

Sixth Domain – Care Environment and Amenities

Care is provided in environments that promote patient and staff wellbeing and respect for patients' needs and preferences in that they are designed for the effective and safe delivery of treatment, care or a specific function, provide as much privacy as possible, are well maintained and are cleaned to optimise health outcomes for patients.

Core Standard	Prompts	Baseline Position	Compliant Level	Assurance
<p>C20 Healthcare services are provided in environments which promote effective care and optimise health outcomes by being:</p> <p>a) A safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation</p>	<p>The healthcare organisation minimises the health, safety and environmental risks to patients, staff and visitors, in accordance with health and safety at work and fire legislation, the Disability Discrimination Act 1995, and The Management of Health, Safety and Welfare Issues for NHS staff (NHS Employers 2005).</p> <p>Acute services, PCTs, mental health services and learning disability services The healthcare organisation protects patients, staff and visitors by providing a secure environment, in accordance with NHS Estates building notes and health technical memoranda and taking account of A professional approach to managing security in the NHS (Counter Fraud and Security Management Service 2003) and other relevant national guidance.</p> <p>The healthcare organisation effectively protects its physical assets and those of patients, staff and visitors taking into account A professional approach to managing security in the NHS (Counter Fraud and Security Management Service).</p>	<p>H & S Policy and Procedure signed off by the CEO and is included in the Risk Management Annual Report that is produced and approved by the Board. All policies relating to H & S are disseminated to all staff in a controlled manner. The Risk Manager/Health and Safety Advisor is available for any issues or concerns raised. All H & S related incidents are acted on once reported. Fire alarms are tested yearly and fire drills are carried out in accordance to guidance. The Health and Safety Risk Assessment Toolkit is designed to coordinate risk assessments and enable staff to have an annual risk assessment for all areas of their work place.</p> <p>Director of Finance and Performance Board level lead for security management. Security measures in place for at risk premises, security guards on duty where applicable. Visitor books used in all premises and id cards issued to all employed staff. Staff security policy approved by the Risk Management Committee.</p> <p>Risk assessments routinely carried out in all areas of the organisation. Staff Security Policy and Procedure in place which super seeds the zero tolerance and personal safety policy. Staff have access to secure their belongings in their workplace. Counter fraud measures are in place, recent presentation at senior staff seminar on counter fraud to staff.</p>	Compliant	<p>IWL Practice Plus Report</p> <p>NHS Staff Survey</p> <p>NHS Patient Survey</p> <p>Health & Safety Risk Assessment Toolkit</p> <p>Estates Returns Information Collection (ERIC) reports.</p> <p>Patient Environment Action Team (PEAT) reports</p> <p>Risk Management Committee</p> <p>Clinical Risk Management Group</p>
<p>C20 Healthcare services are provided in environments which promote effective care and optimise health outcomes by being: b) Supportive of patient privacy and confidentiality</p>	<p>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.</p>	<p>Essence of care has been used to benchmark the PCT, an action plan was developed and actions carried out.</p> <p>Single sex wards in both Highbury and Lings Bar Hospitals</p>	Compliant	<p>IWL Practice Plus Report</p> <p>NHS Staff Survey</p> <p>NHS Patient Survey</p> <p>ERIC reports.</p> <p>PEAT reports</p> <p>IWL Steering Group</p>

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Core Standard	Prompts	Baseline Position	Compliant Level	Assurance
C21 Healthcare services are provided in environments which promote effective care and optimise health outcomes by being well designed and well maintained with cleanliness levels in clinical and non-clinical areas that meet the national specification for clean NHS premises.	<p>The healthcare organisation has taken steps to provide care in well designed and well maintained environments, taking into account Developing an estates strategy (1999) and Estatecode: essential guidance on estates and facilities management (NHS Estates 2003), A risk based methodology for establishing and managing backlog (NHS Estates 2004), NHS Environmental assessment tool (NHS Estates 2002) and in accordance with the Disability Discrimination Act 1995 and associated code of practice.</p> <p>The healthcare organisation provides care in an environment that meets the national specification for clean NHS premises in accordance with the Revised guidance on contracting for cleaning (Department of Health 2004) and A matrons charter: an action plan for cleaner hospitals (Department of Health 2004).</p>	<p>Board approved Estates Strategy produced as part of LIFT Programme. Backlog maintenance is identified in the Estates Strategy although this is managed through the Facilities Management SLA and through improvements funded via the PCT's block capital allocation. All new buildings evaluated using Achieving Excellence Design Evaluation Toolkit (AEDET) Toolkit. Existing buildings assessed using 6-facet appraisal – recommendations to achieve condition B funded through block capital allocation. GP surgeries also assessed using 6-facet appraisal. Extensive public consultation for new developments including patient questionnaires, residents groups, local news articles and displays at public events – comments fed into design process. DDA survey completed on all PCT owned premises, GP and Dental surgeries</p> <p>Infection, Prevention and Control action plan developed.</p> <p>PEAT audits carried out annually.</p> <p>Matrons Charter followed and actions addressed.</p>	Compliant	<p>IWL Practice Plus Report</p> <p>NHS Staff Survey</p> <p>NHS Patient Survey</p> <p>Estates Returns Information Collection (ERIC) reports.</p> <p>Patient Environment Action Team (PEAT) reports</p> <p>IWL Steering Group</p>