

## **POLICY NOTE**

### **THE PUBLIC BODIES (JOINT WORKING) (NATIONAL HEALTH AND WELLBEING OUTCOMES) (SCOTLAND) REGULATIONS 2014**

#### **SSI 2014/343**

1. The above instrument is made in exercise of the powers conferred by section 5(1) and 69(2) of the Public Bodies (Joint Working) (Scotland) Act 2014 .The instrument is subject to affirmative resolution procedure.

#### **Policy Objectives**

2. The national health and wellbeing outcomes (“the outcomes”) under the Public Bodies (Joint Working) Scotland Act 2014 provide a strategic framework for the planning and delivery of health and social care services. The suite of national health and wellbeing outcomes, together, aim to improve the quality and consistency of health and social care services, focussing on improving the experiences and quality of services for services users, carers and their families. The outcomes focus on improving how services are provided, as well as, the difference that integrated health and social care services should make, for individuals.
3. The outcomes strike a balance between national prescription and local flexibility. A characteristic of a successfully integrated health and social care system is consistency of outcomes. The outcomes provide a framework for all Scotland, so people receiving integrated health and social care services have a similar experience of services, and carers have a similar experience of support whichever Health Board or Local Authority area they live in.
4. The purpose of the outcomes is to achieve our ambitions for patients, service users, carers and families; so that people are supported to live well at home or in a homely setting; and that people have positive experiences of health and social care services. The outcomes place a strong focus on recognising the valuable contribution carers make and ensures that support is focussed on carers own health and wellbeing, which may arise as a result of their caring role. Clearly, to achieve this, a shift in culture and practice, as well as, better use of resources both human and financial, is required. The outcomes reflect the importance of a supported and empowered workforce and the use of resources that avoid unnecessary duplication or waste, to achieving those aims.
5. Under the joint working arrangements established under the Act, the bodies to which health and/or social care functions are delegated will have responsibility for the planning and resourcing of a significant proportion of health and social care services across Scotland. It is important that for each body taking responsibility for integrated health and social care services there is a consistent framework against which to plan, report and account for its activities so that Integration Authorities, Health Boards, Local Authorities, the Scottish Ministers and the public can assess progress made to improve outcomes locally and across the country. The outcomes apply across all integrated health and social care services, thereby ensuring that Health Boards, Local Authorities and Integration Authorities are clear about their shared priorities by bringing together responsibility and accountability for their delivery.

## **Consultation**

6. A public consultation took place, running from 12 May 2014 to 1 August 2014 and 172 responses were submitted in total. Where we received permission to do so, the responses to the consultation have been published on the Scottish Government website. It includes responses from Health Boards, local authorities, representative bodies, third sector and carers organisations.

## **Impact Assessments**

7. An equality impact assessment has already been completed on the Public Bodies (Joint Working) (Scotland) Act 2014. To view the Equality Impact Assessment click [here](#)

## **Financial Effects**

8. A Business and Regulatory Impact Assessment has already been completed on the Public Bodies (Joint Working) (Scotland) Act 2014. To view the Business and Regulatory Impact Assessment click [here](#). No additional issues arise as a result of this instrument.

Scottish Government  
Directorate for Health and Social Care Integration  
Integration and Reshaping Care Division  
September 2014