

Urgent and unscheduled care standards

Final scope

September 2026

© Healthcare Improvement Scotland 2026

Published | September 2026

This document is licensed under the Creative Commons Attribution-Noncommercial-NoDerivatives 4.0 International Licence. This allows for the copy and redistribution of this document as long as Healthcare Improvement Scotland is fully acknowledged and given credit. The material must not be remixed, transformed or built upon in any way. To view a copy of this licence, visit <https://creativecommons.org/licenses/by-nc-nd/4.0/>

www.healthcareimprovementscotland.scot

Contents

Contents 1

1. Introduction 2

2. Background to the standards..... 2

3. Scope of the urgent and unscheduled care standards 3

4. Standards development group 10

Appendix 1: Standards development methodology 11

References..... 12

1. Introduction

Healthcare Improvement Scotland is the national health and social care improvement organisation for Scotland and is part of NHS Scotland. It provides the expertise and resources to co-produce standards which are developed, informed and shaped by people who commission, deliver and use health and/or social care services. It uses well established and robust methodology to underpin standards development. Our approach to developing standards is outlined in [Appendix 1](#).

Standards are informed by:

- people with lived and living experience and their representatives/care partners
- formally collected patient-reported outcomes
- current national policy and legislation
- evidence relating to effective clinical practice, feasibility and service provision.

Healthcare Improvement Scotland are developing national standards for urgent and unscheduled care.

2. Background to the standards

In March 2025, Healthcare Improvement Scotland published the [NHS Greater Glasgow and Clyde Emergency Department Review](#) report, which included broader recommendations for national bodies to support improvements in care in Scotland. In relation to standards development, the report recommended that:

“Scottish Government should commission Healthcare Improvement Scotland to lead the development of a national approach to improving the quality and safety of urgent and unscheduled care in NHS Scotland, consistent with the Quality Management System, including the development of national standards in partnerships with a range of agencies including the Royal Colleges.”

Healthcare Improvement Scotland are now undertaking the development of national standards for urgent and unscheduled care.

Recent publications and inspection reports have highlighted a number of system-wide pressures and challenges within urgent and unscheduled care and the high demand for emergency departments.¹⁻³ Reports have highlighted the key demand drivers to understand and address why people access urgent and unscheduled care. For example, in patients with frailty, mental health or a long-term condition, inadequate anticipatory care planning may lead to a person reaching a crisis point and urgent care. There are a number of national initiatives supporting the whole-system redesign of urgent and unscheduled care including hospital at home and flow navigation pathways. This is with a focus to ensure that people are receiving the appropriate care and treatment in the right place.

3. Scope of the urgent and unscheduled care standards

Title of the standards

The proposed title is “Standards for urgent and unscheduled care in Scotland”.

Purpose of the standards

The standards set out best practice for all staff and services involved in the planning, commissioning or delivery of urgent and unscheduled care in Scotland.

The standards will be aligned with national policy, guidance and standards including Healthcare Improvement Scotland’s [clinical governance standards](#).

Who the standards will apply to

These standards apply to all people (including children and adults) who require access to urgent, unscheduled (unplanned), emergency and critical care services. This includes people experiencing sudden illness or injury, acute presentations of existing conditions, urgent health needs, or life-threatening conditions.

This may also include, but is not limited to:

- people experiencing an acute presentation of a long-term condition
- people experiencing sudden clinical deterioration
- people experiencing mental health or psychological distress, including crisis presentations
- frailty, including people with complex or multiple conditions including frail older people
- children and young people requiring urgent or emergency assessment
- people with palliative or end-of-life care needs experiencing an acute episode, including some people who are dying
- people affected by alcohol or substance use requiring urgent care
- those presenting with safeguarding concerns or vulnerability, including people at risk of harm
- people experiencing social crisis that is impacting their immediate health and wellbeing (e.g. homelessness, lack of support)
- people seeking care on behalf of dependants or those unable to access services independently
- people with learning disabilities and neurodevelopmental conditions who require urgent or unscheduled care

- carers and young carers supporting individuals accessing urgent and unscheduled are services.

The standards will apply in all settings, including remote, rural and island communities, where clinical assessment, care or treatment is required from a health or care professional. This includes, but is not limited to hospitals, out of hours, primary care, Scottish Ambulance Service, community providers (pharmacy, dental, optometry), prison and police custody, hospices, hospital at home services and care homes. It also includes independent health and social care providers.

Definitions will be provided in the standards.

Overarching principles:

These standards aim to support and promote access to urgent and unscheduled care that is delivered by the right person, in the right place, at the right time. The standards will be developed in line with the principles of Realistic Medicine and value-based health and care, with a focus on person-centred, safe, effective, and sustainable services that optimise outcomes and experiences for people using urgent and unscheduled care.

Themes covered in the standards

The standards will include the following high-level themes and further descriptors have been provided.

Principles of person-centred, trauma-informed and evidence-based care

This theme focuses on ensuring that care is safe, effective, and centred on the needs and experiences of individuals. The following key areas are proposed:

- **Safe, effective, and high-quality care** - ensuring care meets established standards of safety, effectiveness, and quality.
- **What matters to patients** - recognising and responding to individual needs, preferences, and priorities.
- **Patient experience** - valuing and improving how care is perceived and experienced by patients.
- **Equitable access and addressing inequalities** - ensuring fair access to care and actively reducing health inequalities.
- **Care in the right place at the right time** - delivering timely care in the most appropriate setting.
- **Evidence-based practice and realistic medicine** - providing care informed by current evidence, supporting appropriate and proportionate interventions.
- **Communication and information** - ensuring clear, accessible, and timely information for patients.
- **Supported and informed decision-making** - enabling individuals and their carers/representatives to participate in decisions about their care, with appropriate support (including written information, translation services, and British Sign Language where required).
- **recognising the impact of geography, transport and travel** – as barriers to people's ability to access care.
- **engaging with communities and people with lived experience** - to inform service design, planning and improvement.

Leadership, governance and culture

This theme focuses on the leadership, culture, systems, and oversight required to support the delivery of safe, effective, and high-quality care. The following key areas are proposed:

- **Culture of openness and transparency** - promoting a shared, values-based culture that is open, transparent, and trauma-informed.
- **Governance systems and accountability** - establishing clear governance structures, including defined roles, responsibilities, and lines of accountability.

- **Risk management and learning** - identifying, managing, and escalating risks appropriately, alongside embedding a culture of continuous learning and shared learning.
- **Alignment with national guidance and standards** - ensuring services are delivered in line with relevant national legislation guidance, policy and standards. For example, the Health and Care (Staffing) (Scotland) Act 2019, Realistic Medicine and Values Based Health and care.
- **Shared accountability and partnership** – to enable effective and safe working across organisations and sectors involved in urgent and unscheduled care delivery.

High-performing staff and teams

This theme focuses on creating and sustaining collaborative, well-supported staff members and teams that are essential for delivering safe and high-quality care. The following key areas are proposed:

- **Collaborative working across roles, services, agencies, organisations and boundaries** - promoting effective teamwork across staffing groups and professional boundaries, with mutual respect for roles, skills, and expertise, access to appropriate referral pathways and guidance.
- **Oversight and assurance of workforce planning** - including review of staffing and workforce data (such as workforce numbers and skills mix), established workforce plans, clear lines of accountability, and the implementation of relevant actions and improvement plans.
- **Psychological safety and staff wellbeing** - supporting a culture where staff feel safe to speak up, alongside promoting wellbeing through approaches such as restorative supervision.
- **Access to training and development** - ensuring staff have access to appropriate training and ongoing professional development, including opportunities for restorative supervision.
- **Effective management and supervision** - providing clear, supportive management and supervision structures to enable staff to perform effectively.
- **Staff feedback and engagement** - actively seeking, valuing, and responding to feedback from staff to inform service improvement.
- **Duty of candour and whistleblowing** - embedding principles of openness and accountability, including clear processes for duty of candour and raising concerns safely.

Service Planning

This theme focuses on ensuring services are effectively planned and supported by appropriate infrastructures to deliver safe, timely, and high-quality care. The following key areas are proposed:

- **Care pathways and patient flow** - establishing clear, integrated pathways to support safe and timely access, clinical assessment, prioritisation and triage, transfer, and discharge across services, including coordination with the Scottish Ambulance Service, out of hours services, flow navigation centres, and routes to access to specialist care and social care providers.
- **Use of technology and innovation** - supporting the appropriate use of new and emerging technologies to enhance care delivery, access, communication, and efficiency.
- **Prevention, anticipatory care and early intervention** – supporting people to access timely care and support before health or social care needs escalate into crisis.
- **Supporting people to access and navigate services easily**, including clear routes into care, assessment, triage, referral and transfer processes.
- **Continuity and coordination of care** across services, settings and transitions – to enable safe and effective delivery of care.

Care environment

This theme focuses on ensuring that the physical environment and infrastructure in which appropriate care is delivered is safe, effective, and sustainable, and supports high-quality person-centred care. The following key areas are proposed:

- **Facilities and environment** - ensuring care environments are safe, meet infection prevention and control requirements, fit for purpose, accessible, and responsive to population needs, and support privacy, dignity, and wellbeing.
- **Addresses and minimise** harms associated with overcrowding, delayed care and prolonged visits for assessment and treatment.
- **Sustainable infrastructure** - promoting environmentally sustainable approaches to facilities planning and service delivery.

Intelligence gathering and information sharing

This theme focuses on ensuring that information and data are managed and shared effectively to support safe, high-quality, and coordinated care. The following key themes are proposed:

- **Use of data and intelligence** - using data, evidence, and intelligence to monitor, assess, and improve the quality and safety of care.
- **Workforce planning and data** - using workforce data to support workforce planning.

- **Addressing inequalities and intersectionality** - understanding and responding to the impacts of health inequalities and multiple inequality or disadvantage (intersectionality) can have on people accessing urgent and unscheduled care.
- **Safe, legal, and appropriate information management** - ensuring that the collection, storage, and sharing of information relating to care is lawful, secure, and appropriate.
- **Cross-agency information sharing** - promoting effective information sharing across services and agencies to support continuity and coordination of care.
- **Openness and timeliness of information** - ensuring that relevant information is shared openly and in a timely manner to support decision-making, safety, and patient care.
- **Understanding population need and demand** – including the use of demographic, activity and population health data to support equitable service planning and delivery.

The standards will align with and reference relevant national policies, strategic priorities, referral pathways, and associated standards and frameworks. This supports integrated service delivery and a coherent, system-wide approach to quality improvement.

Areas out of scope of the standards

There are a number of national initiatives supporting the whole-system redesign of urgent and unscheduled care and will therefore not be part of the standards. This includes:

- condition-specific clinical treatment or pathways
- defined service models or service design
- development of specific workforce modelling or staffing tools
- development of quality indicators, performance targets or operational metrics or other data measurements or datasets
- development of national targets and flow pathways
- implementation of the standards
- inspection or assurance methodology or mechanisms.

Related sources and work programmes

The project team will undertake a literature review to support the development of the standards. This section highlights key resources. To note, this is not an exhaustive list.

Healthcare Improvement Scotland:

- [Ageing and frailty standards](#)
- [Clinical governance standards](#)
- [Excellence in Care](#)
- [Healthcare Staffing Programme](#)
- [Maternity care standards](#)
- [NHS Greater Glasgow and Clyde Emergency Department Review](#)
- [Quality of care review guidance](#)
- [Scottish Approach to Change](#)

Other:

- National Centre for Sustainability Delivery. [National Unscheduled Care Programme](#)
- Royal College of Emergency Medicine. [Clinical standards and guidance](#).
- Royal College of Paediatrics and Child Health. 2025. [Facing the Future - standards for children and young people in emergency care settings](#).
- Scottish Government. 2025. [Multi-agency partnership approach to distress: Framework for collaboration](#).
- Scottish Government. 2025. [Redesign of urgent care](#).

4. Standards development group

The standards development group will be co-chaired by Lesley Sharkey (Nurse Director – Acute Service, NHS Tayside) and Dr Caroline Whitworth (Consultant Nephrologist, NHS Lothian). The group will convene in Summer 2026 and will meet approximately four times over a 12-month period.

The development group includes a range of professionals with strategic and operational backgrounds including representation from across urgent and unscheduled care settings described above.

The current standards development group membership is available from the project team.

Further information

If you would like to find out more about the urgent and unscheduled care standards project or be added to our distribution list for any of our consultation activities or project updates, please contact:

Jen Layden
Programme Manager
Jennifer.Layden@nhs.scot

Appendix 1: Standards development methodology

Healthcare Improvement Scotland has established a robust process for developing standards, which is informed by international standards development methodology. This ensures the standards:

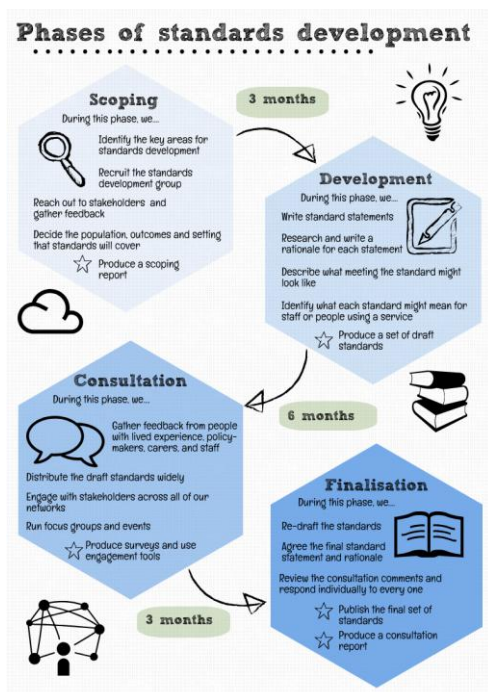
- are fit for purpose and informed by current evidence and practice
- set out clearly what people who use services can expect to experience
- are an effective quality assurance tool.

All Healthcare Improvement Scotland standards are mapped to key national legislation, policy and standards. They support the implementation of person-centred and trauma informed principles, and human rights and equality legislation.

As part of the standards development process, the standards will take into account and consider relevant legislation, national policy, quality improvement and assurance programmes.

The standards will use terminology aligned with the relevant legislation, policy and Healthcare Improvement Scotland style guide.

The phasing of all Healthcare Improvement Scotland standards development is illustrated in the figure below. For further information, please visit our [website](https://www.his.scot.nhs.uk/standardsandindicators/) or contact the standards team at his.standardsandindicators@nhs.scot.



References

1. Scottish Government. Redesign of urgent care (RUC) - Evaluation main report. 2025 [2026 June 25]. Available from: <https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2025/01/main-report-redesign-urgent-care-evaluation/documents/redesign-urgent-care-ruc-evaluation-main-report/redesign-urgent-care-ruc-evaluation-main-report/govscot%3Adocument/redesign-urgent-care-ruc-evaluation-main-report.pdf>.
2. Healthcare Improvement Scotland. Rethinking unscheduled care within strategic planning. 2023 [2026 June 25]. Available from: <https://www.hisengage.scot/equipping-professionals/strategic-planning-in-health-and-social-care/resource-directory/rethinking-unscheduled-care-within-strategic-planning/>.
3. Scottish Government. Pulling together: transforming urgent care for the people of Scotland. The report of the independent review of primary care out of hours services. 2015 [2026 June 25]. Available from: <https://www.gov.scot/binaries/content/documents/govscot/publications/progress-report/2015/11/main-report-national-review-primary-care-out-hours-services/documents/00489938-pdf/00489938-pdf/govscot%3Adocument/00489938.pdf>.

Published | September 2026

Need information in a different format? Contact our Equality, Inclusion and Human Rights Team to discuss your needs. Email his.equality@nhs.scot or call 0141 225 6999. We will consider your request and respond within 20 days.

Healthcare Improvement Scotland

Edinburgh Office
Gyle Square
1 South Gyle Crescent
Edinburgh
EH12 9EB

Glasgow Office
Delta House
50 West Nile Street
Glasgow
G1 2NP

0141 225 6999

www.healthcareimprovementscotland.scot