

TRUST BOARD MEETING – JANUARY 2009

Title of the Paper:	Privacy & Dignity Progress Report		
Agenda item:	14/09		
Author:	Gary Etheridge, Director of Nursing & Patient Services		
Trust Objective:	Strategic Objective 2 - Improved Rating with Annual Health Check (SFBH Core Standards 7e, 13a & 20b)		
Key Issues: This paper offers the Board assurance that all patients are nursed in single sex bays with the exception of Critical Care Units, High Dependency Areas, Short Stay Acute Admission Bays and the Day Surgery Unit. Trust implementation of the National <i>Confidence in Caring</i> Framework which can promote dignified care, focusing on what matters most to patients.			
Purpose: The report highlights the key Privacy & Dignity initiatives which have been implemented Trust wide since the last Board report.			
Risk Implications for the Trust (<i>including any clinical and financial consequences</i>):		Mitigating Actions (<i>Controls</i>):	
Potential breaches in providing single sex accommodation in general ward areas.		Breaches are reported as adverse incidents.	
Level of Assurance that can be given to the Trust Board from the report Significant			
Links to Key Line of Enquiry (KLOE 1 - 5) 5.4 The results of patient feedback on services and resulting action plans for improvement are reported to the Board. Progress on areas highlighted for action is routinely reported to the Board. This report provides evidence of patient feedback in relation to privacy and dignity.			
Recommendation to the Trust Board: For discussion & Trust Board noting.			

Public Board Meeting: 22nd January 2009

Privacy and Dignity

Presented by: Gary Etheridge Director of Nursing

1. Purpose

This paper provides assurance to the Trust Board that a number of privacy and dignity initiatives are being implemented Trust wide, with the aim of improving the experience of our patients and service users.

2. Background

This paper provides an update on a number of ongoing initiatives implemented within the Trust in relation to maintaining our patient's privacy and dignity needs, thereby meeting compliance against the Core Standards for Better Health - **C13a** and **C20b**.

3. Mixed Sex Accommodation

Quarterly mixed sex accommodation audits and bi-annual privacy and dignity self-assessments measure compliance and progress against our ability to meet the privacy and dignity needs of our patients.

The Mixed Sex Accommodation audit undertaken in November 2008 offers Board assurance that all patients are nursed in single sex bays with the exception of Critical Care Units, High Dependency Areas, Short Stay Acute Admission Bays and the Day Surgery Unit.

100% of these areas have dedicated washing and toilet facilities, which are clearly labelled.

4. Privacy & Dignity Initiatives

4.1 Institute for Innovation and Improvement Privacy and Dignity self assessment Tool

The Institute for Innovation and Improvement have produced a good practice guidance document entitled *Privacy and Dignity - The Elimination of Mixed Sex Accommodation* (2008) which focuses on key issues relating to privacy and dignity, which includes environment, staff attitudes, behaviour and organisational commitment.

Following on from the assessment of twenty-four inpatient clinical areas across the Divisions of Acute Medical Care and Surgery, the Head of Practice and Innovation has now met with the Head of Midwifery and Matrons to discuss how best to utilise the self assessment tool in Maternity, Intensive Care Unit, Children's Facilities and Day Surgery.

All these areas plan to undertake the assessment over the next 2 months, identifying best practice and challenges specific to their speciality.

Self-assessments of all inpatient areas will be undertaken six-monthly thereafter, with a focus on recognising and sharing best practice as well as identifying measurable outcomes in relation to improving the patients' experience.

4.2 Confidence in Caring

Recent evidence has suggested that, even though overall care outcomes continue to improve and overall satisfaction with nursing remains high, patients and in particular, older patients, do not always have confidence in the care they receive.

The recently published *Confidence in Caring* (DH, 2007), offers a framework of best practice guidelines developed by a National Project Team, to help carers focus on the issues that matter most to patients and provide a positive experience for them. It can be used in conjunction with initiatives like *The Productive Ward* and *Essence of Care*.

As part of the National Study patients were asked what gave them confidence in the care they received. At the same time, Nurses were asked what factors they thought were central to a positive patient experience. The results enabled the team to identify a set of five 'confidence creators'. The five identified 'confidence creators' were core issues that patients care about and that effective carers seek to deliver. These are:

- ◆ A calm, clean safe environment
- ◆ A positive, friendly culture
- ◆ Good team-working and good relationships
- ◆ Well-managed care with efficient delivery; and
- ◆ Personalised care for and about every patient

Following discussion at a recent Professional Nursing and Midwifery Strategy Group meeting, it has been agreed that Cleves Ward (Orthopaedics) and Sarrat Ward (Care of the Older Person), at Watford General Hospital will pilot this initiative. This pilot will provide an ideal opportunity to test the framework and evaluate effectiveness prior to further roll out.

Over the next 3 months, the ward teams supported by the Practice and Innovation Team will undertake a baseline assessment of their current position, utilising existing Quality Indicators. A leadership action plan will be devised for the Senior Sisters and the ward team will agree on a philosophy which will frame practice. Progress and outcomes, measured against the baseline assessment, will be reported to the Trust Board in August 2009.

4.3 Essence of Care (Privacy & Dignity Benchmark)

Key areas, which will be progressed/developed during the forthcoming months, include:

- Align Corporate Nursing Professional Development Nurses to Divisions, thereby ensuring that the Trust's Privacy & Dignity initiatives are embedded and driven locally
- A review of the Trust's Essence of Care Strategy
- In collaboration with the Trust's Head of Patient Services, streamline the way the Trust measures the patient experience in line with the Trust Pledge and National Patient Survey

4.4 Dignity in Care Campaign

70 Trust staff have now registered as Dignity Champions and have joined a National network of people who are committed to taking action to improve dignity in care. The challenge for 2009 is to

enable cross boundary working and make a difference together through a more formalised framework.

5. Dignity Conference

The Trust held its second Annual Dignity Conference on the 16th December 2008.

The twelve event speakers and nine poster presentations highlighted achievements and successes offering the opportunity to share best practice and challenges.

The involvement of multi- professional groups and external agencies reinforced the message that promoting Privacy and Dignity is a collective concern across a variety of health care settings.

The key note guest speaker Pauline Ford, Gerontological Nursing Advisor/RCN Dignity Campaign Lead offered a national perspective.

One of the most inspiring moments of the conference was the screening of a charity DVD of the old poem "What Do You See?" Staff commented after the screening: *"very moving and motivating - should be shown to every healthcare professional"*.

6. Equality and Diversity

As a large provider of acute care, employing over 4000 staff, the Trust is committed not only to ensuring that all of its services are accessible, appropriate and fair, but also to recruiting a diverse workforce, matching the diversity of the local population and being capable of understanding the needs and culture of patients within the communities it serves.

A detailed Equality & Diversity Plan to ensure that the Trust is compliant with **Standard For Better Health (C7e)** is in place and monitored quarterly by the Trust's Equality & Diversity Group.

Standard (C7e) has been amended by the HCC (November 2008) to emphasise that Trusts need to cover the issues in terms of challenging discrimination in the provision of services, goods and facilities, as well as employment. Trusts are required to undertake Equality Impact Assessments for these areas, which includes policies and service development.

7. Formal Complaints

The Trust received no formal complaints specifically relating to Privacy and Dignity between 1st October 2008 and 30th December 2008.

8. Recommendation

Trust Board members are asked to note the contents of this report.

Gary Etheridge
Director of Nursing & Patient Services