

COVID-19 Emergency Support Framework

Engagement and support call Summary Record

Croft Residential Limited

Location / Core Service address	Date
The Croft Residential Home 20 Castlecroft Road Finchfield Wolverhampton WV3 8BT	08/09/2020

Dear Croft Residential 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 Are infection risks to people using the service being thoroughly assessed and managed?

Yes Infection risks to people using the service are being thoroughly assessed and managed.

1.2 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 people who use the service?

Yes The service has reliable access to the right personal protective equipment and C-19 testing for both staff and people who use the service.

1.3 Does the location's environment and layout support preventing and containing transmission of infection?

Yes The location's environment supports the preventing and containing the transmission of infection.

1.4 Are working arrangements and procedures clear and accessible to staff, people who use the service, their supporters, and visitors to the service?

Yes Working arrangements and procedures are clear and accessible to staff, people who use the service, their supporters, and visitors to the service.

1.5 Are medicines being managed safely and effectively?

Yes Medicines are being managed safely and effectively.

1.6 Are risks to the health of people using the service being properly assessed, monitored and managed?

Yes Risks to the health of people using the service are being properly assessed, monitored and managed.

Assessment Area 2

Staffing arrangements

2.1 Are there sufficient numbers of suitable staff to provide safe care and treatment in a dignified and respectful way?

Yes There were enough suitable staff to provide people with safe care in a respectful and dignified way.

2.2 Are there realistic and workable plans for managing staffing levels if the pandemic or other causes lead to shortfalls and emergencies?

Yes There were realistic and workable plans for managing any staffing shortfalls and emergencies.

Assessment Area 3

Protection from abuse

3.1 Are people using the service being protected from abuse, neglect, discrimination and loss of their human rights?

Yes People were being protected from abuse, neglect, discrimination, and loss of their human rights.

3.2 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?

Yes Safeguarding and other policies and practice, together with local systems, are properly managing any concerns about abuse and protecting people's human rights.

Assessment Area 4

Assurance processes, monitoring and risk management

4.1 Is the provider monitoring and protecting the health, safety and wellbeing of staff?

Yes The provider is monitoring and protecting the health, safety and wellbeing of staff.

4.2 Does the provider have effective systems and methods for monitoring the overall quality of the service and for responding to business risks and issues as they arise?

Yes The provider's systems and methods for monitoring the overall quality of the service and for responding to business risks and issues as they arise are effective.

4.3 Is the provider supporting staff and people who use the service to raise any concerns and give feedback?

Yes Staff are supported to raise concerns and give feedback about the service.

4.4 Is care and treatment provided to people being properly recorded?

Yes Care and treatment provided to people is being properly recorded.

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

Yes The provider is able to work effectively with system partners when care and treatment is being commissioned, shared or transferred.

Overall summary

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

- Infection control practice
- You advised infection control practices had been updated to reflect national

guidance on Covid-19 risk management. You advised a range of audits were in place to ensure staff were compliant with guidance and staff had received training in donning and doffing PPE from Wolverhampton CCG. You confirmed regular audits reviewed IPC practices to ensure compliance.

- Infection control products

You confirmed you maintained sufficient stocks of required PPE throughout the pandemic and had no concerns regarding obtaining PPE. You had accessed support from Wolverhampton Local Authority in the first few weeks of the outbreak, who supplied limited amounts of required PPE.

- Testing for COVID-19

You advised one resident had tested positive, after returning from a short hospital visit, however the outcome of this test was later disputed by Public Health, as possibly not reliable. There have been no other positive test results for either residents or staff. Weekly testing is being carried out for staff, and monthly testing for residents. You advised you were experiencing some delays in receiving staff test results, but had escalated these and received a response and apology.

- Staff support and training

You advised support had been made available to the staff team through both the management team and the provider. New staff had received a full induction, as per 'business as usual' processes. Training had now resumed and staff had undertaken small group face to face learning. You advised risk assessments were in place for each staff member and members of the BAME community had risks regularly reviewed.

- Management of the service

You advised management of the service had remained consistent and support for yourself as registered manager had been provided by the deputy manager and senior team. You advised both yourself and the provider had maintained regular contact with relatives, keeping them updated with any changes, particularly in light of visiting restrictions.