

COVID-19 Emergency Support Framework

Engagement and support call Summary Record

Ferrolake Limited

Location / Core Service address	Date
Westport Care Home 14-26 Westport Street Stepney, E1 0RA London	10/06/2020

Dear Westport Care Home,

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

This ESF took place on 3/6/2020 with RM and deputy. They confirmed the use of robust systems in place to promote safety for people and staff, eg service accessed enough applicable PPE and staff received relevant training including infection prevention and control, and safe hand washing protocols. Provider stated there is a Covid-19 risk management policy and procedure which has been reviewed and

updated in accordance with national guidance. Information shared with staff at daily handovers, in dedicated folders and staff meetings. Changes to the environment and intensive cleaning implemented to promote safety and provider has been able to responsibly use an internal staff bank. One safeguarding notifications reported to CQC since onset of COVID-19. Staff have regular safeguarding training and mechanisms in place to raise concerns about COVID -19 and any other matters. There is an employee assistance programme that offers counselling, staff (and residents) have been supported to be tested and management team described strategies to promote a supportive and open culture, such as genuine discussions with staff about their welfare. RM/deputy spoke about interventions to meet the emotional needs of residents, eg staff help people to use IPADs, phones and photos to communicate with their loved ones. Newsletters and remote meetings used to update and reassure families. There are designated safe areas for residents to wave/ speak at a distance with visitors. No known concerns with medicine management and continuous QA occurring, eg health and safety checks and audits. Caring approach demonstrated, a staff group cocooned at WCH for 2 weeks. RM/deputy spoke of beneficial external relationships, eg monitoring officer (SH), CMHT and SJ hospice. SH provided positive feedback. Management completed required data for LA/CQC etc and checked staff recorded how they supported residents during this pandemic. RM/deputy have regularly shared ideas and their learning with CQC inspector.