

<b>DIGNITY IN CARE POLICY</b>	<b>Policy Register No: 10120</b> <b>Status:</b>
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Developed in Response to:	Best Practice
Contributes to CQC	Outcome 1

Consulted with	Individual/body	Date
Charlotte Hctor	End of Life Facilitator	June 2018
Dignity Forum	Dignity champion network	June 2018
Jo Mitchell	Head of Performance, EFM	June 2018

<b>Professional Approval by:</b>		
Lyn Hinton	Director of Nursing	29 <sup>th</sup> June 2018

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Authors/ Contacts for Information	Daniel Spooner, Deputy Director of Nursing
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## **1.0 Purpose**

- 1.1 The purpose of this policy is to ensure that patients will experience care in an environment that actively encompasses respect for individual values, beliefs and personal relationships at Mid Essex Hospitals NHS Trust (MEHT).

## **2.0 Aims**

- 2.1 Core to the fundamentals of safe and personalised care is that patients 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 patients is a priority for all MEHT staff. All Trust staff must work to best practice standards which every patient should have a right to expect.
- 2.2 To provide a framework for staff to help focus priorities towards the issues that are important to patients and carers.
- 2.3 To ensure that patients come first in our practice and not experience negative or offensive attitudes and behaviour.
- 2.4 To ensure that appropriate staff behaviours are promoted through:
- Communication; including consideration of non-verbal behaviour and body language, politeness and friendly introductions.
  - Appearance; so that we show pride and professionalism in ourselves and the environment we work in.
  - Actions which support kindness and compassionate with all people we interact with.
  - Showing that we are understanding of others, have openness and willingness to learn.
- 2.5 To provide care to the standards outlined in this policy.
- 2.6 To provide the care that patients and their relatives have a right to expect.

## **3.0 Scope**

- 3.1 This policy covers privacy and dignity issues for Mid Essex Hospital Trust and includes patients, employees, volunteers and temporary staff. The NHS Constitution (DH, 2013) and Operating Framework (DH, 2010) signal the continued drive for best practice and to ensure the patients receive a high quality safe experience.
- 3.2 This policy will apply to all patients irrespective of age, ethnicity, social, cultural, psychosocial and physical requirements.

## **4.0 Definitions**

- 4.1 Dignity consists of many overlapping aspects, involving respect, autonomy and self-worth. It comes from putting the individual receiving care at the centre of that care; and asking them what their needs and wants are without patronising them. It requires respect of their rights to independence and privacy and takes their religious and cultural needs into account.

4.2 Privacy and dignity as defined by the Essence of Care (DH, 2010) initiative and for the purpose of this policy is:

- Privacy refers to freedom from intrusion and relates to all information and practice that is personal or sensitive to the individual.
- Dignity refers to being worthy of respect.

4.3 The NHS constitution (DH2013) defines respect and dignity as:

We value every person – whether patient, their families or 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.

## **5.0 Best Practice Standards**

In implementing Best Practice Standards the following are important:

### **5.1 Courtesy, Honesty & Respect for Dignity**

- To ensure that principles of common courtesy are upheld by staff, especially when faced with challenging questions or working under difficult circumstances.
- To ensure patients and their carers are greeted appropriately with staff introducing themselves by name and role, without undue delay when they first arrive in the relevant area and that patients are asked how they wish to be addressed.
- To ensure the patient environment is welcoming and supports appropriate standards of privacy, confidentiality and dignity.
- To ensure patient privacy and dignity is respected in all interactions with staff.
- To ensure that privacy and dignity are respected and maintained during visiting times and that both patients and carers are receptive to the needs of other patients and carers within the care environment.

### **5.2 Communication**

- To ensure that staff demonstrates effective communication skills and that communication takes place in an appropriate environment.
- To ensure technical information is provided at the required level of understanding and that sufficient time is available to enable the patient and their carers to communicate their needs and preferences.
- To ensure patients and carers are provided with clear explanations about the rationale for examinations, including pain or discomfort which may be experienced.

- To ensure that all discussions will be relevant to the patient's care and will avoid personal comments or remarks.
- To ensure patients and carers are consulted and involved in the planning of services and service delivery.
- To ensure patients are informed when a service is not available and are provided with an explanation for the reason why.
- To ensure patient's communication needs are assessed and that patients and carers are provided with appropriate support when a need has been identified.
- To ensure language interpreter services are provided when required, including spoken and sign language.

### 5.3 Confidentiality

Patients have a right to expect that staff dealing with their information ensure that;

- Data Protection Act, NHS Code of Confidentiality and Professional Codes of Conduct relating to confidentiality are adhered to.
- Appropriate areas are provided where discussions can take place regarding diagnosis and/or treatment, free from intrusion of visitors and other patients.
- MEHT provides, and is seen to provide, a confidential service to all patients. It is not acceptable to discuss clinical information in public areas even if a patient's name is not used (Trust Confidentiality Policy).
- Written patient information - for example handover sheets, medical data which contain confidential details - are disposed of correctly in confidential waste and not left in public places.
- They only share information that a patient discloses with staff who are directly involved in the patient's care and with the patient's verbal consent.
- Comply with the Sharing Patient Information Policy when considering sharing patient identifiable information with other health care providers or other agencies and, in accordance with the Data Protection Act, share only the minimum information that is required to meet the needs of the patient.
- Obtain patient's consent before disclosing information to family and friends. If appropriate, ask patient on admission to nominate one key person who will be responsible for liaising directly with nursing and medical staff and record the name of this person in the nursing notes.
- Precautions are taken to prevent information being shared inappropriately, computer screens being viewed and white boards being read.

### 5.4 Care & Treatment

- Offering a chaperone of the same sex and allow a friend/relative to be present as the patient wishes, in accordance with the Trust's Chaperone Policy.

- To obtain permission before any examinations or treatments are carried out.
- To maintain privacy to undress and dress for intimate examinations or treatments.
- Not to ask the patient to take off more clothing than necessary.
- To ensure privacy and dignity is respected at all times: in particular when giving personal care, when entering single rooms, during patient consultations with healthcare professionals where personal information, diagnosis and treatment options are being discussed, and ward areas when curtains are closed.
- During the last days of life, immediately before and following death.
- Following physical examination, patients have an opportunity to redress before the consultation continues.
- Checking with patient that they give permission to be washed or examined by a person of the opposite gender, and respect their wishes where possible.
- Encourage patients to wear their own clothes during the day.
- Encourage patients to wear their own night attire to sleep in. When this is not appropriate or possible, patients should have access to hospital clothing that protects their modesty and is acceptable to them.
- Adequately covering a patient that does not have access to their own clothing or are too unwell to be dressed prior to leaving the ward.
- A patient's dietary needs, preferences and assistance needed at meal times should be assessed, recorded and referred to by frontline staff.
- Where assistance is required this should be provided discreetly to avoid embarrassment and loss of dignity. Adapted cutlery and crockery should be provided to enable people to feed themselves where appropriate.
- Give patients time to eat without rushing and aim to avoid interruptions in order to protect the patient's mealtime.

## 5.5 Individual and Cultural Diversity

- To ensure patients are treated fairly on the basis of need and not discriminated against on the basis of their protected characteristics.
- To ensure patients are treated in a manner, which respects their protected characteristics.
- To ensure patient's cultural & religious needs will be valued and met where possible.
- To ensure decisions on care that patients receive are determined only by their needs.

## 5.6 End of Life Care

5.6.1 The Trust plans and delivers end of life care in accordance with national guidance to ensure patients receive high quality care. A person who is dying will have their care individualised and will be treated with the upmost dignity, respect and compassion. When a patient has died, the body will be treated with the same dignity and respect as when they were alive whilst encompassing cultural and religious beliefs. Relatives/Carers will be treated with particular sensitivity and compassion at this time.

5.6.2 Staff must comply with the Trust's Care of the Dying Policy.

## 6.0 Equality and Diversity

6.1 The Trust's standards for privacy, dignity and confidentiality will be developed, implemented and observed in accordance with the principles set out in the Trust's Equality and Diversity Group.

6.2 The Equality Impact Assessment is attached Appendix 2.

## 7.0 Dignity Champions

7.1 Dignity Champions are part of a nationwide approach to challenging practice, working both individually and collectively to support zero tolerance of abuse and disrespect for adults.

7.2 At the heart of the Dignity campaign are the Dignity Champions, who have signed up to the 10 point challenge (Appendix 1) and are sharing their good practice. The Trust is committed to developing a dignity group whose members represent a wide range of dignity champions across the organisation and there will be a register of all dignity champions within the Trust.

7.3 Staff at all levels in NHS and social care, volunteers, service users, their carers and members of the public are encouraged to sign up to become a Dignity Champion by registering at: [www.Dignityincare.org.uk](http://www.Dignityincare.org.uk) and through contacting the Trust's Dignity lead at [angela.wade@meht.nhs.uk](mailto:angela.wade@meht.nhs.uk).

7.4 The campaign is about winning hearts and minds, changing the culture of care services and placing a greater emphasis on improving the quality of care and the experience of people using services including NHS hospitals, community services, care homes and home support services.

7.5 It includes action to:

- **Raise awareness** of dignity in care;
- **Inspire** local people to take action;
- **Share** good practice and give impetus to positive innovation;
- **Transform** services by supporting people and organisations in providing dignified services;
- **Reward** and recognise those people who make a difference and go that extra mile.

## 9.0 Responsibilities

### 9.1 Chief Executive

The Chief Executive has overall responsibility for ensuring that the Trust meets its statutory and non-statutory obligations in respect of maintaining appropriate standards of privacy, dignity and confidentiality for patients and their carers.

## 9.2 **Director of Nursing**

The Director of Nursing is responsible for ensuring that Trust staff uphold the principles of privacy and dignity when dealing with patients and their carers, 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.

## 9.3 **The Chief Estates and Facilities Director**

The Chief Estates & Facilities Director is responsible for ensuring that the environment within Trust premises supports and enhances standards of privacy and dignity for patients and their carers.

## 9.4 **Senior Managers/ Associate Directors of Nursing and Midwifery/Matrons**

Are responsible for ensuring that the requirement of the Delivering Same Sex Accommodation Policy (DSSA 2010) is effectively managed within their directorate and that their staff are aware of, and implement, those requirements. Should there be a breach in the same sex accommodation Policy which is not clinically justified, this should be escalated to the Director of Nursing, and a risk event form completed. Mitigating actions to maintain the patient's privacy and dignity are outlined in the regional guidance for Mixed Sex Occurrence.

## 9.5 **All Staff**

All staff are responsible for observing the requirements of the Delivering Same Sex Accommodation Policy, for attending any designated training and for adhering to all underlying policies relating to privacy and dignity should there be a breach in the same sex accommodation Policy which is not clinically justified, this should be escalated to the Matron, and a risk event form completed. Mitigating actions to maintain the patients' privacy and dignity are outlined in the Delivering Same Sex Accommodation Policy. The Ten Point Dignity Challenge (Appendix 1) acts as a guide to best practice across the organisation for all staff.

## 10.0 **Training**

10.1 Staff awareness of privacy and dignity issues is highlighted at Corporate Induction and at mandatory training programmes. The Trust will strive to ensure that managers are supported in privacy and dignity practice training requirements for their staff and will encourage staff to access the training they need on dignity and respect. Staff training needs will also be reviewed as part of the normal appraisal process.

## 11.0 **Audit & Monitoring**

11.1 Problems in relation to standards and guidelines on privacy and dignity in care of patients will be monitored and reported through Datix and the complaints channel.

- 11.2 Monitoring of patient privacy and dignity within the clinical area will be audited, utilising CQC domains as benchmarks, DSSA audits and Privacy and Dignity audits, patient surveys. This includes local surveys for Inpatient, Outpatient and Accident and Emergency areas and the results of similar National surveys.
- 11.3 PLACE assessment includes specific scoring criteria relating to the environment and facilities that is provided to promote the privacy and dignity of patients. Results from the assessment and any subsequent improvement plans are overseen by the the Care Environment Group (CEG) and also reported at the Patient Experience Group (PEG).
- 11.4 Ultimately, the patients will measure the Trust's success. A reduction in complaints relating to privacy and dignity issues, as well as positive feedback through national and local surveys, should signify a positive impact on the patient experience.

## **12.0 Implementation & Communication**

- 12.1 The Trust's Dignity Champion Group will have responsibility for the on-going communication and monitoring of the best practice standards.

## **13.0 Useful Websites**

Dignity in Care Campaign- <http://dignityincare.org.uk>

### Dignity Ten Point Challenge

Mid Essex Hospital Services NHS Trust has agreed to meet the Department of Health, Dignity Challenge in ensuring that high quality services are delivered that respect people's dignity. The ten point challenge is:

- Have a zero tolerance of all forms of abuse.
- Support people with the same respect you want for yourself or a member of your family.
- Treat each person as an individual by offering a personalised service.
- Enable people to maintain the maximum possible level of independence, choice and control.
- Listen and support people to express their needs and wishes.
- Respect people's right to privacy.
- Ensure people feel able to complain without fear of retribution.
- Engage with family members and carers as partners in care.
- Assist people to maintain confidence and positive self esteem.
- Act to alleviate people's loneliness and isolation.

**Equality Impact Assessment (EIA)**

Title of document being impact-assessed: **Privacy & Dignity Policy**

<b>Equality or human rights concern. (see guidance notes below)</b>	<b>Does this item have any differential impact on the protected characteristics listed? Brief description of impact.</b>	<b>How is this impact being addressed?</b>
<b>Gender</b>	Clinical need may take priority over same sex accommodation – high intensity clinical areas	Delivering Same Sex Accommodation Policy. Mitigating actions clearly defined
<b>Race and ethnicity</b>	Language may be a barrier for some patients.	Interpreters are made available when required. Staff training offered for equality and diversity.
<b>Disability</b>	Disabled Patients and relatives	All patient areas are accessible by wheelchair or lift. Risk assessments completed for patients.
<b>Religion, faith and belief</b>	This would depend on individual needs and requirements.	There is access to the multi faith chaplaincy team who offer advice and support for all patients, relatives/carers and staff.
<b>Sexual orientation</b>	All people who use, visit or work within the services are treated with respect and dignity.	All complaints would be fully investigated and responded to if they arose. Staff training offered for equality and diversity.
<b>Age</b>	The age of a patient determines the most appropriate care setting for an in patient episode	Delivering Same Sex Accommodation Policy. Mitigating actions clearly defined
<b>Gender reassignment</b>	All people who use, visit or work within the services are treated with respect and dignity.	Staff to attend training offered for equality and diversity. An individualised approach to care needs throughout gender assignment stages. All complaints would be fully investigated and responded to if they arose
<b>Social class</b>	All people who use, visit or work within the services are treated with respect and dignity	Provide information for all patients to MEHT.
<b>Marriage and civil partnership</b>	All people who use, visit or work within the services are treated with respect and dignity	Provide information for all patients to MEHT.
<b>Pregnancy and Maternity</b>	This would depend on individual needs and requirements.	Provide information for all patients to MEHT.

Date of Assessment: June 2018

Names of Assessor(s): Daniel Spooner