



Why have the CQC developed the Emergency Support Framework?

During the COVID-19 pandemic the CQC have made the decision to stop undertaking planned inspections. This is to reduce the burden on providers and to help limit the spread of the infection. However, the CQC still want to understand the issues, the concerns being experienced by you, provide and signpost support and also have some assurance that during the pandemic the care being provided by you is safe, compassionate and of good quality.

They also want to be able to inform the national picture, to influence strategy and be a voice for you in assisting to address concerns.

To do this they have developed the Emergency Support Framework.

What is the Emergency Support Framework?

During the COVID-19 pandemic, the Emergency Support Framework (ESF) is the way the CQC maintain an oversight of your service and gets 'first-hand' information to inform the national picture. The ESF is based around a conversation with you, during which they will ask you a few set questions. These questions help the CQC understand how well you are coping with the COVID-19 pandemic, whether additional support may be required and also if you are continuing to deliver safe, effective care for the people you support during the increased pressures caused by the pandemic.

There is more detail about the content and process associated with the ESF throughout this guidance document.

Should I be worried about the call?

No. All providers will be receiving a call from the CQC at some point and they have been clear that the primary function of the call is to be supportive, have a conversation with you about your experience of COVID-19 and understand the issues you are encountering. They may suggest resources, information, connections and guidance that you may not be aware of that could assist you in effectively managing during the pandemic.

However, you should treat the call seriously and be prepared to answer the questions asked of you. If your responses do not satisfy the CQC and cause them to question whether you are delivering a service that is maintaining the safety of the people using your service, they may decide to call you again to explore the concerns more fully or, in certain circumstances, commence enforcement actions.

When can I expect a call?

The CQC started using the ESF framework for GP practices from 18th May, and it is expected that over time, all services will receive a call. Before contacting you, they will review all the information they know about you from several separate sources including, but not limited to:

- Local Clinical Commissioning Group (CCG)
- Statutory notifications
- Safeguarding incidents
- Staffing information
- Information from the public
- Information from people that use services

This information will then be analysed and the CQC will prioritise calls to services that they assess as being of higher risk. Higher risk may be indicated by your current CQC rating, the time since your last CQC inspection, breaches of any regulations, risk registers, or predictive model score (this uses data science techniques and a combination of over 100 data items to give a calibrated view across the metrics (including QOF, GPPS, prescribing, staffing, childhood immunisations, CQC data, demographic data).

The CQC will arrange a time that is convenient with you for the call, so you can be prepared for the conversation. They will not call you unannounced or expect you to fit in around their arrangements.

How will the call be made?

The CQC will telephone you or use Microsoft Teams to have a video call, whichever is the most convenient for you. They may also ask you to send additional information by email or ask you to share information on your screen if using Microsoft Teams.



Who do the CQC want to talk to?

The CQC will normally want to speak with the Registered Manager as they are the person with responsibility for the service. If there is no Registered Manager in place, or they are unavailable, then the most senior member of staff with the widest knowledge and understanding of the service should be made available for the call.

What will they ask me about during the call?

The call will focus on four main themes. The focus of the questioning is how you have managed the service during the pandemic and mitigated the impact of any concerns you have had:

1. Safe care and treatment
2. Staffing arrangements
3. Protection from abuse
4. Assurance processes, monitoring and risk management

The questions provide a framework for the CQC to ensure that they are consistent in the way they treat all providers and as such, you will be asked the same questions as all other services.

Even though the CQC ask all the questions, they are clear that the ESF is about having a 'two-way conversation' and giving you the opportunity to let them know what issues you are encountering. This will allow them to understand more about your service and what support the CQC can provide or signpost you towards.

What are the individual questions under each theme?

There is a total of 15 questions across the four themes. Under each question there are some further questions that you will need to provide a more specific response to. Below are examples of the questions, but please do refer to the CQC website for a full and up-to-date [list](#).

1. Safe care and treatment:

- How have risks related to infection prevention and control, including in relation to COVID-19, been assessed and managed?
- Did you have enough of the right equipment to help you to manage the impact of COVID-19?
- How was the practice environment suitable to contain an outbreak?
- How did you make systems clear and accessible to staff, patients, and any visitors to the practice?
- How were medicines managed effectively?
- How had your risk management systems been able to support the assessment of both existing and COVID-19 related risks?

2. Staffing arrangements:

- Did you have enough suitable staff to provide safe care and treatment in a dignified and respectful way during the COVID-19 pandemic?
- Did you have realistic and workable plans for managing staffing levels if the pandemic leads to shortfalls and emergencies?

3. Protection from abuse:

- How were people using the service being protected from abuse, neglect and discrimination?
- How have you been able to properly manage any safeguarding incidents or concerns during the pandemic?

4. Assurance processes, monitoring and risk management:

- How have you been able to take action to protect the health, safety and wellbeing of staff?
- How have you been able to implement effective systems to monitor and react to the overall quality and safety of care?
- How are you able to support staff to raise concerns during the pandemic?
- How has care and treatment provided to people been sufficiently recorded during the COVID-19 pandemic?
- How have you been able to work effectively with system partners when care and treatment is commissioned, shared or transferred?

How should I prepare for the ESF call?

You should read this guidance and other information on the CQC website to make sure you are aware of the structure of the call and the questions that are going to be asked.

Treat the call as an opportunity to feedback to the CQC what your concerns are, the areas that you think that you have been innovative and how you have worked with other organisations to ensure the best outcomes for people who use your service.

Be aware that the CQC will be using the information they gather through the ESF process to inform the national picture and leverage additional resources to support you. Do not be afraid of explaining your difficulties, challenges and fears. Your openness will reflect positively on you and will help improve the situation for all providers.

Look at the questions in detail and make sure that you have evidence to report back to the CQC with. You know what you are going to be asked about so you should really be prepared. If you haven't got the evidence to support the questions, think about what practical steps you can take before the call. This will show them that you are aware of the issues and that you are taking action to address them.

Gather the views and opinions of other staff, people who use your service and external organisations so you can provide a 'holistic', rounded view rather than just your own impressions. The CQC will prefer this approach as it provides them with more assurance that you are aware of the issues and are keen to meet the challenges presented.

Understand, and if necessary, update your Business Continuity Plan and how it relates to COVID-19 and supports your management of the pandemic.

Ensure that all audits and monitoring continue as planned, e.g. medication, care plans, health and safety. Make sure there are action plans to address any areas for improvement or shortfall in required standards. These audits can then be used as evidence to support and inform your conversation with the CQC.

You should also be aware of the impact of COVID-19 and your ways of working on other people using your service. You should have evidence that you are not neglecting areas of your service that aren't directly impacted by COVID-19, and that your resources, systems and quality assurance are inclusive of all aspects of the service you provide.



How long are the calls?

The calls are usually less than an hour long, but if it is longer than that, do not be concerned. The call is a conversation and we know sometimes they can take longer than planned, especially when both parties are interested in getting the most from it.

How long will these calls replace the standard inspection process for?

The CQC have said that they are pausing planned inspections for the period of the COVID-19 pandemic. As such, the ESF could be in place for a number of months, but things can change rapidly so please keep yourself aware of the current situation by using the QCS management system and App, and also sign up for newsletters and emails direct from the CQC.

Are the calls seen as an inspection?

No. The CQC are clear that the ESF calls are not classed as an inspection and as such, the report isn't published on the website, there is no 'factual accuracy' process and your rating will not be changed as a result of the call.

Is there a written report of the call?

Yes. The CQC produce a 'summary report' of the conversation that is sent to you as a PDF attachment to an email. This report will include:

- The 15 questions that were asked and some standard wording that reflects your answer to each question
- Details of any innovative ways you may have developed to manage the situation.
- A summary of the specific internal and external risks and challenges that we discussed
- Any sources of support that the CQC suggested to help you
- A short summary of whether the CQC have assessed if your practice is 'managing' or 'needs support'



What will CQC do after the call?

The CQC may do a number of things dependent upon whether they think you are 'managing' or 'needing support'.

If they assess you as 'managing', there will normally be no further action taken as a direct result of the call, but your inspector will stay in touch with you and may plan another call if there is information that your situation has changed. The record of the call will be used to inform regulatory planning beyond the COVID-19 pandemic.

If the CQC come to the opinion that you 'need support', they have a number of avenues that they will explore with you dependent upon the nature, scale and impact of the concerns on your service. They may:

- Provide additional sources of support and suggest ways for you to manage more effectively
- Arrange a follow-up call to discuss progress with you

In exceptional circumstances, the CQC may decide to proceed with enforcement or arrange additional inspection activity by themselves, or with a 'system partner'. This will only take place if the concerns are serious and relate to significant harm, abuse or breaches of human rights. In addition, if the CQC is considering any enforcement action, a panel will review any proposals and the CQC Chief Inspectors will make final decisions.

However, the CQC have stated that they wish to work with providers and these calls should be viewed as 'supportive' and help reduce the burden and stress for you.

Who will the CQC share information about us with?

The actual summary record document will not be shared with anyone else apart from you, but if you want to share it you can do. However, if there is information that the CQC feel it is appropriate to share with the CCG, or other partners, they will. The CQC and local authorities have committed to work together with you to support you and your service. The intention is to reduce the burden on you and for them to present and work with you in a coordinated way. How they do this will largely be determined at a local level, but both organisations have made a national commitment to work in this way.

What action do I need to take?

- You should be proactive and make sure that you are regularly updating your own knowledge and understanding of the CQC approach during the COVID-19 pandemic
- Take full advantage of the latest information, resources, policies and guidance provided as part of your membership of QCS
- You should sign up for newsletters and emails from the CQC
- Be an active member of any local care networks that are good sources of information and support
- Reach out to other Registered Managers to understand and learn from their experience of the ESF
- Join the [QCS Facebook discussion group for General Practice](#) to share ideas and get support

