Privacy and Dignity Policy

POL006

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Contents

Introduction

This policy will support clinical staff in ensuring that the privacy and dignity needs of our service users are considered and ensured during any contact(s) with Regional Safety Group. The Company 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 treatment.

Purpose

The core principles of this policy are to:

- Define the concept of privacy and dignity in relation to local and national context.
- Ensure that service users/carers experience care in a manner that actively encompasses the principles of respect, privacy, and dignity.
- Ensure service users/carers feel that they 'matter' and that they do not experience negative or offensive attitudes and behaviours whilst receiving care from Regional Safety Group. This includes respecting their individuality and protected characteristics.
- To raise awareness of the principles of privacy and dignity and to enable staff to respond appropriately if they feel that the concepts of the policy are being infringed.

In line with Essence of Care (Essence of care 2010, 2022) the privacy, dignity and respect benchmarks for all services provided by Regional Safety Group will ensure that:

- Service users will feel that they matter all the time.
- Service users experience care in an environment/manner that encompasses their values, beliefs, and personal relationships.
- Service users' personal space is protected by staff.
- Service users and carers experience effective communication with staff, which respects their individuality.
- Service users care ensures their privacy and dignity and protects their modesty.
- Service users experience care that maintains their confidentiality.

Respect and Dignity

We value every person, whether service user, their families, carers, or staff – as an individual, respect their aspirations and commitments in life, and seek to understand their priorities, needs, abilities and limits. We take what others have to say seriously. We are honest and open about our point of view and what we can and cannot do.

Everyone Counts

We maximise our resources for the benefit of the whole community, and make sure nobody is excluded, discriminated against, or left behind. We accept that some people need more help, that difficult decisions must be taken – and that when we waste resources, we waste opportunities for others.

The Equality Act 2010 and Human Right Act 1998 places a responsibility on the Company to prevent discrimination and harassment and show how it is ensuring equitable services. Providing care that ensures the dignity of healthcare service users and carers, respects the diversity of the population and the individual needs of these users is how the Company shows it is meeting this requirement.

Definitions

Privacy

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

Dignity

It is every individual's right to be worthy of respect and not to be subjected to inhuman or degrading treatment.

Respect

To show consideration and appreciation towards other people.

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".

Duties

Directors and Managers

Are responsible for the overall implementation and attainment of the policy. Are responsible for ensuring that systems are in place to monitor compliance and non-compliance at a local level.

Clinical Staff/Non-Clinical Staff

It is the responsibility of all staff groups working within Regional Safety Group to adhere to the principles set out in this policy.

Standards of Practice

Environment

Service users have a right to:

- Be cared for in a single sex environment within in-patient settings.
- To be cared for within their own home where appropriate to do so.

Best Practice

It is Regional Safety Group's commitment to offer same sex accommodation to its service users, this means that:

- That staff will use appropriate risk assessment/ management tools to support service users on mixed sex units (as indicated).
- Consideration will need to be given to transgender and transsexual service users who are commencing or part way through a gender reassignment process, in these cases the service user's preference should be accommodated where possible. They should be accommodated according to their presentation and the way they dress and the name and pronouns that they currently use.
- Whilst it may sometimes be a challenge to maintain the principles of privacy within the service user's environment, the preferences of the service user should be listened to and adhered to where practical.
- Staff are responsible for identifying together with patients/carers any reasonable adjustments needed to the environment for the special needs of patients with physical impairment or learning disabilities and developing and implementing an appropriate plan of care.

As a matter of course:

- Staff should introduce themselves (name and role) on initial contact with the service user and their carer, this includes phone conversations.
- Staff must always wear identification badges.
- Service users should have the opportunity to discuss with staff if they have any objections to health professionals (not directly related to their care). These wishes should be adhered to as required.
- Staff should ask each service user how they wish to be addressed e.g. Mr, Mrs, Reverend and should avoid lapsing into over familiarity.
- Staff should ensure service users and carers (if appropriate) are equal partners in any care decisions being made. They should have clear opportunities to contribute to care planning and should be actively encouraged to identify their aspirations for wellbeing.
- Staff should ensure that a service users request is dealt with promptly, where there is an unavoidable delay, an apology should be given.
- Staff should respect the individual patient's cultural, religious, and ethnic beliefs and make arrangements as required in relation to diet, worship and care of the dying and be documented in patient records.

- Knocking before entering an Ambulance or room when the service user is being examined or receiving personal care – following this staff should wait for a reply before opening the entering the room (unless there is a clinical indication not to wait).
- Staff should be aware of how their body language may be interpreted by a service user or carer. Staff should be aware of healthcare users' sensitivities regarding personal contact/touch and personal boundaries. These issues might arise as a result of gender, culture and ethnicity.
- Ensuring that a service user who does not speak or understand English has access to an appropriate interpreter in a timely manner.
- Staff should not assume that a patient's partner is of the opposite sex or that their partner is married to them. Staff need to recognise that same sex couples may also have a civil partnership. If it is not clear what sex the partner is, gender neutral words must be used such as "they" rather than making assumptions
- Ensuring service users with other communication impairments such as deafness or a learning disability are provided with the appropriate communication aids.
- For those service users whose knowledge and understanding may be limited, their diagnosis, care and treatment must be explained to them in a manner that promotes understanding.
- Staff must ensure that they use language and demonstrate behaviour which is inclusive to all service users and carers.
- Staff should seek to ensure that they provide individualised care to service users based on individual protected characteristics.

Personal Consideration and Respect

Service users have a right to:

- Be treated as individuals
- Be listened to, and have their views taken in account
- Be always treated courteously
- Receive support to foster hope and identify aspirations
- Be an equal partner in making care decisions
- Know who is responsible for the care they are receiving
- Have private discussions about their care and treatment

Under Article 8 of the Human Rights act (1998) everyone has the right to respect for their private and family life, their home, and their correspondence. A person's right to respect means 'having the right to live one's own life with such personal privacy that is reasonable, whilst considering the rights and freedoms of others.

It includes the freedom for every individual to choose:

- How they look
- How they dress
- Their religious beliefs
- Who they choose to socialise with
- Their sexual identity
- To express personal opinions

These rights therefore should be acknowledged by staff and where appropriate should be included within any care planning process. Staff are personally accountable for ensuring that they promote and protect service user's well-being and their attitude and behaviour should reflect this. Staff should recognise and prevent any barriers to access and support because of stereotyping, or stigma associated with age, ethnicity, disability, faith, sexual orientation, and gender.

Confidentiality

Patients have a right to expect that patient information is shared to enable care, with their consent.

This can be achieved by:

- Only sharing information that a service user discloses, with staff who are directly involved in their care and with the service user's verbal consent. Staff asking for personal and demographic details ensure they cannot be overheard.
- Obtaining service user consent before disclosing information to family, carers, and friends.
- Being aware of and alert to anyone who may overhear staff conversations. It is not acceptable to discuss clinical information in public areas even if a service users name is not used.
- Ensuring written service user information which contain confidential details are disposed of correctly and are not left in public places.
- Precautions are taken to prevent information being shared inappropriately, e.g. computer screens being viewed.
- Conforming to respective data protection and confidentiality policies, where in place at Regional Safety Group.

Privacy, Dignity and Modesty

Patients have the right to:

- Be always treated with dignity
- To have their modesty protected
- To remain autonomous and independent wherever possible.

This can be achieved by:

- Closing curtains or vehicle doors fully and positioning screens correctly in all areas where service users are required to undress, including outpatient settings.
- Utilising an area (e.g. a bedroom) within a service user's environment, which is more conducive to privacy and dignity principles.
- Not asking a service user to take off more clothing than is necessary.
- Providing service users with the opportunity to dress or make themselves comfortable before continuing with care/interventions/treatment.
- Checking with a service user that they give permission to have their personal care undertaken by a person of the opposite sex, the service users wishes should be respected where possible.
- Encouraging service users who are within in-patient settings to dress in their own clothes during the day

- Encouraging service users to wear their own night attire to sleep in. When this is not appropriate or possible, service users should have access to hospital clothing that protects their modesty and is acceptable to them.
- Ensuring the dignity of a service user by making sure they are appropriately covered/ dressed whilst in your care.
- Ensuring that medical aids (e.g. stoma bags, catheters etc) which may cause the service user distress or embarrassment are covered in a manner which is acceptable to them.
- Ensuring a service user's dietary needs, preferences and assistance requirements at mealtimes are assessed, recorded, and referred to by clinical staff.
- Giving service users time to eat without rushing and aim to avoid interruptions to mealtimes by utilising the 'protected mealtime' principles.

End Of Life Care

A person who requires end of life care either within the pre-hospital or home setting will be cared for sensitively and empathetically. Death will be handled with dignity and compassion and in accordance with cultural and religious beliefs of the individual person and their family.

Children

The following considerations are essential:

- Privacy and dignity are important aspects of care for children and young people.
- Decisions should be based on the clinical, psychological, and social needs of the child or young person, not the constraints of the environment, or the convenience of staff.
- Privacy and dignity should be maintained whenever children and young people's modesty may be compromised (e.g. when wearing hospital gowns/nightwear), or where the body (other than the extremities) is exposed, or they are unable to preserve their own modesty.
- The child or young person's preference should be sought, recorded and where possible respected.
- Where appropriate the wishes of the parents should be considered.

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