Support with answering Transitional Monitoring Activity (TMA) framework questions: Independent services for people with a learning disability and/or autism

This guidance supports the cross-sector Transitional Monitoring Activity (TMA) Guidance and provides sector-specific supporting information.

This guidance covers independent services for people with a learning disability and/or autism.

REMEMBER: the main way we will gather information from providers is through the conversation we have with them when working through the Transitional Monitoring Activity (TMA).

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. Please structure your conversations with providers in whatever way you see fit. This may mean, for example, covering the Well-led discussion questions first.

A list of potential evidence that can be requested during monitoring conversations is available to support this guidance. Inspectors do not have to routinely ask for evidence or request everything in this list. They should apply professional judgement to identify the evidence they need to answer a particular question to determine that they have sufficiently assessed each KLOE's risk level.

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. In addition, check our MOU and information sharing agreements, with HSE and other regulators and professional bodies.

The medicines optimisation team are available to support inspectors in their assessment of question S.4: "How does the provider ensure the proper and safe use of medicines, where the service is responsible?" Where an inspector is unsure or

concerned about the answers a provider is giving regarding medicines, the team can provide advice and training, or support conversations with the provider. Please e-mail medicines.enquiries@cqc.org.uk with any queries.

Overarching question (displayed in tool) and prompts	Any related guidance
S1: How do systems, processes and practices keep people safe and safeguarded from abuse? • *Are infection risks to people using the service being thoroughly assessed and managed?* • *Have changes been made to the layout/environment of clinical and non-clinical areas to continue to provide services safely in this period?* *e.g. clean sites, vehicle layout, separate entrances and waiting areas for known/suspected COVID patients, additional signage, spaces between stations, isolation facilities,* ensuring compliance with best practice guidance when visiting people in their own homes *etc.* • *Does the service have the resources to obtain, and reliable access to, all the supplies, personal protective equipment and C-19 testing it needs, for both staff and, where appropriate, people who use the service?* • *Are working arrangements and procedures clear and accessible to staff, people who use the service, their supporters and, where appropriate, visitors to the service?* • *Are people using the service being protected from abuse, neglect, discrimination and loss of their human rights?* • *Where applicable, has the provider identified when they may be depriving a person of their liberty, and followed the correct and lawful procedures e.g. DoLS application, Court of Protection?* • *Are the service's safeguarding and other policies and practice, together with local systems, properly managing any concerns about abuse and protecting people's human rights? Is the service working effectively with local authority safeguarding teams?*	Safeguarding intranet page and inspector handbook on safeguarding includes guidance on level of training required and CQC inspection of safeguarding. Closed Culture Guidance

Note: Remember to consider whether it is necessary and appropriate to notify other bodies (or share relevant information with them) about incidents or risks CQC has identified that may be relevant to the exercise of their functions, for instance HSE of health and safety risks to workers	

S1. Additional prompts for independent services for people with a learning disability and/or autism

- Is the service maintaining mandatory staff training to keep people safe?
- How is the Registered Manager assured that patients do not suffer abuse within the service?
- Are there regular visits from other stakeholders, visiting professionals or families and friends to the service?
- Have there been any concerns raised during quality or contracting visits by commissioners or safeguarding teams? How has the service responded to these?
- Have there been any concerns raised by family members or people using the service? How has the service responded to these?

S2: How are risks to people assessed, and their safety monitored and managed, so they are supported to stay safe? - *Are risks to the health and wellbeing of people using the service being properly assessed, monitored and managed?* - *Are there enough staff with the skills and experience to provide safe care and treatment in a dignified and respectful way? Are escalation plans in place in response to surges in demand e.g. second wave, seasonal pressures?* - *How is the service identifying and managing risks for patients including any restrictive practices, the impact on the patient of any restrictive practices or issues affecting their legal or human rights?*	Health & Care Professions Council: COVID-19 Our approach to temporary registration CQC interim guidance on DBS and other recruitment checks COVID-19: how DBS is supporting the fight against coronavirus and the CQC impact assessment **Patients with mental health needs and restrictive practices**

	CQC provider guidance on working within the Mental Capacity Act during the coronarvirus pandemic

CQC Brief Guide: Working within the MCA and DoLS during the Covid-19 emergency

DHSC guidance for all sectors on the application of the MCA and DoLS during the pandemic |

S2. Additional prompts independent services for people with a learning disability and/or autism

- Where restrictive practices are in place, are there plans to reduce restrictions to a minimum level?
- Do staff have specific training to support people with learning disabilities and / or autistic people?

S3: Do staff have all the information they need to deliver safe care and treatment to people? - *Does the service have access to and is following guidelines around Treatment Escalation Plans (TEPs), anticipatory care planning, Do Not Attempt CPR(DNACPR) orders and individualised care plans? Are plans in place for rapid transfer to preferred places of care – relationships and planning with PMS, district nursing etc.* - *Is the service able to effectively manage referrals and, where relevant, discharges and ensure safe transfers of care? Where relevant, what testing arrangements are in place, and how does the service handle transfers of known/suspected COVID patients safely? How is the service working with other partners??*	Investigation and initial clinical management of possible cases

Guidance for the stepdown of infection control precautions within hospitals and discharging COVID-19 patients from hospital to home settings |

S3. Additional prompts for independent services for people with a learning disability and/or autism

- Do people have access to individualised care plans including positive behaviour support plans, treatment escalation plans and anticipatory care planning?

- Does the service have systems in place to ensure people have access to primary and specialist healthcare services? Is information shared to ensure that planned care meets the physical health needs of people using the service?
- Are local arrangements in place for the safe transfer of patients to an acute hospital where this is necessary to meet their physical health needs?
- Where Do Not Attempt CPR (DNACPR) orders are in place, do these follow current guidance?

S4: How does the provider ensure the proper and safe use of medicines, where the service is responsible? - *Are medicines being managed safely and effectively? Has Covid-19 impacted the service's ability to manage medicines?*	Overarching provider assessment and protocol in place to ensure adequate supplies and impact of lack of clinical pharmacy services on audits and incident reporting. https://www.sps.nhs.uk/articles/summary-of-covid-19-medicines-guidance-learning-disabilities/ https://www.gov.uk/guidance/the-yellow-card-scheme-guidance-for-healthcare-professionals https://www.sps.nhs.uk/articles/administration-of-depot-antipsychotic-injections-during-covid-19-in-stable-adult-patients/ https://www.sps.nhs.uk/articles/lithium-drug-monitoring-in-primary-care-during-covid-19-for-stable-patients/ https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/C0381-nhs-covid-19-grab-and-go-lda-guidance-notes.pdf CQC Medicines Optimisation Team Brief Guide: COVID-19 Access to medicines

	[Advisory Council on the Misuse of Drugs advice on COVID-19 emergency legislation to enable supply of controlled drugs](#)
S5: What is the track record on safety? • *Are there any significant trends in - Never Events, Significant Incidents, themes in incidents, Mortality, Unexpected deaths? What is being done by the provider to prevent future deaths as a result of incidents and mortality reviews (including LeDeR)* • Are there any significant trends *where groups of patients are faring worse in terms of safety concerns?*	**Patient Safety Bulletins** The NHSI Patient Safety team have issued patient safety bulletins with key safety messages. • [Issue 1 (1st May 2020)](#) • [Issue 2 (15th May 2020)](#) • [Issue 3 (29th May 2020)](#) • [Issue 4 (12th June 2020)](#) • [Issue 5 (23rd June 2020](#) – please note date on bulletin itself is wrong) • [Issue 6](#) (10th July 2020) • [Issue 7](#) (27th July 2020)
S5. Additional prompts for independent services for people with a learning disability and/or autism • Does the service report all deaths of people with a learning disability to LeDer and does the service participate in LeDeR reviews?	
E1: Are people's needs assessed and care and treatment delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes? • *How is the service identifying, cascading and keeping up-to-date with changes in clinical guidance?* • *Where people are subject to the MHA, how is the service ensuring compliance with the MHA?*	

E1. Additional prompts for independent services for people with a learning disability and/or autism

- Have there been any deaths (covid or non covid) in the service? Was full and timely access to primary and acute healthcare treatment in place prior to the patient's death?
- Where required, what arrangements are in place to ensure access to appropriate end of life care and support?
- How does the service ensure staff are able to identify the deteriorating physical health of patients who may not be able to communicate their needs?

E2: How are people's care and treatment outcomes monitored and how do they compare with other similar services? • How is the service collecting information about people's care treatment and outcomes? Where relevant, are they continuing to submit to relevant national clinical audits? • How are outcomes being monitored for groups of people that may be at higher risk , such as BAME people and older people?	
E3: How does the service make sure that staff have the skills, knowledge and experience to deliver effective care, support and treatment? • How is the service ensuring that all staff, including those being flexibly re-deployed, have the skills and training to carry out their roles effectively?	

E3. Additional prompts for independent services for people with a learning disability and/or autism

- Is the service providing regular supervision to staff?
- Are staff provided with support and debriefing following incidents?
- Do staff have training in how to support communication with people with learning disability or autistic people?

E4: How well do staff, teams and services work together within and across organisations to deliver effective care and treatment? • *How is the service ensuring that the necessary staff, teams and services are involved in assessing, planning and delivering peoples care and treatment?*	

E4. Additional prompts for independent services for people with a learning disability and/or autism

• Does the service have effective discharge planning in place? • Does the provider work proactively with commissioners to ensure that patients are discharged to services which meet their individually assessed needs and do not remain in hospital longer than is necessary for assessment and treatment?	

E6: Is consent to care and treatment always sought in line with legislation and guidance?
• *How does the service ensure consent to care and treatment is always sought in line with legislation and guidance? Including, where appropriate:*
   ○ *ensuring that people are involved in decisions about not providing care and treatment, including advanced care plans and DNACPR decisions?*
   ○ *promoting supportive practice that avoids the need for physical restraint? Where physical restraint may be necessary, how does the service ensure that it is used in a safe, proportionate, and monitored way as part of a wider person-centred support plan?*
   ○ *Ensuring staff apply relevant legislation where people may lack capacity to consent to particular care and treatment, including the Mental Capacity Act 2005 (including DoLS) and the Children's Acts 1989 and 2004?*
	[CQC provider guidance on working within the Mental Capacity Act during the coronarvirus pandemic](#)
	
	[CQC Brief Guide: Working within the MCA and DoLS during the Covid-19 emergency](#)
	
	[DHSC guidance for all sectors on the application of the MCA and DoLS during the pandemic](#)

C1: How does the service ensure that people are treated with kindness, respect and compassion, and that they are given emotional support when needed? • *How has the service adapted how they support and engage with patients and their families/loved ones?* • *How does the service ensure the care delivered is compassionate and upholds people's human rights?*	

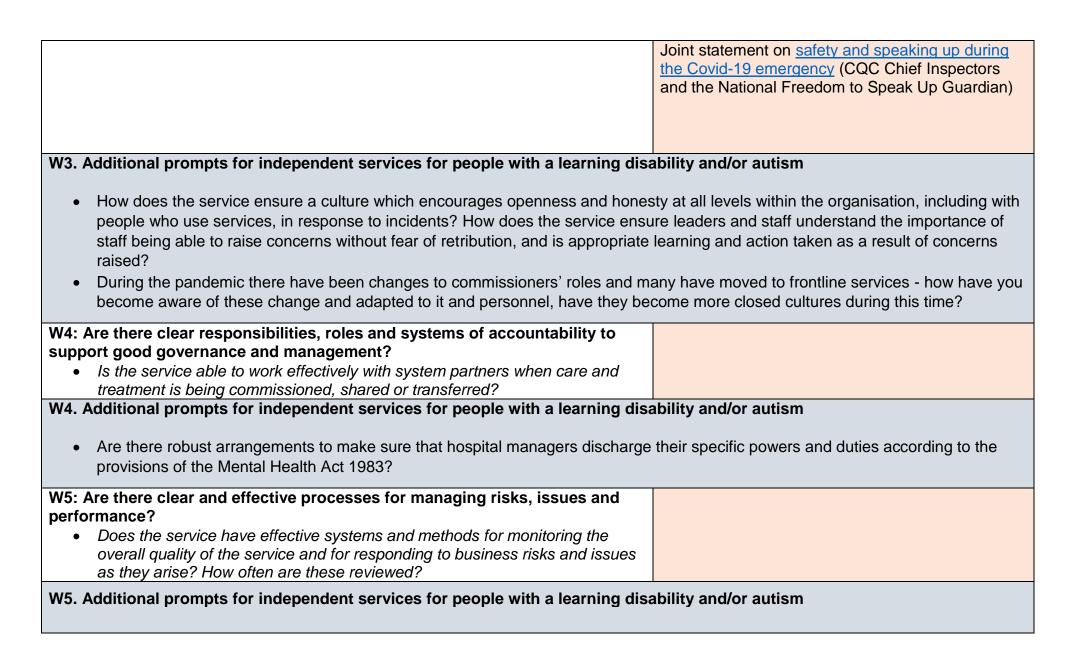|	
C2: How does the service support people to express their views and be actively involved in making decisions about their care, support and treatment as far as possible? • *How does the service support people to express their views and be actively involved in making decisions about their care, support and treatment?* • *Where appropriate, how is the service managing the impacts of limited visiting on patient's wellbeing?* • *How is the service promoting and ensuring patients know how to access advocacy support??*	
C2. Additional prompts for independent services for people with a learning disability and/or autism • How does the service involve family and carers in peoples care, support and treatment? • How has the service continued to support regular contact between patient's, their family and friends? • Is WIFI good enough to enable relatives to keep in contact?	
R1: How do people receive personalised care that is responsive to their needs? • *How does the service ensure that they meet the needs of the population served and do they enable flexibility, choice and continuity of care?* • *Where relevant, do individual patients have choices about how, when and where they are seen?*	

R2: Do services take account of the particular needs and choices of different people?
• *How are services delivered, made accessible and coordinated to take account of the needs of different people, including those with protected characteristics under the Equality Act and those in vulnerable circumstances? This may include:*
   o *How does the service ensure that each patient has their information and communication needs identified, recorded, flagged, shared and met?*
   o *How does the service identify and make other reasonable adjustments for disabled people?*
	Accessible Information Standard
	https://www.england.nhs.uk/ourwork/accessibleinfo/
	
	Brief guide: good communication standards for people with a learning disability or autism
	
	https://www.cqc.org.uk/guidance-providers/adult-social-care/access-hospital-care-treatment-older-disabled-people-living

• *Where new protocols for admission are being used, how are these being communicated to staff and how are they reviewed to ensure they are non-discriminatory?*	
R2. Additional prompts for independent services for people with a learning disability and/or autism • How is the service supporting people to follow their interests and take part in activities that are socially and culturally relevant and appropriate to them, including in the wider community and, where appropriate, to have access to education and work opportunities?	
R3: Can people access care and treatment in a timely way? • *How is the service managing access to the service to ensure that high-risk patients/pathways are being identified and prioritised appropriately, including reinstating services and handling backlogs of activity?* • *Is there a structured approach to patient flow that ensures all components of the system are appreciated and managed appropriately, and flow issues are escalated appropriately? How does the approach take account of the pandemic?*	
W1: Is there leadership capacity and capability to deliver high-quality, sustainable care? • *Has there been any impact on leadership capacity as a result of the COVID-19 crisis? Are there plans and mitigations in place should it be affected?* • *Do leaders understand the challenges to quality and sustainability during this period, and can they identify the actions needed to address them?*	
W3: Is there a culture of high-quality, sustainable care? • *Is the service monitoring and protecting the health, safety and wellbeing of staff?* • *How is the provider taking action to protect the health, safety and wellbeing of staff, e.g. access to emotional support, supporting staff to raise concerns, adequately risk-assessing and placing staff in appropriate environments to protect their health and safety, including BAME staff and other staff at high risk of COVID 19?*	PHE COVID-19 Infection Prevention and Control Guidance Library: with particular consideration to: • Management of staff and exposed patients or residents in health and social care settings

	Joint statement on [safety and speaking up during the Covid-19 emergency](#) (CQC Chief Inspectors and the National Freedom to Speak Up Guardian)

W3. Additional prompts for independent services for people with a learning disability and/or autism

- How does the service ensure a culture which encourages openness and honesty at all levels within the organisation, including with people who use services, in response to incidents? How does the service ensure leaders and staff understand the importance of staff being able to raise concerns without fear of retribution, and is appropriate learning and action taken as a result of concerns raised?
- During the pandemic there have been changes to commissioners' roles and many have moved to frontline services - how have you become aware of these change and adapted to it and personnel, have they become more closed cultures during this time?

W4: Are there clear responsibilities, roles and systems of accountability to support good governance and management?	
- *Is the service able to work effectively with system partners when care and treatment is being commissioned, shared or transferred?*	

W4. Additional prompts for independent services for people with a learning disability and/or autism

- Are there robust arrangements to make sure that hospital managers discharge their specific powers and duties according to the provisions of the Mental Health Act 1983?

W5: Are there clear and effective processes for managing risks, issues and performance?	
- *Does the service have effective systems and methods for monitoring the overall quality of the service and for responding to business risks and issues as they arise? How often are these reviewed?*	

W5. Additional prompts for independent services for people with a learning disability and/or autism

- Are there robust arrangements for identifying, recording and managing risks, issues and mitigating actions? Is there alignment between the recorded risks and what staff say is 'on their worry list'?

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

Ethical Guidance

https://www.bma.org.uk/advice-and-support/covid-19/ethics/covid-19-ethical-issues

https://www.gmc-uk.org/ethical-guidance/ethical-hub/covid-19-questions-and-answers#Decision-making-and-consent

Working within the Mental Capacity Act including DNACPR & DoLS during the pandemic

Department of Health & Social Care MCA & DoLS guidance

CQC Provider FAQ MCA & DoLS Public Website

MCA & DoLS CQC Intranet Brief Guide

GMC guidance about the application of the MCA

https://www.resus.org.uk/dnacpr/ and https://www.resus.org.uk/respect/

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](#)

Protection of health, safety and wellbeing of staff

[Second phase of NHS response to COVID-19](#) and it's [CQC impact assessment](#).

[NHS Confederation: Action needed to mitigate COVID-19 risks to BME communities and staff](#)

[NHS Employers: Risk assessments for staff](#). This includes a link to:

>   [Faculty of Occupational Medicine Risk reduction framework for NHS Staff at risk of COVID-19 infection](#)

[PHE: Management of exposed healthcare workers and patients in health and social settings](#)

[PHE Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19](#)

[HSE: RIDDOR reporting of COVID-19](#)