Health and Care Standards 2015 mapped to Health Standards 2010



| 0 | Governance, le | adership and | l accountability | Effective governance, leadership and accountability in keeping with the size a | and complexity of the health service are essential for the sustainable del | ivery of safe, effective personcentred care. | |
|----------|--------------------------------------------------|---------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--|
| New | Standards | Old S | Standards | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| Standard | Sub-section | Standard | Sub-section | • | | old wording (Sub-section) | |
| 0 | А | | | Health services demonstrate effective leadership by setting direction, igniting passion, pace and drive, and developing people. | Organisations and services operate within a clear and robust fran delivery of their purpose, aims, and objectives, in a manner that: | nework for decision making and accountability designed to achieve successful | |
| 0 | В | | 1 | Strategy is set with a focus on outcomes, and choices based on evidence and people insight. The approach is through collaboration building on common purpose. | a) upholds organisational values and standards of behaviour; b) complies with all relevant regulatory, accreditation, licensing requirements, standards, directions and instructions; | | |
| 0 | с | | - | Health services innovate and improve delivery, plan resource and prioritise, develop clear roles, responsibilities and delivery models, and manage performance and value for money. | c) secures the efficient, effective and economic use of resources;d) safeguards and protects all assets, including its people; and | | |
| 0 | D | | | Health services foster a culture of learning and self-awareness, and personal and professional integrity. | e) ensures good governance when working in partnership with others. | | |
| 1.1 | 1.1 Health Promotion, Protection and Improvement | | | People are empowered and supported to take responsibility for their own he partnership with others to protect and improve the health and wellbeing of p | | heir own health and wellbeing are supported. Health services work in | |
| New | Standards | Old Standards | | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| Standard | Sub-section | Standard | Sub-section | New wording | | | |
| 1.1 | А | | | People know and understand what care, support and opportunities are available, locally, regionally and nationally, including community support and support for people from protected groups. | | | |
| 1.1 | В | | | People are supported to engage, participate and feel valued in society. | | | |
| 1.1 | с | 3 | b | People are supported to be healthy, safe, and happy, and to lead an active life. | Organisations and services work in partnership with others to protect and improve the health and wellbeing of citizens and reduce health inequities by: | supporting citizens to maintain and improve their health, wellbeing and independence; | |
| 1.1 | D | | | Children have a good, healthy, safe and nurturing start in life. | | | |
| 1.1 | E | | | Carers of individuals who are unable to manage their own health and wellbeing are supported. | | | |
| 1.1 | F | 3 | с | People are supported to make decisions about their health behaviour and wellbeing which impact on their health and the health and wellbeing of their children. | Organisations and services work in partnership with others to protect and improve the health and wellbeing of citizens and reduce health inequities by: | promoting healthy lifestyles and enabling healthy choices; | |
| 1.1 | G | 14 | с | Breast feeding is promoted and supported. | Organisations and services will comply with legislation and guidance to ensure that: | breastfeeding is promoted and supported. | |
| 1.1 | н | | | Smoking cessation and smoke free environments are promoted and supported. | | · | |
| 1.1 | I | 3 | с | People are supported to avoid harm to their health and wellbeing by making healthy choices and accepting opportunities to prevent ill health. | Organisations and services work in partnership with others to protect and improve the health and wellbeing of citizens and reduce health | promoting healthy lifestyles and enabling healthy choices; | |
| 1.1 | J | 3 | d | There is active promotion of healthy and safe workplaces and communities. | inequities by: | promoting healthy and safe workplaces; | |
| 1.1 | К | | | There is active promotion of the health and well being of staff. | | | |

| | | 3 | а | Systems, resources and plans are in place to identify and act upon significant | | having systems in place to identify and act upon significant public health issues; |
|----------|---------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 1.1 | L | 3 | f | public health issues so as to prevent and control communicable diseases and provide immunisation programmes; with effective programmes to screen and detect disease. | Organisations and services work in partnership with others to protect and improve the health and wellbeing of citizens and reduce health inequities by: | having systems and plans to prevent and control communicable diseases and provide immunisation programmes; |
| | | 3 | g | | nicquites by. | having effective programmes to screen and detect disease |
| 1.1 | М | 3 | e | Needs assessment and public health advice informs service planning, policies and practices. | | ensuring that needs assessment and public health advice informs service planning, policies and practices; |
| 1.1 | N | | | Health services have systems and processes in place that play their part in reducing inequalities and protect and improve the health and wellbeing of their local population. | | |
| 1.1 | 0 | | | Relationships and allocations of responsibilities between the various organisations with public health responsibilities are clear and acted upon. | | |
| 2.1 | 2.1 Managing Risk and Promoting Health and Safety | | ing Health and | People's health, safety and welfare are actively promoted and protected. Risks are identified, monitored and where possible, reduced or prevented. | | |
| | Standards | Old Standards Standard Sub-section | | New wording | Old wording (Standard) | Old Wording (Sub-section) |
| Standard | Sub-section | | Post practice is applied in associating managing and mit | | | |
| 2.1 | A | 22 | а | on people's experiences of the service. | | applies best practice in assessing, managing and mitigating risk; |
| 2.1 | В | 22 a | Risk management and health and safety are embedded within all healthcare settings and are monitored to ensure continuous improvement. | re which comply with legislation and guidance that: ir | implements policies and arrangements for reviewing and continuously improving all aspects of their activities and environment to protect and improve the health, safety and wellbeing of their patients, service users, carers, staff and the public; | |
| 2.1 | С | | | Access to up to date and relevant information is readily available to identify, prioritise and manage real risks that may cause serious harm. | | |
| 2.1 | D | 22 | с | Safety notices, alerts and any such communication are acted upon. | Organisations and services will have systems and processes in place which comply with legislation and guidance that: | acts upon safety notices, alerts and other such communications. |
| 2.1 | E | | | Measures are in place to prevent serious harm or death where the required controls are well known. | | |
| 2.1 | F | 12 | | Issues relating to the environment such as security, safe and sustainable design, clear signage, planning, privacy, fire safety, age related general health and safety, and disability accessibility are considered. | Organisations and services comply with legislation and guidance to provide environments that are accessible, well maintained, fit for | |
| 2.1 | G | 12 | | There is compliance with legislation and guidance to provide safe environments that are accessible, well maintained, fit for purpose, safe and secure, protect privacy & sustainable. | purpose, safe and secure, protect privacy and sustainable. | |
| 2.1 | н | 4 | | There is compliance with the requirements of the Civil Contingencies Act 2004 and supporting guidance. This will include undertaking risk assessments, having current and tested emergency plans and business continuity arrangements developed through collaboration with partner agencies. This will ensure delivery of a robust response and ensure continuity of essential health services in the event of a major incident or emergency situation. | Organisations and services are able to deliver a robust response and ensure business and service continuity in the event of any incident or emergency situation. | |

| 2.2 | | essure and Tis | | People are helped to look after their skin and every effort is made to prevent | people from developing pressure and tissue damage. | - |
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| New Standard | Standards Sub-section | Old S Standard | Standards Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) |
| 2.2 | A | Standard | Jub-section | People are assessed for risk of pressure and tissue damage and if considered at risk, they receive further assessment and a plan of care is developed and implemented. | | 1 |
| 2.2 | В | | | People are made aware of the risks of pressure and tissue damage and shown ways of preventing them. They and those caring for them are encouraged and advised on appropriate care procedures, including nutritional advice. | | |
| 2.2 | С | | | Appropriate beds, chairs and other equipment are made available to reduce the risks of pressure and tissue damage and specialist preventative equipment such as special mattresses and cushions are also available if necessary. All equipment is clean and properly maintained. | | |
| 2.2 | D | | | Correct moving techniques are encouraged, including regular turning and appropriate self-care, helping people to avoid pressure and tissue damage, increasing their well-being, independence and dignity. | | |
| 2.2 | E | | | Risk assessments are in place to identify if a person is at risk, their skin is checked at least once daily, and preferably when their personal hygiene is attended to. | | |
| 2.3 | Fa | alls Preventio | n | People are assessed for risks of falling and every effort is made to prevent falls and reduce avoidable harm and disability. | | |
| New S Standard | Standards Sub-section | Old S Standard | Standards Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) |
| 2.3 | A | Standard | Sub-section | Falls prevention strategies are implemented based on national standards and evidence based guidelines. | | 1 |
| 2.3 | В | | | People are assessed for risks to their own safety and the safety of others. A plan for managing risk is agreed between the person being cared for and those caring for them. | | |
| 2.3 | С | | | Staff receive appropriate information, training and supervision to ensure that people and their carers are safe. | | |
| 2.3 | D | | | People are encouraged to develop or maintain the level of independence they wish, striking a responsible balance between risk and safety. | | |
| 2.3 | E | | | People are able to summon help easily at all times, using a telephone, bell or other convenient means. If unable to do so their needs will be checked regularly. | | |

| 2.4 | | ention and Co econtamination | ontrol (IPC) and on | Effective infection prevention and control needs to be everybody's business associated infections. | and must be part of everyday healthcare practice and based on the best | available evidence so that people are protected from preventable healthcare |
|----------|-------------|---------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| New | Standards | Old S | tandards | New wording | Old wording (Standard) | Old Wording (Sub-section) |
| Standard | Sub-section | Standard | Sub-section | New Wording | | |
| 2.4 | А | 13 | а | There are appropriate organisational structures and management systems for infection prevention, control and decontamination in place. | Organisations and services comply with legislation and guidance on IPC and decontamination, in order to: | eliminate or minimise the risk of healthcare associated and community acquired infections; |
| 2.4 | В | | | Physical environments are maintained and cleaned to a standard that facilitates infection prevention and control and minimises the risk of infection. | | |
| 2.4 | С | | | Suitable and accurate information on infections is available. | | |
| 2.4 | D | | | Suitable, timely and accurate information on infections is provided to any person concerned with providing further support or nursing/medical care when a person is moved from one organisation to another or within the same organisation. | | |
| 2.4 | E | | | Staff employed to provide care in all settings are fully engaged in the process of infection prevention and control. |] | |
| 2.4 | F | | | Adequate isolation facilities are provided to support effective infection prevention and control. | | |
| 2.4 | G | | | Policies on infection prevention and control are in place and made readily accessible to all staff. | _ | |
| 2.4 | н | | | So far as is reasonably practicable staff are free of and are protected from exposure to infections that can be acquired or transmitted at work. | | |
| 2.4 | I | | | Staff are suitably trained and educated in infection prevention and control associated with the provision of healthcare. | | |
| 2.4 | J | 16 | d | Suitable and sustainable systems, policies and procedures are in place for medical device decontamination by competent staff in an appropriate environment. | Organisations and services ensure the safe and effective procurement, use and disposal of medical equipment, devices and diagnostic systems that: | decontaminates reusable medical devices properly; |
| 2.4 | к | 13 | с | Patients and visitors are supported to achieve and maintain high standards of hygiene. | | support, encourage and enable patients, service users, carers, visitors and staff to achieve and maintain high standards of hygiene; |
| 2.4 | 24 | 13 | e | Proper arrangements exist for the segregation, handling, transporting and disposal of waste including human tissue and subsequent disposal | Organisations and services comply with legislation and guidance on IPC and decontamination, in order to: | handle human tissue and subsequently dispose of it appropriately and sensitively. |
| 2.7 | L | 13 | d | appropriately and sensitively. | | segregate, handle, transport and dispose of waste so as to minimise risks to patients, service users, carers, staff, the public and environment; |

| 2.5 | Nutrit | ion and Hyd | ration | People are supported to meet their nutritional and hydration needs, to maxim | mise recovery from illness or injury. | | |
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| New Standard | Standards Sub-section | Old S Standard | Standards Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| 2.5 | A | 14 | a | People's nutritional needs and physical ability to eat and drink are assessed, recorded and addressed. They are reviewed at appropriate intervals and are referred to dietetic services as required for specialist advice and support. | Organisations and services will comply with legislation and guidance to | patients' and service users' individual nutritional and fluid needs are assessed, recorded and addressed; | |
| 2.5 | В | 14 | d | People are offered a choice of food and drink which is prepared safely and meets the nutritional, therapeutic, religious and cultural needs of all; and is accessible 24 hours a day. | ensure that: | a choice of food is offered, which is prepared safely and meets the nutritional, therapeutic, religious and cultural needs of all; | |
| | | 14 | е | | | is accessible 24 hours a day. | |
| 2.5 | С | | | People are encouraged to eat nutritious, varied, balanced meals, hygienically prepared and served at regular times. | | | |
| 2.5 | D | | | Food and drink are served in an acceptable setting, with minimal interruption and are at the right temperature and attractively presented. People have a positive eating experience. | | | |
| 2.5 | E | | | Carers and family members who wish to support people at meal times are encouraged and enabled to do so. | | | |
| 2.5 | F | | | If a meal is missed, alternative food is offered and/or snacks and drinks can be accessed at any time. | | | |
| 2.5 | G | | | Fresh drinking water is available at all times, and water and appropriate fluids are encouraged throughout the day for people to meet their hydration requirements, except when restrictions are required as part of treatment. | | | |
| 2.5 | н | 14 | b | People are provided with therapeutic diets in accordance with their medical needs. If eating and/or drinking cause people difficulties, they receive prompt assistance to eat or drink encouragement and appropriate aids or support. | Organisations and services will comply with legislation and guidance to ensure that: | any necessary support with eating, drinking or feeding and swallowing is identified and provided; | |
| 2.5 | I | | | People with swallowing difficulties are assessed by a speech and language therapist and where necessary training in assisting people to swallow food or drink safely is given. | | | |
| 2.5 | J | | | People are supported who require artificial nutritional support via enteral or parenteral routes. | | | |
| 2.5 | к | se | e 2.5 B | Where food and drink are provided: a choice of food and drink are offered, which is prepared safely and meets the nutritional, therapeutic, religious and cultural needs of all; and is accessible 24 hours a day. | | | |
| 2.6 | Medio | ines Manage | ement | People receive medication for the correct reason, the right medication at the | e right dose and at the right time. | | |
| New Standard | Standards Sub-section | Old S Standard | Standards Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| 2.6 | A | 15 | а | There is compliance with legislation, regulatory and professional guidance and with local guidance for all aspects of medicines management. | | they comply with legislation, licensing and good practice guidance for all aspects of medicines management including controlled drugs; | |
| 2.6 | В | 15 | b | Health professionals are qualified, registered with their respective regulatory bodies and fit for practice to prescribe, dispense and administer medicines within their professional competence and appropriate to the needs of the patient. | | clinicians are qualified and trained in prescribing, dispensing and administering medicines within their individual scope of practice; and | |
| 2.6 | с | 15 | с | There is timely, accessible and appropriate medicines advice and information for patients, carers and staff. Patients are provided with sufficient information to meet their needs regarding the purpose and correct use of their medication and alternate treatment options. All patients have an opportunity to discuss and agree their treatment plan. | Organisations and services will ensure that: | there is timely, accessible and appropriate medicines advice and information for patients, service users, their carers and staff including the reporting of drug related adverse incidents. | |
| 2.6 | D | 15 | с | Adverse drug reactions and medicine related adverse incidents are reported and investigated where appropriate. | | | |

| 2.7 | | Children and Adults at Risl | Safeguarding | Health services promote and protect the welfare and safety of children and a | dults who become vulnerable or at risk at any time. | | |
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| New | Standards | Old S | itandards | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| Standard | Sub-section | Standard | Sub-section | New wording | | | |
| 2.7 | A | 11 | а | There is compliance with legislation and guidance to include: All Wales Child Protection, and Vulnerable Adult procedures & Mental Health Act 1983 in relation to persons liable to be detained, and the Mental Capacity Act 2005 regarding Deprivation of Liberty Safeguards. | Organisations and services promote and protect the welfare and safety of children and vulnerable adults by: | , conforming to legislation and guidance; | |
| 2.7 | В | | | Assurance of safeguarding services and processes is evident across all levels of the organisation. | | | |
| 2.7 | с | 11 | b | Effective multi-professional and multi-agency working and co-operation are in place complying with the Social Services and Well-being (Wales) Act. | Organisations and services promote and protect the welfare and safety | ensuring effective multi-agency working and co-operation; | |
| 2.7 | D | 11 | с | Staff are trained to recognise and act on issues and concerns, including sharing of information and sharing good practice and learning. | of children and vulnerable adults by: | training and supporting staff to recognise and act on issues and concerns, including sharing of information; | |
| 2.7 | D | 11 | d | | | sharing good practice and learning. | |
| 2.7 | E | | | People are informed how to make their concerns known. | - | | |
| 2.7 | F | | | Priority is given to providing services that enable children and vulnerable adults to express themselves and to be cared for through the medium of the Welsh language because their care and treatment can suffer when they are not treated in their own language. (They are recognised as a priority group in More than just Words). | | | |
| 2.7 | G | | | Suitable arrangements are in place for people who put their safety or that of others at risk to prevent abuse and neglect. | | | |
| 2.7 | н | | | Risk is managed in ways which empower people to feel in control of their life. | | | |
| 2.7 | I | | | Arrangements are in place to respond effectively to changing circumstances and regularly review achievement of personal outcomes. | | | |
| 2.8 | Blo | od Managem | ent | People have timely access to a safe and sufficient supply of blood, blood proc | ducts and blood components when needed. | | |
| New | Standards | Old S | standards | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| Standard | Sub-section | Standard | Sub-section | | | | |
| 2.8 | A | | | Health services have robust governance systems in place to maintain a safe sufficient supply of blood, blood components and blood products to support timely appropriate and effective use for all. | | | |
| 2.8 | В | 17 | а | There is compliance with legislation and national guidance on the supply and | | compliance with legislation and national guidance on the supply and use of | |
| 2.8 | с | 17 | b | Effective schemes and systems are in place to actively manage stock, minimise wastage, and plan effectively for shortages. | | the use of schemes and systems to reduce wastage of blood, blood products and blood components; | |
| 2.8 | С | 17 | с | · · · · · | Organisations and services ensure that patients have access to a safe | effective planning for blood shortages; | |
| 2.8 | D | 17 | d | A continuous innovative programme of education, training and competence assessment covers all staff involved in the transfusion process in line with national strategy. | and sufficient supply of blood, blood products and blood components, through: | an ongoing programme of education, training and competence assessment for all staff involved in the transfusion process; | |
| 2.8 | E | 17 | e | Processes are in place that enhance the safety of blood transfusion and support the recognition and reporting of, and shared learning from all incidents, adverse blood events and reactions. | | the reporting of all adverse blood reactions and incidents. | |
| 2.8 | F | | | There is a collaborative approach to optimal blood management. | | | |

| 2.9 | Medical Device | s, Equipment Systems | and Diagnostic | Health services ensure the safe and effective procurement, use and disposal | of medical equipment, devices and diagnostic systems. | |
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| | Standards | | tandards | New wording | Old wording (Standard) | Old Wording (Sub-section) |
| Standard | Sub-section | Standard | Sub-section | | | |
| 2.9 | А | 16 | а | There is compliance with health, safety and environmental legislation, regulation and guidance. | | conform to health, safety and environmental legislation and guidance; |
| 2.9 | В | 16 | h | Processes ensure that equipment, and devices are maintained, cleaned and calibrated in accordance with manufacturer's guidelines, ensuring they are | | are maintained, cleaned and calibrated in accordance with manufacturer's guidelines; |
| 2.9 | В | 16 | с | appropriate for their intended use and for the environment in which they are used. | | are appropriate for their intended use and for the environment in which they are used; |
| 2.9 | с | 16 | e | An ongoing programme of training and competence assessment covers staff and users. | Organisations and services ensure the safe and effective procurement, use and disposal of medical equipment, devices and diagnostic systems that: | is supported by an ongoing programme of training and competence assessment for staff and users; |
| 2.9 | D | 16 | f | Timely reporting and management arrangements exist to address any device, equipment or system faults in use or in stock, including any alert or warning notices issued by appropriate agencies such as MHRA. | t | there is timely reporting and management of any device, equipment or system faults. |
| 2.9 | E | 16 | Suitable and sustainable systems, policies and procedures are in place for d medical device decontamination by competent staff in an appropriate environment. | | decontaminates reusable medical devices properly; | |
| 3.1 | | | | Care, treatment and decision making should reflect best practice based on er | vidence to ensure that people receive the right care and support to meet | their individual needs. |
| New | Standards | | tandards | New wording | Old wording (Standard) | Old Wording (Sub-section) |
| Standard | Sub-section | Standard | Sub-section | | | |
| 3.1 | А | | | People are safe and protected from avoidable harm through appropriate care, treatment, information, support and early detection of risks. | | |
| 3.1 | В | | | People are supported to protect their own and their families' health. | | |
| 3.1 | с | | | Welsh speakers are able to use the Welsh language to express themselves and information is communicated effectively. | | |
| 3.1 | D | | | Practice evolves to reflect new evidence and provides an efficient and effective response to promote safe and clinically effective care. | | |
| 3.1 | E | 7 | n | Systems and processes comply with safety and clinical directives in a timely way, including alerts. | | that complies with safety and clinical directives in a timely way; |
| 3.1 | F | 7 | | Systems ensure that non-compliance or variance from best practice is properly recorded and audited and any risks identified are managed appropriately. | Organisations and services will ensure that patients and service users are provided with safe, effective treatment and care: | which is demonstrated by procedures for recording and auditing compliance with and variance from any of the above. |
| 3.1 | G | 7 | а | People receive a high quality, safe and effective service whilst in the care of the NHS which is based on agreed best practice guidelines including those defined by condition specific Delivery Plans, National Institute for Health and Clinical Excellence (NICE), NHS Wales Patient Safety Solutions, and professional bodies. | Organisations and services will ensure that patients and service users are provided with safe, effective treatment and care: | based on agreed best practice and guidelines including those defined by National Service Frameworks, National Institute for Health and Clinical Excellence (NICE), National Patient Safety Agency (NPSA) and professional bodies; |
| 3.1 | н | | | Practice keeps up to date with best practice, national and professional guidance, new technologies and innovative ways of working. | | |

| 3.2 | Commu | unicating Effe | ectively | In communicating with people health services proactively meet individual lan | nguage and communication needs. | | | |
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| | Standards | | itandards | New wording | Old wording (Standard) | Old Wording (Sub-section) | | |
| Standard 3.2 | Sub-section A | Standard | Sub-section | | | | | |
| 3.2 | В | | | Open and honest communication is emphasised in the spirit of co-production. | | | | |
| 3.2 | С | | | Special care is taken in communicating with those whose mental capacity may be temporarily or permanently impaired. | | | | |
| 3.2 | D | 18 | e | care needs including: learning disabilities, dementia, stroke, sensory loss, | Organisations and services comply with legislation and guidance to ensure effective, accessible, appropriate and timely communication and information sharing: | addressing all language and communication needs. | | |
| 3.2 | E | | | Effective, accessible, appropriate and timely communication is tailored to the needs of each individual person and reasonable adjustments are made as defined in the Equality Act 2010. | | | | |
| 3.2 | F | | | Methods of on and off line communication in various languages and accessible formats are used. | | | | |
| 3.2 | G | | | Communication is age appropriate and considers people's ability to engage in health related conversations. |] | | | |
| 3.2 | Н | | | Support is given for carers and advocates who in turn are supporting the needs of people with communication needs. | | | | |
| 3.2 | I | 18 | a,b,c | communication is considered internally and externally with natients service | Organisations and services comply with legislation and guidance to ensure effective, accessible, appropriate and timely communication and information sharing: | internally and externally; with patients, service users, carers and staff using a range of media and formats; about patients, service users and their carers; | | |
| 3.3 | 2.3 Quality Improvement, Research and Innovation | | esearch and | Services engage in activities to continuously improve by developing and implementing innovative ways of delivering care. This includes supporting research and ensuring that it enhances the efficiency and effectiveness of services. | | | | |
| | Standards | | tandards | New wording | Old wording (Standard) | Old Wording (Sub-section) | | |
| Standard | Sub-section | Standard | Sub-section | | | | | |
| 3.3 | A | 6 | а | Local capacity and capability is developed to support and enable teams to identify and address local improvement priorities, including participation in with address local improvement priorities, and the supervised of the supervised set of t | | identifying and participating in quality improvement activities and programmes; | | |
| | | 6 | b | audit and recognised quality improvement methodologies, activities and programmes. | Organisations and services reduce waste, variation and harm by: | supporting and enabling teams to identify and address local improvement priorities: | | |
| | | 6 | с | | | using recognised quality improvement methodologies; | | |
| 3.3 | В | 6 | d | Progress is measured, recorded and learning is shared. | | measuring and recording progress; and | | |
| | | 6 | e | | | spreading the learning. | | |
| 3.3 | С | 21 | а | There is consistent application of the principles and requirements of the Framework for Health and Social Care Research and Development. | | ensure that the principles and requirements of the Research Governance Framework for Health and Social Care are consistently applied; | | |
| 3.3 | D | 21 | b | | Organisations and services will: | have an outcome focussed research and development strategy that benefits patients and improves service delivery; | | |
| 3.3 | Е | | There is a structured approach to promoting and supporting research and Innovation and it is applied in every day practice. | | | | | |
| ├ ───┤ | E | | | Innovation and it is applied in every day practice. | - | | | |
| 3.3 | F | 21 | с | | | promote research, development and innovation. | | |

| 3.4 | Commu | tion Governa nications Tec | hnology | Health services ensure all information is accurate, valid, reliable, timely, relevant, comprehensible and complete in delivering, managing, planning and monitoring high quality, safe services. Health services have systems in place, including information and communications technology, to ensure the effective collection, sharing and reporting of high quality data and information within a sound information governance framework. | | | | |
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| New Standard | Standards Sub-section | Old S Standard | Standards Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) | | |
| 3.4 | A | 19 | a | Safe and secure information systems are developed in accordance with legislation and within a robust governance framework. | | developing and using safe and secure information systems in accordance with legislation and within a robust governance framework; | | |
| 3.4 | В | 19 | b | Processes exist to operate and manage information and data effectively, to maintain business continuity and support and facilitate patient care and delivery. | Organisations and services support and facilitate patient care and service delivery by: | having processes to operate and manage information and data effectively and to maintain business continuity; | | |
| 3.4 | С | 19 | С | Data and information are accurate, valid, reliable, timely, relevant, | | ensuring data quality is robust and timely; | | |
| 3.4 | D | 19 | d | Information is used to review, assess and improve services. | | using information to review, assess and improve services; | | |
| 3.4 | E | 19 | e | Information is shared with relevant partners using protocols when necessary to provide good care for people. | | sharing information with relevant partners using protocols when necessary. | | |
| 3.5 | R | ecord Keepin | ıg | Good record keeping is essential to ensure that people receive effective and | safe care. Health services must ensure that all records are maintained in | accordance with legislation and clinical standards guidance. | | |
| News | Standards | ndards Old Standards | | New wording | Old wording (Standard) | Old Wording (Sub castion) | | |
| Standard | Sub-section | Standard | Sub-section | New wording | old wording (standard) | Old Wording (Sub-section) | | |
| 3.5 | A | | | Paper and electronic clinical record quality is improved through adoption of the Academy of Medical Royal Colleges standards for the clinical structure and content of patient records. | | | | |
| 3.5 | В | | | Clear accountability for record keeping supports effective clinical judgements and decisions. | | | | |
| 3.5 | С | | | There is effective communication and sharing of information between members of the multi-professional healthcare team and the patient. | | | | |
| 3.5 | D | | | Record keeping supports clinical audit, research, allocation of resources and performance planning. | | | | |
| 3.5 | E | | | Evidence shows how decisions relating to patient care were made. | | | | |
| 3.5 | F | | | Identification of risks enables early detection of complications. | | | | |
| 3.5 | G | | | Record keeping supports the delivery of services, patient care and communications. | | | | |
| 3.5 | н | 20 | а | Records are designed, prepared, reviewed and accessible to meet the required needs. | | designed, prepared, reviewed and accessible to meet the required needs; | | |
| 3.5 | Ι | 20 | b | Records are stored securely, maintained, are retrievable in a timely manner and disposed of appropriately. | Organisations and services manage all records in accordance with legislation and guidance to ensure that they are: | stored safely, maintained securely, are retrievable in a timely manner and disposed of appropriately; | | |
| 3.5 | J | 20 | с | Records are accurate, up-to-date, complete, understandable and contemporaneous in accordance with professional standards and guidance; and | | accurate, complete, understandable and contemporaneous in accordance with professional standards and guidance; | | |
| 3.5 | J | 20 | d | shared when appropriate. | | shared as appropriate. | | |
| 3.5 | К | | | People's personal records are regularly updated and available to them. To ensure confidentiality, they are kept secure and comply with the Data Protection Act 1998. | | | | |
| 3.5 | L | | | Care, treatment and decision making is supported by structured, accurate and accessible patient records documenting the conversations between people and health professionals and the resulting decisions and actions taken and reflects best practice founded on the evidence base. | | | | |

| 4.1 | ſ | Dignified Care | | People's experience of health care is one where everyone is treated with digr needs. | ity, respect, compassion and kindness and which recognises and addres | ses individual physical, psychological, social, cultural, language and spiritual | | | |
|--------------|--------------------------|-------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--|--|--|
| New Standard | Standards Sub-section | Old S Standard | Standards Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) | | | |
| 4.1 | A | Stanuaru | Sub-section | People are treated with respect, courtesy and politeness. | | | | | |
| 4.1 | В | | | People are able to access free and independent advice so they can make choices about their care and lifestyle. | | | | | |
| 4.1 | С | | | Individuals are addressed by their preferred name. | | | | | |
| 4.1 | D | | | Welsh Language needs are responded to sensitively. | | | | | |
| 4.1 | E | | | Confidentiality, modesty, personal space and privacy are respected especially in hospital wards, public spaces and reception areas. | n | | | | |
| 4.1 | F | | | People's feelings, needs and problems are actively listened to, acknowledged and respected. | | | | | |
| 4.1 | G | | | All care is recognised as holistic and includes a spiritual, pastoral and religious dimension. | d | | | | |
| 4.1 | н | | | Information and care are always provided with compassion and sensitivity. Ensuring that people and their carers have the freedom to act and decide based on opportunities to participate and on clear and comprehensive information. | | | | | |
| 4.1 | I | | 10 | Consideration is given to people's environments and comfort so they may rest and sleep. | Organisations and services recognise and address the physical, psychological, social, cultural, linguistic, spiritual needs and preferences of in and that their right to dignity and respect will be protected and provided for. | | | | |
| 4.1 | J | | | People are helped to be as comfortable and pain free as their condition and circumstances allow. | and that their right to dignity and respect will be protected and provide | | | | |
| 4.1 | к | | | People are supported to be as independent as possible in taking care of their personal hygiene, appearance and feet and nails. | | | | | |
| 4.1 | L | | | People are supported to maintain a clean, healthy, comfortable mouth and pain- free teeth and gums, enabling them to function as normal (including eating and speaking) and prevent related problems. | | | | | |
| 4.1 | М | | | Continence care is appropriate and discreet and prompt assistance is provided as necessary taking into account peoples' specific needs and privacy. | | | | | |
| 4.1 | Ν | | | People are supported to feel confident to talk through all aspects of their care including sensitive areas such as life expectancy. Advanced care planning, end of life care and addressing the needs of the dying and as good a death as practical for the individual and their family is a key part of dignified care. | | | | | |

| 4.2 | Pat | ient Informat | ion | People must receive full information about their care which is accessible, und equal partner. | derstandable and in a language and manner sensitive to their needs to en | nable and support them to make an informed decision about their care as an | |
|----------|-------------|---------------|-------------|-------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------|--|
| - | Standards | | standards | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| Standard | Sub-section | Standard | Sub-section | | | | |
| 4.2 | А | | | People's rights and individual circumstances are respected so they have a voice | | | |
| 4.2 | A | | | and control, empowering them to make decisions that affect their lives. | | | |
| | | | | Welsh speakers are empowered to express their needs and they are able to | - | | |
| | | | | fully participate in their care as equal partners. Where needed people are | | | |
| 4.2 | В | | | provided with access to a translator or a member of staff with appropriate | | | |
| | | | | language skills. | | | |
| 4.2 | С | | | Health, personal and social care needs are assessed and set out in regularly | | | |
| | | - | | reviewed plans of care. | 4 | | |
| | | | | Assistance or specialist aids are provided to those with speaking, sight or | | | |
| 4.2 | D | | | hearing difficulties, special needs such as memory problems or learning | | | |
| | | | | disabilities, enabling them to receive and respond to information. | | | |
| 10 | - | | Í. | People are consulted about any treatment and care they are to receive and | | | |
| 4.2 | E | 9 | b | opportunities provided to discuss and agree options. | | providing opportunities to discuss and agree options; | |
| | | | | People's personal records are kept safe regularly updated and available to | 4 | | |
| 4.2 | F | 9 | с | them. | | treating their information confidentially; | |
| | | | | Time is taken to listen and actively respond to any questions and concerns that | | | |
| 4.2 | 4.2 G | 9 | с | the individual or their relatives may have, treating their information | | treating their information confidentially; | |
| | | | 1 | confidentially. | Organisations and services recognise and address the needs of | | |
| | | 0 | | | patients, service users and their carers by: | | |
| | | 9 d | a | Valid consent is obtained in line with best practice guidance; and assessing and | | obtaining informed consent, in line with best practice guidance; | |
| 4.2 | н | | Í | caring for people in line with the Mental Capacity Act 2005, and when appropriate the Deprivation of Liberty Safeguards 2009. | | assessing and caring for them in line with the Mental Capacity Act 2005 | |
| | | 9 | e | appropriate the Dephydition of Liberty Saleguarus 2005. | | when appropriate. | |
| | | | | | - | | |
| 4.2 | I | 9 | а | Timely and accessible information is provided on people's conditions and care, | | providing timely and accessible information on their condition, care, | |
| | | | | medication, treatment and support arrangements. | | medication, treatment and support arrangements; | |
| 5.1 | - | Timely Access | | All aspects of care are provided in a timely way ensuring that people are trea | ated and cared for in the right way, at the right time, in the right place an | d with the right staff | |
| | Standards | <u> </u> | Standards | ······································ | | | |
| Standard | Sub-section | Standard | Sub-section | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| | | otanuara | ous section | People's health outcomes are monitored in order to ensure they receive care in | | | |
| 5.1 | A | | | a timely way. | | | |
| | | | | All aspects of care are provided, including referral, assessment, diagnosis, | | providing all aspects of care including referral, assessment, diagnosis, | |
| 5.1 | В | 8 | а | treatment, transfer of care and discharge including care at the end of life, in a | Organisations and services recognise and address the needs of | treatment, transfer of care and discharge including care at the end of life, in | |
| 511 | 5 | 0 | ŭ | timely way consistent with national timescales, pathways and best practice. | patients, service users and their carers by: | a timely way consistent with any national timescales, pathways and best | |
| <u>├</u> | | | L | · · · · · · · · · · · · · · · · · · · | | practice; | |
| 5.1 | С | | | Conditions are diagnosed early and treated in accordance with clinical need. | | | |
| | | 1 | | Accessible information and support is given to ensure people are actively | 4 | | |
| 5.1 | D | | | involved in decisions about their care. | | | |
| 5.1 | E | 1 | | There is compliance with the NHS Outcomes and Delivery framework relating | 1 | | |
| 5.1 | E | 1 | | to timely care outcomes | | | |

Planning Care to Promote Independence

Care provision must respect people's choices in how they care for themselves as maintaining independence improves quality of life and maximises physical and emotional well being.

| 0.1 | r hanning care | re to Promote independence | | Care provision must respect people's choices in now they care for themselve | es as manitaning independence improves quarty of me and maximises p | nysical and emotional well being. | | | |
|----------|----------------|----------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--|--|
| | | tandards | New wording | Old wording (Standard) | Old Wording (Sub-section) | | | | |
| Standard | Sub-section | Standard | Sub-section | | | | | | |
| 6.1 | А | | | People are supported to engage and participate in their care and feel valued in society. | | | | | |
| | | | | | | | | | |
| 6.1 | В | | | People are treated with the understanding that they have the right to be who they are, to be understood, considered and recognised as an individual. | | | | | |
| | | | | | - | | | | |
| 6.1 | с | | | Sufficient time is available to support and encourage people to care for themselves, and supporting carers where individuals are unable to care for | | | | | |
| | | | | themselves. | | | | | |
| 6.1 | D | | | Support is given to ensure that people have the right to make decisions about | | | | | |
| | | | | their life. The care that people receive will respect their choices in making the most of | - | | | | |
| 6.1 | E | | | their ability and desire to care for themselves. | | | | | |
| | | | | Ongoing assessment and individual care planning involving all those relevant to | | | | | |
| 6.1 | F | | | the person's care, forms the basis of the plan of activities and care. This takes | | | | | |
| | | | | account of the person's requirements, strengths, abilities and potential. | | | | | |
| | | | | Patients receiving secondary mental health services subject to the Mental | | | | | |
| 6.1 | G | | | Health (Wales) Measure 2010 must have a statutory outcome focussed care | | | | | |
| | | | | and treatment plan that must be regularly reviewed. Where possible, people are shown different ways of doing things to help them | - | | | | |
| 6.1 | н | | | to be independent. | | | | | |
| | | | | If appropriate, people are offered equipment to help them walk, move, eat, | | | | | |
| 6.1 | I | | | hear and see. This equipment is well maintained, and if provided for a specific | | | | | |
| | | | | person is kept for their own use. | - | | | | |
| 6.1 | J | | | People's ability to care for themselves is fostered and their NHS/care | | | | | |
| | | | | environment is as accessible, comfortable and safe as possible. | | | | | |
| 6.1 | к | | | People are encouraged to be active taking appropriate exercise and/or | | | | | |
| | | | | recreation as far as their condition allows. | - | | | | |
| | | | | Healthcare workers are sensitive to people's linguistic needs and people will receive services through the medium of Welsh as a natural part of their care. | | | | | |
| 6.1 | L | | People are shown respect for their cultural identity and are able to access | | | | | | |
| | | | Welsh language services without any obstacles, although not everyone | | | | | | |
| | | | | responsible for their care will speak Welsh. | | | | | |
| 6.1 | м | | | Public information will be easily accessible to ensure people take responsibility | | | | | |
| | N | | | to access care appropriately. | - | | | | |
| 6.1 | N | | | There is effective transition from children to adult services. | - | | | | |
| 6.4 | 0 | 0 | | | | | Health, personal and social care needs are assessed and set out in regularly | | |
| 6.1 | 0 | | | reviewed plans of care agreed by the individual and the people caring for them. The plan is only shared with others with the service user's consent. | | | | | |
| | | | | | - | | | | |
| 6.1 | Р | | | People are supported to get help, when they need it in the way they want it. | | | | | |
| | | | | | | | | | |
| | Q | 8 | o b rehabilitation and re-enablement; and achieve ef | Support is provided to develop competence in self-care and promote | | providing support to develop competence in self-care and promote rehabilitation and re-enablement; | | | |
| 6.1 | | | | rehabilitation and re-enablement; and achieve effective partnership working with other services and organisations, including social services and the third | | | | | |
| | | | | sector. | patients, service users and then carefs by. | working in partnership with other services and organisations, including | | | |
| | | 8 | с | | | social services and the third sector. | | | |
| 6.1 | R | | | Health services will work with community groups for example those who can | | | | | |
| | | | | help support people with protected characteristics. | | | | | |

| 6.2 | Р | eoples' Right | S | Health services embed equality and human rights across the functions and delivery of health services in line with statutory requirement recognising the diversity of the population and rights of individuals under equality, diversity and human rights legislation. | | | |
|-----------------|------------------|---------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| New Standards | | Old Standards | | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| Standard 6.2 | Sub-section A | Standard 2 | Sub-section a | Needs of individuals are recognised and addressed whatever their identity and background, and their human rights are upheld. | | needs of individuals whatever their identity and background, and uphold their human rights; | |
| 6.2 | В | 2 | с | Discrimination is challenged, equality and human rights are promoted and efforts are made to reduce health inequities through strategies, equality impact assessment, policies, practices, procurement and engagement. | Organisations and services have equality priorities in accordance with legislation which ensure that they recognise and address the: | need to challenge discrimination, promote equality and human rights and seek to reduce health inequities through their strategies, policies, practices and procurement processes. | |
| 6.2 | с | | | Strategic equality plans are published setting out equality priorities in accordance with legislation. | | | |
| 6.2 | D | | | Care is consistent whatever the age of the person being cared for, so that for example for younger people with serious illnesses should expect an efficient transition from child services to adult services with good communication between those agencies. | | | |
| 6.2 | E | 2 | b | The rights of children are recognised in accordance with the United Nations Convention on the Rights of the Child (UNCRC). | Organisations and services have equality priorities in accordance with legislation which ensure that they recognise and address the: | rights of children in accordance with the United Nations Convention on the Rights of the Child (UNCRC); | |
| 6.2 | F | | | The rights for older people in Wales are recognised in accordance with the Declaration of Rights for Older People in Wales and the UN principles for Older Persons. | | | |
| 6.2 | G | | | The spiritual and pastoral care needs of people and their carers are recognised and addressed. | | | |
| 6.2 | н | | | People are encouraged to maintain their involvement with their family and friends and develop relationships with others, according to their wishes. | | | |

| 6.3 | Listening and Learning from Feedback | | | People who receive care, and their families, must be empowered to describe their experiences to those who provided their care so there is a clear understanding of what is working well and what is not, and they must receive an open and honest response. Health services should be shaped by and meet the needs of the people served and demonstrate that they act on and learn from feedback. | | | |
|--------------|--------------------------------------|---------------------------------------|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| New Standard | Standards Sub-section | Old Standards Standard Sub-section | | New wording | Old wording (Standard) | Old Wording (Sub-section) | |
| 6.3 | A | Standard | 305-3601011 | Health services and boards demonstrate how they are responding to user experience to improve services. | | L | |
| 6.3 | В | 5 | а | Partners are engaged in supporting and enabling people to be involved in the design planning and delivery of services. | | engage with partners in supporting and enabling citizens to be involved in the design, planning and delivery of services; | |
| 6.3 | С | 5 | b | The patient's and carer's voice is heeded by health services and boards, including through the use of patient stories. | Organisations and services use a range of methods and approaches to: | seek feedback from patients, service users and carers about their experiences; and | |
| 6.3 | D | 5 | с | Feedback is captured, published and acted upon in a way that provides an ongoing and continuous view of performance and demonstrates learning and improvement. | | demonstrate that they act on views and feedback in making changes to improve services. | |
| 6.3 | E | | | Service delivery improvement for all people is captured and demonstrated which includes as a consequence meeting statutory responsibilities for children and young people, equality and diversity, and the Welsh language. | | | |
| 6.3 | F | | | It is clear how data reported in national surveys and audits are used and applied. | | | |
| 6.3 | G | | | There are processes in place that assure a good experience for people which include: i. assessing and evaluating service user experience, especially for those who are ii. vulnerable; iii. provision for people who are less able to speak for themselves; iv. delivering and measuring improvement; v. using patient feedback to influence/drive changes to service provision and delivery; vi. recognising the spiritual, pastoral and religious dimension of care. | | | |
| 6.3 | Н | | | There is compliance with legislation and guidance to deal with concerns, incidents, near misses, and claims as set out in the "Putting Things Right" arrangements. | | | |
| 6.3 | I | I | 23 | а | Concerns are reported, acted upon and responded to in an appropriate and timely manner and are handled and investigated openly, effectively and by | Organisations and services comply with legislation and guidance to | are reported, acted upon and responded to in an appropriate and timely manner; |
| | | 23 | b | those appropriately skilled to do so. | deal with complaints, incidents, near misses, and claims - known collectively as 'concerns' which ensure that they: | are handled and investigated openly, effectively and by those appropriately skilled to do so; | |
| 6.3 | J | 23 | с | Patients, service users and their carers are offered support including advocacy and where appropriate redress. | | offer patients, service users and their carers support including advocacy and where appropriate redress; | |
| 6.3 | к | | | Health services are open and honest with people when something goes wrong with their care and treatment. | | | |
| 6.3 | L | 23 | e | Appropriate support is provided to health staff and learning and services improve through sharing lessons from local and national reviews. | Organisations and services comply with legislation and guidance to deal with complaints, incidents, near misses, and claims - known collectively as 'concerns' which ensure that they: | learn and share lessons from local and national reviews to improve services. | |

| 7.1 | 7.1 Workforce | | | Health services should ensure there are enough staff with the right knowledge and skills available at the right time to meet need. | | | |
|-----------------------------|---------------|-----------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| New Standards Old Standards | | Standards | New wording | Old wording (Standard) | Old Wording (Sub-section) | | |
| Standard | Sub-section | Standard | Sub-section | | Old wording (Standard) | | |
| | | | | Health services work with partners to develop an appropriately skilled, safe and sustainable workforce by: | | | |
| 7.1 | А | 24 | а | having effective workforce plans which are integrated with service and financial plans; | Organisations and services work with partners to develop an appropriately constituted and sustainable workforce by: | having effective workforce plans which are integrated with service and financial plans; | |
| 7.1 | В | 24 | b | meeting the needs of the population served through an appropriate skill mix with staff having language awareness and the capability to provide services through the Welsh language; | | meeting the needs of the population served through an appropriate skill mix; | |
| 7.1 | с | 24 | d | promoting the continuous improvement of services through better ways of working; | | reflecting the demographic profile of its population; | |
| 7.1 | D | 24 | e | enabling the supply of trainees, students, newly qualified staff and new recruits and their development; | | enabling the supply of trainees, students, newly qualified staff and new recruits and their development. | |
| 7.1 | E | | | ensuring plans reflect cross organisational/regional/all Wales workforce requirements where appropriate. | | | |
| | | | | The workforce: | | | |
| 7.1 | F | 25 | а | have all necessary recruitment and periodic employment checks and are registered with the relevant bodies; | Organisations and services ensure that their workforce: | have all necessary recruitment and periodic employment checks and are registered with the relevant bodies; | |
| 7.1 | G | 25 | b | are appropriately recruited, trained, qualified and competent for the work they undertake; | | are appropriately recruited, trained, qualified and competent for the work they undertake; | |
| 7.1 | н | 25 | с | act, and are treated, in accordance with identified standards and codes of conduct; | | act, and are treated, in accordance with identified standards and codes of conduct; | |
| 7.1 | I | 25 | d | are able to raise, in confidence without prejudice, concerns over any aspect of service delivery, treatment or management; | | have access to processes which permit them to raise, in confidence and without prejudice, concerns over any aspect of service delivery, treatment or management; | |
| 7.1 | J | 25 | е | are mentored, supervised and supported in the delivery of their role; | | are supervised and supported in the delivery of their role; | |
| 7.1 | к | 25 | f | are dealt with fairly and equitably when their performance causes concern; | | are dealt with fairly and equitably when their performance causes concern. | |
| 7.1 | L | 23 | d | are provided with appropriate skills, equipment and support to enable them to meet their responsibilities to consistently high standards. | Organisations and services comply with legislation and guidance to deal with complaints, incidents, near misses, and claims - known collectively as 'concerns' which ensure that they: | provide appropriate support to staff; | |
| 7.1 | м | 26 | а | maintain and develop competencies in order to be developed to their full potential; | Organisations and services ensure that their workforce is provided with appropriate support to enable them to: | maintain and develop competencies in order to be developed to their full potential; | |
| 7.1 | N | 26 | b | attend induction and mandatory training programmes; | | participate in induction and mandatory training programmes; | |
| 7.1 | 0 | 26 | с | have an annual appraisal and a personal development plan; | | have an annual personal appraisal and a personal development plan enabling them to develop their role; | |
| 7.1 | Р | 26 | с | develop their role; | | have an annual personal appraisal and a personal development plan enabling them to develop their role; | |
| 7.1 | Q | 26 | d | demonstrate continuing professional development; | | demonstrate continuing professional and occupational development; | |
| 7.1 | R | 26 | е | access opportunities to develop collaborative practice and team working; | | access opportunities to develop collaborative practice and team working. | |
| 7.1 | S | | | work closely together, preventing duplication of effort and enabling more efficient use of resources. | | | |