



Duty of co-operation framework between Healthcare Improvement Scotland and the Care Inspectorate

Report to: Board
Date: 24 June 2016
Report by: Patrick Lowe, Senior Policy Advisor
Report No: B-10-2016
Agenda Item: 14

PURPOSE OF REPORT

To inform the Board of the roles and responsibilities of the Care Inspectorate and Healthcare Improvement Scotland, their shared interface and how both organisations work together.

RECOMMENDATIONS

That the Board notes:

1. The areas of joint working between the Care Inspectorate and Healthcare Improvement Scotland
2. The Duty of Co-operation Framework developed by the Executive Teams of both organisations

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Version Control and Consultation Recording Form

Version	Consultation	Manager	Brief Description of Changes	Date
	Senior Management			
	Legal Services			
	Corporate and Customer Services Directorate			
	Committee Consultation (where appropriate)			
	Partnership Forum Consultation (where appropriate)			
Equality Impact Assessment				
Confirm that Involvement and Equalities Team have been informed			YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
EIA Carried Out			YES <input type="checkbox"/>	NO <input type="checkbox"/>
If yes, please attach the accompanying EIA and appendix and briefly outline the equality and diversity implications of this policy.				
If no, you are confirming that this report has been classified as an operational report and not a new policy or change to an existing policy (guidance, practice or procedure)			Name: P Lowe Position: Senior Policy Adviser	
Authorised by Director	Name: R Okasha		Date: 14 June 2016	

1.0 INTRODUCTION

Healthcare Improvement Scotland is the national healthcare improvement organisation for Scotland and part of NHSScotland. Healthcare Improvement Scotland inspects healthcare services to ensure they are meeting the required standards of care, that good practice is identified and areas for improvement are addressed. Healthcare Improvement Scotland carries out a programme of inspections to provide assurance that the care of older people in acute hospitals is of a high standard, while the Healthcare Environment Inspectorate focuses on ensuring hospitals are safe and clean. Healthcare Improvement Scotland also undertakes inspections of community and non-acute hospitals, as well as independent healthcare services across Scotland, and is responsible for the registration and regulation of the latter.

The Care Inspectorate is the independent scrutiny and improvement body working across early learning and childcare, integrated health and social care, social work, social care services, criminal justice social work and community justice. The Care Inspectorate regulates around 14,000 care services, of which some 9,000 are services for children, such as childminders, nurseries and playgroups, as well as specialist services like adoption and fostering agencies, childcare agencies and school care and secure accommodation. Of the near 1,150 care home services for adults regulated by the Care Inspectorate in the 2015/16 period, around 830 are care homes for older people. We are the lead agency responsible for working with partners such as Education Scotland, Her Majesty's Inspectorate of Constabulary and Healthcare Improvement Scotland to undertake strategic scrutiny of services for children in community planning partnerships across Scotland to assess outcomes for all children and young people. We work with other scrutiny partners such as Her Majesty's Inspector of Prisons contributing to prison based inspection and in partnership with the Mental Welfare Commission on a range of functions.

The interface between the work of the Care Inspectorate and the work of Healthcare Improvement Scotland is therefore small, but extremely important. The interface focuses primarily around the provision of adult social care where a significant health component is provided, ensuring effective and appropriate streamlined pathways and good outcomes for people using care services. We also have a shared interface around joint scrutiny and improvement work in the integrated space. Effective joint working means that, in quality assessing and supporting improvement in services for people, the right blend of social care and health expertise is drawn.

The Care Inspectorate and Healthcare Improvement Scotland have a close and constructive relationship, underpinned through our duty of co-operation. The organisations recognise each other's respective statutory roles, responsibilities and independence but will always seek to collaborate and cooperate in the public interest, striving for true partnership in delivering our core functions, in the course of our day to day working relationship, and in

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order to support better outcomes for people. This is particularly pertinent within the context of health and social care integration and the need to work effectively together to ensure a streamlined approach for service providers and people that use services.

This paper seeks to clarify the respective roles and responsibilities of the organisations, while highlighting where we have a shared interface and how we work together.

2.0 LEGISLATIVE BACKGROUND

Healthcare Improvement Scotland and Social Care and Social Work Improvement Scotland (the Care Inspectorate) were created by the [Public Services Reform \(Scotland\) Act 2010](#) on 1 April 2011. They were initially built on work previously carried out by NHS Quality Improvement Scotland, the Care Commission, the Social Work Inspection Agency and the child protection functions of Her Majesty's Inspectorate of Education.

2.1 Healthcare Improvement Scotland

The Act places a number of statutory duties on Healthcare Improvement Scotland, including a general duty of furthering improvement in the quality of healthcare; a duty to provide information to the public about the availability and quality of services provided under the health service; and, when requested by the Scottish Ministers, a duty to provide Scottish Ministers with advice about any matter relevant to the health service functions of Healthcare Improvement Scotland.

The Act provides Healthcare Improvement Scotland with powers to inspect any service provided by the national health service or independent health care services, in pursuance of its general duty of furthering improvement in the quality of healthcare in Scotland. It also sets out that Healthcare Improvement Scotland must conduct joint inspections with other scrutiny authorities when requested by Scottish Ministers

2.2 Care Inspectorate

The Act gives the Care Inspectorate responsibility for the regulation and inspection of social care and support services, scrutiny of criminal justice social work services and joint inspections with other scrutiny partners of services for adults and children. The Care Inspectorate also deals with complaints regarding care services.

The Act establishes that the Care Inspectorate, much more explicitly than its predecessor bodies, has "the general duty of furthering improvement in the quality" of social care services and must also provide information to the public about the availability and quality of services. The Act also gives the Care

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Inspectorate the power to take enforcement action aimed at securing improvement in the quality of care services. The Care Inspectorate can provide direct improvement support, arrange such support, impose conditions of registration; serve formal improvement notices requiring changes within a required timescale and cancel registration if it is not complied with, subject to appeal to the sheriff.

2.3 Duty of co-operation

The Act also sets out that the organisations have a duty of co-operation and requires that:

- scrutiny bodies must co-operate and co-ordinate activity with each other with a view to improving their scrutiny functions around (a) local authorities, (b) social services, (c) health services, “having regard to efficiency, effectiveness and economy”
- this should not prevent or delay action by one body which is necessary as a matter of urgency

The [Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#) supports improvement of the quality and consistency of health and social care services through the integration of health and social care in Scotland and had significant implications for the work of both organisations. Section 56 of the Act, Joint inspections of social services and health care services, provides for Healthcare Improvement Scotland and the Care Inspectorate to jointly conduct inspections in relation to integrated health and social care services, and including any local authority, health board or integration joint board which is required by the Act to prepare a strategic plan. The Act also places a joint responsibility upon Healthcare Improvement Scotland and the Care Inspectorate to encourage improvement in the extent to which implementation of a strategic plan prepared under the Act complies with the integration delivery principles and contributes to achieving the national health and wellbeing outcomes.

3.0 SHARED INTERFACE

While the statutory joint working duties are heavily focused on scrutiny activity, there is a growing need to ensure that joint working reflects more recent changes and further shifts in the public service landscape and the responsibilities of agencies, including the sharing of intelligence, public involvement, and the planning and delivery of improvement interventions. The changes in the landscape include: the integration of health and social care services; changes in policy around children’s services; changes in community justice arrangements; and the stronger focus on preventative expenditure and tackling inequalities in health.

The development by Healthcare Improvement Scotland of the Improvement Hub (ihub), in place of the separate roles of Healthcare Improvement Scotland

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and the Joint Improvement Team and Quality and Efficiency Support Team in Scottish Government, is a response to a commission from Scottish Government to deliver improvement support into the integrated health and social care landscape. The Care Inspectorate has an existing statutory role to support improvement in social care and it is important that there is clarity on where work is taking place independently and where joint working can, and should, improve the quality and impact of the offering.

There is a clear interface between the work of Healthcare Improvement Scotland's ihub and the Care Inspectorate, with both supporting the planning and delivery of improvement within the integrated space. The Executive Director of Strategy and Improvement (Care Inspectorate) and the Director of Improvement Support and ihub (Healthcare Improvement Scotland) have been working closely together to develop strong and effective interfaces across the respective programmes of work. Where elements of the ihub's work relates to the work of the Care Inspectorate, both the Care Inspectorate and Healthcare Improvement Scotland will work together to determine if those elements should be jointly delivered, or delivered in partnership.

Colleagues from the Care Inspectorate, Healthcare Improvement Scotland Quality Assurance and Healthcare Improvement Scotland ihub met together recently to discuss priorities for taking forward work to both assure and support the improvement of joint strategic commissioning. It was agreed to undertake a joint piece of work to outline "what good looks like" to inform both the assurance and improvement support offerings, and that this needs to be co-produced with Health and Social Care Partnerships and involve other national partners with an interest.

It was also agreed that, once appointed, the Head of Strategic Commissioning Support (Healthcare Improvement Scotland ihub) would work with the Chief Inspector – Strategic Scrutiny (Care Inspectorate) to ensure effective co-ordination of any improvement support offerings going forward. An amendment to the ihub committee's terms of reference has been agreed to clearly reference the statutory role of the Care Inspectorate in supporting improvement in social care services.

3.1 Areas of joint working

The Care Inspectorate and Healthcare Improvement Scotland work closely together, recognising that in different circumstances, the organisations will jointly lead on certain issues, one organisation may lead with the support of the other, and there may be single-agency responsibility. The following areas of joint working are specifically referenced in our respective Local Delivery Plans / Scrutiny and Improvement Plan:

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- Strategic inspection of adult services:
 - joint inspections with neither agency having a lead role
 - joint approach (to the future design of joint adult inspections)
- Joint inspection of children's services:
 - Healthcare Improvement Scotland to ensure strong and effective clinical input to the multi-agency inspections led by the Care Inspectorate
- National Care Standards:
 - to deliver in collaboration a set of general and specialist standards linked to the overarching principles signed off in March 2016

There are also a number of areas where both organisations are offering improvement support, for example on frailty and falls, Healthcare Associated Infection and pressure ulcers in care homes. These are currently being mapped and named leads will work together to agree how there should be co-ordinated delivery or joint delivery of improvement support.

3.2 How we work together

The Care Inspectorate and Healthcare Improvement Scotland recognise the need to build on existing shared scrutiny and development work and further develop effective working arrangements between the organisations. This will help to deliver more efficient scrutiny and provide assurance to people using services and their carers as a result of more cohesive scrutiny. It will also ensure a consistent approach, avoid confusion and help to manage public expectations.

The Executive Teams of both organisations have developed a duty of co-operation framework setting out the shared vision for how both the organisations will work together, with the goal of promoting open, honest and constructive relationships which support people using health and care services to achieve better outcomes.

Essential elements of this include:

- Strategic alignment reflected in appropriate operational, corporate and strategic plans as well as appropriate sharing of resourcing of joint initiatives
- Promoting good working relationships, including close working in the development of approaches to communication and engagement, quarterly meetings between Chairs and Chief Executives, regular meetings of the senior executive teams and annual meetings of both Boards to explore strategy and future priorities. The Chairs of both organisations sit as non-Executive members on each other's Boards.

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The ihub Committee within Healthcare Improvement Scotland also reflects the importance of partnership working in its Terms of Reference, highlighting in particular the need to work with the Care Inspectorate in relation to improvement support and through its membership, which includes Karen Reid, Chief Executive of the Care Inspectorate.

4.0 RESOURCE IMPLICATIONS

There are no resource implications arising from this paper; the strands of work referenced are already included within the agreed budget.

5.0 BENEFITS FOR PEOPLE WHO USE SERVICES AND THEIR CARERS

The Duty of Co-operation Framework builds upon the statutory requirements of the Care Inspectorate to work strategically with Healthcare Improvement Scotland in driving improvements in the quality of health and social care services in Scotland. The principles outlined in the framework will provide assurance to people who use services and their carers that both organisations are taking a shared and consistent approach in delivering scrutiny.

LIST OF APPENDICES

- Appendix 1 -** Duty of Co-operation Framework between Healthcare Improvement Scotland and the Care Inspectorate: key principles and operating framework