

Title/Subject: National Health and Social Care Standards
Meeting: Integration Joint Board
Date: 6 April 2018
Submitted By: Head of Social Work Adult Services
Action: For Noting

1. INTRODUCTION

- 1.1. The purpose of this report is to advise the Integration Joint Board (IJB) on the adoption of new National Care Standards for inspection, registration and quality assurance of health and social care services.
- 1.2. Following public consultation, the Cabinet Secretary for Health and Sport approved the new “Health and Social Care Standards: My support, my life” on 9 June 2017. These new Standards replace the National Care Standards which have been in place since 2002.

2. RECOMMENDATIONS

The Integration Joint Board is asked to note:

- 2.1. development and the adoption of the new Standards from April 2018
- 2.2. actions being taken as set out in paragraphs 4.10 to 4.17, in preparation for the introduction of the new Standards
- 2.3. intention to provide further reports to the IJB following receipt of further guidance from the Care Inspectorate and Healthcare Improvement Scotland and the local experience of the implementation of the new Standards.

3. BACKGROUND

- 3.1. The first major review of National Care Standards since 2002 has now been undertaken following an extensive consultation exercise between October 2016 and January 2017. Seven draft standards were proposed for public consultation and 19 engagement events were held across Scotland by the Care Inspectorate (CI) and Health Improvement Scotland (HIS).
- 3.2. Since 2002 there have been significant changes. More people are supported in their own homes; the quality of the care experience is now considered as important as other aspects of care such as safety, and the establishment of HSCPs means that when people use health or care services they should get the right care and support, whatever their needs. To support these needs a new

single set of Health and Social Care Standards is needed across all care services people may use in their lifetime.

- 3.3. The objectives of the new Standards are to drive improvement, promote flexibility and encourage innovation in how people are supported and cared for. From 1 April 2018 the Standards will be taken into account by the CI, HIS and other scrutiny bodies in relation to inspections and quality assurance functions and when considering applications for the registration of health and care services. Rather than just checking that a service is complying with the basic inputs for all people, inspections are increasingly looking at what it is like to actually use a service. Inspectors from different scrutiny bodies now also work jointly to look at how individuals experience a range of services within the care system. More integrated standards, which look at how the rights and wellbeing of people who use care are protected and improved, from strategic commissioning to the actual experience of using the service will, it is argued, provide a more effective and relevant model of scrutiny fit for the future.
- 3.4. It is expected that all care providers, Integration Joint Boards, Local Authorities, Community Planning Partnerships and Community Justice partners will be using the standards from April 2018, in how they plan, commission and deliver care. The challenge over the next few months is how to prepare for these changes. Section 4 sets out proposals to meet the new Standards.

4. THE NEW STANDARDS EXPLAINED

- 4.1. New human rights based Health and Social Care Standards have been developed. They set out what we should expect when using health, social care or social work services in Scotland. This means empowering people to know and claim their rights and increasing the ability and accountability of individuals and organisations who are responsible for respecting, protecting and fulfilling rights.
- 4.2. All services and support organisations, whether registered or not, should use the Standards as a guideline for how to achieve high quality care.
- 4.3. The new Standards are wide reaching, flexible and focussed on the experience of people using services and supporting their outcomes. One of the major changes to these Standards is that they will now be applicable to the NHS.
- 4.4. They do not replace previous standards and outcomes relating to healthcare that have already been produced under section 10H of the National Health Service (Scotland) Act 1978 but they will replace the National Care Standards published in 2002 under section 5 of the Regulation of Care (Scotland) Act 2001.
- 4.5. The Standards are published in exercise of the Scottish Ministers' powers under section 50 of the Public Services Reform (Scotland) Act 2010 and section 10H of the NHS (Scotland) Act 1978.

4.6. **Who are these Standards for?**

The Standards are for everyone. The standards can be applied to a diverse range of services from child minding and day care for children in their early years, housing support and care at home for adults to hospitals, clinics and care homes.

4.7. One single set of Standards has been agreed to promote coherence at every level and takes into account that many people use different types of care at the same time.

4.8. The Standards should be used to complement the relevant legislation and best practice that support health and care services to ensure high quality care and continuous improvement.

4.9. **What are the Standards?**

The [Health and Social Care Standards](#) describe both the headline outcomes, and the descriptive statements which set out the standard of care a person can expect. Not every descriptor will apply to every service.

The headline outcomes are:

- I experience high quality care and support that is right for me.
- I am fully involved in all decisions about my care and support.
- I have confidence in the people who support and care for me.
- I have confidence in the organisation providing my care and support.
- I experience a high quality environment if the organisation provides the premises.

Each Standard is underpinned by five principles: dignity and respect, compassion, be included, responsive care and support and wellbeing. These principles are not standards or outcomes but rather reflect the way that everyone should expect to be treated.

How will local Implementation of the Standards be supported?

4.10. Briefing materials have been produced by the Training and Workforce Development Team to help Service and Team Managers to raise awareness and familiarise themselves with the Standards and to prepare to take these into account from April 2018 when planning, commissioning and delivering services. Frequently Asked questions can be accessed [here](#).

4.11. This will be accompanied by a template for completion by Service and Team Managers which requires them to record the steps taken to raise awareness of the Standards, their relevance in specific settings and how they will impact on the workforce.

4.12. Completed templates will be collated and will contribute towards Service and Team self-evaluation alongside providing assurance of steps being taken towards local implementation.

4.13. Health

The Nursing Practice Development Unit has commenced work with Practice Education Facilitators to identify key stakeholders to map the new standards against existing ones, for example in relation to the care of older people in hospital and people with dementia. This includes Practice Education Facilitators who work in care homes to support undergraduate nursing students. This work will be shared through Clinical and Care Governance processes

The National Health and Social Care Standards were discussed at a recent meeting between NHS Board Liaison Coordinators and Healthcare Improvement Scotland (HIS). HIS advised that they believed that the development of the standards supported the Quality of Care Approach being developed and tested by HIS and joint working and joint inspection.

The Quality of Care Appraisal and a draft edition of the Quality Framework is currently been tested in a full end-to-end pilot in NHS Orkney. NHS HIS have advised that they do not plan to inspect individual clinical specialities against the National Health and Social Care Standards. They are currently involved in supporting Boards in promoting the standards and have analysed a number of elements in Boards and at public events as well as publicising them on their website and via twitter.

4.14. Adult Care

In respect of Adult Care, the Care Inspectorate expects to work alongside care providers and umbrella bodies to collaborate on the new scrutiny model that will start next year with Inspections of Care Homes for Older People. There is expected to be local engagement in this process alongside ongoing work being undertaken to further develop our processes of self-evaluation and quality assurance. This work will be linked to and take account of the new Standards.

- 4.15. The Social Work Service SVQ Centre team has considered the new Standards during a recent development session. This included a focus on the Assessors role in helping SVQ candidates to evidence their understanding of them; their adherence to the Standards in practice and why they apply. Also given consideration was the need to develop a timescale when candidates will be expected to evidence the new Standards, to ensure that this takes into consideration when the Care Inspectorate will be assessing work practice against the new Standards, (May 2018).

- 4.16. Within the Care and Support at Home Services and residential and day care services the National Care Standards are the cornerstone on which provision is based and ultimately inspected. All staff will be provided with access to a copy of these new standards and discussion on them in their own registered setting, in line with the proposals as set out above. Staff will be offered time to discuss and explore the impact of these new standards and what they mean as regards their own practice in providing care. Briefing sessions which will allow for information giving, as well as time to reflect on individuals practice, will be arranged for staff to attend. These sessions have been arranged from April 2018 onwards and will

be attended by significant staff numbers. These would be across localities at a variety of venues and times to ensure all staff have the opportunity to attend.

- 4.17. A future report to the Integration Joint Board will further set out the implications for the wider HSCP of the new Standards once further clarification and guidance is received from the Scottish Government. This will hopefully cover the implications for the planning and commissioning of services as well as assessment and the health services managed under the HSCP.

5. CONCLUSION

- 5.1. The introduction of the new National Health and Social Care Standards from April 2018 is to be welcomed. This report details the new national standards and sets out the approaches to be adopted being developed across Health and Social Work Adult Services in preparation for the revised national standards.

Resource Implications

There are no resource implications. The amendment to existing National Standards will be realised from current resources.

Impact on IJB Outcomes and Priorities

The new National Standards are consistent with Falkirk HSCP strategic outcomes.

Legal & Risk Implications

The current risk of failing services remains under the new Standards. Actions being taken for the new standards mitigate risk.

Consultation

There are no requirements arising from the content of the report.

Equalities Assessment

There are no requirements arising from the content of the report.

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Date: 23 March 2018