#### WIRRAL COUNCIL

HEALTH AND WELL-BEING OVERVIEW AND SCRUTINY COMMITTEE: 10<sup>th</sup> NOVEMBER 2009

REPORT OF THE ASSISTANT DIRECTOR OF STRATEGY & PLANNING WIRRAL UNIVERSITY TEACHING HOSPITAL NHS FOUNDATION TRUST

#### **DELIVERING SAME SEX ACCOMMODATION UPDATE OCTOBER 2009**

#### **Executive Summary**

This paper outlines the progress being made in regard to eliminating mixed sex wards at Arrowe Park Hospital

## 1. Background

- 1.1 Wirral University Teaching Hospital has always attempted to make best use of its facilities in order to protect the Privacy and Dignity of its patients. The original design concept of Arrowe Park Hospital and the ward configuration provided an environment that met the expectations of patients at the time when the buildings were commissioned in the late 1970's.
- 1.2 Wirral University Teaching Hospital has been able to use the hospital ward design of four and six bedded bays and single rooms to be able to keep men and women in separate sleeping areas as sub specialisation within clinical care, patient and carer expectations and quality and care standards have changed.
- 1.3 It has been acknowledged for some time that the limitations of the existing ward configuration and facilities would not meet the ever higher standards of privacy required for patients in a modern NHS
- 1.4 The provision of a greater number of single rooms has therefore been a strategic objective since the Trust applied for Foundation Trust status. It was agreed that as wards are upgraded they will incorporate a higher proportion of single rooms with en-suite sanitary accommodation.

### 2. Context of the Current Policy

- 2.1 The national operating framework for 2009/10 required providers, through their respective PCT's to publish by March 2009, plans to deliver substantial reductions in the number of patients who report that they share sleeping or sanitary accommodation with members of the opposite sex.
- 2.2 The Health Secretary announced in January that performance measures will be put in place via the standard contract from April 2010 to ensure that same sex accommodation is provided for every patient.

- 2.3 The noted exception to this is for patients who need specialist or urgent care, where providing fast, effective care for the patient may take priority over providing same sex accommodation. (See note 1 below)
- 2.4 To support this programme, the Department of Health made available a £100 million Privacy and Dignity Challenge Fund against which Trusts could bid. WUTH was allocated £900,000 to effect the necessary changes to the ward layout.

#### 3 Local Work Plan

- 3.1 To meet the requirement to provide for all patients, single sex sleeping and sanitary accommodation by April 2010, a programme of work has been agreed that will allow the designated male and female bays to be identified in separate areas of each ward which will be separated by doors. In addition, sanitary accommodation will be provided in each male and female area that precludes the need for patients to pass through the other (male/female) area in order to access the designated bathroom/toilette facilities. The work plan (which can be seen at appendix 1) has been drawn up in consultation with NHS Wirral. A policy for implementing single sex accommodation to the required standard and the allowed exceptions identified in appendix 1 will be put in place by the 31 March 2010.
- 3.2 The production of an information leaflet for patients is complete and has been distributed throughout the Trust.

#### Note 1

DOH principles for exceptions to the requirement to provide single sex accommodation for patients admitted in an emergency.

- Decisions should be based on the needs of each individual patient, not the constraints of the environment or convenience of staff
- Admissions units should be capable of delivering segregation for most of the patients, most of the time
- Patient preference should be sought, recorded and where possible respected. Ideally, this should be in conjunction with relatives or carers
- The reasons for mixing, and the steps being taken to put things right should be explained fully to the patient, family and friends
- Staff should make clear to the patient that the trust considers mixing to be the exception never the norm
- Greater segregation should be provided where the patient's modesty may be compromised (eg. When wearing hospital gowns /nightwear, or where the body other than extremities is exposed)

- Greater protection should be provided where patients are unable to preserve their own modesty (eg. when semi conscious or sedated)
- Where mixing is unavoidable, transfer to same sex accommodation should be effected as soon as possible. Only in the most exceptional circumstances should this exceed 24 hours

### 4 Financial Implications

Capital Grant of £900k to Wirral University Teaching Hospital

5 Staffing Implications

Nil

6 Equal Opportunities Implications

NIL

7 Community Safety Implications

NIL

8 Local Agenda 21 Implications

NIL

9 Planning Implications

NIL

10 Anti Poverty Implications

NIL

11 Social Inclusion Implications

NIL

12 Local Member Support Implications

NIL

13 Health Implications

NIL

# 14 Background Papers

NONE

#### 15 Recommendations

That:

- (1) Health & Well-Being Overview and Scrutiny Committee note the progress being made at Wirral University Teaching Hospital (NHS Foundation Trust) to deliver same sex accommodation by the target date of April 2010.
- (2) Health & Well-Being Overview and Scrutiny Committee agree to have a further update in six months time

## **Assistant Director of Strategy & Planning WUTH**

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Date 28 October 2009

# WIRRAL UNIVERSITY TEACHING HOSPITAL NHS FOUNDATION TRUST

# **DELIVERING SAME SEX ACCOMMODATION - PROGRESS UPDATE**

#### **SEPTEMBER 2009**

DEPARTMENT OF MEDICINE FOR	PROGRESS
THE ELDERLY/REHAB	
Ward 20	Completed – June 2009 - Female
Ward 21	Completed – June 2009 - Male
Ward 22	In progress – Work scheduled for 14
	September 2009
Ward 23	In progress – Work scheduled for 14
	September 2009
Ward 24	Completed - Female
Ward 25	Completed – June 2009 - Female
Isolation Ward 25 *	No work needed
Ward 36	Completed – June 2009 – Male with
	contingency for a female bay – need
	doors
Stroke Rehabilitation	In progress – work due in New Year
	2010
Wirral Neurological Rehabilitation unit	In progress – work due in New Year
	2010

<sup>\*</sup> Clinical Need

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## **DELIVERING SAME SEX ACCOMMODATION - PROGRESS UPDATE**

## **SEPTEMBER 2009**

DEPARTMENT OF MEDICINE	PROGRESS
Clinical Decision Unit *	Work scheduled 19 October 2009
Medical Assessment Unit *	Work scheduled 28 September 2009
Ward 30	Completed – all single side rooms,
	minor works in progress
Ward 31	In progress – Work scheduled for 10
	August 2009
Ward 32/HAC *	In progress – Work scheduled for 14
	September 2009
Cardiac Care Unit *	No work needed
Ward 33	In progress – Work scheduled for 14
	September 2009
Ward 34 *	In progress – Work scheduled for 28
	September 2009
Ward 37	In progress – Work scheduled for 7
	December 2009
Ward 38 *	In progress – Work scheduled for 7
	December 2009
Observation Ward	Toilet/shower – Monday 24 August
	2009 – work in progress

<sup>\*</sup> Clinical Need

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# **DELIVERING SAME SEX ACCOMMODATION - PROGRESS UPDATE**

## **SEPTEMBER 2009**

GENERAL SURGERY/UROLOGY	PROGRESS
Ward 14 – Surgical Assessment Unit	Completed – May 2009
Ward 17	In progress – Segregated work due in
	August 2009 to install doors
Ward 18 – Surgical Day Case Unit	In progress – Segregated work due in
	August 2009 to install doors
Ward M2	In progress – New Year 2010
SPECIAL SURGERY	PROGRESS
Ward 16 – Ophthalmology Clinic	In progress – Segregated work due 1
	October 2009
Ward 1	In progress – due to start 24 August
	2009
Dermatology	In progress – New Year 2010
MUSCULOSKELETAL	PROGRESS
Ward 26	Completed - Female
Ward 27	Completed – Some work required 7
	December 2009 Male with female flexibility
Ward M1	In progress – New Year 2010
Ward 10	In progress – Segregated – Problem
	discuss at next month's meeting
Park Suite	Completed – May 2009