Standards are fundamental to the quality agenda. The fundamental cornerstone of the document, therefore, is the further development of safe, high quality care for all patients in Wales. Along with the development of NSF's and NICE guidance, this is part of a sustained drive to remove inequalities in health across Wales.

The next stage in the process will be the development of the criteria against which the standards will be assessed. It is planned that formal assessment against the standards will begin in April 2006.

In due course, the Assembly intends to publish integrated standards for health and social care.

Objectives

- to promote care based on shared values that can be adopted universally
- to establish a basis for continuous improvement
- to provide a framework for self-assessment and for external review and investigation
- to help clarify the current complicated array of standards and guidance
- to enhance the reputation of the NHS in Wales

4 Domains – 32 Standards

1. The Patient Experience

1. The views of patients, service users, their carers and relatives and the public taken into account in the delivery and improvement of health and social care services

2. The planning and delivery of healthcare reflect the views of patients and users, reflect health needs, based on evidence and best practice; and ensure equity

3. Patients with emergency health needs access care promptly and within timescales

4. Healthcare premises are well-designed and appropriate

5. Healthcare services are provided in well maintained and clean environments

6. Healthcare organisations to recognise different language, communication, physical and cultural needs:

7. Patients and service users encouraged to contribute to their care plan and provided with opportunities and resources to develop competence in self-care

8. Healthcare organisations ensure that patients, service users, their relatives, carers and staff are treated with dignity and respect; informed consent is obtained; and patient information is treated confidentially

9. Where food is provided, there is a choice which provides a balanced diet and meets personal, cultural and clinical dietary requirements

10. People accessing health care not to be unfairly discriminated against on the grounds of age, gender, disability, ethnicity, race, religion, or sexual orientation
### 4 Domains – 32 Standards (Continued)

#### 2 Clinical Outcomes

11. Clinical care and treatments based on evidence-based practice and carried out under appropriate clinical supervision and leadership; clinicians continuously update skills and participate in regular audit and review.

12. Treatment and care conform to NICE appraisals, the recommendations of AWMSG, based on best practice, take account of patients’ needs, and are integrated.

13. Application of the principles and requirements of the research governance framework.

#### 3 Healthcare Governance

14. Healthcare organisations review and improve their activities that affect the safety and health of patients, and comply with best practice in assessing and managing risk.

15. Healthcare organisations recognise different language and communication needs of patients, service users, relatives and carers.

17. Compliance with national child protection and vulnerable adult guidance.

18. Planned responses to incidents and emergency situations.

19. Risks of medical devices minimised; and management of the quality, safety and security issues of medicines.

20. Best practice in human resources management.

21. Employment checks, professional registration and representation of minority groups.

22. Appropriately trained and qualified staff who participate in induction and CPD.

23. Healthcare organisations ensure that staff are supported.

24. Health and social care and other partners to work together.

25. Healthcare organisations use effective information systems and integrated IT.


27. Governance arrangements based on best practice.

28. Principles of clinical governance underpin clinical work with a cycle of continuous quality improvement; effective clinical and managerial leadership and accountability.

#### 4 Public Health

29. Promotion, protection and demonstrable improvement in the health of the community by collaborating and working in partnership and ensuring that needs assessment and sound public health advice inform policies and practices.

30. Systematic and managed disease prevention and health promotion programmes, which take current and emerging policies and knowledge into account.

31. Plans to deal with health emergencies; action on public health problems; effective programmes to improve health and reduce health; protection from hazards to health; encouragement and support of individuals to recognise their own responsibilities.

32. Healthcare organisations achieve the Corporate Health Standard, moving to a higher level on reassessment.