e.g. remote working solutions?</i> • <i>Is debriefing being used effectively and are staff being provided with appropriate access to emotional support, e.g. counselling?</i> 	<ul style="list-style-type: none"> • COVID-19 contingency plans • Arrangement for supporting staff • Risk assessments / register • Board papers?
<p>4.2 Had the provider been able to implement effective systems to monitor and react to the overall quality and safety of care?</p> <ul style="list-style-type: none"> • <i>Has the pandemic impacted the provider's ability to monitor the overall quality of care?</i> • <i>How is the provider keeping up to date with relevant standards and guidance relating to the delivery of care and treatment?</i> • <i>Has the provider been able to develop effective contingency plans relating to COVID-19?</i> • <i>How are 'business as usual' processes and systems being</i> 	<ul style="list-style-type: none"> • Risk Register (or equivalent) and action plans for improvement • Systems for sharing and cascading information internally, and with commissioners and external stakeholders • COVID-19 contingency plans • Board papers

<p><i>managed, e.g. seven-day follow-ups, waiting lists?</i></p> <ul style="list-style-type: none"> • <i>How are Mental Health Act safeguards being managed, e.g. tribunals, associate manager reviews, independent reviews?</i> 	
<p>4.3 Is the provider able to support staff to raise concerns during the pandemic?</p> <ul style="list-style-type: none"> • <i>Has the provider made any changes to the way staff are able to speak up and raise concerns?</i> • <i>Is the provider still able to have team meetings?</i> 	<ul style="list-style-type: none"> • Whistleblowing procedures • Staff meeting minutes • Freedom to Speak Up Guardian information
<p>4.4. Was care and treatment provided to people sufficiently recorded during the COVID-19 pandemic?</p> <ul style="list-style-type: none"> • <i>Is the provider experiencing any barriers to sharing or accessing patient information with other providers, e.g. to support transfers?</i> 	<ul style="list-style-type: none"> • Care plans • Recording systems • Procedures for recording care and treatment during the pandemic
<p>4.5 Has the provider been able to work effectively with system partners to plan and deliver care, including arrangements for sharing services and transferring service users?</p> <ul style="list-style-type: none"> • <i>Is the service able to effectively manage discharges and ensure safe transfers of care? Is planning and partnership working effective?</i> • <i>How is the provider ensuring they are meeting the physical health needs of patients including access to primary health care and acute hospital treatment where required?</i> • <i>Have providers been identified for expanding capacity and brought into local system?</i> • <i>How is information being shared where regulated activities happen across different locations? For example, where staff are working in designated hot sites in the locality and where patient record systems differ.</i> • <i>How is the provider working in provider's area, and sharing</i> 	<ul style="list-style-type: none"> • Systems for sharing and cascading information with other providers and/or organisations, commissioners, stakeholders. • Risk Register (or equivalent) • COVID-19 recovery plans • Board papers

<p><i>information with other services and/or providers?</i></p> <ul style="list-style-type: none">• <i>How is the provider working with external partners and/or stakeholders on service recovery plans?</i>	
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Infection Control

<https://www.england.nhs.uk/coronavirus/publication/infection-prevention-and-control-supporting-documentation/>

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

<https://www.gov.uk/government/publications/covid-19-guidance-for-stepdown-of-infection-control-precautions-within-hospitals-and-discharging-covid-19-patients-from-hospital-to-home-settings>

Working within the Mental Capacity Act inc. DoLS during the pandemic

https://www.gov.uk/government/publications/coronavirus-covid-19-looking-after-people-who-lack-mental-capacity?utm_source=a4a3d322-fbe7-424e-bc47-ed85741782a8&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate

<https://www.cqc.org.uk/guidance-providers/all-services/working-within-mental-capacity-act-during-coronavirus-pandemic>

<http://intranetplus.cqc.local/Registration%20and%20Compliance/MentalCapacityAct/Documents/20200327%20Brief%20guide%20about%20impact%20of%20COVID-19%20on%20MCA%20%20DoLS%20%20v4%20final.pdf>

NICE website for COVID-19 related information

<https://www.nice.org.uk/covid-19>

includes information on the following;

- [Rapid guidelines](#)
- [Rapid evidence summaries](#)
- [Medtech innovation briefings](#)
- [Clinical knowledge summaries](#)