



Wellbeing for Life Dignity and Respect



Learning Outcomes

- Explain what is meant by Dignity and be familiar with the “10 Dignity Do’s.”
- Understand how to recognise whether someone is being treated with dignity and respect.
- Consider your own behaviour and how to ensure the “little” things you do can make a difference to someone’s dignity.



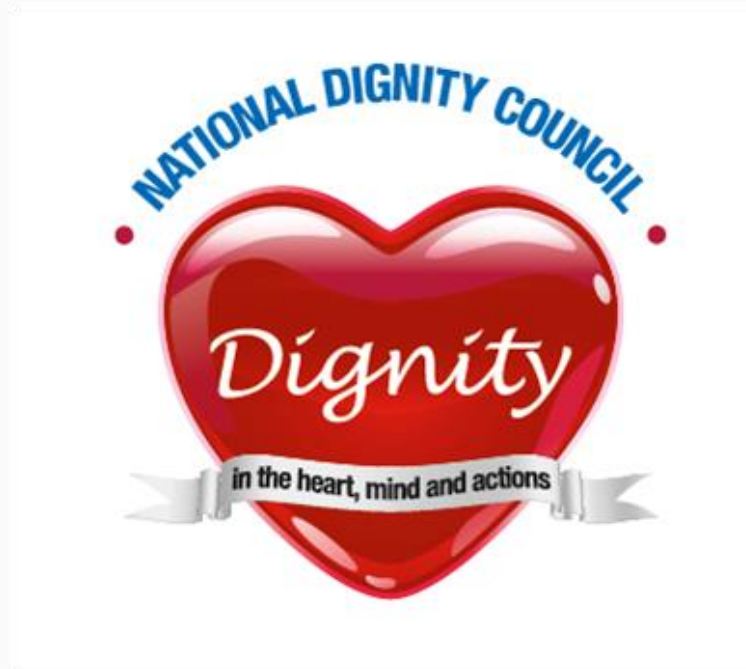
An Introduction to Dignity and Respect

Philosophy of Support – *“Putting Dignity at the Heart of Everything you Do”*

- We continue to read and hear about situations where services fail to preserve the dignity of people in many aspects of their care and support.
- This has been spectacularly highlighted in the mistreatment of adults with a learning disability by staff at Winterbourne View hospital.
- Tragically there was a similar story in Staffordshire where the failures of Mid-Staffordshire NHS Foundation Trust hospital resulted in patients being denied basic healthcare - “Privacy and dignity, even in death, were denied” (Mid-Staffs public enquiry: executive summary Feb 2013).
- This must not continue and we need to do all we can to make sure everyone is treated with dignity and respect.



Dignity in Care Campaign



The Dignity in Care Campaign (<https://www.dignityincare.org.uk/>) was launched in November 2006, and aims to put dignity and respect at the heart of UK care services. The information in this module has been based on the resources provided by the campaign. The campaign aims to raise awareness of dignity and inspire people to take action. We want to inspire you to take action and make a difference to others.



What is Dignity?

Dignity covers all aspects of daily life, including respect, privacy, autonomy and self-worth. The National Dignity Council.

Dignity can be difficult to define; however people know when they have not been treated with dignity and respect.

One of the fundamental standards from CQC is about Dignity and Respect. CQC expects that: “You must be treated with dignity and respect at all times while you're receiving care and treatment”.

This includes making sure:

- You have privacy when you need and want it.
- Everybody is treated as an equal.
- You are given any support you need to help you remain independent and involved in your local community.

Thinking about the impact of not including Dignity into everything that you do...



Think about a time when you have visited someone in hospital.

How did you know they were being treated with dignity and respect? What was being said and done that made you believe they were being treated with respect and dignity?

Write down what you saw and heard.

Now write down what was being said and done that meant the person was **not** being treated with respect and dignity:



"I'm here..." "I'm Here...."

**Louise Appleton from Hartlepool wrote a poem called "I'm here..."
"I'm Here...."**

*I am still a person although my actions and words may not make sense
It's just something's seem complicated to me, doesn't mean that I'm stupid or dense
I ask you don't treat me as another number a person in care
I'm a person who needs to be treated with respect and dignity that's fair
I am frightened and confused and not sure what's going on
So please don't assume that my faculties' have gone
There are times when I can recognise special people and their faces
And remember special thoughts and memories of times and places
I need your help, your care and complete reassurance
To know that I can spend the rest of my days happy getting through this
I was like you once, you know, and wish I was still today
But unfortunately life has dealt the cards and I've ended up this way
So please understand I'm not stupid, nor a child or mad
I'm just a person who is confused, frustrated and sad
And so I am asking please be there for me and make me smile
Make the rest of my life happy, special and worth while*

– Louise Appleton 2010



10 Dignity Do's

The Dignity in Care Campaign has identified a “10 Point Dignity Challenge” (called the 10 Dignity Do's).

The challenge describes values and actions for all services to ensure that they respect people's dignity.

To promote dignity at the heart of everything you do, you must:

1. Have a zero tolerance of all forms of abuse
2. Support people with the same respect you would want for yourself or a member of your family
3. Treat each person as an individual by offering a personalised service
4. Enable people to maintain the maximum possible level of independence, choice and control
5. Listen and support people to express their needs and wants
6. Respect people's right to privacy
7. Ensure people feel able to complain without fear of retribution
8. Engage with family members and carers as care partners
9. Assist people to maintain confidence and positive self-esteem
10. Act to alleviate people's loneliness and isolation.



How do you make sure that the support you provide follows the “10 Dignity Do’s”?

There are 8 main factors that promote dignity and should always be present in all support and care. These are:

1. **Choice and control** – making choices about life and everyday activities.
2. **Communication** – listening to what people have to say (however they do this); using respectful language with and about people (*Please see their Communication Profile*)
3. **Eating and Nutrition** – a choice of what to eat and drink is available; support with eating and drinking is available when needed.
4. **Pain Management** - no-one is expected to be in pain or distress; they have the right medicine and pain management techniques to help control the pain; how they show/tell you they are in pain is recognised.
5. **Personal Care** – particularly intimate care; support in a public situation; importance of choice and control.
6. **Practical Assistance** – “just the right amount” of support to promote and maintain independence
7. **Privacy** – respecting personal space; considering confidentiality of information including written records
8. **Social Inclusion** – keeping in touch with family and friends; meeting new friends; being involved in social activities.



Choice and Control

Making choices about life and everyday activities.

Aspects to consider in practice:

- Ensure that people are fully involved in every decision about their care and support including personal decisions (such as what to eat, what to wear and what time to go to bed), and wider decisions about their service such as recruiting new staff.
- Follow **The Mental Capacity Act 2005** and the principle that you must not assume that people are not able to make decisions.
- Value time spent supporting people with decision-making as much as the time spent doing other things.

Choice and Control

- Provide opportunities for people to participate as fully as they can at all levels of their life; including learning new skills and having new experiences.
- Make sure the person is at the centre of everything that happens about them.



- Make sure they have access to jargon-free information about services when they want or need it.
- Identify ways to promote the person's independence.



Communication

Listening to what people have to say (however they communicate this); using respectful language with and about people.

Things to consider in practice:

- Always use the communication method that makes sense to the person
- How you speak to others has a big impact on the person's sense of self-worth and dignity
- Ask people how they prefer to be addressed and respect their wishes, do not use familiar names that their family use unless the person would want you to
- Do not make assumptions based on the person's age, gender, ability, culture – or any other factor
- Ensure people are offered 'time to talk', and a chance to voice any concerns or simply have a chat
- Be creative to find ways to get the views of people
- Respect their contributions by acting on their ideas and suggestions.

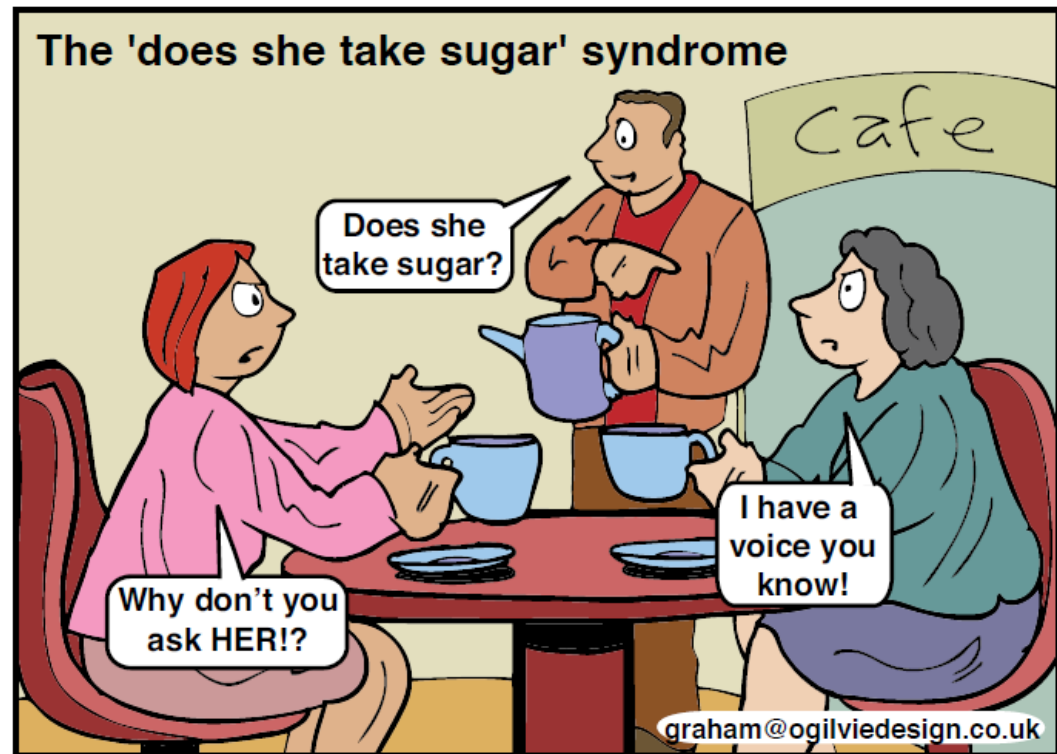
(Please see the person's Communication Profile)

Eating and Drinking

A real choice of what to eat and drink is available; support with eating and drinking is available when needed.

Things to consider in practice:

- Make sure their person centred support plan includes their dietary needs and preferences and details any assistance they need at mealtimes – ask the person if you are not sure.





Eating and Drinking

- Spend time to make food look appetising. Keep different foods separate to enhance the quality of the eating experience – especially when the food needs to be pureed.
- Allow people time to eat; they should not be rushed.
- Use serviettes, not bibs, to protect clothing.
- Offer finger food to those who have difficulty using cutlery.
- Provide adapted crockery and cutlery to enable people to support independence.
- Be careful not to make assumptions about a person's preferences on the basis of their cultural background – people should be asked what their preferences are.
- Involve people in their meal preparation.
- Encourage people to drink regularly throughout the day. The Food Standards Agency recommends a daily intake of six to eight glasses of water or other fluids.



Pain Management

No-one should be in pain or distress; they have the right medicine and pain management techniques to help control the pain; how they show/tell you they are in pain is recognised.

Things to consider in practice:

- Make sure their person centred support plan describes how they tell and/or show you they are in pain or distress.
- Use a learning log to record different ways to help manage pain and identify which is the most effective, for which type and cause of pain for the person.
- Challenge assumptions that people with a learning disability do not experience pain – this is not true.
- Be aware that some people are not able to show you they are in pain or distress in a way that you will recognise.
- Be alert to the fact that some people may not want you to know they are in pain or distress.
- Do not make assumptions about someone's level of pain – every person experiences pain and the tolerance of pain differently.

In MacIntyre, we also have the Pain and Distress Assessment Tool, externally there is a document called the Disability Distress Assessment Tool (DISDAT) – all found on the Health Noticeboard.



Personal Care

Particularly intimate care; support in a public situation; importance of choice and control.

Aspects to consider in practice:

- The support that the person wants and needs.
- Understand their preferences and wishes.
- Match staff to the person, for example wishes around gender.
- Whether this type of support is new to the person as a result of a new health condition, eg broken arm or a deterioration in an existing health condition e.g. dementia.
- That the person does as much as possible for themselves and is involved fully in their support.
- You understand not only the physical but the emotional support the person needs
- Look at all aspects of hygiene and what is important to the person.

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Personal Care – Case Study Example

You support a young lady called Julia to participate in a community arts project. She joined two weeks ago and is enjoying meeting new people as well as learning new skills.

Julia's person centred support plan describes that she needs to be reminded to go to the toilet regularly so that she is continent. Julia has a goal to become independent in using the toilet and she has agreed to this support and has so far achieved her goal of no longer wearing continence pads.

When you both arrived at the community hall, you reminded Julia to use the toilet, she declined as she wanted to go and say hello to everyone. During the first break you again reminded her to use the toilet and why – she again said no.

Once the group has restarted you notice that another group member is staring at Julia and seems to be whispering to another group member. You realise that Julia has become incontinent and that there is a puddle on the floor.

**Talk as a team: What would you do? How do you respond and maintain Julia's dignity?
How do you maintain Julia's dignity once in the bathroom? What do you need to consider? How do you respond to the group members who have now noticed?
How could you avoid this in the future?**



Practical Assistance

Practical Assistance - “just the right amount” of support to promote and maintain independence.

Things to consider in practice:

- A small amount of support can have a big impact on the person’s wellbeing, self- respect and their dignity.
- Be clear on the exact type of support the person needs, for example a visual prompt, physical prompt, hand under hand.
- Find ways to enable the person to do things themselves.
- Ask for advice from an Occupational Therapist or a community independence centre – there are many small devices that can make a difference.
- Look into other ways the person can receive their support and who is the best person to do this.



Privacy

Respecting personal space; considering confidentiality of information including written records.

Things to consider in practice:

- Ensure only those who need information have access to people's personal records or financial information; this includes sharing verbal information about them.
- Use person centred risk assessments to respect privacy when people have personal and sexual relationships.
- Obtain the person's permission before entering their personal space, make sure you understand how they show or tell you.
- Make sure people are able to have private conversations and telephone calls.
- Consider issues of privacy if a person requires close monitoring or observation.
- Continence – or rather incontinence - is a real threat to dignity. Use routines and habits to know when to support someone to either use the toilet or be changed. Be sensitive where this is a new area of support for the person.



Social Inclusion

Keeping in touch with family and friends; meeting new friends; being involved in social activities.

Things to consider in practice:

- Consider how to involve the person in local events.
- Support people to meet others and have a range of relationships.
- Identify solutions to any transport issues so that people are able to participate in the wider community.
- Build links with community projects to increase the opportunity for social contact between people from different generations.
- Identify, respect and use people's skills to develop a wide network of people which includes shops and pubs, sporting and cultural opportunities.
- Respect the person's preferences for social contact – some people are happier with a small network of people.
- Provide support to have fun with a network of others, including people in a similar position to me.



How do you know if someone is being respected? Case Study Example

MacIntyre's Great Interactions™ describe how the people we support experience our behaviours – the way we interact with them all day every day.

Read the story below and highlight all the examples of poor practice that do not show dignity and respect:

Ted Brissett is a 79 year old man. He has a learning disability and has recently had a stroke. Prior to the stroke he had his own flat and received 7 hours of support each day. Since the stroke he is less able to look after himself as the stroke has significantly affected his right arm and leg; he also finds it difficult to speak.

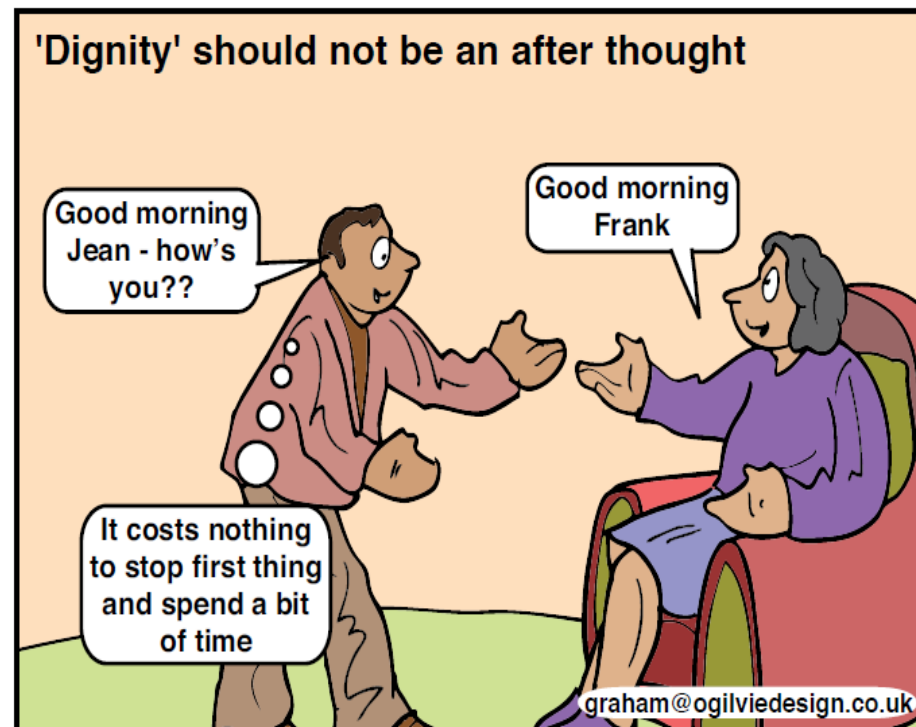
A new member of staff introduces herself to Ted – “You’re Teddy? What a lovely name.” She pushes his wheelchair out of his bedroom into the bathroom. “You sit there and I will wash your face”. She calls out to others as they walk past the bathroom door which is ajar. She tells him there is no time for a proper wash as she is busy and needs to feed everyone.

At the dining room table she passes him a plate of cereal and a cup of coffee. Ted does not eat or drink any of his breakfast, and sits quietly with tears running down his face.

**Talk as a team: What would you do? How do you respond and maintain Ted’s dignity?
How could you avoid this in the future?**

What can you do?

- Be a champion for Dignity.
- Be passionate about dignity – it is a human right not an optional extra.
- To be truly person centred, dignity must be at the heart of everything you do.
- Speak up about dignity – don't tolerate disrespectful behaviour.
- Give feedback on health services – good and bad.
- Give random acts of kindness – do something for someone else.
- The small things matter and have a big impact on others.





Heather Macken – I Laugh With You Sometimes

Heather Macken used a personal experience to inspire her to write this poem for Dignity in 1994.

I Laugh With You Sometimes

*I laugh with you sometimes
and say foolish things,
I try to be brave
and think you won't notice,
I am crying inside.
My words muddle up,
though I know what I mean
I get so confused
I wish I could scream!
I am crying inside.
I am in the wrong body,
my mind's not my own.
I live in a large house
and long for my home.*

*I am crying inside.
I forget the last minute
"What was it you said?
I remember my childhood
but can't find my bed!
I am crying inside.
Where are my family?
my Father my Mother?
all the friends I have known
where has time gone to?
I am crying inside.
I long for my last bed
my pillow the grave.
yet I cling on, I am so afraid.
"Won't somebody hear me!"
I am dying.
I am crying inside.'*

-Heather Macken 1994.



Produced by the MacIntyre Dementia Project with the support of an Innovation, Excellence and Strategic Development Fund Award from the Department of Health

A special thank you to Beth Britton, and for all her hard work on the MacIntyre Dementia Project.

<https://www.bethbritton.com/>

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