Patient Engagement

SEXUAL SAFETY ON CLEARBROOK

PDSA model's

- DISCUSSING SEXUAL SAFETY IN 1:1'S

- REGULAR STAFF AND PATIENT MEETINGS.

- PATIENT QUESTIONNAIRE

- ADDED SHEET ON THE BACK OF OUR CARDS FOR MORE INFORMATION.

- INVOLVED PEER SUPPORT WORKER.

- PROJECT MEETINGS HELD ON THE WARD (ALLOWS CLINICAL STAFF TO ATTEND).

- STAFF RECEIVING TRAUMA INFORMED TRAINING.

- INPUT BY SALT

SPEECH AND LANGUAGES INPUT

Our speech and language therapist has became involved within this project.

They are supporting the team and patients around communication and discussing such difficult topics. We have 18 ladies on the ward who all interpret things in different ways due to their cognitive function so having SALT around helps the team manage any issues we may encounter.

One of the comments which a patient wrote, stated how they don't like being called "darling". Staff have worked with SALT to develop their communication skills and knowledge as previous to this comment no one had gave it a thought how that word could trigger previous trauma.

Stops you assuming everyone can communicate and understand information like yourself.
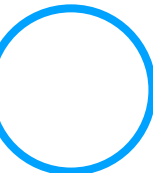
TRAUMA TRAINING AND STAFF AWARENESS

Throughout this project staff have received awareness training with regards to what the project is and how they could help the ladies on the ward.

It was noted from the 1:1 audits that at first staff didn't always feel uncomfortable discussing any issues related to sexual health or trauma.

In order to help the staff it was thought that if staff could receive training around trauma and with help from SALT that this may relief some anxieties.

This gave staff a better understand on what to say to people and how they respond.

E.g. trauma informed care is about changing how we say or see things. "What's wrong with you" changes to "what happened to you." This takes the blame away from the person who experiencing the Trauma.

What's wrong with you

Trauma Informed

What happened to you
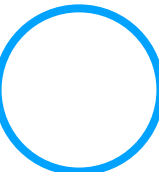
PATIENT SEXUAL SAFETY MEETINGS

Sexual safety leads hold sexual safety meetings every two weeks alongside the ward activity co-ordinator and Peer Support Worker.

To get patient and staff input about what they would like to be discussed at these meetings, the sexual safety leads will then come up with different topics to discuss in each community meeting i.e. mutual expectations, terminology, how safe they feel, any questions about the project etc.

The ward Charter was developed within these meetings so patients and staff could come up with agreed expectations whilst on the ward.

Following these meetings in order to be able to audit and gain an understanding of patients perspective, there was a questionnaire developed with the patients. This needed changed from the original questionnaire due to patient literacy levels varying.

WARD CHARTER

Sexual Safety

Everyone has the right to feel safe from sexual harm on Clearbrook. We do not want you to feel uncomfortable, frightened or intimidated in a sexual way by anyo including other service users, visitors or staff. We will work together to promote a protect as necessary, everyone's sexual safety. Everyone should behave in a wa that meets the following standards.

1. I respect myself.

2. I treat others with respect and dignity.

RESPECT YOURSELF AND **RESPECT OTHERS**

3. I understand that sexual activity with another person should be for mutual pleasure and something that I have agreed to. It should never be used for punishment or through manipulation/bullying.

4. I do not try to talk someone else into engaging in sexual activity or harass another person sexually.

Don't do

5. I try to be aware of how my behaviour and what I say can make others feel and will change my behaviour if someone tells me it makes them uncomfortable, or I will ask for help with this if need to.

before you speak
THINK
T ~ is it true?
H ~ is it helpful?
I ~ is it inspiring?
N ~ is it necessary?
K ~ is it kind?

6. I respect the rights of others space and privacy to fulfil their sexual needs through self-stimulation (masturbation).

Respecting Other's Space and Privacy

7. I understand that fulfilling my own sexual needs through self-stimulation (masturbation) must be conducted privately and discreetly.

In our own room please

8. I will report (speak up) if I have been hurt, harassed or assaulted physically or sexually.

Speak OUT

9. I will report (speak up) if I see or hear about someone else being hurt, harassed or assaulted either physically or sexually.

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10. I will be aware/sensitive to the possibility of difficult life events that may cause distress.

If you feel too frightened or upset to speak to a Local member of staff, you can get independent advice or support by calling:-

For Service users:-
- IMHA (Independent Mental Health Advocate)
- Chaplaincy

For Staff –
- Freedom to Speak Up Guardian
- Your Union Rep
- Chaplaincy

PATIENT QUESTIONNAIRE

Has this meetings helped you to understand what sexual safety is?

I GOT IT!!
I ALMOST GOT IT!!
I NEED HELP!!

circle one to say how you feel

Has the meeting helped you feel able to talk about sexual safety?

Yes ( )

No ( )

Not sure ( )

Please tick one of the above

How do you feel about the meeting?

YOUR FEEDBACK

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Is there anything you would like us to discuss at the next meeting?

Please write below:-
_____

Do you have any feedback for the staff in relation to the Sexual Safety project?

Please write below:-
_____

Is there anything else you would like to say?

HAVE YOUR SAY

Please write below:-

FEEDBACK CARDS AND AUDIT

- On the back of our data collection cards we have added an extra part to allow for any comments as to why the patient and staff do or do not feel safe.

- This has allowed us to be able to gain further understanding and offer support where needed.

- These cards get audited after every data collection. Common themes are noted and support given where needed.

- One theme which came about recently was that staff didn't feel safe due to a patient making allegations in a sexual nature. Staff worked with the patient in order to offer support around this. The patient was reminded that there is CCTV on the ward that could be checked should she feel people went in her room on a night time.

Staff can be approached for 1:1 discussions should you wish to, or there is a sexual safety anonymous box in the dining room.

Please give any comments for your answers to help us understand why you answered yes or no

_____

_____

_____

_____

_____

_____

ANONYMOUS SEXUAL SAFETY BOX

- One thing that did come from the data collection cards was that some patients are not at a stage where they feel able to talk to staff should they feel they are not sexually safe.

- Following this we designed a sexual safety anonymous box from a shoe box, covered it up with paper and left it in the dinning room for patients or staff to add any comments should they wish to. Staff and patients are reminded about this in meetings and when its data collection.

PATIENT 1:1 DISCUSSIONS

The aim is to discuss the project within 1:1s to give patients an opportunity to discuss anything that may make them feel unsafe on the ward. They can also discuss what does make them feel safe. They may disclose previous sexual incidents and may require support around this or may not wish to discuss it further.

These 1:1's get audited every month for 3 month then reviewed and change anything which need changing.

Sexual safety conversation starters:

Something important on our ward is safety. There are many ways to feel safe or unsafe. Whist on the ward I want you to be able to feel you could discuss any concerns you may have.

On Clearbrook we are doing a project about sexual safety, what do you think about when I say sexual safety?

Do you have any concerns around your sexual safety on the ward?

Do you feel comfortable to discuss topic of sexual safety on the ward with me right now?
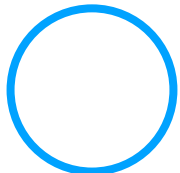
Do you understand that sexual safety is not just being physically safe?

Have you ever felt sexually uncomfortable on the ward?

Is there anything currently that makes you feel uncomfortable or unsafe on the ward?

As a team we will offer support. Is there anything me or the team could do to help?

I understand this might not be the right time however please remember we are always here when you feel ready.

Thank You