



CSP029 - Privacy and Dignity

Policy and Procedure



Document Title	CSP029 - Privacy and Dignity
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Author Title & Issuing Department	Head of Quality and Compliance – Care and Support
Target Audience	Care and Support staff team

Approved By	EMH Executive Management team
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Links to Regulatory Standards – Economic/ Consumer Standards	The Human Rights Act 1998 The Mental Capacity Act 2005 The Equality Act 2010 The Mental Health Act 2007 The Safeguarding Vulnerable Groups Act 2006 The Care Act 2014 The Health and Social Care Act 2008 The Health and Social Care Act (Regulated Activities) Regulations 2014 The Health and Social Care Act (Regulated Activities) Regulations 2014: Regulation 10
Outcomes for Customers	Ensuring that the privacy and dignity needs of our service users are always considered and ensured in the delivery of care and support services Definitions and Scope
How were tenants, residents and service users involved in the review/development of this document	
Training Provision	<p>Staff awareness of privacy and dignity issues is highlighted at Induction and through mandatory training programmes</p> <p>emh care & support managers will actively encourage staff to access the training they need on dignity and respect and monitor this completion Staff training needs will also be reviewed as part of the normal appraisal process</p>
Links to the Business Plan	
Links to Key Values	Integrity, Diversity, Openness, Accountability. Clarity and Excellence

Version Control

Version	Revision Date	Author: Job Title	Change Description
V2	Feb 2021	Head of Quality and Compliance	Content Review - housekeeping

1. Introduction

- 1.1 emh care & support has a crucial role to play in creating an environment in which human rights are respected. A fundamental aspect of human rights is an individual's right to privacy and dignified care and support
- 1.2 This policy will support emh care & support staff in ensuring that the privacy and dignity needs of our service users are always considered and ensured in the delivery of care and support services Definitions and Scope

2. Specifics of the Policy

- 2.1 Core to the fundamentals of safe and personalised care is that service users should feel they are being treated with dignity and that their privacy is respected and maintained at all times. Protecting the privacy and dignity of our service users is a priority for all emh care & support staff. All staff must work to best practice standards which every service user should have an automatic right to expect.
- 2.2 The core principles of this policy are to:
 - 2.2.1 Define the concept of privacy and dignity in relation to local and national context
 - 2.2.2 Ensure that service users experience care and support in a manner that actively encompasses the principles of privacy, dignity, and respect
 - 2.2.3 Ensure service users feel that they 'matter' and that they do not experience negative or offensive attitudes and behaviours whilst receiving care and support from emh services. This includes respecting their individuality and protected characteristics
 - 2.2.4 Ensure that appropriate staff behaviours are actively promoted and monitored
 - 2.2.5 Raise awareness of the principles of privacy and dignity and to enable all staff to respond appropriately if they feel that the concepts of the policy are being infringed

Scope

- 2.3 This policy covers privacy and dignity issues for emh care & support and includes services users, staff, volunteers, and temporary staff (agency)
- 2.4 The application of this policy applies to all service users irrespective of age, ethnicity, social, cultural, psychosocial, and physical requirements

2.5 Definitions

1	Privacy	Refers to freedom from intrusion and relates to all information and practice that is personal or sensitive in nature to an individual
2	Dignity	Is every individual's right to be worthy of respect and not to be subjected to inhuman or degrading treatment
3	Respect	To show consideration and appreciation towards other people
4	Protected Characteristics	It is against the law to discriminate against anyone because of age, disability, gender reassignment, gender (sex), marriage and civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation. These are called 'protected characteristics

3. Implementation

3.1 This policy applies to all EMH Care and Support providing support within our services

3.1.1 All staff should be aware that failure to comply with this Policy, including any processes, procedures or arrangements which are put in place under it, will be investigated and may lead to disciplinary action being taken

3.2 Training

5.2.1 Staff awareness of privacy and dignity issues is highlighted at Induction and through mandatory training programmes

5.2.2 emh care & support managers will actively encourage staff to access the training they need on dignity and respect and monitor this completion

5.2.3 Staff training needs will also be reviewed as part of the normal appraisal process

4. Responsibilities

4.1 *Executive Director: Care*

4.1.1 The Executive Director has overall responsibility for ensuring that the organisation meets its statutory and non-statutory obligations in respect of maintaining appropriate standards of privacy, dignity, and confidentiality for service users

4.2 **Head of Service: Care and Support**

4.2.1 The Head of Service is responsible for ensuring that emh care & support staff upholds the principles of privacy and dignity when dealing with service users, that appropriate policies and procedures are developed, maintained and communicated throughout the organisation and that those policies and procedures are developed and implemented in co-ordination with other relevant organisations and stakeholders

4.3 **Service / Scheme Managers and Coordinators**

4.3.1 Service Managers and Coordinators are responsible for ensuring all team members have read the policy and understand its principles. Alongside this they will be required to respond (as appropriate) where issues of non-compliance with this policy have been identified

4.4 **All Staff**

4.4.1 It is the responsibility of all staff groups, volunteers and temporary staff working within emh care & support to adhere to the principles set out in this policy keep their training up to date and attend appropriate training relating to the provision of information to service users and effective communication.

5. **Associated Documents**

- ▶ Data protection policy
- ▶ Safeguarding Adults at Risk policy
- ▶ The Mental Capacity Act policy
- ▶ Mental Capacity policy

6. **Policy**

emh care & support operates a 'zero tolerance' approach to breaches of privacy and dignity of service users. Failure to comply with the Standards of Practice could result in action being instigated in accordance with the disciplinary policy and procedure.

Privacy and Dignity Standards of Practice

6.1 Courtesy, Honesty & Respect for Dignity

- 6.1.1 The principles of common courtesy will be upheld by all staff, especially when faced with challenging questions or working under difficult circumstances
- 6.1.2 Staff will ensure that service users and their families are greeted appropriately at all times. Staff will introduce themselves by name and role, without undue delay and ensure that service users and family members are asked how they wish to be addressed

6.1.3 Staff will ensure that the care and support environment is welcoming and supports appropriate standards of privacy, confidentiality, and dignity always in the provision of personal care and support

6.1.4 All staff will ensure that privacy and dignity of service users is respected and maintained at all times

6.2 Communication

6.2.1 Staff will always demonstrate effective communication skills and ensure that communication takes place in an appropriate environment

6.2.2 Staff will ensure that information is provided at the required level of understanding and that sufficient time is available to enable the service user to communicate their needs and preferences

6.2.3 Staff will ensure that service users are provided with clear explanations about the care and support being offered, and that consent is provided by service users for all personal care and support activity undertaken

6.2.4 Staff will ensure that all discussions that take place are relevant to the service user's care and support and will avoid personal comments or remarks

6.2.5 Staff will ensure service users and their relevant family members are consulted and involved in the planning of care and service delivery

6.2.6 Managers will ensure service users and their family members are promptly informed when a service is not available and are provided with a clear explanation for the reason why fact that they have not been able to give their valid consent should be fully recorded using an appropriate form.

6.3 Where a service user is found to lack the capacity to give their consent over one particular care or treatment option, it should never be assumed that this applies to all decisions.

Further appropriate attempts should be made to inform them about treatment options and to obtain informed consent.

6.4 A service user must be assumed to have capacity unless the contrary is established and should not be treated as unable to make a decision unless all practical steps have been taken without success to help them take the decision.

6.5 Advocacy will be provided or sought for any service user who might require it.

Ongoing monitoring, information sharing and compliance

6.6 When they have consent or permission to do so, and where it is compliant with data protection and information governance policies, staff should share details about a service user's communication or information needs with other NHS, local authority and adult social care providers where necessary.



- 6.7 Feedback from surveys, inspections, complaints and from service users themselves will be used to identify areas of improvement in meeting people's information and communication needs and in meeting the accessible information standard.
- 6.8 Quality assurance mechanisms will be in place to ensure that the organisation is meeting the information and communication needs of people. This will include regular audit and the inclusion of information and communication needs in annual service reviews.
- 6.9 Service users, carers, relatives and advocates should be encouraged and supported by staff to make a suggestion for improvement or complaint if they feel that the organisation is in any way failing to effectively support people with information or communication needs.
- 6.10 EMH Care and Support has a clear complaints procedure in place, and information about this should be communicated to all service users in various formats. Wherever a person needs additional information or help to make a complaint or raise a concern or pass on feedback, this should be supported by staff.
- 6.11 The provision of adequate levels of information and communication support will be included as a standing item in surveys and feedback questionnaires for service users and relatives.

Confidentiality

- 6.12 All staff will ensure that service user's rights to privacy and confidentiality are maintained by ensuring:
 - 6.12.1 The principles of the Data Protection Act and Professional Codes of Conduct relating to confidentiality are always adhered to
 - 6.12.2 That appropriate areas are used where confidential discussions can take place regarding a service users care, free from intrusion of others
 - 6.12.3 Written service user information, for example support plans, handover sheets etc. which contain confidential details are stored and disposed of correctly in confidential waste and not left in public places
 - 6.12.4 They only share information that a service user discloses with people who are involved in their care and support and always with the service user's verbal consent
 - 6.12.5 All relevant precautions are taken to prevent sensitive information being shared inappropriately, computer screens being viewed, and communication notes being read

Care and Support

- 6.13 Staff will always obtain consent before any personal care or support is carried out
- 6.14 Staff will ensure privacy and dignity is always respected, in particular when giving personal care and when entering private rooms
- 6.15 Staff will always check with a service user that they give permission to receive personal care, particular hygiene, by a person of the opposite gender, and respect their wishes
- 6.16 Staff will ensure a service user's dietary needs, preferences and assistance needed at mealtimes are always followed

- 6.17 Staff will ensure that where assistance at mealtimes is required, this is provided discreetly to avoid embarrassment and loss of dignity. Staff will endeavour to ensure that adapted cutlery and crockery is available to enable service users to feed themselves where appropriate
- 6.18 Staff will give service users time to eat without rushing and aim to avoid interruptions

Individual and Cultural Diversity

- 6.19 Staff will ensure that service users are always treated fairly on the basis of need and not discriminated against on the basis of their protected characteristics
- 6.20 Staff will ensure that service users receive care and support in a manner which respects their protected characteristics
- 6.21 Staff will ensure that service user's cultural and religious needs are valued and met where reasonably practical
- 6.22 Staff will ensure decisions on care and support that service users receive are determined only by their specific needs

End of Life Care

- 6.23 Staff will always ensure that a person who requires end of life care is cared for sensitively and empathetically. Death will be handled with dignity and compassion and in accordance with cultural and religious beliefs of the service user and their family