Sexual Safety Collaborative

Measurement

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Postcards

Data about feeling safe from sexual harm

We will measure the overall aim of people feeling safe from sexual harm with a 2-item postcard questionnaire (printed for you). The questions are:

- 'In the past 2 weeks, have you felt safe from sexual harm on the ward?' (yes/no)
- 'If you did not feel safe from sexual harm at any point, would you feel able to speak to someone about it?' (yes/no)

The postcard questionnaires should be provided to all service users and staff. It is up to each ward/unit to decide the most effective means for capturing the data.

Questions to think about and discuss with other teams -

- How have you been collecting data?
- What is working well?
- What might need improvement?

Postcards (standard)

Feeling safe from sexual harm means feeling free from being made to feel uncomfortable, frightened, or intimidated in a sexual way by service users or staff. Your answers to these questions are anonymous.



Please tick: Service user

Staff

In the past two weeks, have you felt safe from sexual harm on the ward?

Yes / No

Please circle your answer

If you did not feel safe from sexual harm at any point, would you feel able to speak to someone about it?

Yes / No

Please circle your answer

If you would like to speak with someone independent about your sexual safety on the ward, please see the contact details on the ward sexual safety charter.

Postcards (easy-read)

Your name will NOT be linked to these answers



In the past 2 weeks, have you felt safe from sexual harm on the ward?





Please circle your answer

If you did not feel safe from sexual harm, would you feel able to speak to someone you trust?





Please circle your answer

If you don't feel safe from sexual harm, you might be feeling:

- uncomfortable
- upset
- scared
- threatened
- ashamed
- hurt

Please speak to someone you trust. See the details on the ward sexual safety charter.

Remember the PANTS rules

P rivates are private

A lways remember your body belongs to you

N o means no

Talk about secrets that upset you

5 peak up, someone can help

Safety cross

Incident data

Given the sensitive nature of this work, we are giving each ward/unit a choice of means for collecting this data. You can choose whether to collect the incident data through Datix or by use of a safety cross.

A safety cross is a simple visual data collection tool used to count what you wish to improve. The safety cross will allow you to record the number of incidents on a ward/unit. The purpose of a safety cross is to make the issue transparent, raise awareness and provide real time incidence data to support timely learning and improvement.

Each safety cross represents one calendar month, with each box representing a single day.

Questions to think about and discuss with other teams -

- How have you been collecting incident data?
- What is working well?
- What might need improvement?

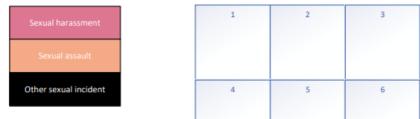


Safety cross

NATIONAL COLLABORATING CENTRE FOR MENTAL HEALTH

NHS England and NHS Improvement







Month and Year:

7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
	,	28	29	30		

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Narrative

Making use of your data

Finding ways to record the narrative when collecting data can help you identify the areas you might want to improve and develop change ideas for.

Some wards have been stratifying their data, examples include:

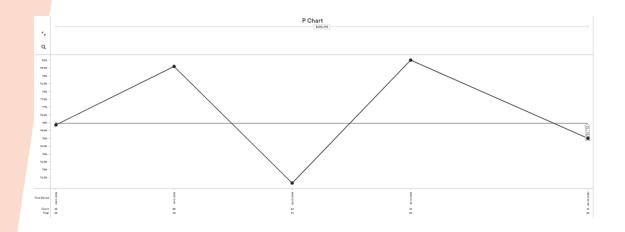
- Gender
- Initiator and person directly affected (according to gender or staff/service user)
- Ward environment/wider hospital grounds

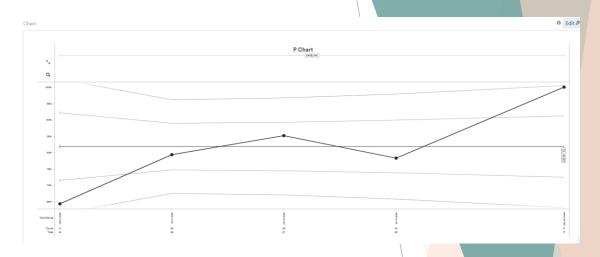
Other wards have included a narrative to explain certain data points, to provide more information and inform learning for future work. Narrative can be added to individual data points on Life QI. Additional charts can also be added for stratifying your data. Ask your coach how.

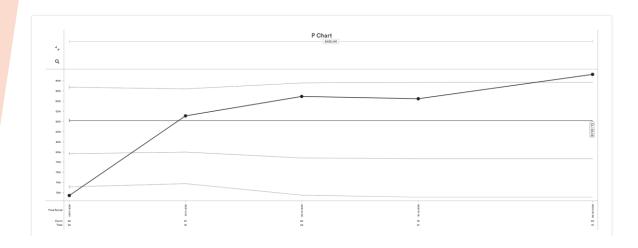
Questions to think about and discuss with other teams -

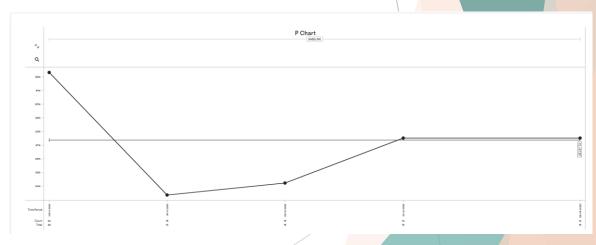
- What have you learned from your data about areas to prioritise?
- Is there anything you could do differently to learn more from your data?

Narrative









QI

NCCMH



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