

**Draft
National
Care
Standards**

for Independent Hospitals

A Consultation Paper



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December 2001

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INTRODUCTION

The Scottish Commission for the Regulation of Care

Independent hospital services form one part of the wide range of social care services which will be registered and inspected by the Scottish commission for the Regulation of Care (the Care Commission). The Care Commission will come into operation in April 2002.

The Care Commission will register and inspect independent hospitals providing acute care and psychiatric care. In time, the range of services will expand to include other independent health care services.

Background: Independent hospitals

Independent hospitals in Scotland employ more than 2,000 people with over 600 beds in nine hospitals. Each year, over 150,000 outpatient appointments take place and the hospitals are responsible for treating over 30,000 inpatients undergoing 25,000 operations. The services range from acute psychiatry to all acute medical and surgical specialities, including cardiac surgery.

All the independent hospitals in Scotland are members of the Scottish Independent Hospitals Association (SIHA) and also members of the Independent Healthcare Association (IHA), which is representative of Independent Healthcare and Social Care providers throughout the UK. Its members include acute hospitals, psychiatric hospitals, nursing homes and residential care homes. Chapter 6 includes a number of additional standards which are specific to children. These standards are addressed to the child's parents or guardian. Chapter 7 details a number of standards which are specific to mental health hospitals treating adults.

As a condition of membership, all acute hospitals have to be working towards a nationally accredited quality assurance programme.

The national care standards

Scottish Ministers set up the National Care Standards Committee (NCSC) to develop national standards. The NCSC carried out this work with the help of a number of working groups. The standards have been developed from the point of view of people who use the services. They describe what each individual person can expect from the service provider. They focus on the quality or care that the person using the service actually experiences.

Consultation

The Independent Health Care Panel is formed under the auspices of the National Care Standards Committee (NCSC) and as a consequence the Independent Hospitals Working Group was constituted. The group had representation from most providers including clinicians and managers, consumers, the Royal College of Nursing and current registration and inspection staff.

The working group met on five occasions between June and August 2001 with smaller groups meeting to draft and edit particular areas of the standards.

Independent researchers were commissioned to hold two focus groups of patients to seek their views on the care provided within the independent health care sector and how closely it matched their expectations.

The focus groups were held in Glasgow and Edinburgh to allow people to choose the easiest travel route and increase the chance of a wide representation. The findings from the research have been included in these standards to ensure they reflect the patient's expectations of the service.

The members of the working group are particularly concerned, in the light of the comments from the patients' focus group, that it had no representation from the Royal College of General Practitioners and look forward to receiving their views on the document during consultation.

Writing the standards

The working group initially sought to broaden its membership. It recognised the diversity of persons involved in the delivery of health care and the need to draw on their knowledge and expertise in drafting the standards.

The group also sought to draw on existing work to assist in the task of writing standards. This included the draft standards developed in England for independent health care which contained considerable specific clinical detail. The clarification of the relationship between the Care Commission and the Clinical Standards Board for Scotland (CSBS) allowed the working group to focus on developing standards aimed at the service user. The CSBS generic standards are included in the draft standards and to support patient and staff safety reference is made to Clinical Negligence and Other Risks Indemnity Scheme (CNORIS) standards in risk management. Reference is also made for all services provided by independent hospitals to satisfy current legislative and best practice guidelines and have evidence of a robust quality framework.

The principles behind the standards

The standards are based on a set of principles. The principles themselves are not care standards but reflect the recognised rights which you enjoy as a citizen. These principles are the result of all the contributions made by the NCSC, its working groups and everyone else who responded to the consultations on the standards as they were being written. They recognise that services must be accessible and suitable for everyone who needs them, including people from black and ethnic minority communities. They reflect the strong agreement that your experience of receiving services is very important and should be positive, and that you have rights.

The main principles

The national care standards are based on the six principles of dignity, privacy, choice, safety, realising potential and equality and diversity.

Dignity

Your right to:

- be treated with dignity and respect at all times; and
- enjoy a full range of social relationships.

Privacy

Your right to:

- have your privacy and property respected, and to receive the time, the space and facilities you need and want; and
- be free from intrusion as long as it is safe for you and everyone else.

Choice

Your right to:

- make informed choices, while recognising the right of other people to do the same; and
- know about the range of choices.

Safety

Your right to:

- feel safe and secure in all aspects of life, including health and wellbeing;
- be secure in the knowledge that adults have responsibility for children's safety;
- enjoy safety but not be overprotected; and
- be protected from exploitation and abuse.

Realising Potential

Your right to have the opportunity to:

- attain and achieve all you can in accordance with your talents;
- make full use of the resources available to you; and
- make the most of your time.

Equality and Diversity

Your right to:

- live an independent life, rich in purpose, meaning and personal fulfilment;
- be valued for your ethnic background, language, culture and faith;
- be treated equally fairly; and
- be able to complain effectively without fear of discrimination.

The Scottish Commission for the Regulation of Care

The Regulation of Care (Scotland) Act 2001 set up the Scottish Commission for the Regulation of Care (the Care Commission). The Care Commission will register and inspect all the services to be regulated against the national care standards issued by Scottish Ministers. The Care Commission will have its headquarters in Dundee, with regional offices across the country. Its inspectors will assess applications from people who want to provide registered services. They will inspect the services to make sure that they are meeting the standards and the regulations.

The Scottish Social Services Council

The Scottish Social Services Council (the Council) was established on 1 October 2001 under the Act. It will also have its headquarters in Dundee. The Council will have the duty of promoting high standards of conduct and practice among social services workers, and in their education and training. To deliver its overall aims of protecting service users and carers and securing the confidence of the

public in social services, the Council has been given four main tasks. These are: to establish registers of key groups of social services staff; to publish codes of practice for all social services staff and their employers; to regulate the training and education of the workforce; to undertake the functions of the National Training Organisation for the Personal Social Services.

How standards and regulations work together

The Act gives Scottish Ministers the power to publish standards which the Care Commission must take into account when making its decisions. It also gives Scottish Ministers the power to make regulations imposing requirements in relation to care services.

The standards will be taken into account by the Care Commission in making any decision about applications for registration (including varying or removing a condition that may have been imposed on the registration of the service). All providers must provide a statement of function and purpose when they apply to register their service. On the basis of that statement the Care Commission will determine which standards will apply to the services the provider is offering.

The standards will be used to monitor the quality of care services and their compliance with the Act and the regulations. If, at inspection, or at other times, for example, as a result of the Care Commission looking into a complaint, there are concerns about the service, the Care Commission will take the standards into account in any decision on whether to take enforcement action and what action to take.

If the standards were not being fully met, the Care Commission would note this on the inspection report and require the service manager to address this. The Care Commission could impose an additional condition on the service's registration if the provider persistently, substantially or seriously failed to meet the standards or breaches a regulation. If the provider does not then meet the condition, the Care Commission could issue an improvement notice detailing the required improvement to be made and the time scale this needs to be achieved in. Alternatively, the Care Commission could move straight to an improvement notice. The Care Commission would move to cancel the registration of any service if the improvement notice does not achieve the desired result. In extreme cases (i.e. where there is serious risk to a person's life, health or well-being) the Care Commission could take immediate step to cancel the registration of any service without issuing an improvement notice.

Regulations are mandatory. In some cases not meeting a regulation will be an offence. This means a provider may be subject to prosecution. Not meeting or breaching any regulation is a serious matter.

Decisions by the Commission on what to do when the standards or regulations are not met will take into account all the relevant circumstances and be proportionate.

2. Your Pathway of Care

2.1 BEFORE YOU COME TO OUTPATIENTS

Quality of Life

You will be able to decide whether using the hospital services will meet your needs

You can expect that:

You will have access to accurate, clear and understandable information to assist you in making an informed choice. Information will be written in plain English or in a language and format you can understand.

1. Sufficient information will be available for you and your referring practitioner to allow you to choose your consultant and/or the hospital services.
2. Your general practitioner will be kept informed of the range of services available and will be invited to visit the facilities in order to give you the information you require.
3. You will be given a contact number at the hospital for any questions regarding its services and facilities.
4. The hospital will provide you with the following information before your consultation:
 - hospital and clinic location.
 - directions on how to get to the hospital, including car parking and public transport.
 - appointment time and an indication of duration.
 - any special instructions regarding the consultation.
5. If you are a National Health Service patient treated under contract in an independent hospital, you will have equal access to services, facilities and information.
6. You will be given a guide to advise you about the charges you may expect. This will include both consultant and hospital services.
7. Your consultant will provide information on the cost of any investigation to be done before it is carried out.

2.2 YOUR OUTPATIENT APPOINTMENT

Quality of Life

Throughout your visit all staff will treat you with dignity and respect.

You can expect that:

You will be kept fully informed and involved and will leave with an understanding of what will happen next.

1. Where possible an appointment will be offered at a time which suits you.
2. You will be asked by staff to confirm all your personal details are correct in a manner which is sensitive to your privacy.
3. Your consultation will be conducted in a private, suitably furnished consulting room.
4. You will be fully involved in all aspects of the assessment of your health care needs which will take account of your preferences.
5. There will be adequate time for you to ask questions and receive information.
6. An interpreter will be available if required.
7. Any examination or investigation will be carried out following a clear explanation of the procedure. A chaperone will be available if required.
8. You will be seen on time and where delay is unavoidable you will receive a full explanation/apology.
9. You will be given an indication of all likely costs, what these include and your payment choices.
10. If you wish to discuss any aspects of your consultation, relevant contact details will be given to you before you leave.
11. If you have to return for an investigation or admission to the hospital, you will be provided with all the information you need.

2.3 BEFORE YOU COME INTO HOSPITAL

Quality of Life

You will be an active participant in making decisions about your care and treatment.

You can expect that:

You will feel fully prepared for your admission and have an understanding of your likely needs on discharge.

1. You will be provided with all the information you need regarding your hospital admission including:
 - details of how to find the hospital, when to arrive and where to go;
 - what to bring for your stay, eg suitable clothing, current medication, money and valuables;
 - details of any planned treatment;
 - guidance on financial arrangements;
 - the opportunity for a pre admission visit;
 - contact information for you and your family;¹
 - information on visiting arrangements;
 - an estimation of your likely length of stay;
 - an indication of how you will feel and what you will be able to do when you leave the hospital including any support arrangements you may need;
 - the transport arrangements you will need on discharge.

¹ The words “you and your family” have been used throughout this document to encompass all those groups of people who may have involvement in your care including family, friends, carers, representatives and advocates.

2.4 YOUR ADMISSION TO HOSPITAL

Quality of Life

When you arrive at hospital you will be welcomed and made to feel at ease.

You can expect that:

You can have confidence that the staff will be prepared for your admission and take time to settle you into the hospital.

1. You will be asked to confirm all your personal details are correct.
2. You will wait no longer than 15 minutes before being escorted to your care environment by a member of your care team and anyone you choose will be invited to accompany you.
3. You will be introduced to your nursing team who will ask how you wish to be addressed.
4. On each shift there will be a nurse who will take particular responsibility for your care who will introduce themselves.
5. You will be made familiar with your care environment and its facilities to help you settle in. It will include:
 - the nurse call system;
 - telephone facilities;
 - toilet and washing facilities;
 - the television and radio;
 - the management of valuables;
 - arrangements for storage of personal medication;
 - ordering food, including any special dietary requirements; and
 - arrangements for smoking.
6. Your cultural needs and religious beliefs will be respected at all times.
7. All aspects of the financial management of your care will be discussed sensitively and agreement reached.

2.5 PLANNING YOUR CARE

Quality of Life

You will have a care plan detailing your needs and preferences, showing how these will be met.

You can expect that:

You will be fully involved in the development of your care plan and it will be accessible to you at all times.

1. Your needs and preferences will be taken into account in any assessment.
2. You will be given an explanation of the clinical assessments which may be carried out by different members of your healthcare team.
3. You will be given time to ask questions and you will be encouraged to participate fully in all aspects of your care.
4. If information about your care is to be shared, this will usually be done with your agreement.
5. You will have a visit from your consultant specialist who will confirm the reason for your admission and take time to answer any queries.
6. Your consent to treatment will be obtained or checked in line with best practice guidelines. (See 3.2)
7. If appropriate, you will have a visit from your consultant anaesthetist who will give a clear explanation of the anaesthetic to be used, including any risks and side effects.
8. You and your family will be given adequate information regarding enquiries and visiting arrangements.

2.6 YOUR OPERATION OR INVESTIGATION

Quality of Life

You can be confident that your treatment will be carried out to the highest standards.

You can expect that:

Your treatment will be carried out when expected and in a manner designed to put you at ease. You will be advised of the recovery process and options for the management of any pain.

1. You will be accompanied to and from the treatment area by a member of the nursing team.
2. There will be sufficient qualified staff to assist you throughout your operation/investigation.
3. Following treatment your condition will be closely monitored within a recovery area and you will not be returned to your care environment until it is safe to do so.
4. Information regarding your treatment, your recovery and any instructions for your care will be communicated to the relevant members of your healthcare team.

2.7 AFTER AND CONTINUING CARE

Quality of Life

Following your operation/investigation, your after and continuing care will be designed with you to meet your needs.

You can expect that:

You will be fully involved in planning and implementing your continuing care.

1. When you are ready, an explanation of your operation/investigation will be given and you will be advised of any changes to your care plan.
2. Together, you and your healthcare team will plan your after-care, taking into account your individual needs and preferences.
3. In the event that you are not able to participate in the planning of your care, any previously identified wishes will be acted on. Whatever the circumstances, you will always be told about changes to your care plan.
4. A range of services that you may need to support your recovery will be available to you while you are in hospital.
5. You will be involved with and kept advised of progress towards your recovery.

2.8 YOUR DISCHARGE FROM HOSPITAL

Quality of Life

Planning for the end of your stay in hospital will begin at an early stage, be discussed and agreed with you so that you feel confident about leaving.

You can expect that:

The hospital will have comprehensive procedures for planning your discharge in partnership with yourself and others involved.

1. Your care plan will include planning in advance for your discharge.
2. All relevant information will be communicated to you in good time and to any others involved in your continuing care.
3. You are discharged only when follow up services (including aids and adaptations where required) have been requested.
4. Where delay in discharge occurs you will be informed and any implications of this discussed with you.
5. You receive information on discharge about plans for your continuing care, including your medication.
6. Following discharge, should you have any worries or concerns you will know how to contact the hospital for support and advice. This will be available 24 hours a day.

2.9 EXPRESSING YOUR VIEWS

Quality of Life

The hospital will actively seek and welcome your views on all its services so that it can continuously improve its quality of care. If you feel unable to represent yourself you will receive support from a representative of your choice.

You can expect that:

You and those important to you will be encouraged to express any views you may have on any aspect of the hospital's service.

1. You are supported in a safe and confidential manner to make known any views, whether positive or negative, on any aspect of your care.
2. You will have access to a written policy for handling any complaints or concerns you may have which will be easily understood, include the time-scales involved and the external options available to you, should they be required.
3. The hospital will positively ask for your views and opinions to assist in finding ways to continually improve the service.
4. You will also be told how to make formal complaints directly to the Care Commission.

3. Your Safety²

3.1 STAFF

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of health care.

You can expect that:

The hospital has procedures for recruitment of all staff, including checking their qualifications, skills and training.

1. Recruitment and selection will follow a clear written policy which complies with all relevant legislation.
2. The hospital checks the qualifications and all necessary records of all staff before they start work.
3. A procedure is in place for checking the registration of professional staff in accordance with requirements of their regulatory bodies. Other records are checked in accordance with current legislation and guidance.
4. The person holding the registration of the hospital shall satisfy all the fitness requirements set out in the Regulations to the Act.
5. You can have access to information regarding the guidance on practising privileges for consultant specialists who work at the hospital. The consultant specialists will satisfy these rules before being allowed to practice within the hospital.
6. Appropriate induction and other training that meets the needs of the staff and the services they provide is given to all new and temporary staff.
7. Regular review is undertaken of the continuing ability of staff to perform their duties safely and effectively.
8. All staff have the opportunity, supported by the hospital, to participate in training and updating of knowledge relevant to their roles. This will include recommended training identified in best practice guidelines and/or as required by legislation.
9. Mechanisms are in place to assist staff to raise in confidence concerns over any aspect of service delivery they feel may have a detrimental effect on your care and the care of others or the quality of the service.
10. The hospital keeps a confidential record of all staff concerns and the action taken in response.
11. The hospital encourages effective team work.

² There is an overarching quality of life statement covering the chapter, Your Safety. It is therefore repeated before each standard.

3.2 DECIDING ON YOUR TREATMENT

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of healthcare.

You can expect that:

You will be provided with information in a way you can understand on the risks and benefits of your proposed treatment or investigation and available alternatives so that you can make an informed decision.

1. Information will be given about the range of appropriate treatments available relevant to your needs. This will include an explanation of the advantages and disadvantages of any treatment as well as what may happen if you choose not to proceed.
2. The opportunity will be offered to you to ask questions or receive further advice from an appropriate member of staff.
3. Time will be given to allow you to consider your choice of treatment/investigation.
4. Only when you have chosen and decided to proceed will you be asked to sign a consent form which details in writing the procedure to be carried out, as well as the medical risks involved. Your signature on the consent form authorises the consultant or registered practitioner to perform the agreed treatment/investigation.
5. You can request a copy of your consent form if one is not given to you.
6. If you need emergency treatment and are able to give consent, you will be asked to do so following a full explanation.
7. If you need emergency treatment and are unable to give consent, the relevant doctor will act in your best interests, taking account of your previously stated wishes.

3.3 CLINICAL EFFECTIVENESS

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of healthcare.

You can expect that:

The quality of your clinical treatment benefits from regular review of the practice of all healthcare professionals.

1. There is a process for measuring the performance of clinical treatment and care against good practice guidelines.
2. The process of review will lead to changes in practice and improvements in the standards of care you receive.
3. You can request information about the process for measuring the performance of health care professionals and the results.
4. All healthcare staff will take part in the process of review and the development of improvement to practice.
5. The hospital provides clinical care which reflects the participation and achievement of satisfactory reports in the Clinical Standards Board for Scotland (CSBS) accreditation programme for its condition specific standards.

3.4 PREVENTION OF INFECTION

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of health care.

You can expect that:

Prevention and control of infection is considered to be of high importance and integral to your care and recovery.

1. The environment in which you will be treated will be clean.
2. The hospital will have a comprehensive policy and procedures for the prevention and control of infection, reflecting relevant legislation and professional guidance.
3. The prevention and control of infection will be part of the induction programme for all staff.
4. You will, whenever possible, be fully involved in and understand the need for procedures designed to prevent and control infection.
5. If you have or acquire an infection you will be informed and receive an explanation of what this means to you and your care.
6. Staff will treat you with dignity and consideration if you have an infection and take account of your wishes in planning the most appropriate care for you as an individual.
7. The hospital will have in place a process for refreshing and updating its staff and its policies at least annually.
8. Staff will always wash and dry their hands thoroughly before and after treating you.

3.5 INFORMATION HELD ABOUT YOU

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of healthcare

You can expect that:

The hospital will keep an accurate, up to date and comprehensive record of all aspects of your care which is available to you and those involved in your care.

1. You can be confident that all personal information will be stored securely.
2. The hospital and all staff work within current legislative requirements and guidelines in regard to information held about you.
3. Only you and those involved in your care or agreed by you will have access to information held about you
4. Staff will be aware of the need for confidentiality and your personal information will not be disclosed inappropriately.
5. Your patient care record (including the medical component) will be used by all members of your healthcare team to ensure continuity of your care and treatment.
6. Your patient care record (including the medical component) will contain up to date information recorded by all healthcare professionals about every aspect of your care on each visit or admission to hospital.
7. If you are unclear about any of the content in your patient care record (including the medical component) an appropriate member of the healthcare team will be willing to provide an explanation to you.
8. There is an efficient system for identifying and retrieving results of any tests you may have carried out in order that both you and your consultant are provided with full and up to date information.
9. If the hospital ceases to operate, contingency arrangements will be prepared and planned for the safe storage and retrieval of records.

3.6 ENVIRONMENT

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of healthcare

You can expect that:

The physical design, layout and facilities of the hospital support the safe and effective delivery of your treatment and your care.

1. Your care environment will be suitable to your needs, offer you privacy and ensure your comfort.
2. Signs will be clear, enabling you to find your way about easily.
3. The buildings, its services and grounds will be maintained in accordance with Health and Safety regulations, and any other relevant legislative or regulatory requirements.
4. Regular checks are carried out on services that carry additional risks, for example water supply and ventilation systems. Where necessary, remedial action is taken promptly to ensure the continued provision of a safe care environment.
5. All equipment used in support of your care and treatment is installed, checked and serviced according to manufacturer instructions, best practice guidelines or legislative requirements.
6. You will be informed of what will happen and what to do in the event of fire or need to evacuate the building.
7. If there is a failure in any major service, there will be a back up system to allow care to continue safely.
8. In the event that the hospital becomes unable to provide the treatment you require, you can be assured that prompt arrangements will be made for alternative suitable care.
9. The hospital will arrange provision of suitable continuing care if you require to be transferred to another hospital.

3.7 FOOD SAFETY

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of healthcare

You can expect that:

You will be provided with a varied, nutritious diet which reflects your needs, preferences and any special dietary requirements you may have during your hospital stay.

1. Your food and drink preferences and requirements will be recorded and made known to all relevant staff.
2. Your food and drink will be prepared and served in line with current food and hygiene legislation and guidelines.
3. A choice of food, drinks and snacks will be available when you wish.
4. Menus will be planned with you to offer a balanced diet and a dietician will be available to give advice if required.
5. You will not be asked to choose your meals more than a day in advance and, should you change your mind, alternatives can be offered.
6. Staff will be sensitive to any practical help you may require to enjoy your food or drink.

3.8 SECURITY

Quality of Life

You will be confident that the hospital and its staff provide a safe and secure environment to support the delivery of high standards of healthcare.

You can expect that:

You will feel safe and secure during your time in hospital.

1. Where there is a healthcare need to monitor your wellbeing closely, this will be discussed with you and will be sensitive to any expressed wishes regarding privacy.
2. The hospital has arrangements for ensuring your personal safety which include:
 - security checks on the premises, particularly at night;
 - a system for monitoring persons who may need access to the premises and its facilities;
 - a system that allows you to summon assistance if needed;
 - arrangements for maintaining confidentiality of your presence in the hospital and your records.
3. Facilities will be available to you for the safekeeping of your valuables whilst in hospital.
4. The hospital and its staff will respect your wishes for privacy with regard to receiving visitors and telephone calls.

4 Your Support Services

4.1 RADIOLOGY

Quality of Life

All departments will follow the safety and quality standards set out in the relevant legislation and guidelines.

You can expect that:

The X-Ray Department will provide an imaging service which will support your diagnosis and continuing care.

1. All X-Ray departments will follow agreed protocols on the investigation of their patients.
2. An explanation will be given to you regarding the reason for your X-Ray or scan and what to expect during the examination.
3. Any preparation needed to ensure a good result will have been explained prior to the examination and assistance offered if required.
4. Your X-Ray/scan result will be reported by a consultant radiologist with specialist accreditation in clinical radiology.
5. You will be informed how long you may need to wait for a result and it will be available to your consultant or your general practitioner to ensure any treatment needed is followed up.
6. You will leave the department with an understanding of what is to happen next .
7. All the equipment to support the imaging service is installed, checked and serviced according to manufacturers' instructions, best practice guidelines and legislation.
8. All imaging departments will have a quality assurance programme to ensure your safety, which will include patient dosage and image quality.

4.2 PATHOLOGY

Quality of Life

All laboratories have space, facilities and trained staff consistent with safe and effective working practice and in accordance with current legislation.

You can expect that:

Any pathology specimens sent to the laboratory for examination or test will provide information to aid your diagnosis and treatment.

1. All laboratories will take part in quality assurance programmes which check the handling of specimens and the accuracy of results.
2. The reason for taking specimens from you to be sent to the laboratory for examination or test will be fully explained.
3. All laboratories will have policies and procedures to ensure that your specimen will be correctly identified.
4. You will be informed how long you may need to wait for a result.
5. The result of your examination or test will be reported on by a consultant pathologist.
6. The results of your examination or test will be available to your consultant or your general practitioner to ensure any treatment needed is quickly followed up.
7. All the equipment used in examining or testing your specimen is checked and serviced according to the manufacturers' guidelines and legislation.

4.3 MEDICINES MANAGEMENT

Quality of Life

Medication is an important part of many people's treatment. The hospital will manage your medication during your hospital visit and at discharge to maximise benefit and minimise the risk from medicines.

You can expect that:

Your medicines will be managed within a comprehensive policy for the use and administration of medicines from admission to discharge, based on legislation and a range of relevant guidance.

1. Any medicines that you bring into hospital will be stored safely and used, if necessary, only for your treatment. Any unused medicines will be returned to you when you leave or be disposed of safely with your agreement.
2. Your medicine will always be available to you at the prescribed times.
3. All medication supplied to you will have been prepared for you and dispensed by a qualified pharmacist in the appropriate manner in a suitable environment.
4. You will be able to discuss your medication, its benefits and side effects with your consultant and the pharmacist to allow you to make informed choices.
5. Any specialist treatment will be provided by staff with specialist training.
6. You will be given a supply of current medication on discharge which will give you time to gain a repeat prescription, if needed.
7. You will have instructions which explain how your medication will work, the reasons for taking them, any side effects likely to be experienced and what to look for before you leave the hospital.
8. If you are unsure about any aspect of taking your medicines after discharge, the information may be shared with a representative of your choice who may help and support you at home.

4.4 **PHYSIOTHERAPY, OCCUPATIONAL THERAPY AND OTHER PROFESSIONS ALLIED TO MEDICINE**

Quality of Life	As a patient you will be assured of a comprehensive clinical service from the professions allied to medicine.
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You can expect that:

Your hospital will offer you clinical support services from the professions allied to medicine to appropriately support you.

1. You will receive care from a practitioner registered with the appropriate professional body.
2. All practitioners providing your care will comply with the code, rules and standards of professional practice as set down by their professional body.
3. If you are to receive a programme of care, it will be fully discussed and explained to you before it commences, giving you the chance to ask questions.
4. You will be given an indication of the demands of the programme, including how long it may last.
5. The programme will be designed to support your optimum recovery.
6. Your hospital will provide therapy and rehabilitation services to support you throughout the full episode of your care. Where this is not directly provided by hospital staff, appropriate arrangements will be in place to ensure prompt access to quality and effective care from an external provider.
7. There will be effective team-working, including communication between doctors, nurses and professionals allied to medicine.

5 Critical Care Services³

5.1 INTENSIVE CARE

Quality of Life

Whatever your needs for critical care, you can be confident that the hospital and its staff will look after you safely.

You can expect that:

If you need one-to-one constant nursing care and observation or life support equipment, a hospital with intensive care facilities will be provided for you.

1. If you know before your surgery that you will need intensive care nursing following your operation, you will be admitted to a hospital that has a unit on site which satisfies best practice principles and current guidelines.
2. You and your family will have the opportunity to visit the unit and meet its staff before your operation.
3. An explanation about the reasons for your stay in intensive care and the equipment to be used will be given.
4. You and your family will be encouraged to ask questions to allay any anxieties.
5. An update on your progress will be given to you and those you wish on a regular basis.
6. All hospitals without intensive care facilities will have formalised arrangements to transfer patients to hospitals that do, should the need arise.
7. If you unexpectedly need intensive care nursing in a hospital without this facility, you can be confident that life support equipment and suitably qualified staff will be available to stabilise and support you until transfer is arranged.
8. You and your family will be kept closely informed about your transfer and the reasons why.
9. A member of your healthcare team will accompany you during your transfer.
10. All professional staff working in the unit will have critical care skills and you will be treated under the guidance of a consultant who is a specialist in intensive care.

³ This quality of life statement overarches all of this chapter and is therefore repeated at the beginning of each standard.

5.2 HIGH DEPENDENCY CARE

Quality of Life

Whatever your needs for critical care, you can be confident that the hospital and its staff will look after you safely.

You can expect that:

If you need very close observation at any time during your admission to hospital, an area fully supplied with monitoring equipment will be provided, supported by professional staff with the appropriate skills.

1. You and your family will be kept fully informed of the reasons for close observation.
2. You will have easy access to your consultant or any member of your healthcare team to discuss your progress.
3. The hospital will offer open visiting to allow your family and friends to choose their times individually.
4. You will have a named nurse on each shift who will be responsible for your care and only one other.
5. As soon as your condition is stabilised and it is safe to do so, you will be moved back to your own care environment and encouraged to mobilise and continue towards recovery.

5.3 RESUSCITATION

Quality of Life

Whatever your needs for critical care, you can be confident that the hospital and its staff will look after you safely.

You can expect that:

The hospital will have an appropriately skilled resuscitation team on duty 24 hours a day.

1. The hospital will follow a clear written policy on the management of resuscitation which takes account of best practice guidelines, including those from the National Resuscitation Council.
2. You can be confident that there will be a team of clinical staff with the appropriate skills on duty at all times.
3. The staff will have regular drills to test their critical care skills which will form the base for future training programmes.
4. All staff involved in your care will have their skills updated annually.

Advanced Statements

5. If you have written an advanced statement, it will be respected by all members of the health care team.
6. You have the right to change your mind on your advanced statement should your health circumstances alter.
7. If your health status is such that resuscitation needs to be discussed, all the risks of resuscitation will be clearly set out to you and your family to enable you to reach decisions.
8. Your doctor cannot make this decision without making every effort to involve you, a family member or representative.
9. Once a decision is reached, you will be confident that it will be communicated to all members of staff.

6 Children's Services

Quality of Life

You can be confident that your child will be looked after in a warm and friendly environment.

You can expect that:

The special physical, psychological and social needs of your child will be met by appropriately trained staff in partnership with yourself.

1. A fully qualified children's nurse will be on duty at all times during your child's stay who will involve you and where appropriate, your child, in all aspects of your child's care planning.
2. The consultant looking after your child will regularly be involved in the treatment of children and have the appropriate skills.
3. Your child's accommodation will provide a safe environment and include an area to play.
4. You will be encouraged to stay at all times and be invited to accompany your child to and from the operating theatre.
5. Accommodation will be provided either in, or close by your child's room.
6. If your child is an adolescent, all their specific needs will be recognised.
7. Your child's privacy will be respected and he/she will be encouraged to take part in his/her own care planning.
8. All staff with access to children will have a criminal record check before taking up their post at the hospital.
9. Child protection awareness will be part of mandatory training for those staff looking after children.

7 Mental Health Care

7.1 PREVENTION OF SELF HARM

Quality of Life

Whatever your needs for psychiatric care, you can be confident that the hospital and its staff will look after you safely.

You can expect that:

If you need one to one nursing care and observation the hospital will provide these facilities for you.

1. Where an assessment of your needs indicates the need to protect you or others from harm, the hospital will make arrangements which satisfy best practice principles, current guidelines and national Clinical Resource and Audit Group (CRAG) recommendations.
2. The need for any arrangements to protect you or others will be discussed with you and an explanation and the reasons for this given to you. Clear information regarding your observation level and any restrictions which may apply, will be given to you.
3. You and your family will be encouraged and given the opportunity to ask questions and receive information to allay any anxieties.
4. All professional staff working in the hospital will have the requisite care skills and you will be treated under the guidance of a consultant who is a specialist in psychiatric care.
5. You will have easy access to your consultant or any member of your healthcare team to discuss your progress.
6. If you unexpectedly need more intensive nursing care and your hospital cannot meet this need, you can be confident that suitably qualified staff will be available to stabilise and support you until transfer is arranged to another hospital.
7. All hospitals without more intensive care facilities will have formalised arrangements to transfer patients to hospitals that do, should the need arise.
8. You and your family will be kept closely informed about any transfer arrangements and the reasons why.
9. A member of your healthcare team will accompany you during your transfer.
10. As soon as your condition is stabilised and it is safe to do so, you will be moved back to your own care environment.

7.2 ELECTRO-CONVULSIVE THERAPY (ECT)

You can expect that:

The hospital will have an appropriately skilled team to provide this treatment if required.

1. The hospital will follow a clear written policy on the provision of electro-convulsive therapy (ECT) which takes account of best practice guidelines, including those from the Royal College of Psychiatrists.
2. The hospital will take part in the national ECT audit to ensure that ECT is carried out in line with all the relevant policies and procedures for its use and administration.
3. You can be confident that there will be a team of clinical staff with the appropriate skills on duty during your treatment.

7.3 MAKING CHOICES AND UNDERSTANDING YOUR RIGHTS

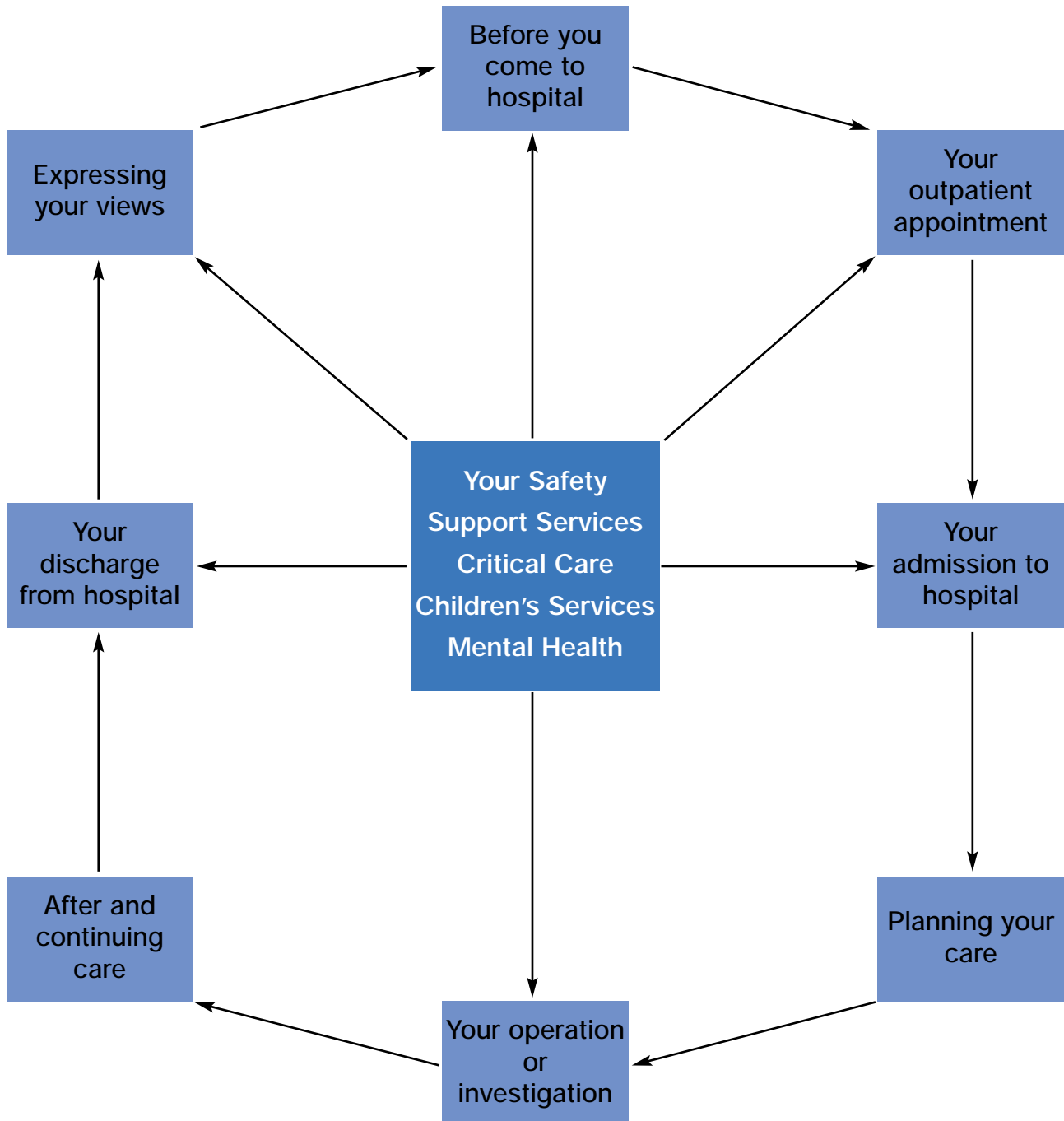
You can expect that:

You receive information which clearly explains your rights, treatment and how to obtain independent advocacy.

1. You will be supplied with information in a format you can understand which includes:
 - your rights;
 - responsibilities;
 - therapies; and
 - details of local organisations providing independent advocacy.
2. Your views will be taken on board and you will be informed of the implications of treatment being proposed.
3. The hospital will provide you with a full range of information on your specific medications and known potential side effects and risks.
4. You and your family will be encouraged to ask questions to allay any anxieties, especially about the effects of medications.
5. If you are detained under the Mental Health (Scotland) Act 1984 the hospital will provide you with information on your detention and manage your care in accordance with the requirements of the Mental Health (Scotland) Act 1984. This will include:
 - your current legal position;
 - your right to appeal against your detention; and
 - contact numbers for the Mental Welfare Commission for Scotland.

Annex A

Your Pathway of Care



Glossary Of Terms

Advanced statements (‘advance directives’ or ‘livingwills’)	A statement made when a person is competent (has capacity) detailing how they wish to be treated, if in time they become unable to express this for any reason.
Anaesthesia	Loss of feeling or sensation in part or the whole of the body.
Anaesthetic	A drug causing anaesthesia.
Care plan	A plan of care based on individual needs.
Chaperone	A member of the hospital team who is in attendance during an examination or investigation.
Clinical assessment	Assessments based on individual’s clinical need, eg by nurse, physiotherapist, occupational therapist, etc.
CNORIS	Clinical Negligence and Other Risks Indemnity Scheme
CRAG	Clinical Resource and Audit Group
Critical care	A service that supports all aspects of acute hospital care.
Electro-convulsive therapy (ECT)	The use of electrical current in the treatment of depressive illness.
High dependency care	A service provided to a patient needing close observation or who is stepping down from intensive care.
Intensive care	A service provided to a patient needing one to one continuous close observation and/or respiratory support.
Medication	A substance administered for treatment purposes.
Occupational therapy	Treatment by providing interesting and congenial work in order to re-educate and co-ordinate muscles in physical defect.
Patient care record	A multi-disciplinary record of all care assessment and treatment including the medical component.
Pathology	A branch of medicine which deals with the essential nature of disease, especially the structural and functional changes in tissues and organs of the body.
Physiotherapy	The health science concerned with the utilisation of physical modalities such as electricity, heat, cold, sound and light, as well as physical activity, exercise and massage for therapeutic purposes.
Radiology	The science of radiation, referring to its use in the diagnosis and treatment of disease.
Rehabilitation	The restoration of one who has been ill or injured to optimum activity levels.
Resuscitation	Restoration to life or consciousness of one who has collapsed or ceased breathing.
Therapy	The treatment of disorder or disease.

Annex C

Independent Hospitals Working Group

Howard, Jan (Chair)	Matron, Murrayfield Hospital (representing the Scottish Independent Hospitals Association)
Beggs, Ian	Consultant Radiologist (representing Royal College of Radiologists)
Chaib, Shona	Director of Nursing and Clinical Services, HCI International Medical Centre
Cruickshank, Anne	Consultant Clinical Biochemist (representing Royal College of Pathologists)
Cruickshank, Neil	Hospital Director, The Priory Hospital
Durie, Marjorie	Clinical Standards Board for Scotland
Davidson, Kenneth	Consultant Surgeon (representing Royal College of Surgeons)
Grierson, David	Director of Clinical Services, The Priory Hospital
Housley, Edward	Consultant Physician, Murrayfield Hospital
Lax, Karen	Scottish Executive
McClure, John	Consultant Anaesthetist (representing Royal College of Anaesthetists)
McLintock, David	representing Royal College of Nursing
Mathieson, Ian	Development Worker, Scottish Consumer Council
Rennison, Martin	Physiotherapy Manager, Murrayfield Hospital (representing the Scottish Independent Hospitals Association)
Smith, Alison	Hospital Manager, Abbey Carrick Glen Hospital
Summers, Vince	Trust Chief Pharmacist, Borders General Hospital (representing the Royal Pharmaceutical Society)
Taylor, Lynn	Scottish Executive
Wood, Ann	Inspector, Lothian Health Board