

Privacy and Dignity Policy

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Category:	Clinical Policies
Version Number:	1.2
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Lead Officer:	Director or Nursing
Equality Impact Assessment completed:	Yes

Applicable Legislation/Regulations:

The Health & Social Care Act 2008/The Care Act 2014 (Regulation 10)
 The Data Protection Act 2018 (General Data Protection Regulations)

Codes of Practice:

NICE Guidance Quality standard [QS15] (Published date: February 2012)
 Dignity in Care – www.dignityincare.org.uk
 Social Care Institute for Excellence (2007) Dignity in Care. Adult service’s practice guide 09.
www.scie.org.uk

Purpose:

To provide guidance as to how all staff should behave in their interactions with our service users and how they should view our service users.

Version Control Table

Date Ratified	Version Number	Status
	1.2	Live

Date	Key Revision
18/09/18	Legislation updated. References to good practice guidance inserted.

Please check to ensure this is the most current electronic copy of this document as it is updated and published in electronic format only (hard copies may become out of date).

1.0 The Policy

- a) As a Healthcare Group, we expect our staff to respect service users' rights to privacy and dignity. We continue to work hard to ensure that there is a culture, in all our facilities, which values privacy and dignity.

This policy is underpinned by Department of Health guidance which defines dignity as:-

'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)

- b) We want our service users to feel that they matter – that their values, beliefs and personal relationships will be respected. This applies to all our service users, regardless of their age, gender, ethnicity, social or cultural backgrounds, or their psychological or physical requirements.
- c) The key underlying principle is that service users should always be treated by staff in the same way, as those staff would wish to be treated themselves.
- d) The policy gives general notes about service users' rooms, personal hygiene, any treatments, and service user's records and notes, telephone interactions etc. Some of these issues are covered in more detail in other policies.
- e) It should be remembered that this policy not only provides for the privacy and dignity of service users but provides guidance for staff, which will assist in protecting them from difficult situations and indicating how to behave if those situations occur.
- f) It should be remembered that these terms can mean different things to different service users so staff should always err on the side of caution and be more careful rather than less careful when dealing with privacy and dignity. A useful guide is for the member of staff to ask themselves how they personally would like to be treated in this situation.

2.0 The Procedure

2.1 Service Users Bedrooms

- a) Each service user has a need for and an entitlement for their own personal space and privacy. For our service users, this space is usually their bedroom. Staff wishing to enter a service user's room should therefore knock on the door and wait for an answer before entering.
- b) If there is a need to enter a service user's bedroom and the service user is not available to give permission, authorisation must be sought from the Nurse in Charge with an acceptable reason, which must be recorded in the nursing notes.
- c) It should be noted that exactly the same rules apply when dealing with a door spy hole or a shuttered window in a door. This must be treated exactly the same way as opening the door with the same rules in place.
- d) It should be remembered that all service users should have entered into a collaborative agreement as part of their care planning that allows staff to make regular routine safety and security checks. There is implied within this, permission to check without needing to disturb the service user; this is especially useful during the night when the service user might well be asleep. It should also be remembered that The Mental Health Act 1983 overrides the entitlement to privacy when the health, safety, or welfare of the patient is at risk

2.2 Personal Hygiene

- a) When assisting service users with their personal hygiene, there is a need for absolute privacy. This can be achieved simply by ensuring that bathroom or toilet doors are closed and that full use is made of screens and curtains. This will prevent accidental intrusions by others and protect the service user from embarrassment.

2.3 Nursing or Medical Interventions

- a) It should be remembered that all nursing or medical interventions must be with the service user's permission. If this is not forthcoming, then staff should refer to the Nurse in Charge and the Responsible Clinician (RC) for advice. See Assessing Capacity Policy CC05.
- b) With the appropriate permission in place these interventions must be given discreetly and preferably in private.

2.4 Dealing with Service Users of the Opposite Sex

- a) The guidance in this area are exactly the same as for a service user of the same sex. However, in order to ensure there is no misunderstanding or ambiguity all staff need to be especially considerate and careful when dealing with service users of the opposite sex.
- b) If the guidance above is followed this should not be an issue but if any member of staff feels that they may be compromised by this they should seek the advice of the nurse in charge for guidance as to what is appropriate and what is not.

2.5 Service Users Records and Information

- a) It is a legal requirement that service users' records are kept private and confidential and are only available to those who have a legitimate reason to have access to them. This issue is largely covered by Information Security Policy CO33 – but the general principle is clear and staff must always act in a manner that keeps all records confidential.
- b) Staff must always be aware when discussing confidential information of any type about a service user that that information must be kept private. Staff should also be aware of who might be able to listen to this information and whether they are legitimately entitled to hear it. Clearly, this will include other service users but may also include staff members who are not entitled to that information.
- c) If at all possible, such conversations should not occur in public areas of the hospital but ideally either in the nursing office or in a private room.
- d) One-to-one sessions, CPAs, placement reviews etc., will be held in the meeting room or other private rooms in order to maintain privacy, dignity and confidentiality.

2.6 Telephone Enquiries

- a) A service user is still entitled to the same privacy rules when telephone enquiries are made about them.
- b) When an enquiry is received by telephone all staff must under no circumstances reveal any private information without the permission from the service user. Staff should politely ask for a name and contact phone number and check in the service user's records for clear authorisation before calling that person back. This call back will normally be made by the named nurse or the nurse in charge.
- c) If there is no clear authorisation in the service user records then the permission of the service user must be gained prior to making the call and that permission placed in the records. See also Assessing Capacity Policy.

Appendix 1

Equality Impact Assessment for this policy

Protected Characteristic (domain)	Area of conflict	Resolution
Age	Nil	N/A
Disability	Nil	N/A
Gender Reassignment	Nil	N/A
Pregnancy & Maternity	Nil	N/A
Race	Nil	N/A
Religion or Belief	Nil	N/A
Sex	Nil	N/A
Sexual Orientation	Nil	N/A
Marriage and Civil Partnership	Nil	N/A

All relevant persons are required to comply with this policy and must demonstrate sensitivity and competence in relation to diversity in race, faith, age, gender, disability and sexual orientation. If you feel you are disadvantaged by this policy, please contact the Registered Manager and the service will actively respond to the enquiry.