

Response ID ANON-4ZP6-AWZP-P

Submitted to **Consultation on the New National Health and Social Care Standards**

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About You

What is your name?

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Are you responding as an individual or an organisation?

Organisation

What is your organisation?

Organisation:

Royal College of Physicians of Edinburgh

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The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

Publish response with name

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

Yes

Did you attend an engagement event/workshop before completing this response?

No

Date:

Name of event:

Questions

1 To what extent do you think the Standards will be relevant and can be applied across all health, care and social work settings?

Agree

Comments:

The Standards are relevant and can be applied across all settings. The real concern, however, is whether they are too broad and can realistically be achieved. To do so will require significant investment in training and supervision. Health and social care partnerships are currently not sufficiently well resourced to be able to deliver these laudable aims, and there needs to be widespread support for the development of new care models in general practice, secondary care and wider primary care. It is also key that the core NHS workforce is engaged in this work. It is possible if resources are removed from secondary care too quickly we will end up with a more fragmented service which will fail to deliver safe care in the community as it will take time and careful planning to allow transition to occur.

The standards as set out are aspirational, which is commendable, but more information is needed on how they can be operational with points of reference for monitoring.

We have some concerns that some standards are not expressed in a manner which can be readily understood. Human rights as a term is loosely employed. A human rights framework should be laid out e.g. the PANEL approach (Participation, Accountability, Non-Discrimination, Empowerment, Legality) as frequently employed by the Scottish Human Rights Commission. For the standards to be realised it is necessary people understand their rights and are able to claim them.

2 To what extent do these Standards reflect the experience of people experiencing care and support?

Neither agree nor disagree

Comments:

Many organisations will aspire to such standards – and deliver them to a greater or lesser extent. The biggest issues are lack of resources and differences between council areas.

These standards are not reflective of the experiences of some groups/ individuals requiring care and support and the stigmatisation of some marginalised and vulnerable populations remains. This includes those experiencing health inequalities and specific health challenges such as addiction, homelessness and mental health problems. Populations with poor health literacy are often not skilled in articulating their needs.

We also have some concerns about the representation of the frail elderly, rather than their proxies or carers, particularly those with dementia.

3 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

3 - Standard 1: I experience high quality care and support that is right for me.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

Any other comments:

This Standard is very aspirational –however, many people do not understand or know what is right for them in relation to their health – or what they can expect from services. As identified by the World Health Organisation (2015) marginalised and vulnerable populations are often less likely to enjoy the right to health. In Scotland this is an issue which must be addressed in relation to improved health literacy for vulnerable and marginalised populations.

With the increasing number of elderly patients being admitted to hospital with multiple pathologies and social issues there is a need for significantly more resources to achieve this standard. The views of the frail elderly are underrepresented in all sections.

Care in “institutions” including hospitals will remain as important as domiciliary care and the standards should not lose sight of this.

High quality care and support must be extended empathetically in a manner (e.g. with compassion) which acknowledges the individual needs of the recipient. The manner in which the Standard is applied will be important.

4 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

4 - Standard 2: I am at the heart of decisions about my care and support.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

There is little mention of participation or involvement – being ‘at the heart of decisions’ could still denote a patriarchal attitude. Recipients of care need assurance that they will be involved in decisions regarding care and support from the outset. Issues should be explained to them in a manner which is appropriate to their understanding. Reference could be made to the PANEL approach which highlights that embracing participation involves giving everyone the right to participate in an informed way in decisions which affect them. Participation should be active, free, and meaningful and give attention to issues of accessibility which includes access to information in readily understood form and language.

Any other comments:

Health and social care workers tend to err on the side of caution and may be reluctant to take calculated risks – even if the person has indicated they wish to do so. Staff need to be clearly supported by the organisations involved in order to feel able to facilitate positive risk taking.

Such a statement requires improved health literacy and access to information for a range of populations.

5 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

5 - Standard 3: I am confident in the people who support and care for me.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

In relation to 3.10 there may be issues with definition – if a service user is told in writing/verbally who provides their care is that the same as them “knowing”?

The inclusion of the word ‘trust’ in addition to ‘confident’ could add more substance to this standard. Trust is essential for the improvement of standards and relationships.

Any other comments:

There is insufficient time available for those providing care to consistently deliver this standard. The standards are rightly aspirational – but they should be

accompanied by a realistic recognition of what is, and is not, possible given current constraints on resources.

The Standard can only be achieved if relevant staff members are versed in the vocabulary of human rights and are able to put these into practice. The PANEL approach encompasses accountability and demands effective monitoring of human rights. If accountability is to be effective there must be the appropriate mechanisms in place including those for obtaining redress for alleged violation.

6 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

6 - Standard 4: I am confident in the organisation providing my care and support.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

The word 'informed' should be considered for inclusion in this statement.

Any other comments:

It is not made clear who is ultimately responsible for the patients' care.

7 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

7 - Standard 5: And if the organisation also provides the premises I use.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

The word 'premises' could be changed to 'setting' which is more reflective of health and empowerment of populations from a settings approach.

Any other comments:

As in Q6, it is not clear who is ultimately responsible for the patients' care.

Many health and social care facilities are far from meeting this. Some form of audit will be required to ascertain the resources which would be required to deliver this standard. For example, something as simple as universal internet access in care homes is far off— yet may contribute positively to the delivery of some aspects of care as well as enhancing quality of life for residents.

8 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

8 - Standard 6: And where my liberty is restricted by law.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

Any other comments:

This is an area where significant improvements are required in relation to criminal justice agencies in the community and the prison setting. Those who tend to become involved in the criminal justice system often have poor health literacy, complex health needs, have experienced significant health inequalities, and may be unable to express their needs.

The stigmatisation of these individuals often becomes a major barrier to engaging with health services in a timely manner.

9 To what extent do you think this Standard describes what people should expect to experience from health, care and social work services?

9 - Standard 7: And if I am a child or young person needing social work care and support.:

Strongly Agree

Is there anything that is missing or should be added to this Standard?:

Any other comments:

10 To what extent do you agree these new Standards will help support improvement in care services?

Agree

Comments:

11 Is there anything else that you think needs to be included in the Standards?

Yes

If yes, please provide details:

More is needed on structure and process as well as a cost analysis.

12 Is there anything you think we need to be aware of in the implementation of the Standards that is not already covered?

Comments:

13 What should the new Standards be called?

National Health and Social Care Standards

If you answered other, please provide details:

14 Any other comments, suggestions?

Any other comments, suggestions?:

There are around 180 different bulleted standards in the 7 domains. While this ensures it is comprehensive and inclusive it also means it is lengthy for both staff and patients. This desire to be inclusive means the standards could be viewed as more aspirational than meaningful and pragmatic. Some prioritisation of aims, along with a timescale for implementation is required, plus detail on how delivery will be monitored, and the consequences for missing targets.

The Standards are largely more relevant to social, rather than health care, but it may be the case that these are covered more comprehensively in separate health care standards.

In collecting information on whether the standards are being met it may be difficult to obtain the views of some patient/service user groups, such as the frail old or those with cognitive impairment.

The document frequently mixes 'hard' and 'soft' aims. Some of the standards are more about process of care and perception of the process, and much less about outcome. A focus on process alone can provide an incomplete picture, particularly when the focus is around perception and experience of care rather than "harder" and arguably more meaningful outcomes of care.

15 We recognise that people may have more than one experience of / involvement with health and care services. For example; you may work in a hospital or care home and also be a registered carer for a friend or relative receiving care services. For the purposes of this consultation please indicate the main capacity in which you are responding.

As a representative of an organisation / service provider

If you answered other, please provide details:

16 Once finalised these new Standards will be made available in various formats. It would be helpful to know which format(s) may be required. Please indicate from the list below which formats you are most likely to use.

Other languages (please indicate which)::

17 Please indicate how you are most likely to access these Standards:

Online/electronic

Evaluation

Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)

Matrix 1 - How satisfied were you with this consultation?:

Slightly satisfied

Please enter comments here.:

Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:

Slightly satisfied

Please enter comments here.: