

Review of National Care Standards: Consultation open

The Scottish Government is asking for views on major changes to the National Care Standards, to help improve the quality of care and protect vulnerable people.

They want to develop overarching standards, based on human rights, which set out the core elements of quality that should apply across *all* health and social care services. This includes all NHS services, including hospitals, for the first time.

The proposed new National Care Standards will impact all RCN members in Scotland, no matter where you work. We want to hear your views on what is being planned by 1 September 2014.

Background

Originally introduced in 2002, there are currently 23 different sets of National Care Standards that apply to a range of care services, including care homes, independent hospitals and hospices.

There have been many changes since the National Care Standards were introduced, including the integration of health and social care, self-directed support and Getting It Right For Every Child (GIRFEC). The Scottish Government is asking how they should update and improve the National Care Standards to reflect the changes that have happened.

Importantly, they believe there should be fundamental quality standards that apply to *all* health and social care services. They are proposing new overarching standards, based on human rights, which will set out the rights of people using a service and the responsibilities of service providers to deliver high quality care.

The current National Care Standards are quite specific in scope, and focus on particular settings, such as care homes. This proposal would see the remit of the National Care Standards become significantly wider, to cover all health and social care services in Scotland, including all NHS services.

No matter where you work, in a hospital, care home or out in the community, with children or with adults, the National Care Standards will apply to you. We want to hear what you think of what the Scottish Government is proposing by 1 September 2014.

What is being proposed

The Scottish Government is asking for views on their approach and the scope of the review of the National Care Standards. They are not, at this time, asking for views on the content of the new standards. They are proposing:

1) *A new structure*

The new model will replace the current 23 separate sets of National Care Standards and include three levels of standards:

<p>a. Overarching quality standards that apply to all health and social care services and apply to all age groups Essential standards based on human rights, such as dignity, equality, fairness, respect, the best interest of the child and children’s evolving capacities. Will complement the national outcomes for adult health and wellbeing, and the SHANARRI¹ outcomes for children and young people</p>						
<p>b. Set of general quality standards which cover areas relevant to all health and social care services For example standards relating to participation, quality assurance and improvement, personalisation, health and wellbeing Will set out both <i>essential (minimum) requirements</i> and <i>aspirational elements</i> to promote improvement</p>						
<p>c. Suite of specific standards for particular aspects of care, particular groups of people, circumstance or need For example, these could include:</p>						
Children and young people	Nutrition for older people	People in the criminal justice system	Supporting people who use medication	Infection control in communal settings	People with learning disabilities	Palliative care

2) *Setting out both the rights of users and the responsibilities of staff*

The Scottish Government is proposing that the standards should set out both the rights of people using services and the responsibilities of service providers to deliver high quality care.

It has given the following example of how overarching standards could set out the rights of people using services and the responsibilities of service providers:

¹ SHANARRI – safe, healthy, achieving, nurtured, active, responsible, respected and included

<p>As a person who uses services I have the following rights <i>(these are examples only):</i></p> <p>Participation I have the right to take part in decisions which affect me, to have and be supported to exercise choice in relation to the care I receive.</p> <p>Accountability Those that provide care services will be monitored and accountable for upholding my rights – including through accessible and effective complaints processes - and ensuring that services are of the highest quality.</p> <p>Non-discrimination and Equality I will not be discriminated against on any grounds such as age, disability, gender reassignment, pregnancy and maternity, race, religion and belief, sex and sexual orientation, or any other status (such as health status).</p> <p>Empowerment I have the right to know what my rights are and how I can make them effective.</p> <p>Legality All of my human rights must be respected, protected and fulfilled when I use care services. These include my right to be treated with respect, my right to dignity, my right for my privacy to be protected and my right to independent living.</p>	<p>As a service provider we have the following responsibilities <i>(these are examples only):</i></p> <p>Participation We will ensure everyone has the support and information they need to make informed choices and decisions about their support/care. We will meaningfully involve people in decisions that affect them.</p> <p>Accountability We will develop effective management, monitoring and complaints processes which are adequate to ensure that the rights of those who use our services are upheld in practice. We will ensure adequate training, support and conditions of employment for our staff to enable them to uphold the rights of those who use our services.</p> <p>Non-discrimination and Equality We will not discriminate against anyone on any grounds such as age, disability, gender reassignment, pregnancy and maternity, race, religion and belief, sex and sexual orientation, or any other status (such as health status).</p> <p>Empowerment We will take steps to increase awareness of rights and of how they can be upheld.</p> <p>Legality We will respect all human rights. These include the right to be treated with respect, dignity, privacy, independent living.</p>
---	---

3) Changes to how the standards will be enforced

The Scottish Government is proposing that the new overarching standards will sit above all existing standards, principles and codes of practice for health and social care.

They want the Care Inspectorate and Healthcare Improvement Scotland to hold services they regulate to account for meeting the overarching standards, the general standards and the suite of specific standards.

Services not regulated by the Care Inspectorate or Healthcare Improvement Scotland will also need to meet the standards. The Scottish Government is asking for views on how this could be done.

One suggestion is that this could be done through the partnerships that will be created under the integration of health and social care. These partnerships will be responsible for planning and commissioning services and therefore could hold services to account for meeting the standards. Another suggestion is that there could be further joint inspections of health and local authority services.

Timescale of the review

The Scottish Government's consultation on the approach and the scope of the review of National Care Standards closes on 17 September 2014.

If there is support for developing overarching quality standards for health and social care, they will further consult on the content of the new standards during 2014-15. They plan to have the new standards in place from April 2015.

What you can do

We want to hear about what you think of the Scottish Government's plan for the National Care Standards. This will help us prepare an RCN Scotland response to the Scottish Government's consultation.

There are some suggested questions on the next page to help guide you.

If you have any feedback on what is proposed, or would like to discuss further, please contact Helen Richens, Policy Officer, by 1 September 2014.

Helen.richens@rcn.org.uk 0131 662 6135

Tell us what you think of the National Care Standards review

1. What do you think of the proposal to extend the National Care Standards to all NHS services?
2. How do you think the National Care Standards should fit alongside other existing standards/principles, for example, standards for older people in acute care, HEI standards, dementia standards, GIRFEC principles, the Patients Rights Act?
3. How clear do you find the model that the Scottish Government is proposing?
4. What would be the advantages and disadvantages of having overarching standards, based on human rights, which apply to all health and social care settings, and to all age groups?
5. What would be the likely impact on staff if they introduce these new standards?
6. What would be the advantages and disadvantages of having standards that set out both the essential (minimum) requirements and the aspirational standards of care?
7. What do you think of having standards that include both the rights for service users and the responsibilities of staff?
8. How should the standards be enforced or inspected against?
9. Do you have any other comments on what is being proposed?