



Bedfordshire Community Health Services

**Delivering Same-Sex Accommodation (SSA)
Provider DSSA Self Declaration Checklist
March 2010**

	Patient Experience	Evidence Required	BCHS Evidence
1	Patient experience of SSA has been measured on three separate occasions to demonstrate progress and submitted to Strategic Health Authority (SHA) as requested	Submitted information to Strategic Health Authorities(SHAs)/Primary Care Trusts(PCTs)	Audit results submitted:- 4 th Dec 2009 28 th Jan 2010 18 th March 2010
2	There is an on-going process in place to continue to measure patient experience of SSA with reports to be submitted to the Board	Results of patient experience surveys Timescales for improvement Reports to the Board Delivery Plan	Patient surveys continue on a monthly basis within inpatient areas and include questions as audited above.
3	There is a process to track other mechanisms for determining patient experience of DSSA, e.g. through patient complaints/comments, Patient Advice and Liaison Service (PALs), Local Involvement Networks (LinKs)	Operational plans Reports to the Board Delivery Plan	PALs enquiries, complaints and compliments discussed within local governance meetings and within Bedfordshire Community Health Services committee
4	Information leaflets for patients on DSSA are available and used by staff in discussions.	Patient experience surveys, Leaflets/posters Communication to patients	Leaflets in place, posters in place including designated privacy and dignity champions.
	Estates		
5	Development funds allocated, spent and projects completed	Report to SHA & PCTs	Estates work completed Dec 2009
6	Estate able to support virtual elimination of Mixed Sex Accommodation	Estates Survey	Complete with estates work.
7	Delivery of SSA is assured in planning of any new or refurbished capital development schemes	Trust DSSA Policy Reports to the Board Delivery Plan	New works discussed within estates and facilities group.
	Systems & Processes		

8	Assurance to the Board and monthly PCT reporting including a system of tracking all occurrences of mixing, whether clinically justified or not.	Reports to the Board Included in dashboard Policy/procedure in place Providers report Delivery Plan	Reporting weekly on compliance and breaches
9	Where there are rare occurrences for non-clinical reasons, a process exists to investigate reason, take prompt action and take remedial actions as required to prevent future occurrence	Process e.g. MSA, Root Cause Analysis(RCA) in place, used by staff Delivery Plan	Any breaches will be investigated and RCA undertaken.
10	Relevant Trust policies refer to requirement to DSSA and privacy and dignity	Policies Delivery Plan	New privacy and dignity policy in place
11	The Trust can demonstrate the virtual elimination of MSA in: Wards Assessment Units Day facilities Patients do not share sleeping accommodation or toilet facilities with members of opposite sex	Reports showing virtually no occurrences in these areas Delivery Plan	Within Archer unit and Biggleswade community hospitals, patients do not share sleeping accommodation or toilet facilities with members of the opposite sex.
Staff Culture			
12	The Board demonstrates a commitment to on-going delivery of SSA	Stated in Board reports Declaration on website Delivery Plan	Declaration on website.
13	The Trust has articulated its intent to deliver care with privacy and dignity within which delivering same sex accommodation is an integral component	Articulated within strategic goals, business plan, on website Delivery Plan Included in staff induction training	Delivery plan Declaration
14	The Trust believes that delivering SSA should be the norm. Mixing will only occur by exception for reasons of clinical justification or patient choice	Evidence of language that mix sex accommodation is the rare exception and not a normal occurrence Delivery Plan	Estates work completed to ensure compliance.
15	If mixing does occur, staff attempt to rectify the situation as soon as possible, whilst safeguarding the individuals dignity and keeping the patient informed about; why the situation occurred and what is being done to address it (with indication of timescales)	Rectification actions and good communication around same sex occurrences are demonstrated in local feedback mechanisms (eg RCA, discharge questionnaires). Paragraph on remedial action included in policy	All breaches will be investigated and RCA undertaken.