

## Report to Trust Board

Date 30 March 2011

Agenda item no 8.6

<p>Title</p> <p>Author</p> <p>Responsible Director</p> <p>Purpose</p>	<p><b>Eliminating Mixed Sex Accommodation – Declaration</b></p> <p>Deputy Director, Nursing and Patient Services/ Deputy COO</p> <p>Chief Operating officer/ Director, Nursing and Patient Services</p> <p>Ratification/ Assurance/</p>
<p>Action required</p>	<p>To confirm that the Trust is compliant in eliminating Mixed Sex Accommodation</p>
<p>Executive Summary</p>	<p>With the progress that the Trust has made in eliminating mixed sex accommodation across the whole organization and the continued focus to maintain this, we recommend a declaration of compliance.</p>
<p>Relevant CQC standard/ NHS Constitution pledge</p>	<p>Outcome 15 - safety and suitability of premises</p> <p>Outcome 1 – respect for human rights and diversity</p>
<p>Link to strategy/plans</p>	<p>None specific</p>
<p>Impact assessment:</p> <ul style="list-style-type: none"> <li>- quality</li> <li>- financial/business</li> <li>- equality/diversity</li> <li>- risk</li> <li>- legal/statutory</li> <li>- sustainability</li> </ul>	<p>Confirms quality standard met.</p> <p>Potential financial risk of non-compliance as part of the national contract</p> <p>Confirms gender mixing avoided</p> <p>Reputational risk of non-compliance Poor outcome of CQC assessment</p> <p>DH requirement to eliminate Mixed Sex Accommodation</p> <p>None</p>
<p>Previous consultation/decision/ discussion/</p>	<p>Previous Declaration of Compliance April 2010</p>

## **Purpose.**

To provide assurance to the Board regarding compliance with Mixed Sex Accommodation as all NHS funded providers are required by the NHS Operating Framework 2011/12 to comply with the national definition.

Trust Boards must make declarations by 1<sup>st</sup> April 2011 and must publish the declaration on their website.

## **Background.**

In January 2009, the Department of Health announced a package of measures designed to all but eliminate mixed-sex accommodation. These included:

- a £100m Privacy and Dignity Fund to support improvements and adjustments to hospital accommodation
- launching the same-sex accommodation: your privacy, our responsibility campaign, to provide information and guidance for hospitals, patients and the public
- sending an improvement team out to hospitals that required extra support
- introducing rigorous and transparent performance objectives for hospitals via the standard contract from April 2010.

In March 2010, Bedford Hospital Trust declared virtual elimination of mixed sex accommodation, as per the principles outlined by the Department of Health. This means patients admitted to our hospital will only share the room where they sleep with members of the same sex, and same sex toilets and bathrooms will be close to their bed area. Sharing with members of the opposite sex, known as justified mixing, will only occur by exception based clinical need, as defined by the DH “where it is in the best interest of the patient”.

In November 2010, the Department of health issued further guidance regarding the reporting of mixed sex occurrences and trusts are required to submit monthly data to Unify2.

## **Evidence of compliance**

### **Local policy**

At Bedford Hospital there is a dedicated Eliminating Mixed Sex Accommodation policy to reflect the national guidance. Delivering same sex accommodation was reviewed in August 2010 in line with the NHS Bedfordshire service specification.

### **Reporting structure**

All breaches are reported to a generic DSSA mailbox in standard format within 24 hours of occurrence and a root cause analysis for each breach should be started within 72 hours. All occurrences are reported to the PCT as per service specification and data is collated monthly and submitted via Unify2. The PCT have also conducted several unannounced visits concerning mixed sex accommodation and the trust has received positive feedback regarding its' management of MSA.

## **Prevention algorithm**

All potential breaches are escalated upwards via the matron and Divisional managers to the Associate Chief Operating Officer. This process has been able to prevent several breaches and has made a positive impact on the management of mixed sex accommodation.

## **Audit**

Bedford Hospital undertakes annual audits of privacy and dignity using the Essence of Care benchmarks in order to understand any impact on patient care. Action plans are in place for improvement and the policy has been amended accordingly.

## **Areas of weakness**

Endoscopy is a risk area due to the physical environment. This will be addressed with the introduction of single sex lists from April 2011.

Radiology have made improvements to signage and single sex changing facilities, however, CT waiting area remains problematic when inpatients and outpatients wait together. To mitigate this patients are changed only when necessary and can remain in the changing room until called. The plan generated from this self assessment addresses Radiology issues and the plan for a second scanner will allow segregation of sexes.

## **Next steps (2011/2012)**

The introduction of Matrons ward rounds to drive quality patient care will include the monitoring of MSA principles such as appropriate signage and availability of patient information leaflets.

Self assessment exercises have continued throughout the year and identified residual areas of risk which are contained within the plan. Bedford Hospital has shared this with our commissioners who are supportive of a positive declaration.

## **Recommendation**

With the progress that the Trust has made in eliminating mixed sex accommodation across the whole organization and the continued focus to maintain this, we recommend a declaration of compliance.

**Eliminating Mixed Sex Accommodation Plan.**

**ONGOING ASSURANCE**

<b>AREAS OF ONGOING MONITORING/Areas of risk</b>	<b>CONTROLS IN PLACE</b>	<b>EVIDENCE</b>
1. Policy Adherence	<ul style="list-style-type: none"> <li>• Matrons ward rounds</li> <li>• Central nursing rounds</li> <li>• Productive series/ward visits</li> </ul>	Evidence of escalation and compliance.  DSSA Mailbox  Root cause analyses and decision to mix forms
2. Monthly reporting to PCT/SHA via Unify	<ul style="list-style-type: none"> <li>• Escalation Process in place internally for reporting potential breaches</li> <li>• RCA's completed for every breach</li> </ul>	Reports  RCA's  Reporting Forms
3. Unannounced visits by PCT	Ongoing	Number of visits have taken place in 2010  More visits planned for 2011
4. Audit (privacy and dignity) using Essence of Care benchmark (2010)	<ul style="list-style-type: none"> <li>• Action plans developed</li> <li>• Policy reviews as required</li> <li>• Dementia action plans</li> <li>• Dignity champions</li> </ul>	Audit plan  DH website identifies local dignity champions
5. Inpatient survey questions	<ul style="list-style-type: none"> <li>• Action plans in divisions to address patient concerns</li> <li>• Patient leaflet on clinical areas re MSA</li> </ul>	Action plans  Patient leaflet in place  Ongoing survey in place
6. Bedford Hospital website	<ul style="list-style-type: none"> <li>• Communications update and review</li> <li>• Separate page/link on what patients can expect re: MSA</li> </ul>	Website updated
7. Endoscopy – (area of weakness) re: physical environment	<ul style="list-style-type: none"> <li>• From 1 April 2011 single sex lists will</li> </ul>	Compliant from April 1 <sup>st</sup> 2011

	begin <ul style="list-style-type: none"> <li>• Dignity curtain clips in recovery area</li> </ul>	
8. Adherence to new professional guidance (PL/CNO/2010/3)	<ul style="list-style-type: none"> <li>• Work with critical care network to establish common process</li> <li>• Monitoring of all reported breaches in 24 hours and RCA within 72 hours</li> </ul>	Evidence within Critical Care Operational policy  RCA completed within timeframes and shared with PCT
9. Radiology – (area of weakness) re:CT waiting area	<ul style="list-style-type: none"> <li>• New CT scanner planned – outcome will be compliance with MSA guidance.</li> </ul>	CT scan proposal.  Clinical service plan - Radiology