# Guideline Reference Respect and Dignity

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<tr>
<th>Ratified by &amp; date</th>
<th>Neonatal Network Board</th>
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## Related documents

<table>
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<th>References</th>
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<tr>
<td>Department of Health (2010)</td>
</tr>
<tr>
<td>NMC Code:</td>
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<tr>
<td>RCN 2008</td>
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<td>NHS</td>
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- Parent satisfaction surveys
- CESDI 27/28 Recommendations
- Audit results related to policies/standards.
- Educational audit and student placement feedback.
- Recognition of parental / professional concerns
- Awareness of neonates cues
- Increasing evidence base.
1.0 Aim of Guideline Framework.

To provide a framework that ensures all people are treated with dignity and respect as stipulated in national and professional recommendations. Where evidence does not exist, currently accepted ‘best practice’ will be offered as the alternative choice when formulating evidence base care.

2.0 Scope of Guideline Framework

The guideline is a reference for all persons receiving care or working within South Central and is a resource tool for all neonatal and maternity staff within South Central Neonatal Units.

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<th>North Network</th>
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<tr>
<td>Milton Keynes General Hospital, NHS Foundation Trust</td>
<td>Dorset County Hospital NHS Foundation Trust</td>
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<td>Oxford University Hospitals NHS Trust, both John Radcliffe Hospital site &amp; Horton site.</td>
<td>Hampshire Hospitals NHS Foundation Trust, Basingstoke site &amp; Winchester site</td>
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<tr>
<td>Buckinghamshire Healthcare NHS Trust, Stoke Mandeville site.</td>
<td>Poole Hospitals NHS Foundation Trust</td>
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<td>Royal Berkshire NHS Foundation Hospital</td>
<td>University Hospital Southampton NHS Foundation Trust</td>
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<td>Heatherwood &amp; Wexham Park Hospitals NHS Foundation Trust</td>
<td>Salisbury NHS Foundation Trust</td>
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<td>IOW NHS Primary Trust, St Mary’s Hospital site</td>
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<td>Portsmouth Hospitals NHS Trust</td>
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<td>Western Sussex Hospitals NHS Trust, St Richard’s site.</td>
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3.0 Background

Providing dignified care is at the very heart of nursing and it is the responsibility of everyone that works within the team, regardless of their role, grade or discipline. It is a key element in the NMC code of conduct.

The RCN states

“Dignity is, effectively, everybody’s business and everyone can influence for dignity in care”.

People within the care of the NHS must be able to trust the carers with their health and their welfare. Not being accorded dignity makes people feel devalued, lacking in control and comfort. They may also lack confidence, making them unable to make decisions for themselves, and thus feel humiliated, embarrassed and ashamed.

Studies have shown that the maintenance of patient dignity is highly valued by patients and the promotion of dignity in care is strongly endorsed by government and professional bodies. This should be parents as well as the baby.
Providing dignity in care centres on three integral aspects: respect, compassion and sensitivity. In practice, this means:

- Respecting baby, parents/carers diversity and cultural needs; their privacy - including protecting it as much as possible in large, open-plan hospital wards; and the decisions they make
- Being compassionate when a baby, parents and carers and/or their relatives need emotional support, rather than just delivering technical nursing care
- Demonstrating sensitivity to baby, parents/carers needs, ensuring their comfort. (RCN 2010)

4.0 Guideline Framework

4.1 Education And Training Of Health Care Professionals

A Network compliant education and competency validation in privacy & dignity shall be conducted during orientation and at regularly defined intervals throughout employment for all nurses delivering care to infants, parents and carers:

- All staff receive training on privacy & dignity during orientation to the Unit
- Staff knowledge base about privacy & dignity is assessed and evaluated within the clinical area
- Evidence based educational resources are available to all staff
- Multi-professional updates occur on an annual basis
- An identified member of the team ensures issues involving privacy & dignity are regularly reviewed, and changes implemented.

4.2 Family involvement

Parents/carers are encouraged to participate and provide care to preserve privacy & dignity.

- Parents know who is involved in the care of their baby and the role they play
- Current written information for parents about privacy and dignity is available and has been discussed with them.
  - Unit philosophy
  - Unit booklet includes privacy & dignity
- Parents contribute to the development of written information.
- Parents are encouraged to participate and provide care to preserve privacy and dignity.
- Parents are made to feel an integral part of the decision-making process involving privacy and dignity.
- Parents have the opportunity to discuss any concerns about the management of their infants’ privacy and dignity with the nurse caring for their baby or a senior nurse.
- Parents/carers’ must be given consistent information to enable them to participate in their infants’ care.

4.3 Environment

Infants are cared for in an environment that actively encompasses their families’ values and beliefs and promotes privacy and dignity in the best interests of the baby.

- Family centred care is offered in a manner that respects the family’s wishes and beliefs.
- Information pertinent to the family/baby’s needs is given to other accredited health care professionals.
- The Unit philosophy promotes an individualised, developmental, family-centred care approach.
  - Each baby should have a plan of care documented.
  - Each cot space should meet infection control guidance on spacing.
  - Availability of items to maintain privacy during procedures
  - Dress baby appropriately to protect their modesty dependent on clinical condition lines etc
  - A designated room is available to discuss issues in complete confidence.
Mother and baby room is available to enable parents to stay when necessary
- Facilities for parents are available.

- Awareness of cultural and religious needs of the family.
  - Links with Chaplaincy service and other multi-faith organisations
  - Links to a trained counselor.

4.4 Guideline and audit
There is a collaborative, multi-professional evidence based guideline ratified by the network for privacy & dignity.

- The guideline is evidence/research based and current
- The guideline is reviewed regularly according to Trust policy
- Compliance to the guideline is audited and non-compliance actioned regularly according to Trust policy
- The guideline should include
  - The role of parents in privacy & dignity.
  - The documentation requirements.

4.5 Documentation
Documentation ensures good communication and the implementation of agreed strategies

- Proposed actions are clearly recorded and actions documented.
- Plan of Care to be regularly updated.