PHSSL CARE LIMITED
CONTROLLED POLICY

D06 – DIGNITY, PRIVACY, CHOICE AND INDEPENDENCE POLICY

Policy Reference	D06	**Version**	1.0
Policy Owner	PHSSL Care Limited	**Approved By**	Lade Awosika, Director
Approval Method	Approved electronically	**Approval Date**	September 2026
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Applies To	All PHSSL Care Limited staff, workers and relevant contractors	**Supersedes**	New policy

1. Purpose

PHSSL Care Limited is committed to ensuring that every person receiving care or support is treated with dignity, respect and compassion; has their privacy protected; is supported to make meaningful choices; and is enabled to retain or develop independence wherever reasonably possible. This policy sets the standards expected of all staff when delivering person-centred care in a person's own home or other agreed community setting.

2. Scope

This policy applies to all employees, agency workers, temporary workers, volunteers, students and relevant contractors acting on behalf of PHSSL Care Limited. It applies throughout assessment, care planning, delivery, review, communication, record keeping and any interaction with people using the service, their families, representatives and advocates.

3. Policy Statement

PHSSL Care Limited will place the person at the centre of their care. Staff must recognise each person as an individual with their own history, identity, culture, beliefs, relationships, preferences, strengths, abilities and goals. Care will not be delivered in a task-focused or institutional manner.

- Treat every person courteously, compassionately and without discrimination.
- Protect privacy during personal care, conversations, correspondence, records and use of the person's home.
- Offer genuine choices and provide information in a form the person can understand.
- Seek valid consent and respect a person's right to refuse or withdraw consent.
- Promote independence by doing with the person rather than automatically doing for the person.
- Support reasonable positive risk-taking while managing identified risks safely.
- Respect relationships, cultural identity, religion or belief, communication needs and protected characteristics.
- Escalate and report any practice that compromises dignity, privacy, autonomy or safety.

4. Legal and Regulatory Framework

This policy should be read and applied alongside current legislation, regulation and guidance, including:

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, particularly Regulation 9 (Person-centred care), Regulation 10 (Dignity and respect), Regulation 11 (Need for consent), Regulation 12 (Safe care and treatment), Regulation 13 (Safeguarding) and Regulation 17 (Good governance).
- Mental Capacity Act 2005 and its Code of Practice.
- Equality Act 2010.
- Human Rights Act 1998.
- Data Protection Act 2018 and UK GDPR.
- Care Act 2014, where applicable.
- Current Care Quality Commission assessment framework and guidance.

5. Dignity and Respect

Staff must preserve dignity at all times, including when a person is unwell, asleep, distressed, has impaired cognition or communication, or requires intimate support.

- Address the person by their preferred name and communicate respectfully.
- Knock, announce presence and wait appropriately before entering private areas.
- Explain what is going to happen before providing care and check agreement throughout.
- Avoid unnecessary exposure during washing, dressing, continence care or other intimate support.
- Use towels, clothing, doors, curtains or screens appropriately to maintain dignity.
- Never discuss a person in a demeaning, infantilising, mocking or dismissive way.
- Respond promptly and sensitively to pain, discomfort, embarrassment or distress.
- Where reasonably practicable, respect preferences about who provides intimate or personal care.

6. Privacy and Confidentiality

- Care discussions should take place where they cannot unnecessarily be overheard.
- Personal information must only be accessed, used or shared for legitimate care, safety or legal purposes and in accordance with PHSSL confidentiality and data-protection procedures.
- Staff must not read personal correspondence, access devices, open cupboards or enter rooms without permission unless there is a lawful and necessary reason.
- Photographs, video or audio recordings must not be taken on personal devices. Any authorised recording must follow company policy, consent requirements and data-protection law.
- Family members and visitors do not automatically have a right to confidential information. The person's wishes, lawful authority and best-interests requirements must be considered.

7. Choice and Control

People must be supported to exercise as much choice and control over their lives and care as possible.

- Offer choices about routines, meals, clothing, activities, personal care, timing of support and other day-to-day matters wherever practicable.
- Provide sufficient information, time and communication support to enable informed decisions.
- Record important preferences in the care plan and ensure staff know how to follow them.
- Respect a capacitous person's decision even where staff would have made a different choice, provided staff do not deliver unsafe or unlawful care.
- Record significant refusals or changes in preference and escalate where refusal creates a material risk to health, safety or wellbeing.
- Involve advocates, representatives or people important to the person where the person wishes this or where lawful decision-making arrangements require it.

8. Promoting Independence

- Identify what the person can do for themselves and what support is genuinely required.
- Encourage the person to retain existing skills and, where appropriate, regain skills after illness or hospital admission.
- Allow adequate time for the person to complete tasks rather than taking over for convenience.
- Use agreed equipment, adaptations and mobility support safely to maximise independence.
- Support access to family, friends, community, meaningful activities and ordinary daily life in accordance with the person's wishes and assessed needs.
- Balance independence with proportionate risk management, documenting agreed measures in the care plan and risk assessments.

9. Consent, Mental Capacity and Best Interests

Consent is an ongoing process and must be sought before care or treatment is provided. A person may change their mind or withdraw consent.

- Do not assume that a person lacks capacity because of age, diagnosis, disability, appearance, behaviour or an unwise decision.
- Where there is reason to doubt capacity for a specific decision, follow the Mental Capacity Act 2005 and PHSSL's Mental Capacity and Consent Policy.
- Provide practicable support to help the person make their own decision before concluding that they cannot.
- Where a person lacks capacity for the specific decision, any decision or action must be lawful, necessary, proportionate and in the person's best interests, with appropriate consultation and documentation.
- Any restriction must be the least restrictive option reasonably available.

10. Equality, Culture, Identity and Relationships

- Respect personal, cultural, religious, spiritual, linguistic and lifestyle preferences.
- Make reasonable adjustments for disability and communication needs.
- Do not discriminate, harass or victimise a person because of a protected characteristic.
- Respect the person's important relationships, family life and social networks, subject to their wishes and safeguarding considerations.
- Care planning and staff allocation should consider relevant preferences and needs, including sensitive personal-care requirements, where reasonably practicable.

11. Supporting Children and Young People

Where PHSSL Care Limited is lawfully providing support to a child or young person within its approved service scope, staff must promote dignity, privacy, participation and age-appropriate choice while recognising parental responsibility, safeguarding duties and the child or young person's evolving ability to understand and make decisions. Any concern about abuse, exploitation, neglect or unsafe practice must be managed under the Safeguarding Policy without delay.

12. Staff Responsibilities

- Read, understand and follow this policy and the individual care plan.
- Complete required training and apply learning in practice.
- Maintain professional boundaries and respectful communication.
- Record care accurately, including relevant choices, refusals, concerns and actions taken.
- Report poor, degrading, discriminatory or undignified practice immediately through safeguarding, whistleblowing or management routes as appropriate.
- Seek guidance from a manager whenever unsure how to balance choice, privacy, independence and safety.

13. Management Responsibilities

- Ensure care plans and risk assessments reflect individual preferences, privacy needs, communication needs, abilities and desired outcomes.
- Provide suitable induction, supervision, competency assessment and refresher training.
- Monitor practice through care reviews, observations, audits, feedback, complaints, incidents and safeguarding information.
- Act promptly on concerns and identify learning or service improvements.
- Ensure staffing arrangements support continuity and person-centred care as far as reasonably practicable.

14. Concerns, Complaints and Safeguarding

A person, relative, representative or staff member may raise a concern if dignity, privacy, choice or independence is not being respected. Concerns will be handled openly and without retaliation. Where the concern indicates abuse, neglect, discriminatory abuse, improper treatment or a risk of harm, safeguarding procedures must be followed immediately. Complaints will be managed under the PHSSL Complaints, Concerns and Compliments Policy.

15. Monitoring and Audit

Compliance with this policy will be monitored through care-plan reviews, spot checks, supervision, staff competency processes, service-user and family feedback, complaints, incidents, safeguarding reviews and governance audits. Findings will be documented and actions tracked to completion.

16. Related PHSSL Policies

- Person-Centred Care and Care Planning Policy
- Mental Capacity and Consent Policy
- Safeguarding Adults and Children Policy
- Equality, Diversity and Inclusion Policy
- Data Protection and Confidentiality Policy
- Complaints, Concerns and Compliments Policy
- Whistleblowing Policy
- Moving and Handling Policy
- Risk Assessment and Management Policy
- Professional Boundaries / Code of Conduct

17. Review and Document Control

This controlled policy will be reviewed at least annually, or sooner where legislation, regulatory guidance, organisational practice, incidents, audit findings or learning indicate that an earlier review is required. Printed or locally saved copies are uncontrolled unless specifically issued and recorded as controlled copies.

Approved by	Lade Awosika
Position	Director
Approval method	Approved electronically
Approval date / next review	September 2026 / September 2027