Proxycare Personnel Ltd

Dignity & Respect Policy

Regulatory Links

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

- **Regulation 9: Person-centred care —** Care and treatment must be appropriate, meet the person's needs and reflect their preferences. This policy ensures care is delivered in a way that respects each person's individuality, choices and goals.
- **Regulation 10: Dignity and respect —** People must be treated with dignity and respect at all times, including having their privacy protected and their autonomy, independence and involvement in the community supported. This policy sets out how the organisation meets this regulation in practice.
- **Regulation 12: Safe care and treatment —** Care must be provided in a safe way. Upholding dignity and respect is integral to safe care, including through appropriate communication, cultural sensitivity and the management of personal care.

CQC Quality Statements

- **Kindness, compassion and dignity:** *"We always treat people with kindness, empathy and compassion and we respect their privacy and dignity. We treat colleagues from other organisations with kindness and respect."* This policy is the primary governance document for meeting this quality statement.
- **Treating people as individuals:** *"We treat people as individuals and make sure their care, support and treatment meets their needs and preferences. We take account of their strengths, abilities, aspirations, culture and unique backgrounds and protected characteristics."* This policy requires personalised care that respects each person's identity, life history and preferences.
- **Independence, choice and control:** *"We promote people's independence, so they know their rights and have choice and control over their own care, treatment and well-being."* This policy supports autonomy and positive risk-taking to maintain independence.

Scope

This policy applies to all staff, volunteers, agency workers and contractors who have contact with people we support, their families or visitors. It covers both residential and community-based services.
This policy should be read alongside the Person-Centred Care and Outcomes Based Care Policy, the Equality and Diversity Policy, the Accessible Information Standard Policy, the Mental Capacity and Deprivation of Liberty Policy, and the End of Life Policy.

Equality Statement

Our organisation is committed to equal rights and the promotion of choice, person centred care and independence. This policy demonstrates our commitment to creating a positive culture of respect for all individuals. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability, sex, gender reassignment, pregnancy and maternity, race, sexual orientation, religion or belief, and marriage and civil partnership. It is also intended to reflect the Human Rights Act 1998 to promote positive practice and value the diversity of all individuals.

Policy Statement

We are committed to treating every person with dignity, respect, kindness and compassion. This applies to the people we support, their families, our staff, visiting professionals and members of the community. It is not optional — it is a fundamental standard of care.

Privacy, dignity and respect underpin everything we do. Staff are required to treat each person as an individual of equal worth, to listen to them, to respect their choices and to deliver care in a way that protects their bodily privacy, emotional well-being and sense of self. Any breach of this policy may be treated as gross misconduct.

Policy Detail

What Privacy Means in Practice

Under the Human Rights Act 1998, everyone is entitled to a private life wherever they live. Privacy means freedom from intrusion and embarrassment, and it applies to all information and practice that is personal or sensitive. In care settings, privacy is consistently identified by people who use services as their second most important requirement after safety.

Staff must protect the bodily privacy of people during intimate personal care through the effective use of private rooms, curtains, screens, blankets and appropriate clothing. Disturbances and interruptions during personal care must be minimised. Staff must knock and wait before entering a person's room or private space.

Staff must respect that privacy includes the right to be alone, to have quiet time, and to have private feelings that do not need to be explained. When information about a person is shared between staff or with a manager, it must always be treated with respect. Discussions about care, treatment and support must take place where they cannot be overheard.

The organisation recognises the importance of private relationships and attachments. People we support must have space to meet, talk to and communicate with friends and partners in private. The right to private contact includes post, telephone calls, email and other communications including social media.

Community services

In community settings, staff are entering the person's own home. Staff must respect the person's home as their private space. This includes removing shoes if asked, not using the person's telephone, kitchen or personal items without permission, and ensuring that conversations about care are conducted privately and not overheard by neighbours or other visitors.

What Dignity Means in Practice

Dignity concerns how people feel, think and behave in relation to their own worth and value. To treat someone with dignity is to treat them as being of worth, in a way that is respectful of them as a valued individual regardless of age, race, culture, gender, sexual orientation, social background, health, marital status, disability, religion or political belief.

Remembering a person's life history is an important part of supporting their identity and dignity. Where a person is at risk of losing their personal story, for example through dementia or cognitive decline, staff support them to maintain and celebrate it.

The organisation is committed to the Dignity in Care campaign's 10 Point Dignity Challenge, which includes zero tolerance of all forms of abuse, treating each person as an individual, enabling maximum independence and choice, listening and supporting people to express their needs, respecting privacy, ensuring people feel able to complain without fear, engaging families as care partners, supporting confidence and positive self-esteem, and acting to alleviate loneliness and isolation.

Respectful Communication

Respectful communication is at the heart of dignity. Staff must:

- Address people by their preferred name, identified at assessment and recorded in the care plan.
- Use respectful, person-centred terminology in all records and handovers.
- Be aware of the impact of non-verbal communication, body language and tone of voice.
- Be aware of the needs of people for whom English is not their first language and provide communication support as needed.

- Follow the Accessible Information Standard to ensure information is provided in formats people can understand.
- Never speak about a person as though they are not present, or refer to them by room number, condition or task.

Personalised Care and Preferences

A person's dignity is supported by care tailored to their individual needs. During the care assessment, the person's preferences are identified and recorded in the care plan, including preferred form of address, dietary requirements and cultural or religious preferences, washing and toileting preferences, clothing choices, preferences about who delivers their care (including gender of staff), and activities that are meaningful to them.

Where the organisation is unable to meet a specific preference due to staffing or other reasons, the reasons are discussed with the person and alternatives are explored. This is recorded in the care plan.

People we support are enabled to take positive risks where these have been identified through assessment and developed within the care plan to support their well-being and independence. See the Person-Centred Care and Outcomes Based Care Policy.

Supporting Dignity at End of Life

Staff must be prepared to support people who are dying with compassion and dignity. Training on death, bereavement and dignified end-of-life care is provided. The well-being of staff working in end-of-life care is also supported. See the End of Life Policy.

Mental Capacity and Dignity

By following the Mental Capacity Act 2005, staff support people's dignity by recognising their equal right to freedom, choice and control. Where a person may lack capacity for a specific decision, additional support is provided from staff, family, advocates or attorneys. Where a best interest decision is required, any impact on the person's privacy and dignity is considered. See the Mental Capacity and Deprivation of Liberty Policy.

Skills for Care Code of Conduct

All staff comply with the Skills for Care Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England. The Code requires staff to promote and uphold the privacy, dignity, rights, health and well-being of people who use services and their carers at all times. The Code is referenced in induction, supervision, appraisal and, where necessary, disciplinary processes.

What Each Role Must Do

Registered Manager

- Ensure all staff receive dignity and respect training during induction and at annual refreshers, using practical scenarios.
- Use supervisions, spot checks and feedback from people we support to assess staff competence in upholding dignity.
- Take action where staff are identified as falling below the expected standard, including additional training, mentoring or disciplinary action as appropriate.
- Ensure the organisation's Dignity Champion has the support and resources to carry out their role.

Dignity Champion

- Promote dignity, respect and privacy across the service.
- Support staff to understand and embed dignity in their daily practice.
- Share updates and resources at staff meetings and through team communications.

All Staff

- Treat every person with dignity, respect, kindness and compassion at all times.
- Follow individual care plans and respect the preferences recorded in them.
- Protect bodily privacy during personal care and minimise interruptions.
- Report any concerns about a person's dignity being compromised to the senior person on duty immediately.
- Never speak about people in a way that reduces them to tasks, conditions or numbers.

Procedures

Identifying and Recording Dignity Preferences at Assessment

Who: The staff member conducting the care assessment. When: At initial assessment and at each scheduled care review.

- Ask the person how they wish to be addressed and record this in the care plan. Use their preferred name in all interactions and records.
- Discuss and record preferences for personal care, including washing, toileting, dressing, dietary requirements, cultural or religious observances, and gender preference for care staff.
- Discuss and record the person's communication needs, including language, sensory impairments and any accessible information requirements.
- Discuss and record the person's important relationships and how they wish to maintain contact with family, friends and the community.
- Discuss and record any activities that are meaningful to the person, their life history, interests and goals.
- Review and update dignity preferences at each scheduled care review, or sooner if the person's needs or wishes change.

Responding to a Dignity Concern

Who: Any staff member who observes or is told about a concern. When: Immediately.

- If the person's dignity is being compromised at that moment, take immediate action to protect it. For example, close a door or screen, stop a conversation, or adjust clothing.
- Report the concern to the senior person on duty within one hour.
- The senior person on duty assesses whether the concern requires a safeguarding referral. If so, follow the Safeguarding Adults Policy immediately.
- If the concern relates to staff practice, the Registered Manager investigates within 24 hours and takes action as appropriate, which may include additional training, supervised practice, or disciplinary proceedings.
- Record the concern, the actions taken and the outcome in the person's care records and the incident log.
- The Registered Manager reviews dignity concerns at least quarterly as part of governance reporting to identify patterns and improve practice.

Conducting a Dignity Spot Check

Who: Registered Manager, senior care worker or Dignity Champion. When: As part of the routine spot check programme.

- Observe how staff interact with people we support during the visit, including tone of voice, body language, use of preferred names, and whether privacy is maintained during personal care.
- Check whether care plans reflect current dignity preferences and whether staff are following them.
- Speak with people we support (and their families where appropriate) to ask whether they feel treated with dignity, respect, kindness and compassion.
- Record findings in the spot check record. Share positive observations with the staff member. Where practice falls below standard, discuss the concern and agree an action plan.
- Report findings to the Registered Manager and include them in quarterly governance reporting.

Community services

In community settings, the spot check includes observation of how staff enter and move around the person's home, whether they respect the person's private space and possessions, and whether conversations about care are conducted appropriately. Telephone feedback calls to people we support and their families are used to supplement face-to-face spot checks.

References and Further Reading

Legislation

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – https://www.legislation.gov.uk/ukdsi/2014/9780111117613/contents
Human Rights Act 1998 – https://www.legislation.gov.uk/ukpga/1998/42/contents
Equality Act 2010 – https://www.legislation.gov.uk/ukpga/2010/15/contents
Mental Capacity Act 2005 – https://www.legislation.gov.uk/ukpga/2005/9/contents

CQC Guidance

CQC: Regulation 10 — Dignity and respect – https://www.cqc.org.uk/guidance-regulation/providers/regulations-service-providers-and-managers/health-social-care-act/regulation-10
CQC Single Assessment Framework quality statements – https://www.cqc.org.uk/guidance-regulation/providers/assessment/single-assessment-framework

Other Guidance

Dignity in Care: The 10 Point Dignity Challenge – https://www.dignityincare.org.uk/About/Dignity_Champions/
Skills for Care: Code of Conduct – https://www.skillsforcare.org.uk/Support-for-leaders-and-managers/Managing-people/Code-of-Conduct.aspx
SCIE: Dignity in care – https://www.scie.org.uk/dignity/care/
Equality and Human Rights Commission – https://www.equalityhumanrights.com/

Related Organisational Policies

- Person-Centred Care and Outcomes Based Care Policy
- Equality and Diversity Policy
- Accessible Information Standard Policy
- Mental Capacity and Deprivation of Liberty Policy
- End of Life Policy
- Safeguarding Adults Policy
- Complaints Policy