

DIGNITY IN CARE POLICY	
Category	
Policy drafted by	Phalguni Trivedi
Policy Approved by Operational Lead and date	
Policy approved by Board Lead and date	
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<p>1. INTRODUCTION</p> <p>GPCG is committed to ensuring that people (patients, carers and staff) are treated as individuals with privacy, dignity and respect .We seeks to provide a person centred approach to care and the application of legislation, practice, policies and procedures that encourage and support this philosophy, allowing choice and recovery.</p> <p>The NHS Plan (2000), Our Health, Our Care, Our Say (2006) all emphasise the importance of dignity and respect for patients. This policy is underpinned by Department of Health guidance which defines dignity as:-</p> <p>A state, quality or manner worthy of esteem or respect; and (by extension) self-respect. Dignity in care, therefore, means the kind of care, in any setting, which supports and promotes, and does not undermine, a person’s self-respect regardless of any difference.” (Social Care Institute for Excellence, 2007).</p> <p>Every patient has the right to receive high quality care that is safe, effective and which respects their privacy and dignity.</p> <p>The purpose of governance arrangements within the organisation is to ensure the provision of safe, high quality, efficient and responsive healthcare to individual patients and the wider community it serves, within the resources available. Part of governance is the provision of policies, procedures and guidelines to minimise risk and maintain safety through appropriate systems and processes.</p> <p>Any breach of this policy either clinical or non-clinical, will be scrutinised and investigated, the outcomes of which will be addressed accordingly.</p>	
<p>2. SCOPE</p> <p>This policy outlines the steps adopted by the GPCG to ensure the privacy and dignity of all patient’s within its care, and will provide a framework for all staff working within the organisation.</p>	

The policy will raise awareness to the principles of privacy, dignity and respect and enable staff to respond appropriately should they feel that the principles of the policy are being infringed.

Privacy: refers to freedom from intrusion and relates to all information and practice that is personal or sensitive in nature to an individual.

Dignity: is being worthy of respect.

A person's or group of people's sense of self-worth and self-esteem.

Respect: To show consideration and appreciation towards other people

3. DUTIES AND RESPONSIBILITIES

The responsibility for protecting a patient's privacy and dignity does not lie with any one individual or group, but with all staff, at any level of the organisation.

Individual Responsibility

All employees will, at all times, behave in a way that promotes openness and displays unconditional positive regard, giving due consideration to the manner in which they treat others does not inadvertently discriminate against any groups based on their race, disability, gender, age, sexual orientation, religion and belief.

GPCG employees will promote the vision and values of the organisation through professional, personal appearance, appropriate communication and non-discriminatory practice.

- Promote the dignity of all people.
- Participate in any related training or service development initiatives identified by their manager.
- Adhere to the principles set out in this policy
- To comply with the Professional Code of Practice of their governing bodies e.g. Royal College of Psychiatrists, Nursing and Midwifery Council.
- To uphold the duty of care and practice within the legislative framework. E.g. Human Rights Act (1998), Mental Capacity Act (2005).
- To disclose any non-compliance with the policy to their line manager
- To utilise the incident reporting system should there be any breach to the principles highlighted within this policy

Managers Responsibility

As above plus:

- Implement the principles set out in this policy.
- To ensure that individuals within the team understand their roles and responsibilities with regard to privacy, dignity and respect.
- To understand and implement specific privacy and dignity activity relevant to the Service
- To ensure that staff have the tools, resources and skills to promote and deliver services which respect privacy and dignity.
- To address any local issues related to privacy and dignity, sharing any learning with team members.

Director Responsibility

To lead, promote and champion the privacy and dignity agenda through integrating dignity and respect into governance and service monitoring.

Set clear principles for the organisation in relation to dignity and respect, ensuring that measurable standards are met.

4. FRAMEWORK

4.1 Principles for achieving a high quality service that respects people's dignity

GPCG is committed to the delivery of effective care in a safe and secure environment and everyone who uses the services has a right to do so, free from abuse, neglect or discrimination.

Definition of Abuse – „No Secrets“ (paragraph 2.5) defines abuse in the following terms: “Abuse is a violation of an individual’s human and civil rights by another person or persons. Abuse may consist of single or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm, or exploitation of the person subjected to it.

Working practices and attitudes of employees must support effective safeguarding and contribute to a reduced risk of abuse for people who use these services.

(See policy for the Safeguarding of Vulnerable Adults)

This policy supports the “Dignity in Care” campaign promoted by the Department of Health and requires staff to adopt and implement the Dignity Challenge. High quality services that respect people’s dignity should:

- Have a zero tolerance of all forms of abuse. Care and support must be provided in a safe environment, free from abuse.
- Support people with the same respect that you would want for yourself or a member of your family. People should be cared for in a courteous and considerate manner. People receiving services must be helped to participate as partners in decision making about the care and support which they receive.
- Treat each person as an individual by offering a personalised service. The attitude and behaviour of staff must help to preserve the individual's identity and individuality.
- Enable people to maintain the maximum possible level of independence, choice and control. People receiving services are helped to make a positive contribution to daily life and to be involved in decisions about their personal care, with the maximum possible choice and control over the services they receive.
- Listen and support people to express their needs and wants. Provide information in a way that enables a person to reach agreement in care planning and exercise their rights to consent to care and treatment.
- Respect people's rights to privacy .Ensure that personal space is available and accessible when needed and that people are not made to feel embarrassed when receiving care or treatment.
- Ensure people feel able to complain without fear of retribution. Staff must support people to raise their concerns and complaints with the appropriate person. opportunities are available to access an advocate
- Engage with family members and carers as partners in care. Relatives and carers will feel welcomed and able to communicate with staff as contributing partners.
- Assist people to maintain confidence and a positive self esteem. The care and support provided will encourage individuals to participate as far as they feel able and actively promote wellbeing.
- Act to alleviate people's loneliness and isolation. Help people to feel valued as individuals and members of the community

5. STANDARDS OF PRACTICE

5.1 Attitudes and Behaviour

- Patients will experience care in an environment that actively encompasses respect for individual values, beliefs and personal relationships
- Staff will ensure that they are recognisable by giving their name and wearing/showing an identification badge. Staff will introduce themselves on initial contact including phone conversations, stating their name and role.
- Staff must ensure that good attitudes and behaviour are promoted, considering nonverbal behaviour and body language and the needs of minority groups.
- Staff will ensure that patients are not caused any unnecessary distress by others on the ward or in the clinical area (Zero Tolerance Policy)
- The principles of the Mental Capacity Act will be upheld for patients who do not have the capacity to make an informed choice.

5.2 Privacy, Dignity and Modesty

- Patients will have their privacy and modesty respected. Modesty comprises a set of culturally or religiously determined values that relate to the presentation of the self to others. Care must actively promote privacy and dignity and protect modesty.
- Remain autonomous and independent wherever possible.
- Be cared for in a clean and safe environment.
- Have the right to a chaperone for any intimate procedures and a choice as to who is present during examinations and treatment.

5.3 Confidentiality/Privacy of Patient Information

- All staff are bound by a legal duty of confidence to protect personal information that they may come into contact with. Staff will not discuss any patient or visitor within the hearing of another patient or visitor.
- Staff are obliged to keep any personal, identifiable information strictly confidential e.g. patient records. This will only be shared according to GPCG information sharing policies.
- Patient information is shared with consent, to enable care delivery
- Precautions will be taken to prevent information being inappropriately shared, such as overheard telephone conversations, writing personal information down unnecessarily on personal notebooks etc, and mobile phones with picture or video features.

6. PROVISION OF INTIMATE CARE

Intimate care consists of personal care, invasive clinical procedures and other aspects of direct support or intervention, where the privacy and dignity of an individual may be compromised. All such care should be planned and delivered with consideration for the following good practice principles:

- All people have the right to make choices and decisions about their lives. Every effort must be made by staff to understand each individual's wishes and gain consent before providing intimate care.
- Where individuals lack the capacity to make such decisions an opinion must be sought from the multidisciplinary team in association with parents, relatives, the next of kin or advocate.
- The subsequent outcomes for individuals with or without capacity must be clearly recorded in their plan of care.
- Full consideration and respect must be given to each individual's ethnic origin, sexual orientation and religious beliefs.

Where intimate clinical procedures are involved, patients should wherever possible be

given a choice of care staff and, where feasible, accompanied by staff of age / gender deemed most appropriate for the individual patient.

Where there is any evidence or concern to suggest that staff of either sex may be placed in a vulnerable position in carrying out their duties, such concerns should be brought to the attention of the appropriate manager who will ensure that other staff are delegated to assist or wholly carry out the care required, having due regard to the effect that such delegation may have on the nurse / /patient relationship. Advice and support will be given to the individuals concerned.

7. IMPLEMENTATION AND MONITORING OF THE POLICY

Implementation of the principles outlined within this policy will be monitored through a range of activity such as Essence of Care, Patient Survey, Patient Stories, PEAT audits, incident monitoring etc.

It is the responsibility of all staff to ensure that the core principles of this policy are implemented and embedded within their work environment.

The monitoring of this policy will rest with the Clinical and Information Governance Committee and all of its respective governance structures.

Patient's views on privacy and dignity should be sought when conducting patient satisfaction surveys.