Company Name: Integrative Supported Living Care



Policy No: 03-1012

Authorised: Pellagia Margolis

Date: 15/01/2021

## POLICY ON THE HUMAN RIGHTS ACT 1998

This Policy summarises the broad arrangements within the Organisation that assure compliance with the requirements of the Human Rights Act 1998 as they apply to the Organisation's business strategies:

## A: POLICY SUMMARY:

- 1. The Human Rights Act 1998 incorporates the European Convention on Human Rights 1953, and is directly enforceable against state and public authorities. It is acknowledged that the actions and omissions of the Organisation both as a private employer and as a provider of Domiciliary Care Services will be judged against the standards of the Convention and all courts and employment tribunals will take the Human Rights Act 1998, into consideration when hearing any employment related claims, or claims concerning the quality of personal care delivered to a service user where he / she feels that their human rights have been infringed or contravened.
  - NB: FOR THE PURPOSES OF THIS POLICY, THIS WILL ADDRESS ONLY THOSE ARTICLES THAT WOULD RELATE DIRECTLY TO THE QUALITY OF CARE DELIVERED TO THE SERVICE USER. EMPLOYMENT RELATED MATTERS ARE CONSIDERED TO BE OUTSIDE THE SCOPE OF THIS POLICY AND THE READER IS ADVISED TO SEEK APPROPRIATE SPECIALIST LEGAL COUNSEL FOR SUCH MATTERS.
- 2. The Articles of the Convention taken into the *Human Rights Act 1998*, that are most likely to impact upon the legal aspects of operating a Domiciliary Care business will be as follows, and are linked to the basic Core Values of Care delivered to the Organisation's service users:
  - ARTICLE 8 the right to privacy and respect for family life as the service user perceives it;
  - ARTICLE 9 freedom of thought, conscience and religion;
  - ARTICLE 10 freedom of expression;
  - ARTICLE 11 freedom of assembly and association;
  - ARTICLE 14 prohibition of discrimination in relation to race, sex, colour, religion, faith, language, political or other opinions, national or social origin, ethnicity, association with a national minority, property, birth or other status.
- 3. Where a service user alleges that his / her human rights have been breached as a result of some aspect of the care service which they perceive to be unsatisfactory, then the Complaints Procedure, ref. *Policy No: 2103*, will be invoked. In particular, if such an allegation is made the Domiciliary Care Services Manager should seek appropriate legal advice as part of the process of managing and handling the complaint.
- 4. Part B of this Policy addresses some examples of specific aspects of Domiciliary Care where human rights issues are directly relevant and which the Organisation recognises. This Policy should be read in conjunction with the following documents within the Organisation's Quality Management System:

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## B: SPECIFIC ASPECTS OF DOMICILIARY CARE - STATEMENTS OF INTENT:

- 1. Communication and Provision of the Care Service:
  - 1.1 The service user will be treated courteously at all times and will always be addressed in the manner and by the name of their choosing. This will be noted in the service user Care Plans.
  - 1.2 The Care Worker will properly introduce themselves to the service user and ensure that they know the Care Worker's name.
  - 1.3 The Care Worker will ensure that they wear their Identity Badge where it can be plainly seen nd read.
  - 1.4 Arrangements will be made to ensure proper communication with the service user whose native language is not English.
  - 1.5 Arrangements will be made to ensure proper communication with the service user with sensory deprivations such as visual impairment or loss of hearing.
  - 1.6 It will be ensured that the service user knows where the information supplied by the Organisation is kept in their home, so that they know the quality of care that they can expect.
  - 1.7 The service user, and relevant advocates or family members, will be encouraged to express their views about the service being provided, through the use of appropriate questionnaires.
  - 1.8 On a daily basis, before starting care, the service user and / or advocate will be asked what help they would like. (*NB* - if there are too many tasks to be completed in the available time, the Care Worker will focus on the most important ones and report back to his / her Supervisor promptly).
  - 1.9 If the time of the Care Worker's visits does not suit the service user's needs or preferences, this will be discussed and resolved with the Domiciliary Care Services Manager to the service user's satisfaction.
- 2. Respect and Diversity:
  - 2.1 It is acknowledged that each service user is an individual, with individual and diverse needs. It is a fundamental principle of the Care Service that Care staff will get to know their service users as individuals with many years of life experiences and different likes and dislikes.
  - 2.2 Each service user will be treated equally, and with respect. *Policy No 3104* refers.
  - 2.3 Care Workers will remain sensitive to appropriate personal issues of the service user and his / her family or relatives. In particular, issues of race or ethnic origin, creed, culture, colour, religion, age, gender, political affiliation, parenthood, disabilities or sexual orientation will be respected in accordance with the principles of the Organisation's Equal Opportunities & Diversity Policy (*Policy No 1006*).
  - 2.4 Care Workers will not use their mobile telephone when delivering care (except in cases of emergency). Similarly, the Care Worker will not "talk over" or patronise the service user.
- 3. Safeguarding and Well-being:



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	3.1 Each Care Worker will receive appropriate training in detecting the signs of abuse of a service user, a the procedure to be adopted if abuse is suspected. This will include a Whistle-blowing Procedure whe appropriate.							
	3.2	Each Care Worker will receive appropriate training in manual handling, including proper operation of manual handling equipment where relevant.						
	3.3	Risk Assessments are documented for Safeguarding Vulnerable Adults at the onset of care delivery.						
4.	Independence and Autonomy:							
	4.1	Care Workers are trained to recognise where a service user is at risk of being isolated or lonely, and ways in which this could be overcome; e.g. inclusion of family / relatives in the Care Plan, provided that the service user is in agreement.						
	4.2	Service users are encouraged to undertake tasks <i>with</i> the Care Worker where possible. The Organisation's philosophy is not to increase service user dependency upon others wherever possible and in this respect Care Workers will not normally undertake tasks which the service user could well do himself / herself. This will have been subject to prior agreement with the service user / advocate at the Assessment of Needs stage and will identify the following:						
		<ul> <li>tasks whic</li> <li>tasks which</li> </ul>	h the service user is able to undertake h may require some degree of assistant h the service user is unable to underta rer's duties.	nce from the Care Worker;				
	4.3	in order for the servi agreement or conse	ce user to maintain as independent a l nt of the service user / advocate as ap	need for some specialised Aids to Daily Living festyle as possible, and again will have involved the propriate. These Aids to Daily Living may include the re perceived abilities of the service user:				

- bath seats / raised toilet seats / commodes
- hand grips in baths / adjacent to toilets
- modified tap handles for sinks and baths
- hooked electric plugs
- drinking cups and modified cutlery
- large button telephones / telephone amplification aids
- 5. Privacy and Dignity:

Care Service delivery will be achieved in such a way as to be non-intrusive, and to respect the privacy, lifestyle and dignity of the service user. This is considered to be particularly important for the following activities:

- Entering the service user's home, including key-holding (reference Policy Nos 3701 and 3702);
- Entering rooms within the service user's home;
- Assisting the service user to feed (reference Policy No 3402);
- Assisting the service user to wash or bathe (reference Policy No 3201);
- Assisting the service user in matters of toileting and continence (reference Policy No 3202);



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	•	Assisting th	ne service user to dress / undress (	reference Policy No 3203);		
	٠	Assisting th	ssisting the service user with the care of teeth and nails (reference <i>Policy No</i> 3204); ssisting the service user to take prescribed medication (reference <i>Policy Nos</i> 3300 and 3302);			
	•	Assisting th				
	•	Where the	service user may be HIV+ (referen	ce Policy No 4205);		
	•	Moving and assisting the service user (reference Policy No 4005);				
	•	Assisting th	ne service user with personal plann	ing matters (reference Policy	No 3503);	
	e Policy No 3502).					
6.	Eating	ting and Drinking (reference Policy Nos 3400, 3401 and 3402):				
	6.1	Each Care Worker will receive appropriate training in Food Hygiene and Food Safety within the Domiciliary Care environment.				
	6.2	The Care Worker will ensure that there is sufficient food to prepare meals that suit the service user' preferences, dietary needs, culture and religious beliefs. The Care Worker will alert their Supervisor there is a shortage of food in the home, or if they are unable to prepare adequate meals for the servus user.				
	6.3	The Care Worker will allow the service user sufficient time to eat and drink, offering discreet ass where required.				
	6.4	suitable cut	Vorker will ensure that the service t tlery and crockery / utensils. Food i where it is and can remember to e	s only left for the service user		
	6.5		Vorker will maintain an awareness ydration, and report any concerns t		user's condition, e.g. v	