

Report From: Chief Nurse, Director of Patient Services, Quality & Risk

To: Trust Board, 8th March 2007

Subject: Privacy & Dignity

Action: To Note Contents

Executive Summary

Ivan Lewis MP and Minister for Care Services at the Department of Health (DH) launched the 'Dignity in Care' campaign on 14th November 2006 with three key intentions:

- To raise awareness of dignity in care and inspire local people to take action
- To spread best practice and support people and organisations to drive up standards
- To reward and recognise those that make a difference and go that extra mile

This campaign has reiterated to the Trust the importance of single sex accommodation as a means to ensuring privacy and dignity for all inpatients, as detailed in Standards for Better Health, which is part of The Annual Health Check, developed by the Health Care Commission.

A significant amount of work has already been progressed within the Trust to meet the privacy and dignity needs of patients, most notably through the use of the Essence of Care Benchmarking initiative.

An audit to measure compliance with the Core Standard for Better Health C20b, most notably Element 1a which requires evidence that:

"the healthcare organisation has taken steps to provide services in environments that are supportive of patient privacy and confidentiality, including the provision of single sex facilities and accommodation"

was undertaken in January 2007.

The Trust recognises that within the constraints of the current building stock, full compliance will require substantial financial investment. The Trust was recently successful in bidding to the Strategic Health Authority for £300k to assist in fighting Hospital Acquired Infection. However, this funding will contribute to improving privacy and dignity, as it will fund the creation of additional side rooms and a bathroom upgrade programme.

Gary Etheridge
Chief Nurse, Director of Patient Services, Quality & Risk

March 2007

PRIVACY AND DIGNITY

1. Introduction

This paper outlines West Hertfordshire Hospitals NHS Trust (WHHT) position in relation to the recently launched 'Dignity in Care' campaign and compliance against the Core Standard for Better Health - C20b (Element 1).

2. Background

Ivan Lewis MP and Minister for Care Services at the Department of Health (DH) launched the Dignity in Care campaign on 14th November 2006 with three key intentions:

- Raise awareness of dignity in care and inspire local people to take action
- Spread best practice and support people and organisations to drive up standards
- Reward and recognise those that make a difference and go that extra mile

This campaign complements Standards for Better Health, which is part of The Annual Health Check, developed by the Health Care Commission, plus the more established Essence of Care Benchmarking toolkit, launched by the Department of Health's Chief Nurse in 2001.

3. Performance Management Processes

Privacy and dignity is addressed within both the Essence of Care Benchmarking Tool and within Standards for Better Health.

3.1 Essence of Care Benchmarking

The Essence of Care benchmarks were launched by the Department of Health in February 2001 and provide a practical toolkit for Nurses, Midwives and other team members to focus on ten aspects of care identified as crucial to the quality of care and patients' experience. Privacy and dignity is one aspect of care.

A new Trust Strategy, combining Essence of Care and Observations of Care was developed in early 2006. The purpose of the revised initiative is to assess the extent to which progress has been made in improving the fundamental aspects of care for patients, utilising a focused and manageable approach. The first 'Evaluation of Practice' day took place in July/August 2006 and the Trust is currently conducting a further audit.

3.2 Standards for Better Health

Standards for Better Health was published by the Department of Health in July 2004 and comprises of Core and Developmental Standards

Of particular significance in relation to this paper is the Core Standard C20b, which states:

"Healthcare services are provided in environments which promote effective care and optimise health outcomes, by being supportive of patient privacy and confidentiality".

Element 1a of this Standard states that:

“the healthcare organisation has taken steps to provide services in environments that are supportive of patient privacy and confidentiality, including the provision of single sex facilities and accommodation”.

Single sex accommodation is defined as separate sleeping areas and segregated bathroom and toilet facilities for men and women. This can take a number of forms, and organisations may provide single sex wards or a combination of single rooms and single sex bays.

4. Trust Position

A significant amount of work has already been progressed within the Trust to meet the privacy and dignity needs of patients, most notably through the use of the Essence of Care Benchmarking tool. This tool is well embedded within the Trust and has more recently been used as a means of complimenting evidence of compliance with the relevant Standards for Better Health.

More specifically, Standards for Better Health - Core Standard C20b (Element 1a), states that a Trust should be able to identify any areas that are not supportive of patient privacy and confidentiality and take appropriate steps to address these. Additionally, Trust's should also have taken steps to ensure single sex accommodation is provided for in-patient services, which includes separate sleeping areas and segregated bathroom facilities.

To this end, the Trust carried out an audit in January 2007 of its accommodation (see Appendix 1).

The following measures have been put in place prior and following the audit:

- ◆ Where a minimum of two bathroom areas exist on wards they are now appropriately signed for both sexes
- ◆ Monthly audits are undertaken by the Chief Nurse and Assistant Chief Nurse to monitor the provision and use of inpatient accommodation and washing and bathroom facilities
- ◆ The Corporate Nursing Division will undertake Privacy & Dignity audits, (April and October 2007) through patient questionnaires
- ◆ Ensure minimum standards are met in the production of all new builds planned

5. Conclusion

The Dignity in Care Campaign has reiterated to the Trust the importance of single sex accommodation as a means of ensuring privacy and dignity for all inpatients.

The Trust recognises that within the constraints of the current building stock, full compliance will require substantial financial investment. The Trust was recently successful in bidding to the Strategic Health Authority for £300k to assist in fighting Hospital Acquired Infection. However, this funding will contribute to improving privacy and dignity, as it will fund the creation of additional side rooms and a bathroom upgrade programme.

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Chief Nurse/Director of Patient Services, Quality & Risk

March 2007

Appendix 1

MIXED SEX ACCOMODATION & SEGREGATED BATHROOMS & TOILETS AUDIT – JANUARY 2007

DIVISION: ACUTE MEDICAL CARE DIVISION

Ward	Male	Female	Mixed Sex	If the ward is mixed sex, are male & female patients nursed in separate bays?		Are separate bathroom facilities available for male/female patients?		Are the separate bathroom facilities clearly identified (i.e. laminated signs on doors to signify male/female facility)?		Are separate toilet facilities available for male/female patients?		Are the toilet facilities clearly identified (i.e. laminated signs on the door to signify male/female facility)?		Are bathroom/toilets accessible (i.e. free from clutter/stored equipment or furniture)?		Additional Information
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
Churchill HHGH			√	√		√		√		√		√		√		
Simpson HHGH			√	√		√		√		√		√		√		
CCU HHGH			√	√		√		√		√		√		√		
St Peter's HHGH			√	√		√		√		√		√		√		
Lancaster HHGH			√	√		√		√		√		√		√		
Stuart HHGH			√	√		√		√		√		√		√		
Hanover HHGH			√	√		√		√		√		√		√		HDU is mixed sex bay

DIVISION: ACUTE MEDICAL CARE DIVISION CONT/-

Ward	Male	Female	Mixed Sex	If the ward is mixed sex, are male & female patients nursed in separate bays?		Are separate bathroom facilities available for male/female patients?		Are the separate bathroom facilities clearly identified (i.e. laminated signs on doors to signify male/female facility)?		Are separate toilet facilities available for male/female patients?		Are the toilet facilities clearly identified (i.e. laminated signs on the door to signify male/female facility)?		Are bathroom/toilets accessible (i.e. free from clutter/stored equipment or furniture)?		Additional Information
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
Croxley WGH			√	√			√		√	√		√		√		Ward only has 1 assisted bathroom Measures put in place to address
Letchmore WGH (6 bed #NOF bay)			√	√			√		√		√		√	√		Short term provision ward
CCU WGH			√	√		√		√		√		√		√		
Heronsgate WGH			√	√		√		√		√		√		√		
Sarratt WGH			√	√		√		√		√		√		√		
Cassio WGH			√	√		√		√		√		√		√		
Stroke Unit WGH			√	√		√		√		√		√		√		HDU is mixed sex bay

DIVISION: SURGICAL & ANAESTHESIA

Ward	Male	Female	Mixed Sex	If the ward is mixed sex, are male & female patients nursed in separate bays?		Are separate bathroom facilities available for male/female patients?		Are the separate bathroom facilities clearly identified (i.e. laminated signs on doors to signify male/female facility)?		Are separate toilet facilities available for male/female patients?		Are the toilet facilities clearly identified (i.e. laminated signs on the door to signify male/female facility)?		Are bathroom/toilets accessible (i.e. free from clutter/stored equipment or furniture)?		Additional Information
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
Aragon HHGH			√	√		√		√		√		√		√		
Boleyn HHGH			√	√		√		√		√		√		√		
Cleves HHGH			√	√		√		√		√		√		√		
Private Unit HHGH			√	√		√		√		√		√		√		All single rooms with en suite facilities
De la Mare SACH			√	√		√		√		√		√		√		
Flaunden WGH			√	√		√		√		√		√		√		
Ridge WGH			√	√		√		√		√		√		√		
Elizabeth WGH		√				√		√		√		√		√		Admits female patients only
Langley WGH			√	√		√		√		√		√		√		
ITU HHGH & WGH			√		√		√		√		√		√	-	-	Pts are not ambulatory. P&D maintained by curtains/screens Visiting restricted to immediate family/close friends Arrangements in place to use washrooms & toilets on adjacent wards