

ANGUS COUNCIL

CHILDREN AND LEARNING COMMITTEE – 16 AUGUST 2018

HEALTH AND SOCIAL CARE STANDARDS

1. BACKGROUND

- 1.1 The Health and Social Care Standards set out that people using social care services should expect to be treated with respect and dignity with their human rights upheld. The standards now apply to all health and social care settings.

2. NEW HEALTH AND SOCIAL CARE STANDARDS

- 2.1 In 2017 the Scottish Government published 'Health and Social Care Standards: My support, my life' under section 50 of the Public Services Reform (Scotland) Act 2010 and section 10H of the National Health Services (Scotland) Act 1978. They are designed to complement relevant legislation and best practice. These standards have been informed by learning from inspections and complaints investigations as well as the views of people experiencing care and extensive public consultation. The standards replace the National Care Standards published in 2002.
- 2.2 All services and support organisations, whether registered service or not, are encouraged to use the guidelines to support them to improve innovate and develop flexible services. The new standards apply to all parts of the care system across health care, social care, early learning and childcare, and social work; meaning they will have a far wider impact and apply to many more people's experiences of care.
- 2.3 The standards set out what people can expect when using health, social care or social work services in Scotland. They aim to support the delivery of better outcomes for people with standards shaped under five headline outcome statements:
- 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.
- 2.4 From 1 April 2018, the standards are being taken into account by scrutiny bodies in relation to inspections and registration of health and care services. They are intended to support a change of regulatory culture toward a more collaborative approach to continuous improvement within and across services.
- 2.5 The Care Inspectorate intend to take a phased approach to the incorporation of the standards into inspection methodology. Consideration is currently been given to whether existing themes and grades used for inspection need to be amended and there will be consultation before any changes are implemented. A new inspection methodology, informed by the new standards, is currently being tested within care homes for older people. The standards apply to inspections of both operational services and strategic inspections.
- 2.6 Services will continue to work with the Care Inspectorate to consider how changes in their methodologies need to be incorporated into local self-evaluation and quality assurance activities. This will include activities such as raising awareness of the standards across the workforce and incorporating relevant outcome and descriptive statements into case file auditing and other self-evaluation tools. A range of staff across relevant services attended a session led locally by the Care Inspectorate.

3. CONCLUSION

- 3.1 We will continue to work collaboratively with the Care Inspectorate to ensure that the standards are implemented and embedded in local practice.

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