

COVID-19 Emergency Support Framework

Engagement and support call Summary Record

Ashton Care Homes Limited

Location / Core Service address	Date
Ashton House Bolnore Road , Haywards Heath RH16 4BX	18/06/2020

Dear Ashton Care Homes Limited

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 17/06/2020 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 positives at the beginning of the lockdown. 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 been some issues with sourcing PPE early on but this was immediately acted on by your provider. You had also used initiative by making your own hand sanitiser and face masks by following the world Health Organisation guidance.

Staff received training in PPE and all staff received regular updates.

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 proud of the staff team. Quality assurance systems and processes continue as normal.

Care and treatment for covid19:

Throughout the pandemic you have ensured isolation guidelines are followed. Residents and staff have been tested and appropriate action taken on receiving the results. The service has been divided into zones, (red, amber and green) with dedicated staff. As people recovered there were moved from the red zone to amber and then green zone. You have taken people from hospital with a positive covid 19 test and they are admitted to the red zone initially until recovered. All new people to the home are tested on the day of transfer and isolated as per guidance.

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.

Staff support and training:

Staff are supported by supervision, on-line training and well-being meetings. Senior staff introduced short training sessions on PPE when updates came through.

Communication:

Communication between people and their loved ones has been supported by arranged sightings/meetings, weekly letters and newsletters, telephone calls and video calls. People were supported to contact family and friends by tablets and extra phone lines were installed to assist this process. Families were able to visit their relatives who were on end of life if they wished to, and you ensured infection control measures were followed and they used PPE. You said that the GPs and the pharmacist were very supportive and lines of communication were good. There have been no problems in receiving advice and support from health professionals.