

# COVID-19 Emergency Support Framework

# Engagement and support call Summary Record

**Ashtonleigh Homes Ltd** 

Location / Core Service address

Ashtonleigh 4 Wimblehurst Road

RH12 2ED Horsham Date

04/06/2020

Dear Ashtonleigh,

The Care Quality Commission is not routinely inspecting services during the COVID-19 pandemic. We are maintaining contact with providers through existing monitoring arrangements and engagement and support calls covering four assessment areas:

- Safe Care and Treatment
- Staffing arrangements
- Protection from Abuse
- Assurance Processes, Monitoring and Risk Management

This Summary Record outlines what we found during the engagement and support call shown above, using standard sentences and an overall summary.

We have assessed that you are managing the impact of the COVID-19 pandemic at the above service. The overall summary includes information about the internal and external stresses you are currently experiencing, how they are being managed, and sources of support that are available.

Emergency Support Framework calls and other monitoring activity are not inspections. Summary Records are not inspection reports. Summary Records are not published on our website.

### **Assessment Area 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?
Yes	There were systems to assess and respond to risks regarding infection prevention and control, including those associated with COVID-19.
1.2	Were there sufficient quantities of the right equipment to help the provider manage the impact of COVID-19?
Yes	Essential equipment, such as personal protective equipment, was available in sufficient quantities to help you manage the impact of COVID-19.
1.3	Was the environment suitable to containing an outbreak?
Yes	You had taken steps to ensure the environment was as effective as possible in containing an outbreak of COVID-19.
1.4	Were systems clear and accessible to staff, service users and any visitors to the service?
Yes	Systems to ensure the environment were conducive to containing an outbreak of COVID-19 were clear and accessible to people using the service.
1.5	Were medicines managed effectively?
Yes	Service users' medicines were effectively managed, despite the increased pressures associated with COVID-19.
1.6	Had risk management systems been able to support the assessment of both existing and COVID-19 related risks?
Yes	Systems enabled the continued management of known risks, as well as enabling the provider to respond to new and emerging risks, including those posed by COVID-19.

### **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?

Yes There were enough suitably skilled staff to provide people with safe care in a respectful and dignified way during the Covid-19 pandemic.

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

**Yes** There were realistic and workable contingency plans for staffing shortfalls and emergencies during the COVID-19 pandemic.

### **Assessment Area 3**

### Protection from abuse

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

**Yes** People were being safeguarded from abuse, harassment and discrimination.

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

**Yes** Action had been taken to properly respond to incidents, alerts or potential safeguarding incidents at the service.

### **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
	wellbeing of staff?

Yes Staff health, safety and wellbeing were protected despite the increased pressures associated with COVID-19.

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

Yes There were effective systems to monitor the overall quality and safety of care being provided at the service during the COVID19 pandemic.

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

**Yes** Staff were able to raise concerns and were supported to speak up during the pandemic.

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

**Yes** Care and treatment provided to people is being sufficiently recorded during the Covid-19 pandemic.

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

Yes Working arrangements and information sharing with system partners during the Covid-19 pandemic are effective.

## Overall summary

From our discussion with you on 04/06/2020 and other information about this location, we assess that you are managing the impact of the COVID-19 pandemic.

Infection control practice:

It was clear the service had been through a very difficult time. This was due to a

cluster of Covid 19 positive tests of people and staff during the pandemic. Information regarding PPE and whole service testing was not as available then as it is now. However, you and your team had identified and implemented the appropriate procedures to keep people and staff safe. This had prevented further people and staff contracting coronavirus.

There have been no issues with the supply of PPE. You had ensured that staff received training in PPE and all staff received updates face to face at handovers.

#### Management of the service:

Systems to protect, and support people and staff have been reviewed and updated throughout the pandemic. Lessons had been learnt and you were extremely proud of the staff team. Quality assurance systems and processes continue as normal.

#### Care and treatment for covid 19:

Throughout the pandemic you have ensured isolation guidelines are followed and arranged testing. The home environment has allowed an isolation unit on the top floor. People who had tested positive were moved this unit to minimise risk to other people and staff. This floor had a dedicated staff team.

#### Staff cover:

Staffing was a concern when you had covid 19 in house, but you had a contingency plan and staffing levels have remained consistent due to staff commitment.

### Staff support and training:

Staff are supported by supervision, on-line training and well-being meetings.

Communication: Communication between people and their loved ones has been supported by arranged Sightings/meetings, telephone calls and video. You said that the GPs and the pharmacist were very supportive and lines of communication were good. There had been no problems in receiving advice and support from health professionals.