

## COVID-19 additional Frequently Asked Questions (FAQs)

This document contains the Frequently Asked Questions received by CIW between March – June 2020 at the peak of the COVID-19 pandemic.

We have reproduced them here for reference but please be aware that some of the guidance cited may have been updated. Please check for latest versions.

If you have any queries or other questions you would like to raise, please email us at [CIW@gov.wales](mailto:CIW@gov.wales).

### Generic

Do you have any advice for me regarding loss of earnings if I need to self-isolate and/or close my business temporarily?

We understand this is a deeply worrying and difficult time for many of our providers. We would encourage you to visit the [Business Wales website](#) that lists the financial help and support available for those businesses impacted by COVID-19.

### Notifications

Am I still required to make notifications to CIW?

There are no changes to the requirements to make notifications or the system used to make them – [CIW Online](#).

What changes have been made to the death of a service user notification and why?

We have amended the online form for notifying us about the death of a service user to include coronavirus (COVID-19) as a cause of death.

We have made this change to enable us to provide more accurate summarised data on deaths of people using social care services related to COVID -19.

### Staffing

If CIW receive concerns about staffing levels, will they issue non-compliance notices or will they take circumstances into account?

We appreciate that this is a very difficult time for providers. The safety and well-being of people remains our priority. We will be reviewing each concern as reported and will take a proportionate and considered response. If we believe a provider was not taking appropriate measures to mitigate this risk, we would consider taking enforcement action.

If providers have any concerns about their ability to deliver the service safely, they are urged to [contact us](#) to discuss these with us.

Will providers have the ability to move staff between provisions? For example non-registered care home staff delivering care within Domiciliary Care. Or Day Services staff in LD delivering care in Supported Living?

In the current situation, we recognise providers may need to move staff between services to ensure the safety and well-being of people. It will be important for staff working in unfamiliar services to be well supervised and supported.

Should staff training and development continue?

In these exceptional times we understand staff learning and development will not be a high priority as your focus will be on keeping people safe. Newly recruited staff will need to have induction; we realise it might not be possible to complete the full Social Care Wales induction framework at this time. Training should reflect the needs of people who use the services and ways of delivering training may need to change. We would expect all staff to have supervision, support and oversight, but this is particularly important for new staff and volunteers.

How will providers manage to get all staff registered with social care Wales when they are recruiting high numbers of additional staff to respond to the coronavirus emergency?

We have been liaising closely with [Social Care Wales \(SCW\)](#) and have agreed to extend the registration period before member of staff needs to register from 6 months to 12 months, in order to allow people extra time to complete their requirements. SCW has also extended the confirmed competence eligibility which should make things easier for more experienced staff members returning to the sector.

Is it okay to share staff with other services in our area?

You may need to work collaboratively with other providers in response to COVID-19 and we support partnership working. It is important to make sure staff have been safely recruited and are competent to support the people who use your service.

Have the requirements to have DBS changed?

The Disclosure and Barring Service have announced temporary arrangements to provide DBS checks and fast-track emergency checks of the Adults' and Children's Barred Lists, free-of-charge for health care and social care workers who are recruited in connection with the provision of care and treatment of coronavirus. These arrangements will provide employers with the option to appoint new recruits into regulated activity with adults and/or children, as long as the individuals are not barred and appropriate measures are put in place to manage the individual until the full DBS check is received.

How can I provide support to staff if I am social distancing / isolating?

It is important staff are well supported during this very challenging time. It is fine to do this virtually using technology such Skype / WhatsApp etc. A brief record of this should still be kept.

## Specific questions relating to those care services registered under the Regulation and Inspection of Social Care (Wales) Act (RISCA)

Can care staff focus on meeting people's core needs such as personal care, nutrition and medication where COVID-19 is having an impact, for example on staffing levels?

We understand these are unprecedented times and the care and support provided will need to adjust accordingly.

Are providers expected to support families to maintain contact with people living in care homes?

[Guidance](#) (External link) has been issued about considering different ways to help families to maintain contact whilst there is a need to maintain social distancing. This can include letters, phone calls and Skype. It's important to consider the timing of this for families who may be working.

Should we have DNACPR in place for everyone in our care home?

Decisions about advance care planning, including DNACPR, should always be made on an individual basis. Where a person has capacity, it is important an advance care plan is discussed with them directly. Where a person lacks capacity to engage with the process then best interest guidelines should be followed with the involvement of their family as appropriate.

Advance care plans, with or without DNACPR, should never be applied to groups of people.

Do we have to apply for DoLS authorisation if caring for someone with / suspected of having COVID-19 means they need to stay in their bedroom?

Where life-saving treatment is being provided in care homes or hospitals, including for the treatment of COVID-19, then this will not amount to a deprivation of liberty, as long as the treatment is the same as would normally be given to any person without a mental disorder. This includes treatment to prevent the deterioration of a person with COVID-19. For more detail please see the guidance published on 9 April "[The Mental Capacity Act \(2005\) \(MCA\) and Deprivation of Liberty Safeguards \(DoLS\) During the Coronavirus \(COVID-19\) Pandemic](#)"

What is the guidance for homes with nursing care not having a registered nurse on site at all times and no agency/relief nurses available?

Nursing support must be provided where people have been assessed as having nursing needs. If a service provider has exhausted all options they should contact commissioners (local authority and health board) for assistance; CIW should also be notified. Where possible this should be done at an early stage of identifying difficulties. It is also important to put staff who have symptoms forward for testing.

If a registered manager is unwell, is there any scope for another manager covering more than one service?

If a registered manager is unwell or self-isolating, the provider should put interim management arrangements in place. If the manager is absent for more than 28 days the responsible individual should notify CIW using [CIW Online](#).

Under regulation 69, a manager can be appointed to manage more than one service, but this must be discussed with us.

What is the expectation on domiciliary care agencies to keep their office open?

The service needs to be able to continue to operate and have in place alternative arrangements for supporting staff and provision of supplies. People in receipt of services should be informed of alternative contact arrangements. CIW should be informed of these changes.

Care staff are being asked by GPs to carry out low level observations (heart rate, temperature, blood pressure etc.) and forwarding these readings on to a GP for decisions? Is this ok?

Yes, as long as the person taking the observations is competent to do so and at all times the requesting clinician takes full responsibility for interpreting these observations and making decisions on clinical care and treatment.

I have submitted an application to register/vary a RISCA service, will you be able to register this quickly?

We have streamlined our registration / variation process and are prioritising this work to create capacity in the sector. [Guidance on our adapted processes](#) can be found on our website.

Will providers of RISCA services be required to submit an annual return in May 2020?

In light of the current pressures on social care providers due to the COVID-19 emergency, Welsh Government have agreed to delay implementation of the annual return requirement by one year, to May 2021.

You will not be required to complete an annual return in 2020.

Will CIW enforce the regulations around to pre-employment checks including DBS for social care staff, nursing staff and volunteers?

In response to coronavirus (COVID-19), the Home Office and the Disclosure and Barring Service (DBS) have put temporary arrangements in place, to provide DBS checks and fast-track emergency checks of the Adults' and Children's Barred Lists free-of-charge.

This will apply to healthcare and social care workers being recruited in connection

with the provision of care and treatment of coronavirus in England and Wales.

Further details can be found on the [UK Government website](#).

In addition, the Welsh Government has introduced temporary legislative measures to relax the requirements on adult care home and domiciliary support providers to undertake pre-employment checks on employees to help accelerate the recruitment of additional staff and volunteers during the pandemic.

These regulations [The Regulated Services \(Service Providers and Responsible Individuals\)\(Wales\)\(Amendment\)\(Coronavirus\) Regulations 2020](#) came into force from 5 June. Additional statutory guidance has been published by Welsh Government. This sets out more [details on how providers may comply with the regulations](#).

Are we able to use shared rooms to help create capacity?

The Welsh Government have introduced temporary legislative measures to support local authorities, health boards, adult care home and domiciliary support providers to respond to the pressures and challenges during the current COVID-19 emergency.

This includes relaxing the existing 15% shared rooms threshold, on a temporary basis, to enable service providers with unoccupied rooms or rooms which are not currently in use as bedrooms to increase the maximum capacity within their home, where this is needed as a consequence of the COVID-19 pandemic. This can only be done with the agreement of CIW (as a variation to an existing service). We will consider each variation request on a case-by-case basis, with regard to the best interests of all the residents.

These regulations [The Regulated Services \(Service Providers and Responsible Individuals\)\(Wales\)\(Amendment\)\(Coronavirus\) Regulations 2020](#) came into force from 5 June. Additional statutory guidance has been published by Welsh Government. This sets out more [details on how providers may comply with the regulations](#).

If my nominated online assistants are unwell, can I nominate more people?

We encourage all providers to nominate several online assistants to ensure you are easily able to share information with us. To find out how to set up an online assistant, [click here](#).

This is not applicable for Childcare & Play services.

Is it acceptable to request local authorities carry out assessments virtually rather than coming into the care home?

This will depend on individual circumstances. There should be a discussion with the social worker about the risks of visiting vs virtual assessment, wherever possible the person, or their advocate, should be involved in this decision making. In many cases, virtual assessment will be accepted during the current phase of the pandemic. The risk assessment discussion should be recorded.

Is it okay for community nurses to delegate tasks to care staff such as changing dressings?

Delegation of nursing tasks such as wound dressings should only be done when care staff have been trained and be deemed competent to undertake the task. Please review the [delegation guidance developed for health and care staff](#). If there is inappropriate delegation the social care worker should refuse to undertake the task and the matter should be escalated. In escalating the matter to senior managers, it should be to request the appropriate training and support rather than an outright rejection of supporting care that the person needs. During this pandemic, it is important for health and social care teams to work together to ensure no patient/resident is harmed through inappropriate action or omission of action.

Can I create capacity by turning a lounge or storage room for example into a bedroom?

We understand the need to create additional capacity. Where providers wish to convert existing spaces into bedrooms, this would involve an increase in their maximum numbers. Therefore providers must apply to vary their conditions of registration to increase their maximum numbers. This can be done via [CIW online](#) and would involve uploading a revised statement of purpose and a subsequent conversation with an inspector.

We will prioritise these applications but must consider them on a case by case basis given the unique nature and circumstances of each care home.

When applying for a change in maximum numbers, providers will need to consider the legal limits on the number of people who can be accommodated in a shared room.

Can we allow families to visit when a person who lives in a care home is at the end of their life?

Where it is safe to do, next of kin should be supported to visit their family member, one at a time, at the end of life. It is important to follow public health guidance on social distancing and good infection control with the provision of PPE if required.

Can families now visit people living in care homes or supported living?

Welsh Government has published [guidance on social distancing for everyone in Wales and protecting older people and vulnerable adults](#). Please see attached for details.

Can I visit my loved one who is living in a care home if local lock down is imposed?

Where local lock down restrictions are imposed, local authorities and individual providers may make decisions to temporarily suspend visiting. Imposing restrictions on both indoor and outdoor care home visiting has significant impacts on the well-being of residents, therefore any decision will be carefully balanced between the protecting those living in care homes from infection, and ensuring their continued wellbeing. Public Health Wales are offering expert advice based on the specific situation in the local area.

In exceptional circumstances, for example end of life situations, in areas where local restrictions have been imposed, all visits to care homes in these circumstances will continue to be permitted in all areas, regardless of local lockdown arrangements and the **national guidance** on supporting safe visits in exceptional circumstances continues to apply in these situations.

I am a care home manager, where can I find advice and guidance to help me?

**Social Care Wales have a lot of resources to guide you.** Also, as part of its working programme for supporting care homes to improve the quality of care for older people across Wales, Improvement Cymru have developed the following as a single point of access for **information relating to care homes.**

Should care staff now be wearing PPE to care for people?

**PHW advice** should be followed. As it is now considered there is sustained community transmission across the UK, the guidance was updated on 12 April. It contains enhanced PPE recommendations for a wide range of social care contexts. PPE should be used as set out Table 4 of PHW guidance sets out what used. Additional **guidance on how to work safely in a care home** can be found on the UK Government website.

Can window visits still take place if a care home has a COVID:19 outbreak?

Yes window visits can take place in homes where there is an outbreak if:

- this can be supported by the care home staff
- visitors do not enter the home
- the resident is able to come to a window without exposing other vulnerable residents if infected, or being exposed to infected residents

## Specific questions relating childcare and play services

Can children be looked after by DBS-checked volunteers to enable parents to work, for example in a crèche in a workplace or office?

If this childcare is unpaid, and people looking after the children are unpaid volunteers, then this would be exempt from registration. If there is any reward for providing the care, it would need to be registered.

During Coronavirus related closures, can I continue to charge parents where their children are not attending my setting?

The Welsh Government acknowledges that, in many cases, the insurance that early years providers have will not cover you for income lost during the COVID-19 related closure. Welsh Government is asking you as a childcare provider to be reasonable and balanced in your dealings with parents. You may also need to consider individual contract arrangements. The Welsh Government is keeping what further support businesses may require under close review.

If a Nursery has furloughed staff, including members of management team, do we need to send a notification?

Not unless it affects ratios/staffing or it means that the service is now closed.

First aid courses have all been cancelled and so I'm worried I cannot renew my certificate.

We are aware that there are some courses available which include 1 day online and 1 day practical but that spaces are limited due to social distancing. Where you need to renew your first aid certificate and you cannot access a practical course, then in the first instance, you can undertake an online course to update your knowledge but then access a suitable practical course at the earliest possible opportunity.