


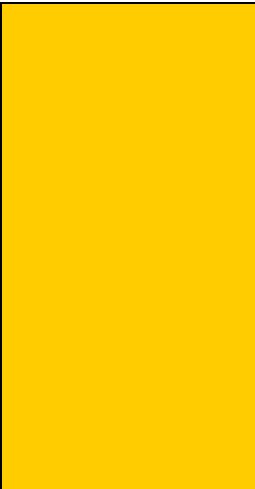
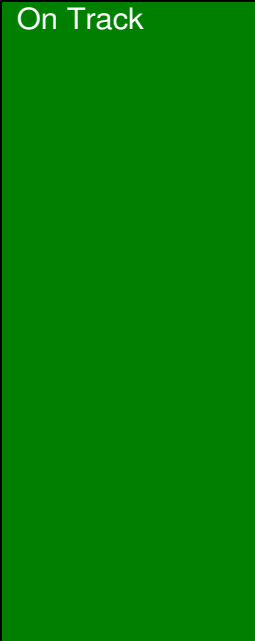
**DELIVERING SAME SEX ACCOMMODATION DELIVERY PLAN
2011/12**

Identified Issue	Aim/Goal	Action	Time Scale	Accountability	Status
1. Patients perspective and understanding of DSSA agenda	<ul style="list-style-type: none">To receive feedback from patients on their experience.	<ul style="list-style-type: none">Discharge telephone survey to identify privacy and dignity issuesEssential Care spot checksYour feedbackWard Quality Indicators monthly per ward or deptPatient Panel presentation planned	Ongoing	Chief Nurse	Complete

<p>2. To bring trust policy and procedures up to date with newly published EMSA guidance (DH, November 2010)</p>	<ul style="list-style-type: none"> • Full compliance with EMSA national guidance 	<ul style="list-style-type: none"> • Review, update and ratify the trust 'Eliminating Mixed Sex Accommodation' policy • Revise, disseminate and internally publish the escalation process mixed sex occurrences • Raise awareness on new guidance/policy and trust escalation process • Devise, disseminate, internally publish and agree with commissioners a clinical justification framework • Internally publish and raise awareness of the commissioner agreed clinical justification framework • Publish revised policy, flowchart, clinical justification framework and patient information leaflet on intranet 	<p>June 2011</p>	<p>Chief Nurse</p>	
--	---	--	------------------	--------------------	--

<p>3 Tracking of DSSA issues through other mechanisms and processes.</p>	<ul style="list-style-type: none"> To highlight any breaches or evidence of non compliance 	<ul style="list-style-type: none"> Complaints monitoring group (quarterly). Through PALS reports to Trust Board Breach review at Directorate monthly performance reports All breaches of sleeping accommodation will undergo a full RCA review (at time of breach) by relevant managers Launch Essence of Care Benchmarking 	<p>Ongoing</p> <p>June 2011</p>	<p>Chief Nurse</p>	<p>On Track</p>
<p>4. Website Content</p>	<ul style="list-style-type: none"> To raise awareness and inform staff and patient users 	<ul style="list-style-type: none"> To update the Trust's website, ensuring public understanding and the Trust's commitment to DSSA and its updated delivery plan. 	<p>June 2011</p>	<p>Head of Communication</p>	<p>On track</p>

<p>5. Maintaining eliminated mixed sex accommodation in line with new guidance (DH, November 2010)</p>	<ul style="list-style-type: none"> • To ensure the Trust continues to deliver on its commitment to eliminate mixed sex 	<ul style="list-style-type: none"> • All refurbishment planned for the last year has been completed. • Four times daily review of compliance to DSSA • All senior nursing staff are signed up to being privacy & dignity champions • All breaches of sleeping accommodation will undergo a full RCA review (at time of breach) by relevant managers • Lessons learnt following breach review will be discussed at Senior Nursing Leadership Group and will be disseminated by attendees • Breaches of sleeping accommodation will be reported using the trust escalation flowchart • Internal review of P&D compliance via monthly 	<p>Completed Ongoing</p>	<p>Head Capacity Management</p>	<p>Ongoing and on track</p>
--	---	---	------------------------------	-------------------------------------	-----------------------------

<p>6. Full delivery of the Trust's Bed Remodelling Programme.</p>	<ul style="list-style-type: none"> To improve the environment to further increase privacy and dignity in the provision of same sex sleeping accommodation and bathroom/toilet facilities 	<ul style="list-style-type: none"> Bed remodeling for this year will require up grade of Kestrel. Still awaiting confirmation of works Patient involvement and feedback is considered in reconfiguration plans 	<p>End June 2011</p>	<p>Head of Capital Projects</p>	
<p>7. Ongoing Performance Management</p>	<ul style="list-style-type: none"> To provide assurance regarding compliance 	<ul style="list-style-type: none"> To continue to monitor compliance and reinforce importance via: <ul style="list-style-type: none"> Executive Team weekly walkabouts. Monthly Chief Executive and Chief Nurse Walkabouts. Non Executive Director Walkabouts Monthly Divisional performance meetings 	<p>ongoing</p>	<p>Chief Nurse</p>	<p>On Track</p> 

8. Performance Management: External		<ul style="list-style-type: none"> To complete weekly performance reports for the PCT and SHA, ensuring all reporting is in line with national guidance and reflects benchmarked good practice. To agree data set with PCT with the support of the SHA to ensure consistency in acute provider reporting 	Ongoing	Deputy Chief Executive	Complete Complete
9. Escalation	<ul style="list-style-type: none"> To ensure compliance to EMSA 	<ul style="list-style-type: none"> To review the Trust's escalation policies, ensuring escalation to the highest level of any risk to delivery of DSSA or potential breach to meet the latest guidance. 	June 2011	Head of Capacity/ Deputy Chief Executive	Complete
11. Website and Public Commitment	<ul style="list-style-type: none"> To ensure updated information is available 	<ul style="list-style-type: none"> Update the website 	June 2011	Head of Communication	Complete
12. Induction and Training.	<ul style="list-style-type: none"> To ensure staff are aware of the agenda 	<ul style="list-style-type: none"> To update the Trust training on DSSA to comply with the latest guidance 	June 2011	Education, Training and Development Manager	On Track