

Emergency Support Framework – guidance to support answering framework questions

Independent Health Care: dialysis May 2020

Support with answering ESF framework questions: Independent health care: dialysis services This guidance supports the cross-sector COVID-19 Emergency Support Framework Guidance and provides sector-specific supporting information.

This guidance covers Independent health care single speciality dialysis 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 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	
Overarching question (displayed in tool) and prompts	
 1.1. Have risks related to infection prevention and control, including in relation to COVID-19, been assessed and managed? Are you managing to keep up to date with current infection prevention and control (IPC) methods? What challenges have you faced? Have the arrangements been reviewed and amended in response to the challenges you have faced during the pandemic? Discussion points: 	NHSE/I Infection Prevention and Control supporting documentation https://www.england.nhs.uk/coronavirus/ publication/infection-prevention-and- control-supporting-documentation/
All dialysis patients have been advised to shield as they are identified as a vulnerable group; how is this fact being taken into consideration? What arrangements are in place to ensure use and compliance with up to date Infection Prevention and Control (IPC) Guidance in relation to Covid-19 How are changes in guidance and processes being	Link to Chief Medical Officer`s letter, confirming patients receiving renal dialysis have been added to the list of conditions that indicate someone is clinically extremely vulnerable to coronavirus: <u>https://www.england.nhs.uk/coronaviru</u> <u>s/wp- content/uploads/sites/52/2020/04/CO44</u>
communicated to staff and is necessary training being provided? Have there been any changes to the configuration of services? Such as a reduction of sessions, or appointments?	2 Renal-letter-to-trusts 27-April.pdf
of COVID-19? Are you managing to access supplies of PPE and equipment? ▶ Appropriate standard? ▶ Sufficient amounts? 	Public Health England- COVID-19: infection prevention and control (IPC) https://www.gov.uk/government/publicati ons/wuhan-novel-coronavirus-infection- prevention-and-control The Renal Association: <u>A statement on PPE usage for the care of dialysis patients</u> Public Health England COVID-19
 What assurances are there that staff are sufficiently skilled to use PPE equipment? Discussion points: What arrangements do you have in place to access PPE and do you know who to contact if you require additional support? 	personal protective equipment (PPE) https://www.gov.uk/government/publicati ons/wuhan-novel-coronavirus-infection- prevention-and-control/covid-19- personal-protective-equipment-ppe

	NHSE/I Guidance on Supply and Use of PPE https://www.england.nhs.uk/coronavirus/ wp- content/uploads/sites/52/2020/03/PPE- Letter-FINAL-20-March-2020-updated- on-22-March-2020.pdf Table 3, recommended PPE for ambulance staff, paramedics and other patient transport services: https://assets.publishing.service.gov.uk/ government/uploads/system/uploads/att achment_data/file/879108/T3_poster_R ecommended_PPE_for_ambulance_staff f_paramedics_transport_pharmacy.pdf
	Table 4, additional considerations: https://assets.publishing.service.gov.uk/ government/uploads/system/uploads/att achment_data/file/879111/T4_poster_R ecommended PPE_additional_consider ations_of_COVID-19.pdf
	NB: See <u>UK Renal Association</u> recommendation above: i.e. that, because people on dialysis are in this extremely vulnerable group and are also often with others when travelling and receiving treatment, patients should be provided with fluid-resistant surgical face masks.
	Kidney care UK: The latest news and information about COVID-19 for kidney patients: https://www.kidneycareuk.org/news-and- campaigns/coronavirus-advice/
1.3 is the environment suitable to containing an outbreak?	NICE guideline [NG160] COVID-19 rapid guideline: dialysis service delivery.
• Have you identified any risks within your environment in relation to managing COVID-19?	https://www.nice.org.uk/guidance/ng160 (particular <u>section 7</u>) Public Health England Reducing the risk
How have you managed these risks?	of transmission of COVID-19 in the hospital setting
Discussion points: Have you made to the layout/environment in response to COVID-19? (e.g. additional signage, waiting areas,	https://www.gov.uk/government/publicati ons/wuhan-novel-coronavirus-infection- prevention-and-control/reducing-the- risk-of-transmission-of-covid-19-in-the- hospital-setting

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COVID-19 and for patients known or suspected to have	
COVID-19, spaces between stations etc)	
1.4 Are systems clear and accessible to staff,	NICE guideline [NG160] COVID-19
service users and any visitors to the service?	rapid guideline: dialysis service delivery.
	https://www.nice.org.uk/guidance/ng16
 Are patients screened and triaged to assess 	<u>0</u>
whether they are known or suspected to have	
Covid-19?	
	Section 7 of the above NG160 refers to
Discussion points:	case ascertainment and cohorting:
	https://www.nice.org.uk/guidance/ng16
Have you considered whether anyone accompanying a	
patient to the dialysis unit may have COVID -9, how has	
this been assessed and how have you cohorted the	<u>cohorting</u>
patient/s appropriately?	
Have you assessed whether dialysis could be delayed	
until their COVID-19 status is known?	
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How have you reviewed facilities to minimise cross-	
infection so that patients can be dialysed in cohorts	
based on their COVID-19 status?	
1.5 Are medicines managed effectively?	
Has COVID-10 imported your ability to manage	
Has COVID-19 impacted your ability to manage modicines2	
medicines?	Kidney Care UK
What advice and options have been explored and	https://www.kidneycareuk.org/news-
used to ensure patients receive their medicines	and-campaigns/coronavirus-
safely and securely?	advice/#medications
Discussion points:	
Are dialysis patients aware that they may use home	
delivery services for their medicines?	
Are these involved in our physics medicines aware that	
Are those involved in supplying medicines aware that	
drivers delivering medicines should have received	
training in the new guidelines and also how to reduce	
risk of infection, by using gloves and hand gel and	
keeping a 2 metre distance between the driver, patient	
and any household members?	
What steps have been taken to track and take action on	
incidents related to medicines during the Covid -9	
period?	

 1.6 How is the service identifying and managing patient risks, and how has that been affected by the COVID-19 pandemic? Are there systems in place to manage and review existing risks? What action have you taken in response to new and emerging risks, including but not limited to those pose by COVID-19? Discussion points: Have there been any significant incidents related to COVID-19? If yes, how is learning from these being identified and shared taking into account the Serious 	Public Heath England COVID-19: investigation and initial clinical management of possible cases https://www.gov.uk/government/publica tions/wuhan-novel-coronavirus-initial- investigation-of-possible- cases/investigation-and-initial-clinical- management-of-possible-cases-of- wuhan-novel-coronavirus-wn-cov- infection
Incident Framework? Are the usual professional guidelines, standards and laws (including equalities, safeguarding, communication and mental capacity) that are ordinarily in place still being applied?	
2. Staffing arrangements	
 2.1 Are there enough suitable staff to provide safe care and treatment in a dignified and respectful way during the COVID-19 pandemic? Has the pandemic affected your ability to staff the service? 	Royal College of Physicians <u>https://www.rcplondon.ac.uk/news/ethic</u> <u>al-guidance-published-frontline-staff-</u> <u>dealing-pandemic</u> NICE guideline [NG160] COVID-19
• Have you been able to make sure that people get care and support from staff with the right knowledge and skills?	rapid guideline: dialysis service delivery. https://www.nice.org.uk/guidance/ng16 0/chapter/9-Staffing-when-workforce- capacity-is-reduced
 How are you supporting staff to deliver services where there have been significant changes to staffing arrangements? Discussion points: Given dialysis is a specialist area, how have the considerations set out in chapter 9 (workforce capacity reduced) of the NICE NG160 been taken into account? e.g. mental wellbeing of staff, identify staff in the regional network who have experience in dialysis but are not currently working in the area, tailored human resources advice to allow agile and safe staff deployment, fast track DBS where necessary etc 	CQC interim guidance on DBS and other recruitment checks: https://www.cqc.org.uk/guidance- providers/all-services/covid-19-interim- guidance-dbs-other-recruitment-checks COVID-19: How DBS is supporting the fight against coronavirus (gov guidance): https://www.gov.uk/guidance/covid-19- how-dbs-is-supporting-the-fight- against-coronavirus
	Health & Care Professions Council: COVID-19 Our approach to temporary registration

2.2. Are there realistic and workable plans for managing staffing levels if the pandemic leads to shortfalls and emergencies?	
 How has the pandemic affected your ability to staff the service? What has this meant for patients who use your services? What have you done to mitigate any impact on staffing levels? Where do you go to seek support? 	NICE guideline [NG160] COVID-19 rapid guideline: dialysis service delivery https://www.nice.org.uk/guidance/ng16 0/chapter/9-Staffing-when-workforce- capacity-is-reduced
 Discussion points: Have you been able to engage regional networks to enable rapid transfer of staff from one organisation to another to maintain safe levels of care? 	

3. Protection from abuse	
 3.1 Are people using the service being protected from abuse, neglect and discrimination and having their human rights upheld? Are people's human rights being recognised and respected? Discussion points: Have you encountered any issues which may affect the equality, diversity and human rights of your patients and how have you responded? 	Royal College of Physician's ethical guidance for frontline staff dealing with the pandemic and it's CQC impact assessment https://www.rcplondon.ac.uk/news/ethic al-guidance-published-frontline-staff- dealing-pandemic
	Joint statement on advance care planning (BMA, CPA, CQC and RCGP). https://www.rcqp.org.uk/about- us/news/2020/april/joint-statement-on- advance-care-planning.aspx

3.2 How have you managed safeguarding incidents or concerns during the pandemic?	
 Have there been any safeguarding incidents and how have you responded to these? Any themes/trends? Discussion points: Have safeguarding arrangements and systems in the provider's locality remained effective? Have you needed to review safeguarding registers and reviewed communication with other agencies where necessary? 	NHSE/I Guidance and updates for Trusts: At-risk patients https://www.england.nhs.uk/coronavirus/ publication/trusts-at-risk-patients/

4. Assurance processes, monitoring and risk management	
4.1 Has the provider been able to take action to protect the health, safety and wellbeing of staff?	NHS confederation
 How are you supporting and protecting the health and safety of staff during this period? 	https://www.nhsconfed.org/news/2020/0 4/action-needed-to-mitigate-covid19- risks-to-bme-communities-and-staff
• Are staff being adequately risk-assessed and placed in appropriate environments to protect their health and safety, including BAME staff?	Public Health England Guidance on shielding and protecting people who are clinically extremely
 How are you managing staffing issues such as sickness and caring/childcare responsibilities? 	vulnerable from Covid-19
 What changes have you made to ways of working to support your staff and ensure their safety? 	Health and Safety Executive RIDDOR reporting of COVID-19 <u>https://www.hse.gov.uk/news/riddor-</u> <u>reporting-coronavirus.htm</u>
Discussion points: What systems are in place to manage the occupational health needs and obligations of staff in relation to infection? Is debriefing being used effectively and where appropriate are staff being provided with appropriate access to emotional support, e.g. counselling?	Second phase of NHS response to COVID-19 and it's CQC impact assessment. PHE: Management of exposed healthcare workers and patients in health and social care settings

 How are you keeping up to date with relevant standards and guidance relating to the delivery of care and treatment? For example, transport arrangements for patients being treated as priority? How are 'business as usual' processes and systems being managed? For example, medication reviews, dietary advice. 	NHSE/I COVID-19 patient transport services: requirements and funding https://www.england.nhs.uk/coronavirus/ wp- content/uploads/sites/52/2020/03/C0035 -patient-transport-services-27-March- 2020.pdf Table 4: Additional consideration, in addition to patient transport: https://assets.publishing.service.gov.uk/g overnment/uploads/system/uploads/attac hment_data/file/879111/T4_poster_Reco mmended_PPE_additional_consideratio ns_of_COVID-19.pdf
	Renal Association published guidance about PPE and also wearing of masks by renal patients. https://renal.org/renal-association- statement-ppe-use-masks-dialysis- patients/ Public Health England - PPE for ambulance staff: https://assets.publishing.service.gov.uk/q overnment/uploads/system/uploads/attac hment_data/file/879108/T3_poster_Reco mmended PPE for ambulance staff_p aramedics_transport_pharmacy.pdf
4.3 Is the provider able to support staff to raise concerns during the pandemic?	
 Have you made any changes to the way staff are able to speak up and raise concerns? Are senior staff visible for advice and support? 	Joint statement on safety and speaking up during the Covid-19 emergency (CQC Chief Inspectors and the National Freedom to Speak Up Guardian:
Discussion points: Are you still able to have team meetings? Have you been supported and also able to listen and support staff?	https://www.nationalguardian.org.uk/ne ws/safety-and-speaking-up-during-the- covid-19-emergency/
4.4. Has care and treatment provided to people being sufficiently recorded during the COVID-19 pandemic?	NHSX COVID-19 Information Governance advice for staff working in health and care organisations https://www.nhsx.nhs.uk/covid-19-
• Are you experiencing any barriers to sharing or accessing patient information with other providers?	response/data-and-information- governance/information-

	governance/covid-19-information- governance-advice-health-and-care- professionals/
4.5 Have you been able to work effectively with system partners to plan and deliver care, including arrangements for sharing services and transferring service users?	
 Have you been identified for expanding capacity of NHS dialysis services? How are you working in your area, and sharing information with other services and/or providers? 	NICE guideline [NG160] COVID-19 rapid guideline: dialysis service delivery https://www.nice.org.uk/guidance/ng160 /chapter/8-Leadership-and-network- level-planning
Discussion points: How are you working with external partners and/or stakeholders, including information-sharing? e.g. commissioners, national bodies, Royal Colleges?	