



Privacy and Dignity Policy

Policy Statement

Whilst healthcare organisations are required to have a policy in place regarding privacy and dignity, it is included in codes of practice for all registered healthcare professionals. However, maintenance of privacy and dignity is a matter of having respect for another person. This policy describes the reasons for and processes to be followed to ensure client dignity and privacy.

1. Introduction

1.1 Levels of dignity and privacy are subjective. The perception of clients will vary not only by individual but also by their experience and how they are feeling at any one time. It will also vary with age, gender, race and background and these must be borne in mind.

1.2 The National Care Standards make two specific references to the privacy and dignity of clients and an organisations level of commitment to these must be included in the Statement of Purpose. Clients must feel that their privacy and dignity are respected at all times, especially when they are being examined or treated, during changing and when discussing personal matters when their confidentiality must also be protected.

1.3 The client's perception of privacy and dignity is specifically included in the client satisfaction questionnaire and any adverse feedback must influence actions to be taken in the future.

2. Responsibilities

2.1 The Registered Manager.

- Has overall responsibility for ensuring the privacy and dignity of clients.
- Ensures that resources are available to meet regulatory requirements.
- Participates in response to clients, when appropriate.
- Ensures that learning points are widely disseminated.
- Ensures staff are aware of their responsibilities.
- Maintain acceptable levels of privacy and dignity within their respective sites.

2.2 All staff:

- Ensure that client privacy and dignity is maintained at all times.

3. Procedure

3.1 Individual changing facilities are available for all clients if appropriate.

3.2 All clients have the opportunity to complete a client satisfaction questionnaire.



3.3 All client correspondence regarding privacy and dignity is responded to.

3.4 Satisfaction results data is included at Governance meetings.

3.5 Learning points are included in Governance minutes.

3.6 Learning points are disseminated across the organisation.

4. Monitoring/Audit Process

4.1 Client satisfaction questionnaires and any correspondence with clients, which is ongoing.

4.2 Monitoring tool to be used annually.

5. Documentation

5.1 Client satisfaction questionnaire.

5.2 Provider inspection tool and report format.

6. Review

6.1 This policy will be reviewed every year unless circumstances arise which require a more timely review.

Policy dissemination flowchart

