

Privacy and Dignity Procedure (includes procedure for chaperoning)

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Privacy and Dignity Procedure (includes procedure for chaperoning)

1 Introduction

The Tavistock and Portman NHS Foundation Trust (the Trust) is committed to ensuring that people (patients, carers and staff) are treated as individuals with privacy, dignity and respect.

We are committed to ensure that every patient and carer that we support experiences high quality care that is safe, effective and which respects their privacy and dignity.

2 Purpose

This procedure sets out the way in which the Trust will ensure that all patients are treated with respect and that their privacy and dignity is maintained.

3 Scope

This procedure is applicable to all clinical areas of the Trust where care or service is offered to patients.

4 Definitions

The term “*dignity*” in this document is:

“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).

The term “*privacy*” means: freedom from intrusion and relates to all information and practice that is personal or sensitive in nature to an individual.

5 Duties and responsibilities

Director responsibility

- To lead, promote and champion privacy and dignity by integrating dignity and respect into governance and service monitoring.
- To take action when breaches of privacy and/or dignity are reported or identified, ensuring that steps are taken to reduce risk of recurrence

All staff responsibility

- All employees will, at all times, behave in a way that promotes openness and display a professional demeanour, giving due consideration to the manner in which they treat others, taking all reasonable steps to preserve the privacy and dignity of all patients that they interact with
- To follow the Trust’s Code of Conduct for Confidentiality¹ in respect of all matters relating to patient information

6 Procedures

Clinical contact

Staff will ensure that all clinical conversations with patients occur in a location that cannot be overheard by other persons. This will usually be in a private consultation room, or if this is an open plan area all reasonable steps must be taken to ensure that the patient’s privacy is maintained.

Telephone contact

If direct telephone contact is made with a patient staff must ensure that the conversation cannot be overheard, and also ask the patient whether

¹ See Trust intranet for most up to date version

s/he is in a location where they feel is sufficiently private to talk to the staff member, and that they cannot be overheard

Physical examinations (chaperoning)

If a patient is to be physically examined by a doctor or nurse then this must take place in a private location, either a consulting room or the medical room at the Tavistock Centre.

The patient should be offered a chaperone of the same sex if an examination is to take place that requires the patient to remove any of their clothes (e.g. when listening to the chest)

There are no occasions when clinical staff need to conduct an intimate examination of a patient

7 Training Requirements

Principles of confidentiality and promotion of patients' privacy is included in induction and INSET training, and as basic training annually.

8 Process for monitoring compliance with this policy

This procedure will be monitored by exception reporting via incidents and complaints. All reports of possible breaches of this procedure will be brought to the attention of the Director of Quality and Patient Experience.

9 Associated documents²

Consent Procedure
Safeguarding Adults Procedure
Safeguarding Children Procedure
Information Governance Policy
Code of Confidentiality

² For the current version of Trust procedures, please refer to the intranet.

10 Appendix: Equality Impact Assessment

1. Does this policy, function or service development impact on patients, staff and/or the public?

YES

2. Is there reason to believe that the policy, function or service development could have an adverse impact on a particular group or groups?

NO

4. Based on the initial screening process, now rate the level of impact on equality groups of the policy, function or service development:

Negative Low

Low.....

(i.e. minimal risk of having, or does not have negative impact on equality)

Positive impact: High

High

(i.e. highly likely to promote, or clearly does promote equality of opportunity)

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