

## Delivering Single Sex Accommodation (SSA) Action Plan March 2011

### 1. Background

Following the announcement by the Secretary of State for Health on 28<sup>th</sup> January stating the intention to eliminate mixed sex accommodation (MSA) within the NHS Hinchingbrooke started a programme of work to ensure the Trust is same sex accommodation compliant by April 2010. **However the EoE SHA have accelerated this timeline for all Trusts/PCTs to achieve compliance by 31 December 09.**

The Trust has always recognised the importance of privacy and dignity for our patients and the elimination of mixed sex accommodation therefore this has been a key priority for some time. The ward refurbishment project undertaken in 2007/2008 has meant that the **majority** of our facilities are configured and operationally managed as same sex areas. However we identified a **limited number** of areas which did require further work and on the 30<sup>th</sup> April the Trust Board approved the £1.8m business case to deliver a fully compliant hospital in the next 12 months. Work began on refurbishing areas of non compliance and was managed under the aegis of the Sustainable Hospital programme to ensure compliance by 31<sup>st</sup> December 2010.

### 2. Context

The following action plan was produced to ensure that the Trust met SSA compliance by the 1<sup>st</sup> April 2010 in accordance with DH guidance. The plan has been derived primarily from the output of a local self assessment carried out in June 2009 and is based on 3 best practice principles namely:

1. The Board of Directors actively supports patients' privacy and dignity
2. The Physical environment actively supports patients' privacy and dignity
3. Individual staff actions actively support patients' privacy and dignity

Achieving SS compliance is not solely about the physical space offered to patients but is about the process and ultimately the culture of care which is delivered at HHCT. The following table highlights the Trust current RAG status, arising from the self assessment and where the assessment is Amber or Red, details the actions required to address each issue.

Best Practice principle	Area of concern	Action	Action	Target Date
1.	Mechanisms are in place to provide the board of directors with regular information on the views of patients and service users	Patient experience group meet bi-monthly chaired by Trust chairman. Patient experience indicators included in monthly board report. Future reports will include statistics on SS breaches/mitigation and action	LP	On going
1.	The board receives regular reports on the trust's progress in eliminating MSA	The Board received and approved the business case and monthly progress was reported to the Board through the Sustainable Hospital Programme Board report	RH/LP	Complete
1.	The board receives information from patient complaints and incidents, categorised on the basis of MSA.	Quarterly Patient experience reports detail all complaints including any incidents of MSA and go also to Clinical Governance committee (a Trust Board sub committee) for discussion and action	LP/LJ	On going
1.	The board reviews and amends policies on MSA in light of experience, incidents and changes to the service	Trust has privacy and dignity policy in place and is regularly reviewed and audited	LP/LJ	On going
2.	Patient and public areas are consistently clean	<p>The most recent PEAT inspection score was Good Ward Managers conduct monthly environmental audits and produce action plans as required Checking of standards by Nurse Director, Associate Director in form of unannounced inspections Trust employed compliance monitor for new cleaning contract</p> <p>New cleaning contract awarded and started 01/11/09 (Mitie) with more intensive cleaning standards. On going monitoring required to assess effectiveness</p> <p>Repeat environment audit showing a significant improvement in cleaning standards</p>	PB/LS	On going
2.	Patient and public areas are well maintained and in good state of repair	<p>Ensure that robust defect reporting in place with agreed charter for follow up action and repairs.</p> <p>Repairs required and faults are reported to facilities and</p>	PB. DW	Complete

		actioned.		
2.	Partitions separating men and women are robust enough to prevent casual overlooking and overhearing	<p>This is being addressed through the SS11 capital refurbishment project through the SS11 project steering group</p> <p>Partitions are fit for purpose. Clinical practice around privacy and dignity will be audited following the development a P &amp; D audit tool.</p> <p>MAU requires temporary hanging blinds to be fitted at the HDU bay windows</p>	DW  LS	Complete blinds fitting by 31 Dec 09
2.	Patients groups who particularly value segregation (e.g. older people, women and those gender related condition) are prioritised when planning the elimination of MSA	<p>Require evidence base to audit the compliance of this principle</p> <p>This now forms part of the operational bed management policy and the P &amp; D policy. The new HHCT website contains all relevant information on privacy &amp; dignity and what patients can expect.</p> <p>Allied to this bed side folders are being produced to advise patients on all aspects of what they can expect during their stay (available Spring 2010)</p>	WR  LS  LS	Complete
2.	Privacy signs are available to be attached to curtains and doors as needed	<p>Privacy and dignity signs are available and their use will be audited and form part of the P &amp; D audit tool</p> <p>Privacy &amp; Dignity workshops held for all nursing staff</p>	LS	Complete
2.	Separate, clearly labelled male and female toilets and washing facilities (other than assisted or accessible facilities) are available within the are or department	<p>This is being addressed through the SS11 capital refurbishment project through the SS11 project steering group</p> <p>Flexible interchangeable signage needs to be fixed to wash/toilet areas to denote whether male or female in the Treatment Centre and medical and surgical wards as required</p>	DW	Complete by 31 Dec 09
2.	Patients can reach toilets and	This has been addressed through the SS11 capital	JS/LS	Complete

	washing facilities without the need to pass through areas occupied by members of the opposite sex	refurbishment project through the SS11 project steering group  The patients are encouraged to change into their theatre gowns as near as possible to their expected theatre time slots. At pre assessment the patients are told to bring in their dressing gowns and slippers and that during their stay they are to dress appropriately. All toilet facilities are now changed to single sex.		
2.	Where patients pass near to areas occupied by members of the opposite sex, adequate screening such as opaque glazing or blinds/curtains and doors is used	This is being addressed through the SS11 capital refurbishment project through the SS11 project steering group  Birch ward complete (notwithstanding flexi signs)  Opaque screening is fitted top all bay doors	DW	Complete by 31 Dec 09
2.	Toilets and washing facilities are fitted with internal privacy curtains where necessary	Where necessary these are in place including curtains within wet rooms.	LS	complete
2.	Where assisted bathrooms remain unisex, appropriate facilities are provided to uphold the privacy and dignity of all patients who use them	This is being addressed through the SS11 capital refurbishment project through the SS11 project steering group  Where these exist everything possible is done to ensure dignity of patients as the nursing role and flexible signage/dedicated female male toilets to be determined	DW	Complete by 31 Mar 10
3.	Except in an emergency, patients are told in writing, prior to	Patients attending the TC for surgery and subsequent 23 hour stay need to be advised of the potential risk of	WR	Complete

	admission if any parts of the ward are shared between men and women. (if the patient is unable to read written information, they are advised verbally and this is documented)	sharing albeit extremely low. Central planning to amend TC patient admission letter.		
3.	Elective patients are accommodated in either single rooms, single sex wards or single sex bays/rooms within mixed wards	This is being addressed through the SS11 capital refurbishment project through the SS11 project steering group	WR/JP	Complete by 31 March 10
3.	Patients admitted as an emergency are accommodated in either single rooms, single sex wards or single sex bays/rooms within mixed wards	This is being addressed through the SS11 capital refurbishment project through the SS11 project steering group	CW	Complete by 31 March 10
3.	Where possible patients are advised to receive visitors in day rooms or other communal spaces	Where day rooms exist this is encouraged		
3.	Clear information is provided for patients, relatives and carers on the arrangements made and the standards they should expect to ensure their privacy and dignity is maintained. This must include who to contact if necessary to raise queries or concerns	The new HHCT website contains all relevant information on privacy & dignity and what patients can expect.  Allied to this bed side folders are being produced to advise patients on all aspects of what they can expect during their stay (available Spring 2010)	WR/LG/LS	Complete by 31 Mar 10