

**Guidance Notes to assist with completing the Dignity Award,
Option 1**

derbyshire.gov.uk/dignity

The Dignity Campaign – National Position

Launched nationally by the Department of Health in November 2006, the Dignity in Care Campaign aims to put dignity and respect at the heart of services that care for people.

Thousands of people have now joined the campaign as Dignity Champions. They are part of a nationwide movement, working individually and collectively, to ensure people have a good experience of care when they need it.

The campaign is about winning hearts and minds, changing the climate of care services and placing a greater emphasis on improving the quality of care and the experience of citizens using services including NHS hospitals, Medical Practices/Surgeries, Dentists, Pharmacies, Opticists, Community services, Care homes and Home Support Services etc.

It includes action to:

- **Raise awareness** of dignity in the care of others;
- **Inspire** local people to take action;
- **Share** good practice and give impetus to positive innovation;
- **Transform** services by supporting people and organisations in providing dignified services;
- **Reward** and recognise those people who make a difference and go that extra mile.

Events have been held around the country asking people what dignity in caring for people means to those providing services. This resulted in the development of the national 10 point Dignity Challenge. The challenge depicts what high quality services that respect people's dignity should include. The award format below has 10 standards based on the national challenge.

The Derbyshire Dignity Campaign

This aims to ensure: that staff teams in Derbyshire get started on the dignity campaign in the following ways:

- **Registering a Champion:** making sure a Champion from every service team is registered on the national register. Champions receive updates and ideas about promotion of dignity. In Derbyshire we want you to be active in your Champion role as described on the website.
- **Team Involvement:** engaging all the staff team in working for the dignity award; taking time out as a team to check their practice against the 10 point dignity challenge.

The Derbyshire Dignity Award

- **What we are looking for: Evidence! Evidence! Evidence!** In the guidance below we have shown the sort of evidence the assessors are looking for. This is a guide which assessors use during assessment sessions.
- **Always give examples** - short written examples of how, when, whom and where will enhance your application.
- **Cross Referencing:** If you quote an example which also gives evidence for another standard it is helpful to cross reference.
- **No attachments please:** Just write your evidence on the Dignity Award format. The boxes expand.-no photocopies.
- **Assumptions:** Do not assume the assessor knows your service. Please avoid jargon and use of initials.
- **4th Question - Is this the best you can do?** Each of the 10 points ends with a question, is this the best we can do? If the answer is 'no' list the actions you intend to make. It is key aim of the Dignity Award for improvements to be identified.
- **It's About Your Service:** The 10 point dignity challenge is generic but your application **must** reflect how your service depending on its purpose, contributes to promotion of dignity.
- **Not Applicable** If you are not able to provide evidence because of the sort of service you provide, say so, but think of the outcome more widely as usually we believe the service you provide will relate in some way to the 10 point challenge.

Assessment Ratings

Assessors are colleagues who volunteer time at monthly assessment sessions. No application 'fails' but they may seek further evidence on some points through a resubmission. For each standard your evidence will be rated as either:

- **Fully Evidenced** - complete answer with clear evidence.
- **Partially Evidenced** – answer missing some evidence or clarity.
- **Limited Evidence** – little relevant evidence

NB Therefore an example of practice as evidence is really important for the assessor.

Further Support Contacts

Please ask for assistance and we will respond

- Chris Whittaker (Co-ordinator Derbyshire Dignity Campaign) chris.whittaker@derbyshire.gov.uk or Tel. 01629 537613
- Michelle Grant michelle.grant@southernderbyshireccg.nhs.uk or Tel: 07909 097615.
- Sam Pessoll spessoll@nhs.net or Tel : 0115 855 4032
- Tracy Cartwright tracy.cartwright@nhs.uk or Tel : 01773 525074

DERBYSHIRE DIGNITY CAMPAIGN AWARD

(Download a copy from the website and boxes will expand as you type)

SERVICE NAME:

(It is helpful too to give a couple of sentences here about the service provided, for example 'we are a 20 bed residential home for older people' this helps the assessors understand the service a bit better)

SERVICE CONTACT PERSON:

DATE SUBMITTED:

NAME OF YOUR REGISTERED DIGNITY CHAMPION(S):

STANDARD		EVIDENCE – ideas for what you might provide
1. Have a zero tolerance of all forms of abuse		
(1.1)	Give an example of positive steps you have taken, or those which would be taken, where potential safeguarding concerns exist about a person.	<ul style="list-style-type: none">• Example (anonymised) where potential safeguarding issues reached a satisfactory conclusion• Team know the difference between abuse v cause for concern and complaint v safeguarding• Example of support provided for victim and alleged perpetrator (if the latter uses the service)
(1.2)	Explain what training your team receives on safeguarding and how is this updated.	<ul style="list-style-type: none">• Type/depth of training provided and by whom• How often training is updated• How safeguarding issues are shared in the team to maintain awareness and learn lessons

STANDARD		EVIDENCE – ideas for what you might provide
(1.3)	Explain how safeguarding policy offers a strong foundation for day to day work.	<ul style="list-style-type: none"> • Service has an up to date policy cascaded to staff who read/understand what to do • Policy of service is consistent with Derbyshire/Derby City Adult Safeguarding Policy & Procedures • Available so staff can access the policy • Publicised so patients/ clients know about it • Staff have identified and notified concerns to managers
(1.4)	For this standard when asking ‘is this the best we can do?’ please list any improvements or changes you will make	<ul style="list-style-type: none"> • Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
2. Support people with the same respect you would want for yourself or a member of your family.		
(2.1)	How do you ensure that people who use your service are given information appropriate to their needs?	<ul style="list-style-type: none"> • How initial contact includes assessment of how to communicate with the person • Full range of information options available e.g. ‘easy read’ formats; visual or hearing impairment, learning disability, translation. • How information is displayed

(2.2)	Explain how the team manager promotes a culture of dignity at all times.	<ul style="list-style-type: none"> • How managers set out a clear framework of high standards for dignity e.g. expectations about attitude and compassion; training; whistle blowing and encouraging / acting on client feedback • How managers model dignity through their own practice • How managers satisfy themselves standards are met e.g. use of language and behaviour; observation; team meetings • How this culture encourages positive questioning and reflection
(2.3)	How can you evidence that people who use your service are involved in how it is run?	<ul style="list-style-type: none"> • Examples of how day to day patients/ clients are meaningfully engaged in how things are running. • Examples of how patients/clients influence changes • Personalisation reflected in overall team practice • How staff too are engaged in how the service is run • Similar to 10.3
(2.4)	For this standard when asking ‘is this the best we can do?’ please list any improvements or changes you will make.	<ul style="list-style-type: none"> • Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
3. Treat each person as an individual by offering support with the same respect you would want for yourself or a member of your family		
(3.1)	How do you enable people to make choices?	<ul style="list-style-type: none"> • How staff are trained/ supported to have a good understanding of what giving choice and personalised service means. • How people are involved in expressing preferences? • Support, care or treatment plans providing direction / guidance on the person's choices • Description of typical range of choices • Example where choice has been enabled creatively under challenging circumstances • How information is collated and updated to enable people make choices
(3.2)	Give an example of how people would be/ have been involved in initial and on-going risk assessment.	<ul style="list-style-type: none"> • How the person has choice to take risks/ contributes to plans which might include management/ mitigation of possible consequences • Understanding of positive risk-taking • Leaflets/ information shared etc. detailing possible risks • Who completes risk assessments (where applicable) • How assessments are recorded and reviewed • Specialist assessor's used or other external advice sought where applicable?

(3.3)	Explain how your team understands what diversity is and addresses this within a personalised service?	<ul style="list-style-type: none"> • How the service addresses diversity e.g. ethnicity; gender; by occupation - farming/ex. mining etc. • Describe staff training in diversity and equal opportunities. • How often? • Service involvement in and/or holding cultural events? • What links does your service have with wider groups or communities?
(3.4)	For this standard when asking 'is this the best we can do?' please list any improvements or changes you will make	<ul style="list-style-type: none"> • Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD	EVIDENCE - ideas for what you might provide	
4. Enable people to maintain the maximum level of independence, choice and control		
(4.1)	Using an example explain how your service actively promotes the independence of people.	<ul style="list-style-type: none"> • Evidence of involving people in their own assessments. • 'Can do' culture encouraged. • Examples of how a people's independence is valued e.g. appointment times; location of meetings / contacts ; process in place for negotiating degree and type of support • Example of how a person regained some independence through having a service

(4.2)	Using an example explain how everyone has a plan to address their individual needs and choices.	<ul style="list-style-type: none"> • Example of how a person’s abilities around their independence, choice and control is agreed • Personal support/treatment/care plans with positive outcomes? • Staff read and consistently follow plans?
(4.3)	Describe how the plan is a working document which is reviewed regularly.	<ul style="list-style-type: none"> • How individual plans are reviewed/updated • Who does this? • How changes are communicated • Any good examples of personal support planning
(4.4)	For this standard when asking ‘is this the best we can do?’ please list any improvements or changes you will make.	<ul style="list-style-type: none"> • Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
5. Listen and support people to express their needs and wants		
(5.1)	Explain with an example, the alternative methods of communication used with people who receive your service.	<ul style="list-style-type: none"> • How you engage with people to make person-centred decisions based on informed choice • Attention given to ensuring contact occurs in appropriate settings which support communication • Sufficient time is given to providing support and listening • Example of methods used to overcome potential communication barriers. • Any specialist equipment or staff with skills in this area? • How/ where would you get help to communicate if needed • Similar to 2.1
(5.2)	Explain training provided which enables staff to communicate effectively with people.	<ul style="list-style-type: none"> • Detail training which Staff access to improve their communication skills with people who require support to communicate or understand • What mechanism do you have to ensure training is put into practice?

(5.3)	Staff supervision actively supports dignity in the day to day service with people.	<ul style="list-style-type: none"> • How regularly supervision is held – 1:1 or group • Dignity issues a standard item in supervision • How day to day practice supports dignity • Similar to 2.2
(5.4)	For this standard when asking ‘is this the best we can do?’ please list any improvements or changes you will make.	<ul style="list-style-type: none"> • Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
6. Respect people's right to privacy		
6.1)	Explain, with an example, how team practice ensures appropriate privacy.	<ul style="list-style-type: none"> • Service specific e.g. hospital or home care, explain how issues are addressed. <p>e.g. <i>We always try to ensure that personal information is not given in a place where others can hear, we give people the option of moving to another room. OR</i></p> <ul style="list-style-type: none"> • <i>We impress on all staff the importance of covering people during examination or personal care to protect their dignity.</i> <p>OR</p> <p><i>staff are respectful of people's property and do not go into areas which they do not need to unless the person asks them to</i></p> <ul style="list-style-type: none"> • How do you ensure interruptions are minimised?
(6.2)	Explain, with an example, how the environment in which the service is delivered is managed to promote dignity	<ul style="list-style-type: none"> • How people who receive the service, staff, visitors will know this environment provides privacy/dignity • Examples of how this is maintained, ensuring the team culture is right around dignity.
(6.3)	Explain, with an example, practices which minimise risk for people whilst alone in a private space.	<ul style="list-style-type: none"> • An issue for some services where vulnerable people have time alone • Explain how privacy is balanced with risk • Use of appropriate equipment, aids for safety and disabled access? •
(6.4)	For this standard when asking 'is this the best we can do?' please list any improvements or changes you will make.	Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
7. Ensure people feel able to complain without fear of retribution		
(7.1)	Explain how people are made aware of how to complain and are encouraged to do so.	<ul style="list-style-type: none"> • How people receiving the service are aware of the policy and can be confident to use it if dissatisfied. • Complaints policy displayed in accessible format. • People can make complaints in their preferred way e.g. anonymously, verbally etc. • Staff understand how the policy works.
(7.2)	Explain how complaints are investigated and responded to.	<ul style="list-style-type: none"> • How complaints are investigated and by whom • Timescales for responding • What is done to ensure that the person feels they have been listened to? • Monitoring measures in place. • How a complaint is handled if it relates to a different service.
(7.3)	Explain, with an example, the process of learning from complaints.	<ul style="list-style-type: none"> • Example (s) of how the service has improved in some way as a result of a complaint. • Complaints reports show service open to learning. • Outcomes shared to enable service to improve from lessons learned e.g. “you said/ we did” format
(7.4)	For this standard when asking ‘is this the best we can do?’ please list any improvements or changes you will make.	Opportunity to write any action/s for the team if you agree there is more you can

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STANDARD		EVIDENCE - ideas for what you might provide
8. Engage with family members and carers as care partners		
(8.1)	Using an example describe how you enable people to involve family or friends as care partners.	<ul style="list-style-type: none"> • How the person consents to carer involvement or chooses to limits this • How the service ensures family/friends are involved. • How carers needs are listened to as well as the person's. • Appropriate actions to involve carers e.g. carer's group; suggestions format
(8.2)	Describe how you ensure that appropriate information is provided to family or friends.	<ul style="list-style-type: none"> • How carers are kept informed. • How a sense of partnership is built with families/ friends and carers where appropriate.
(8.3)	Using an example, describe how your team extends principles of dignity and respect to family or friends of people who receive the service.	<ul style="list-style-type: none"> • How family/friends have the opportunity to contact the service. • How this is put into practice e.g. how carers and children of people receiving the service are welcomed/ catered for. . • How visitors are welcomed.
(8.4)	For this standard when asking 'is this the best we can do?' please list any improvements or changes you will make.	Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
9. Assist people to maintain confidence and positive self esteem		
(9.1)	How do you encourage staff to practice in a way that enables people to achieve/maintain their confidence and self-esteem? (Give an example).	<ul style="list-style-type: none"> • Evidence of imaginative ways of really getting to know and valuing the person. • Examples where the person has said they feel better about themselves as a result of the service. • Any measures of self-esteem e.g. recorded changes in observed behaviour/ morale of the person.
(9.2)	Explain and provide an example of how you assess if people are able to make their own decisions, even unwise decisions	<ul style="list-style-type: none"> • Assessments/ support plans done involving the person. • How information about people is obtained. • How this is updated as the service gets to know them better. •
(9.3)	Explain with an example how you ensure that the decisions for people who lack capacity promote decisions in their best interests.	<ul style="list-style-type: none"> • Staff have access to information re Mental Capacity Act (MCA) & Deprivation of Liberty Safeguards (DOLS) and training where appropriate. • Managers demonstrate an understanding of MCA and have put this into practice when appropriate with an example. • If the service has referred to the DOLs team, maybe a description of how it was taken forward? • Staff understand principles behind Best Interests Decision making.
(9.4)	For this standard when asking ‘is this the best we can do?’ please list any improvements or changes you will make.	Opportunity to write any action/s for the team if you agree there is more you can do

STANDARD		EVIDENCE - ideas for what you might provide
10. Act to alleviate people loneliness and isolation.		
(10.1)	How do you involve people who receive your service in the wider community?	<ul style="list-style-type: none"> • How do you involve your service in the local community? • Do people come in to your unit? • Do you take part in community events? • Do you have volunteers?
(10.2)	Explain with an example how your team alleviates isolation of individuals?	<ul style="list-style-type: none"> • How do you reduce isolation of people? • How do you measure your effectiveness? • Do you signpost people to occupational activity, befriending services, lunch clubs other local services?
(10.3)	How do you ensure that people 'have their say' in how the service is run.	<ul style="list-style-type: none"> • Customer opinion sought and action follows from this • Consultation exercises e.g. questionnaires, user groups/meetings etc. • How are people helped to be involved? • Focus groups held, how often, who attends? • Results of consultation and action taken fed back
(10.4)	For this standard when asking 'is this the best we can do?' please list any improvements or changes you will make.	Opportunity to write any action/s for the team if you agree there is more you can do

