

# **Women Are From Venus, Men Are From...?**

**Admitting Male Patients to  
Eating Disorders Units**



# Eliminating Mixed Sex Accommodation

## The EMSA Story

The 2007/08 NHS Operating Framework for England required that PCTs should :

- Ensure local implementation of the commitment to reduce mixed-sex accommodation
- Work with provider units to publish plans to deliver substantial and meaningful reductions in the number of patients who report that they share sleeping or sanitary accommodation with members of the opposite sex
- EMSA took off with publication by Department of Health of more specific guidance in 2009 and 2010



# Department of Health Guidance (2009)

- Patients should not normally have to share sleeping accommodation or sanitary facilities with members of the opposite sex
- This applies to all areas of hospital care
- High standards usually involve a presumption that men and women do not have to sleep in the same room, nor use mixed bathing and WC facilities



# Department of Health Guidance (2010)

- NHS organisations are expected to eliminate mixed-sex accommodation, except where it is in the overall best interest of the patient, or reflects their personal choice
- All breaches of sleeping accommodation must be reported
- Breaches of bathroom accommodation, including situations where patients must pass through opposite-sex areas to reach their own facilities, must be monitored at organisational level, and plans put in place to deal with the problem
- In mental health units, the provision of women-only day rooms must also be included in these plans
- **Where breaches occur, commissioners should consider imposing financial sanctions**

# Background

Driven by need to ensure that patients in general hospitals are not exposed to the opposite sex when in nightclothes or hospital gowns



- No distinction made between general and psychiatric care
- In mental health, a further concern was to prevent female patients from exposure to male patients who may be very disturbed
- Particularly important for those who have suffered sexual abuse





**Daily Mail**

**FREE £2 BET ON GOLD CUP DAY**  
SEE CHELTENHAM PULLOUT IN THE MIDDLE OF THIS PAPER

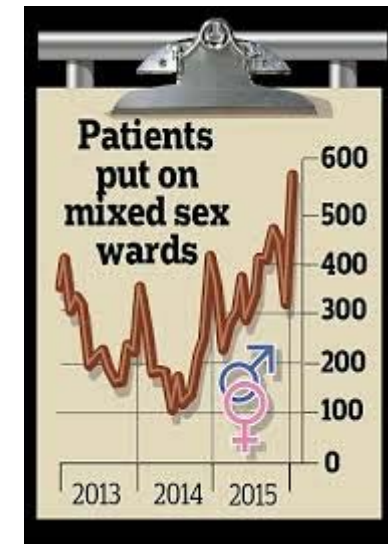
AT RACCOY POWER SHOPS

Manifesto vows broken again and again  
as numbers surge in just two years

# WILL THE SHAME OF OUR MIXED WARDS EVER END?



Can you believe this is the new face of Bake Off?  
SEE PAGE 3



### HOW THE MAIL'S CAMPAIGN LED THE WAY

**END THE WARDS OF SHAME**

November 23, 1994: The Mail's first satire

**Labour's 'cure' for the indignity of mixed-sex wards: A partition wall**

March 12, 2002: Labour backtracks

**Even Third World countries have got rid of mixed-sex wards. What an outrage we can't**

Jan 30, 2006: More pressure

**No end to scandal of the mixed wards**

Oct 6, 2006: Still they fail to act

**DEATH KNEEL FOR MIXED-SEX WARDS**

August 19, 2011: End in sight?



# Revised MHA Code of Practice (2015)

- All sleeping and bathroom areas should be segregated
- Patients should not have to walk through an area occupied by another sex to reach toilets or bathrooms
- Women-only day rooms should be provided
- Women-only environments are important because of the increased risk of sexual and physical abuse and risk of trauma for women who have had prior experience of such abuse





# EMSA and Eating Disorders Services

- In 2015, reports started to come in to NHS England of providers refusing to admit male patients due to fear of being subjected to financial penalties for breaching EMSA regulations
- Often followed CQC inspections
- Some providers apparently told that EMSA regulations required complete segregation of males and females
- Unacceptable even for them to pass in a corridor



# The Strange Case of the Bedroom Door

- Belief arose that there is a breach of EMSA requirements if a female patient has to walk past the door of a male patient's bedroom
- This belief has no basis in Department of Health guidance, the revised Code of Practice or CQC guidance to its own inspectors
- Nevertheless took on status of an urban myth
- “An urban myth is a strange or surprising story which many people believe, but which is not actually true”

*Collins English Dictionary*



# The Issues

- Some patients with anorexia nervosa have suffered sexual abuse
- Males may represent a sexual threat (or be perceived as such)
- Having to share a living space with males may be traumatic and interfere with treatment
- Female patients should be provided with a therapeutic environment that feels safe

## On the Other Hand...

- Arguable that part of the therapeutic task is to help those who have been abused to learn how to deal with males
- Isolating females from males may deprive them of the opportunity to work through these issues in a supportive environment
- Most males with anorexia nervosa have low libido due to hypogonadism
- Anorexia nervosa often associated with impaired psychosocial development
- Single-sex environment unlikely to be optimal for addressing this

# The Practical Problem

- Most EDUs have always been mixed
- NHS England currently commissions 472 adult eating disorders beds in 36 units
- Average of 13 beds per unit
- Average size unit will have 1.3 male patients at any one time
- Impractical for most services to set up separate ward for males



- Could establish three to four male super-units to serve whole of England
- Patients and families would have to travel long distances
- Concentrating male patients in one unit might not be therapeutic



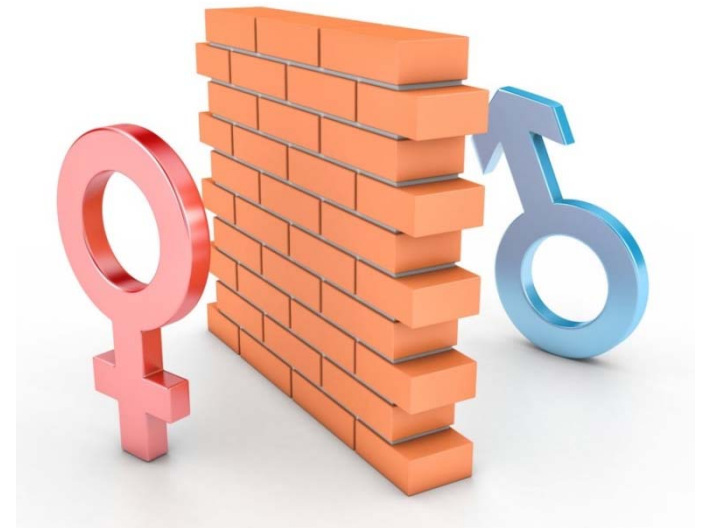


# Role of the National Clinical Reference Group

- National Clinical Reference Group for Specialised Mental Health Services advises NHS England
- Became concerned that male patients were being denied access to inpatient treatment
- Took initial soundings of clinical opinion



- Most clinicians reported few problems with having males on their units
- Many felt that segregation was untherapeutic
- Overall consensus was that mixed sex accommodation was unavoidable due to small number of eating disorders beds and small number of male patients
- Refusing admission to male patients was discriminatory
- Carried out survey of attitudes to mixed sex accommodation among patients and clinicians



# Current Position

- NHSE specialist commissioning teams did not support refusing admission to male patients
  - Able to persuade most trusts to reconsider their position
  - Some trusts unwilling to do so due to fear of financial penalties
  - Further action needed
- 
- CRG produced guidance for commissioners based on what DoH, MHA and CQC guidance **actually** says
  - Ensures that safeguards are in place without denying admission to male patients
  - Endorsed by CQC

# The Guidance

**Admission of a male patient is acceptable provided that:**

- A risk assessment has been carried out to ensure that the male patient does not pose a specific risk to female patients
- There is an agreement in place with NHSE commissioners on the admission of male patients and the admission is consistent with this agreement
- Appropriate arrangements have been put in place to ensure that female patients do not feel unsafe or compromised in terms of privacy

- Male patients are accommodated in single bedrooms with en suite bathroom and toilet facilities, if possible
- If this is not possible, male patients occupy a single room with use of male-only bathroom and toilet facilities
- Patients do not have to walk through a sleeping or bathroom area occupied by another sex
- A women-only day room is available

# Emergencies

- In exceptional, emergency situations, it may be justified to admit a male patient without the above conditions being met
- In these situations, clinical need must be judged for each individual patient and the final placement decision should weigh the benefits and disadvantages of each available option
- Where mixing is unavoidable, transfer to an appropriate male bed should take place as soon as possible. Only in the most exceptional circumstances should this be delayed beyond 24 hours



Guidance circulated to all specialist commissioning teams and all providers of inpatient services

Response awaited



**Watch this space...**