

Development of New National Care Standards: An Update Report

Report to: Board
Date: 26 June 2015
Report by: Rami Okasha, Acting Director of Strategic Development
Report No: B-08-2015
Agenda Item: 12

PURPOSE OF REPORT

To advise members of developments in relation to the update of the National Care Standards.

RECOMMENDATIONS

That the Board:

1. Notes the report.

Version Control and Consultation Recording Form

Version	Consultation	Manager	Brief Description of Changes	Date
	Senior Management			
	Legal Services			
	Resources Directorate			
	Committee Consultation (where appropriate)			
	Partnership Forum Consultation (where appropriate)			
Equality Impact Assessment				
To be completed when submitting a new or updated policy (guidance, practice or procedure) for approval.				
Policy Title:				
Date of Initial Assessment:				
EIA Carried Out			YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
If yes, please attach the accompanying EIA and briefly outline the equality and diversity implications of this policy.				
If no, you are confirming that this policy will have no negative impact on people with a protected characteristic and a full Equality Impact Assessment is not required.			Name: Position:	
Authorised by Director	Name: Rami Okasha		Date: 19/06/15	

1.0 BACKGROUND

The National Care Standards were created under the Regulation of Care (Scotland) Act 2001 and describe what people using a range of care services in Scotland can expect. There are currently 23 standards which are based on care settings including childminders and nurseries, care homes, housing support, services for people in criminal justice supported accommodation and independent hospitals. The standards, which are written from the point of view of people who use services, are one of the measures by which the Care Inspectorate – and, in the case of independent healthcare, Healthcare Improvement Scotland – assess the safety, effectiveness and quality of the care services it regulates.

There has been a significant change in the policy and delivery landscape since the standards were published in 2002 and Scottish Ministers have committed to a review to update and improve standards in line with current expectations of quality care.

2.0 CONSULTATION

A consultation paper on revising the National Care Standards was published by the Scottish Government in June 2014. This received 475 responses from a wide range of stakeholders, organisations that represent the views of people who use services, providers of services, and professional bodies

The consultation set out a range of human rights-based proposals for developing new standards that would improve the quality of care and protect vulnerable people. The proposed model would see the development of overarching quality standards, a set of general quality standards which would apply to all care and health services, and a suite of specific standards for particular aspects of care, circumstance or need.

In our consultation response, the Care Inspectorate welcomed the proposal for standards to apply to health and social care services and the opportunity for greater collaborative working across the scrutiny bodies. This aligns with the new expectations on the Care Inspectorate and Healthcare Improvement Scotland to work together to evaluate the effectiveness of the new integrated landscape.

The Scottish Government issued a report on the consultation on 29 April 2015. On the whole, the proposals in the consultation were well supported with 92% of respondents agreeing that new standards should take a human rights-based approach. Over 85% of those who provided a view supported the development of overarching quality standards which apply across health and social care.

Many respondents stressed the view that the existing 23 standards should be streamlined and should reflect other established approaches to effective

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practice. Most respondents found it challenging to articulate how generic standards would relate to specific standards and this needs further discussion.

3.0 GOVERNANCE ARRANGEMENTS

The Scottish Government has established a project board, chaired by a senior civil servant, to progress the development of the standards. A Project Initiation Document is being developed for the project board to approve. At the project board meeting in January 2015, it was agreed that the Care Inspectorate and Healthcare Inspectorate Scotland would be asked to lead on the development of the over-arching principles and standards.

The Scottish Government has now asked both organisations to set up and co-chair a development group to take this work forward. The development group will report to the project board which will continue to provide strategic leadership to the review. The project board will also continue to be the decision-making body and make recommendations to the Scottish Ministers regarding the new standards. The development group is jointly chaired by the Care Inspectorate and Healthcare Improvement Scotland at director level. The development group has met once and comprises a wide range of stakeholders from providers, umbrella organisations and advocacy groups, with the expectation that members seek views and involve their own members, stakeholders and existing networks.

4.0 TIMESCALES

The Scottish Government expects the project board to develop, test and introduce new standards in 12 to 18 months from now. It is hoped to have a discussion paper ready for issue amongst stakeholders in the summer period.

5.0 IMPLICATIONS FOR THE CARE INSPECTORATE

The review of the standards will have a significant impact for the Care Inspectorate. The current review of scrutiny and improvement, which is examining our methodology for inspection, has been designed to anticipate the development of new standards. The timescale for both major projects means that much of the development work can happen in parallel and appropriate links can be made at a developmental, rather than later, stage.

6.0 RESOURCE IMPLICATIONS

It is necessary to build a team of staff at an operational level who can support the Care Inspectorate's involvement in the development group and associated pieces of work. Consideration is now underway to see how this can be resourced by drawing on the existing and relevant skills of Care Inspectorate staff. It is anticipated that the Executive Team will consider the resourcing implications shortly. It is anticipated that staff from a wide range of departments will contribute to the development in different ways, with an

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important role for the expert groups. Ancillary support in the field of communications, involvement, policy, intelligence and project management will also be needed and it is planned for such colleagues from the Care Inspectorate and from Healthcare Improvement Scotland to work closely together.

7.0 BENEFITS FOR PEOPLE WHO USE SERVICES AND THEIR CARERS

The current national care standards require revision. Having played an important role over a number of years, they no longer meet the expectations of people using services, providers and scrutiny bodies sufficiently well. Because of the proposed grounding in human rights, the new set of standards will support a much more person-centred approach to care delivery and a much more outcomes-based approach to scrutiny. This is essential to be able to drive improvement and ensure that everyone using a care service experiences safe, high-quality, compassionate care.

8.0 CONCLUSION

The Board is invited to note this paper.