

<b>Title:</b>	<b>Patient Privacy and Dignity within the hospital setting</b>		
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<b>Ownership:</b>	<div>██████████</div> Executive Director of Nursing & User Experience		
<b>Approval by:</b>	Standards and Guidelines Committee Policy Committee Executive team Meeting	<b>Approval date:</b>	19/05/2016 01/06/2016 08/06/2016
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<b>Version No.</b>	V4	<b>Supersedes</b>	V3.0 – March 2011-2014
<b>Key words:</b>	Patient privacy, patient dignity, same sex accommodation		
<b>Links to other policies</b>	Photography, digital and video imaging of Service Users: Consent and Confidentiality, Copyright and Storage Policy Intimate Care – Examination – Chaperoning Policy		

Date	Version	Author	Comments
March 2008	1.0	<div>██████████</div>	First draft
June 2008	2.0	<div>██████████</div>	Final Draft
Jan 2011	3.0	<div>██████████</div>	Review. Addition of protocol to be followed when same sex accommodation not available.
November 2014	3.01	<div>██████████</div>	New policy template
December 2014	3.02	<div>██████████</div>	Comment from ADNs & CNMT
February 2015	3.03	<div>██████████</div>	Comment from N Vincent
May 2016	3.04	<div>██████████</div>	Comments from C Jackson – NUE
June 2016	3.05	<div>██████████</div>	Minor amendment following S&G Committee
July 2016	4		Final version

## **1.0 INTRODUCTION / PURPOSE OF POLICY**

### **1.1 Background**

Belfast Health and Social Care Trust (BHSCT) attaches the highest importance to ensuring that the privacy and dignity of its patients is assured. It is one of the 5 Patient and Client Experience Standards. This policy will ensure consistent application of best practice across the Trust and is in line with the organisational vision to deliver person centred care.

### **1.2 Purpose**

To ensure a process where the privacy and dignity of patients and clients is maintained at all times.

### **1.3 Objectives**

- To create a culture of Patient Centred care
- To promote privacy and dignity at all times
- To promote positive attitudes, behaviours, compassion and dialogue between staff, patients and their families

## **2.0 SCOPE OF THE POLICY**

This policy will apply to all Trust employees.

## **3.0 ROLES/RESPONSIBILITIES**

It is the responsibility of all Trust employees to adhere to this policy.

## **4.0 KEY POLICY PRINCIPLES**

### **Policy Principles**

- 4.1 Private areas should be used to prevent disturbance or interruptions to consultations or treatment.
- 4.2 All efforts should be made to deliver care in an appropriate environment for patients facing the end stages of life.
- 4.3 All notice boards containing patient details should be used sensitively giving only basic information and not be in full view of members of the public.
- 4.4 Toilet and washing facilities are designated as single sex in all wards and departments. The toilets must have an appropriate door lock with a nurse call system in operation.
- 4.5 Consent will always be sought before physical examination and a chaperone provided where necessary.
- 4.6 Consent will always be sought to include students or trainees in clinical

examination.

- 4.7 Discretion should be applied when using computers and every precaution taken to prevent patient information being inappropriately displayed.
- 4.8 Auditory privacy should be considered at all times. Personal and sensitive conversations should take place away from the bedside whenever possible. If a patient is required to make a private telephone conversation, efforts should be made to facilitate this. Patients should also be made aware of the availability of a quiet room to facilitate private discussion.
- 4.9 All patients should be afforded as much privacy as possible ensuring appropriate use of curtains, screens, blankets, appropriate clothing and positioning of beds/trolleys.
- 4.10 No patient will be transferred to any department or ward in the Trust without his or her modesty being protected. All patients should have an appropriate outer garment, footwear and a blanket when being transferred.
- 4.11 Professional behaviour towards patients must always demonstrate the showing of respect and kindness.
- 4.12 Staff should be sensitive to differing expectations associated with race, ethnicity and culture. Information on delivery of care and treatment should be provided in a respectful way to ensure cultural and religious beliefs are addressed. Access to a translating service, interpreting service or sign language should be facilitated if required.
- 4.13 All staff must wear the Trust recognised identification, to ensure all patients are aware which member of staff is approaching them.
- 4.14 Nursing handovers must be conducted in such a way that sensitive patient details are not disclosed within audible range of other patients.
- 4.15 BHSCT will make every effort to provide single sex accommodation, with the exception of ICU/high risk and observation areas or when justified by clinical need.
- 4.16 In the event that single sex accommodation cannot be provided, the 'Protocol for Placement of Patients when Same Sex Accommodation is Not Available' must be followed (**Appendix 1**).
- 4.17 In relation to the use of mobile phones/ recording devices please refer to 'Photography, digital and video imaging of Service Users: Consent and Confidentiality, Copyright and Storage' Policy  
[http://intranet.belfasttrust.local/policies/Documents/Photography%20-%20digital%20and%20video%20imaging%20of%20Service%20Users\\_Consent%20and%20Confidentiality,%20Copyright%20and%20Storage.pdf](http://intranet.belfasttrust.local/policies/Documents/Photography%20-%20digital%20and%20video%20imaging%20of%20Service%20Users_Consent%20and%20Confidentiality,%20Copyright%20and%20Storage.pdf)

## **5.0 IMPLEMENTATION OF POLICY**

### **5.1 Dissemination**

This policy will be available to all staff healthcare groups.

**5.2 Resources**  
No significant resource requirement.

**5.3 Exceptions**  
No exceptions.

## **6.0 MONITORING**

Adherence to this policy will be monitored through Patient Satisfaction Surveys and complaints.

## **7.0 EVIDENCE BASE / REFERENCES**

Follows Best Practice Guidelines  
Legacy Trust Policy  
Dignity and the essence of medicine BMJ/28<sup>TH</sup> July 2007/vol 334  
Mental Health Act 2007.  
Dorset and Somerset Strategic Health Authority Dignity on the Ward Audit Template (2003)  
NHS Modernisation Agency Essence of Care Benchmark for Privacy and Dignity (2002)  
Privacy and Dignity Policy Kettering General Hospital (2003)

## **8.0 CONSULTATION PROCESS**

Director of Nursing  
HR Department  
Trust Directorate Directors  
Trade Unions  
Standards and Guidelines Committee

## **9.0 APPENDICES / ATTACHMENTS**

Appendix 1 - Protocol for Placement of Patients when Same Sex Accommodation is Not Available

## **10.0 EQUALITY STATEMENT**

In line with duties under the equality legislation (Section 75 of the Northern Ireland Act 1998), Targeting Social Need Initiative, Disability discrimination and the Human Rights Act 1998, an initial screening exercise to ascertain if this policy should be subject to a full impact assessment has been carried out. The outcome of the Equality screening for this policy is:

**Major impact** ☐  
**Minor impact** ☐  
**No impact.** ☐

## **SIGNATORIES**

(Policy – Guidance should be signed off by the author of the policy and the identified responsible director).



Date: \_\_\_\_\_ July 2016 \_\_\_\_\_



**Co-Director Nursing**



Date: \_\_\_\_\_ July 2016 \_\_\_\_\_



**Executive Director of Nursing and User Experience**

**Protocol for Placement of Patients when  
Same Sex Accommodation is Not Available**

This protocol highlights the importance of good practice in maintaining privacy and dignity when placement of patients within a mixed sex bay becomes necessary.

The Trust recognises that due to the environmental design of many wards, the commitment to care for patients in a single sex environment may not always be realised. In addition, in specialist units such as Coronary Care, Intensive Care, Accident & Emergency, Short Stay Ward and Medical Assessment Unit, the need to admit for emergency treatment and care takes priority over segregation.

Actions to be taken within individual ward areas when same sex bays cannot be provided:

- Review current patient placements within bays and single rooms.
- Identify and move any patients within the ward to maintain segregation of men and women.
- Inform the patient before his/her admission to a mixed sex bay and document same in the patient record.
- Reassure the patient and relatives/carers that the situation will be kept under review and that as soon as facilities are available the patient will be moved to same sex accommodation and document same in patient record.
- Ensure patients have access to segregated toilets and washing facilities which are clearly signposted.
- Enhance privacy through use of additional screens or area dividers.
- Avoid giving personal care in the bay whenever possible and use discretion when there is a need to discuss sensitive information.
- Continue to hold safety briefings and handover reports until issue resolved.