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EQUALITY, DIVERSITY, INCLUSION AND HUMAN RIGHTS

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EQUALITY, DIVERSITY, INCLUSION AND HUMAN RIGHTS

The aim of this policy is to ensure that Nursing Direct Healthcare Limited (hereinafter referred to as 'Nursing Direct') complies with its legal and ethical responsibilities as a care provider. This applies to all individuals within its service, including all staff including Agency Workers, service users and other relevant stakeholders. This policy promotes a positive sense of belonging and ensures equal treatment with respect, regardless of background, identity, abilities, lifestyle, or visible and invisible differences.

Nursing Direct values each person as a unique individual and recognises that some people may be more vulnerable to discrimination. No individual will receive less favourable treatment based on the nine protected characteristics outlined in the Equality Act 2010, including race or ethnicity, age, disability, sex, gender reassignment, sexual orientation, religion or belief, marriage and civil partnerships, and pregnancy and maternity. These characteristics will not affect the quality of care provided. However, we acknowledge the importance of adapting care to meet the specific needs of each individual and understand how diversity influences the type of care or service offered.

Nursing Direct adheres to Human Rights, Anti-Discriminatory, and Anti-Oppressive best practice guidelines. Nursing Direct is committed to removing barriers that hinder diversity and equal access, ensuring that inclusive practices are embedded throughout its operations. To achieve this, Nursing Direct draws insights from various laws and enactments, including the Human Rights Act 1998, the Convention on the Rights of Persons with Disabilities, the Mental Capacity Act 2005, and the Equality Act 2010. Additionally, Nursing Direct takes an intersectional approach to equality, ensuring that its practices support staff including Agency Workers, service users, and other stakeholders holistically.

Nursing Direct strictly prohibits inhuman or degrading treatment and establishes clear boundaries on when an individual's rights to liberty, privacy, or family life (whether a service user, stakeholder, or staff including Agency Worker) may be breached. By using human rights as the framework for this policy, the risk of cruelty, neglect, or thoughtless behaviour is significantly reduced, particularly for vulnerable individuals with disabilities who require substantial care, support, and reasonable adjustments.

1. PURPOSE

1.1 Staff including Agency Workers;

- 1.1.1 To ensure that all staff including Agency Workers can work in an environment that is free from any harassment or discrimination
- 1.1.2 To ensure that all members of staff including Agency Workers and job applicants receive equal treatment, regardless of their Protected Characteristics, namely age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, religion or belief and sex.
- 1.1.3 To enable Nursing Direct to meet the legal requirements to promote and protect the equality diversity, inclusion, and human rights of staff including Agency Workers, including any reasonable adjustments that might be needed. This emphasises anti-discriminatory and anti-oppressive practices in staffing solutions, while actively promoting the recruitment and onboarding of individuals from diverse backgrounds.
- 1.1.4 This policy applies to all aspects of employment with Nursing Direct. For the avoidance of doubt, this includes recruitment, pay and conditions, training, appraisals, promotion, conduct at work, disciplinary and grievance procedures, business trips or at work-related events or social functions and termination of employment.

1.2 Service Users and other stakeholders;

- 1.2.1 To enable Nursing Direct to meet the legal requirements to promote and protect the equality diversity, inclusion, and human rights of Service Users and follows the human rights principles outlined as FREDa: Fairness, Respect, Equality, Dignity, Autonomy.
- 1.2.2 To promote the autonomy, wellbeing and independence of Service Users by actively encouraging diversity and fostering an inclusive environment, respecting and enhancing their human rights which is supported by our policies around Service User Bullying, Consent to Care, Support and Treatment, Raising Concerns, Freedom to Speak Up and Whistleblowing and Closed Cultures
- 1.2.3 To ensure that service users and their families live in an environment that is free from any harassment or discrimination
- 1.2.4 Nursing Direct recognises the importance of having policies and procedures in place to meet the regulatory requirements of the CQC's Key Lines of Enquiry (KLOE) and Quality Statements, specifically those related to being Caring, Effective, Responsive, Safe, and Well-led. This ensures that the organisation upholds its obligations concerning Equality, Diversity, Inclusion, and Human Rights.

1.3 **Relevant Legislations, Rules, and Regulations:**

To meet the legal requirements of the regulated activities that Nursing Direct has undertaken, it has taken into consideration the following legislations when complying with its role and duty as a care provider;

- Health and Social Care Act 2012 Section 250 (Information Standards)
- Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2012 (Amendment to Parts 4 & 5)
- Care Quality Commission (Registration) and (Additional Functions)
- Care Quality Commission (Registration) Regulations 2009
- The Care Act 2014
- Equality Act 2010
- Equality Act 2010: Chapter 1 (Protected Characteristics) Chapter 2 (Prohibited Conduct) and Chapter 3 (Services and Public Functions)
- Human Rights Act 1998
- Mental Capacity Act 2005
- Mental Capacity Act Code of Practice
- Gender Recognition Act 2004
- Data Protection Act 2018
- UK GDPR
- The Worker Protection (Amendment of Equality Act 2010) Act 2023

2. **SCOPE**

2.1 The following roles may be affected by this policy:

- Applicants / Candidates
- All staff including Agency Workers

2.2 The following people may be affected by this policy:

- Service Users

2.3 The following stakeholders may be affected by this policy:

- Family / Next of Kin
- Advocates / Representatives
- Commissioners / Local Authority / NHS / ICB
- Health professionals
- Other relevant stakeholders

3. **OBJECTIVES**

3.1 **Staff including Agency Workers;**

3.1.1 To set out the zero-tolerance approach of Nursing Direct to discourage and penalise the perpetrators of discrimination in the workplace and to set out the approach of Nursing Direct to encourage and support diversity, equity, and inclusion.

3.1.2 To ensure that Nursing Direct has an open and transparent approach to all aspects of employment, free from discrimination.

3.1.3 To ensure that all staff including Agency Workers are able to thrive in an inclusive environment.

3.1.4 To create a positive working environment which enables all staff including Agency Workers to work to the best of their skills and abilities without the threat of discrimination or harassment in the workplace.

3.2 **Service Users and other stakeholders;**

3.2.1 To have a clear and ongoing commitment to promoting and respecting the rights of all individuals, regardless of their situation and protected characteristics as stipulated in the Equality Act 2010.

3.2.2 To provide care fairly and indiscriminately by ensuring that all individuals are treated as unique and care is tailored specifically to meet their individual needs.

3.2.3 To ensure that service users are honoured in all their uniqueness and diversity, and their rights to live as they choose are not restricted, except where this is strictly both necessary and proportionate, and in accordance with this policy.

3.2.4 To ensure that Care Plans are created individually and show ongoing commitment to respecting and promoting the human rights of Service Users:

- Through demonstrating knowledge of the person's wishes and feelings
- Making these the framework for the way services are provided
- Ensuring any reasonable adjustments are in place

3.2.5 To foster a commitment to equality and diversity by empowering Service Users to sustain or develop hobbies, interests, community connections, friendships, and memberships in religious or community organisations.

- 3.2.6 To promote inclusion by ensuring that Service Users feel connected to others who share their cultural, religious, or social background. To achieve this, the organisation reflects the diversity of the local community through its staff including Agency Workers and through proactive community engagement. This approach helps ensure that Service Users do not feel isolated or distanced from those who share their culture or background.
- 3.2.7 To ensure that the six outcomes of the Accessible Information Standard are met and staff at Nursing Direct Healthcare Limited understand them and have processes in place to meet the standards; Identifying needs, Recording needs, Flagging needs, Sharing needs, Meeting needs, and Reviewing needs.

4. POLICY

- 4.1 The Registered Manager and the Nominated Individual of Nursing Direct have overall management responsibility for this policy and procedure. This is in line with the Policy Management Policy and Procedure at Nursing Direct.
- 4.2 This policy applies not only in the workplace but also in community settings where Nursing Direct provide services, such as activity centres, work-related trips, events including social events, alongside other providers and stakeholders, or third-party suppliers whom we associate with. It also extends to any situation where staff, including Agency Workers, are representing the organisation by wearing a uniform or identity badge.
- 4.3 This policy not only applies to staff including Agency Workers, but also Service Users, their families, all professionals, and decision makers at every level of Nursing Directs organisation.
- 4.4 Any data collected as part of this policy will be processed in accordance with UK GDPR, data protection legislation, and the Data Security and Data Retention Policy and Procedure of Nursing Direct. Nursing Direct appreciates that certain health data and medical reports will be special category data and Nursing Direct will process this data sensitively according to the laws.
- 4.5 All actions and decisions that affect Service Users and staff including Agency Workers are to be compliant with relevant human rights laws and other laws detailed within this policy. This includes the Human Rights Act 1998, the Equality Act 2010, and, where Service Users aged 16 or over may lack mental capacity, the Mental Capacity Act 2005 (this list is not exhaustive).
- 4.6 Nursing Direct complies with the Equality Act 2010 in all its processes regarding service users and staff including Agency workers and recognises that all individuals within the service should be treated equally and any forms of discrimination are unlawful and prohibited under this policy.
- 4.7 Nursing Direct recognises that everyone is different and wants to make sure that the service practices, respects, promotes and celebrates these differences. Nursing Direct will not tolerate unlawful discrimination, victimisation, bullying or harassment of any kind, including the nine protected characteristics outlined in the Equality Act 2010:
1. Age
 2. Disability
 3. Gender reassignment or self-identification
 4. Marriage and civil partnership
 5. Pregnancy and maternity
 6. Race (this includes ethnic or national origins, colour, or nationality)
 7. Religion or belief (this includes lack of belief)
 8. Sex (male and female)
 9. Sexual orientation
- 4.8 In accordance with the above, Equality, Diversity, Inclusion and Human Rights are considered in all aspects within the service. The wishes and feelings of individual Service Users and staff including Agency Workers are also taken into consideration.
- 4.8.1 These aspects are supported through rigorous training, access to policies and ongoing monitoring is carried out through Nursing Direct's HR, governance systems, complaints management system, whistleblowing procedure and the discipline and grievance procedures.
- 4.8.2 On a day-to-day basis these are put into practice through a person-centred care approach, regular service calls, team meetings, supervisions, appraisals, and feedback., as well as through our governance and quality assurance procedures that are in place within Nursing Direct.
- 4.9 **Reasonable Adjustments**
Where Service Users and staff including Agency Workers require reasonable adjustments under the Equality Act 2010, Nursing Direct will ensure that these are considered, implemented, and reviewed on an individual basis in respective documentation i.e. occupational health plans and care plans etc.
- 4.10 **All forms of discrimination are unlawful and prohibited under this policy.**

REGARDING SERVICE USERS AND OTHER STAKEHOLDERS

4.11 **Person-Centred Care**

- 4.11.1 Care plans at Nursing Direct emphasise our commitment as an organisation to protecting the human rights of service users by being person-centred and individualised. These plans reflect a dedication to ensuring that individuals can live according to their own choices.
- 4.11.2 Nursing Direct is committed to identify and remove any 'blanket rules' governing how Service Users live. This commitment is exemplified through person-centred planning that accommodates specific religious or cultural practices significant to each individual.
- 4.11.3 Customised treatments at Nursing Direct are designed to respond to what is in the best interests of each individual. By creating tailored care plans, Nursing Direct addresses the unique needs and expectations of service users while also appreciating the diverse backgrounds of those receiving care.
- 4.11.4 Human rights, equality and diversity, and the wishes and feelings of Service Users, are considered in all aspects of service provision, including supervisions and team meetings underpinned by following the FRED A principles.

4.12 **The Importance of Communities**

Nursing Direct operates a continuous commitment to equal opportunities, diversity, inclusion, and human rights, by proactively ensuring that Service Users have access to, and engagement with, their communities, health providers and other important professionals, coordinated around the individual Service User. Nursing Direct recognises the importance of providing opportunities for Service Users to connect with their relatable community.

4.13 **Partnership Working**

Nursing Direct provides its care to support individual Service Users to live the life they choose. In order to ensure that this is successful and meaningful, this means a transparent working partnership with other professionals to ensure the best individual outcomes for individual Service Users.

REGARDING STAFF INCLUDING AGENCY WORKERS

- 4.14 Nursing Direct takes a zero-tolerance approach to any type of discrimination, bullying, harassment and / or victimisation which one member of staff including Agency Workers may perpetrate against another and/or against any other person, including but not limited to applicants/candidates, all staff including Agency workers, Service Users, and any other stakeholders.
- 4.15 This policy applies to all aspects of employment with Nursing Direct including selection, recruitment, performance, contractual terms including pay, benefits and conditions, flexible working and leave, training, appraisals, promotion, conduct at work, disciplinary and grievance procedures, work related social events and termination of employment.
- 4.16 Equally, this policy not only applies in the workplace but also outside of it, staff including Agency Workers are dealing with service users and other stakeholders, suppliers or other work-related contacts, or when wearing a work uniform and on work-related trips or events including social events.
- 4.17 Nursing Direct will ensure that all staff, including Agency Workers, receive regular training and refresher sessions on human rights, equality, diversity, and inclusion. This will include access to relevant policies, principles, and applicable legislation so that staff understand and uphold these standards from the moment they join the organisation. Nursing Direct will also actively encourage open communication and respond to staff feedback to promote and sustain an inclusive workplace.
- 4.18 This policy does not form part of any of staff including Agency workers 's contract of employment and we may amend it at any time.

5. PROCEDURE

REGARDING STAFF INCLUDING AGENCY WORKERS

- 5.1 Nursing Direct will promote awareness and provide appropriate training on recognising and avoiding discrimination, harassment, victimisation and promoting equal opportunities and diversity in the areas of recruitment, development and promotion.
 - 5.2 Nursing Direct is committed to following the European Human Rights Commission Employment Statutory Code of Practice and has responsibility for equal opportunities training.
 - 5.3 Nursing Direct will provide regular training to ensure that staff including Agency Workers are aware of and understand the contents of Equality Diversity, Inclusion and Human Rights. Staff including Agency Workers will be given access to all policies and will be required to confirm that they have read, understood and will comply with this policy.
- #### 5.4 **Recruitment and Selection**
- 5.4.1 Any selection exercises including recruitment and selection will be carried out with regard to objective criteria which specifically avoid any issues of discrimination. Similarly, Nursing Direct will ensure that such exercises are carried out by more than one person, where possible.
 - 5.4.2 Any vacancies will be advertised to as wide and diverse an audience as possible. Such advertisements will not discourage any individual or group from applying.

- 5.4.3 Job applicants will not be asked questions which might suggest an intention to discriminate on grounds of a Protected Characteristic.
- 5.4.4 Job applicants will not be asked about health or disability before a job offer is made, except in the very limited circumstances allowed by law, for example, to check that the applicant could perform an intrinsic part of the role, for example, heavy lifting (taking account of any reasonable adjustments), or to see if any reasonable adjustments may be required at an interview.
- 5.4.5 Where necessary, job offers can be made conditional on a satisfactory medical check. Health or disability questions may be included in interview forms/ equal opportunities monitoring forms and can be discussed in detail at interviews.; and may be considered and used for selection or decision-making purposes.

5.5 **Discrimination**

Staff including Agency Workers must not unlawfully discriminate against or harass other people, including current and former job applicants / candidates, clients, customers, suppliers or visitors. This applies in the workplace, outside the workplace (when dealing with customers, suppliers or other work-related contracts or when wearing a work uniform) and on work related trips or events including social events.

Direct Discrimination, Indirect Discrimination, Harassment, Victimisation and Disability Discrimination are prohibited under this policy. and are unlawful.

5.6 **Training, Promotion and Conditions of Service**

5.6.1 Training needs will be identified through regular supervisions and appraisals which will be based entirely on an objective assessment of performance and will not be influenced by any Protected Characteristics that staff including Agency Worker may have. Staff including Agency Workers will be given appropriate access to regular training to enable them to support their professional development.

5.7 **Sexual Harassment**

Nursing Direct is committed to providing a working environment free from sexual harassment and ensuring that all staff including Agency Workers are treated, and treat others, with dignity and respect. Nursing Direct recognises that sexual harassment can occur both in and outside of the workplace. Please see the Sexual Harassment Policy and Procedure for further information on the approach of Nursing Direct.

5.8 **Disabilities**

5.8.1 Nursing Direct Healthcare Limited is committed to ensuring that all staff including Agency Workers have the ability to thrive in their career. If staff including Agency Workers are disabled or become disabled, whether visibly or not, are encouraged to inform Nursing Direct so that Nursing Direct can consider what reasonable adjustments or support may be appropriate.

5.8.2 Nursing Direct may wish to consult with the staff including Agency Workers medical adviser about possible adjustments or obtain a medical report on the staff including Agency Workers medical condition to understand what adjustments may be put in place to facilitate the individual in the workplace. Nursing Direct will consider the matter carefully and try to accommodate the needs within reason. If Nursing Direct consider a particular adjustment would not be reasonable, Nursing Direct will explain the reasons and try to find an alternative solution, where possible and depending on the condition or disability.

5.8.3 Nursing Direct acknowledges that disabilities may be physical or mental in nature and can have a substantial and long-term adverse effect on an individual's ability to carry out normal day-to-day activities in both their personal lives and in the workplace.

5.8.4 Nursing Direct will monitor the physical features of our premises to consider whether they might place anyone with a disability at a substantial disadvantage. Where necessary, Nursing Direct will take reasonable steps to improve access.

5.8.5 All staff including Agency Workers are expected to show consideration and refrain from discriminating against disabled colleagues, a responsibility that is taken seriously. Understanding and commitment to this policy will be reinforced during supervision and appraisals and regularly reviewed by Nursing Direct's HR department and senior management.

5.9 **Immigration Status**

Nursing Direct will not make any assumptions about immigration status based on appearance or apparent nationality. However, Nursing Direct is required by law to ensure that all of its staff including Agency Workers are entitled to work in the UK. Therefore, all prospective staff including Agency Workers, regardless of nationality, must be able to prove their right to work in the UK and other related compliance checks before their employment begins, with ongoing checks conducted in line with relevant laws.

5.10 **Zero-hour, Temporary, Part-time and Fixed-term Work**

Zero-hour, Temporary, Part-time and Fixed-term staff including Agency Workers should be treated the same as comparable full-time or permanent staff including Agency Workers and enjoy no less favourable terms and conditions (on a pro-rata basis where appropriate), unless different treatment is justified.

5.11 **Neurodiversity**

5.11.1 Neurodiversity is a broad term that is used to describe the infinite number of ways the human brain can operate (most commonly used in the context of autism spectrum disorder (ASD), as well as other neurological or development conditions such as ADHD, dyslexia, dyscalculia and dyspraxia).

- 5.11.2 Nursing Direct appreciates that staff including Agency Workers may be neurodivergent and Nursing Direct promotes neurodiversity within the workplace and will ensure that neurodivergent staff including Agency Workers are not treated unfairly or suffer any detriment due to their neurodivergence.
- 5.11.3 In order to support any neurodivergent staff including Agency Workers, Nursing Direct encourages those staff including Agency Workers who are living with a neurodiverse condition to speak to Nursing Direct management to inform them of their condition. Nursing Direct will deal with any information disclosed in confidence, sensitively and in accordance with its data protection requirements.
- 5.11.4 If staff including Agency Workers have a neurodiverse condition, Nursing Direct management may discuss with them how, if at all, their condition affects their ability to complete their role and where necessary, complete a “needs assessment” to help identify any workplace adjustments that can be put in place to support them within the workplace and help the employee complete their role.
- 5.11.5 Nursing Direct is committed to ensuring that neurodivergent staff including Agency Workers feel comfortable in the workplace and is committed to raising awareness of neurodiversity by:
- Providing training to managers on supporting neurodiverse staff including Agency Workers
 - Creating neurodiverse support networks for staff including Agency Workers
 - Encouraging staff including Agency Workers to speak about neurodiversity
 - Creating neurodiverse champions

5.12 Termination of Employment

Nursing Direct will ensure that redundancy criteria and procedures are fair and objective and are not directly or indirectly discriminatory. Nursing Direct will also ensure that suspensions, disciplinary procedures, and penalties are applied without discrimination, whether they result in disciplinary warnings, dismissal, or other disciplinary action. Other justified terminations are considered as per the relevant Employment Laws and contractual terms.

5.13 Disciplinary Procedure

Nursing Direct takes a strict approach if any one breaches this policy. If any staff including Agency Workers are found to be in breach of this policy will be subject to disciplinary action. Serious cases of deliberate discrimination may amount to gross misconduct, resulting in dismissal. Please see the Discipline Policy and Procedure for further information.

5.14 Grievance Procedure

If a member of staff including Agency Workers believes that they have suffered discrimination, then they should raise these issues through the Grievances Policy and Procedure and/or the Anti-Bullying Policy and Procedure and the Harassment Policy and Procedure at Nursing Direct. Staff including Agency Workers will not be bullied or victimised for raising issues under this policy. However, if a complaint is made in bad faith and/or is knowingly false, the member of staff including Agency Workers may be subject to the Discipline Policy and Procedure of Nursing Direct.

REGARDING SERVICE USERS AND OTHER STAKEHOLDERS

- 5.15 Nursing Direct acknowledge the CQC statement ‘Care that respects people’s rights are good care – we call this ‘rights-respecting care’. Where there is good care there are ‘rights-respecting cultures, but where there is poor care, the opposite is true, and we can describe these as ‘rights-rejecting cultures.

“Our human rights need protecting most when they feel the least powerful and are relying on others for their basic needs – including when we are using health and care services” (The CQC 2023)

- 5.16 Nursing Direct provides care for all service users using a person-centred approach, respecting the individual needs, wishes and capabilities and promoting their human rights. This is reflected in Nursing Direct’s values that promote an open, transparent culture which is dedicated to cultivating rights-respected care.
- 5.17 Nursing Direct places significant value in training staff to ensure that they understand the following Articles of the Human Rights Act and can recognise when any of them is at risk of being breached. Nursing Direct is committed to delivering care and support in a way that promotes and enhances the human rights of all.
- 5.18 **Right to Life**
Article 2 – Everyone has the right to life. Nursing Direct takes reasonable steps to protect and maintain the Service User’s life except in circumstances where it is reaching its inevitable and natural close. Nursing Direct has clear policies and procedures on supporting each Service Users’ end of life wishes and their Care provision, which includes:
- Advance decisions to refuse treatment
 - Powers given by the Service User by way of lasting power of attorney for health and welfare to a trusted relative or friend, to consent to or refuse life-sustaining treatment in the person’s best interests, and
 - ‘Do Not Attempt Cardiopulmonary Resuscitation’ (DNRCPR) recommendations

Please see the advance decision policies at Nursing Direct for further information.

5.19 Right to Liberty

Article 5 – Everyone has the right to liberty. Nursing Direct ensures that the principles of the Mental Capacity Act (MCA) 2005 are followed and that Service Users receive Care in the least restrictive way. Nursing Direct promotes empowerment and independence and supports Service Users decisions to live their lives in the way they choose. Please see the deprivation of liberty policy and procedure and the Mental Capacity Act (MCA) 2005 Policy and Procedure for further information.

5.20 **The right to be free from discrimination**

Article 14 – The right to be free from discrimination. Nursing Direct promotes opportunities for all and provides Care in a non-discriminatory manner, respecting and treating everyone as unique.

5.21 **Freedom from Torture and Inhuman or Degrading Treatment**

Article 3 – It is essential that the right to protection from torture and inhumane and degrading treatment must never be breached. It underpins all care commitments. Staff receive formal training on how to deliver respectful Care that enhances Service Users' dignity. Formal training is reinforced on a daily basis by adhering to the company values, as well as being a focus in team meetings and supervision. Examples of breaches of Article 3 are:

- Physical or mental abuse
- Failure to address, swiftly and discreetly, the physical and emotional results of incontinence (for example, by replacing soiled linen or clothing in a non-judgmental way)
- Leaving food or drinks without helping the Service User to eat or drink, when they are too frail or forgetful to feed themselves
- Any disproportionate, unnecessary or inappropriate force to restrain Service Users
- Carrying out care tasks, such as washing or dressing Service Users, without full and ongoing regard to their feelings, individuality, self-esteem and dignity

5.22 **Your right to maintain contact with families and friends**

Article 8 – Service Users' rights to maintain contact with their families and friends under Article 8 are supported and never breached, except where this is unavoidable to protect the health of the Service User or others. It is the right of the Service User with the capacity to do so, to make their own decisions about the level of contact, if any, with their personal network. Legal advice is sought about the possible need for Court authorisation if a decision by Nursing Direct Healthcare Limited is likely regarding any Service User that they should cease contact by all available means with a relative or friend

5.23 **Your Right to Respect for your Private and Family Life**

Article 8 – Except as restricted for public health reasons, rights to a private and family life are proactively respected and enabled, for example, by providing privacy and a pleasant environment for visits, and respecting the Service User's right to sexual and other relationships

5.24 **The right to peaceful enjoyment of possessions**

Article 1 – Nursing Direct approaches our service delivery with the utmost respect for the Service User's property and possessions, understanding that we are guests in their home and to support them to enjoy their lives in the way that they choose

5.25 **CCTV**

Article 8 – Monitoring by CCTV or other surveillance techniques may breach Article 8 (rights to privacy). The use of such recordings must adhere to the CQC guidance on surveillance.

5.26 **Accessible Information Standard**

Nursing Direct recognises the importance of sharing information in a way that is accessible and that people understand. Nursing Direct ensure that, as part of each Service User Care Plan process, Service Users' communication needs are assessed and detailed as per the Accessible Information Standards.

Following this, Nursing Direct will take a proactive approach and ensure that there are consistent methods in place for identifying, recording, flagging, sharing, meeting and reviewing the information and communication support needs of Service Users and staff including Agency Workers as well as any changing needs.

Staff including Agency Workers are trained in the Accessible Information Standard through induction, in line with the Care Certificate and continual learning in relation to communication. This will form part of supervision and appraisals and continually monitored via the compliance process at Nursing Direct.

5.27 **Record Keeping**

Nursing Direct uses digital record keeping systems which enable us to share appropriate information with other services and professionals (with consent) efficiently.

Nursing Direct has rigorous record keeping protocols which ensure that daily care notes are accurate, transparent and reflect the bespoke person-centred Care provided in real time. Daily care notes for each visit are recorded for each Service User, which outline the person-centred Care delivered.

Nursing Direct is able to share records appropriately (with consent) with other professionals as and when necessary to ensure the best interests of each Service User. There is also a clear ethos of partnership working throughout the organisation. For more information on when to share information with others, you can refer to the suite of Data Protection and UK GDPR Policies and Procedures.

5.28 **Reasonable Adjustments**

5.28.1 As part of the Care Plan process, Nursing Direct will identify and document reasonable adjustments for each Service User. These adjustments will be discussed with the service user by the allocated clinical lead and implemented where necessary, with all actions clearly recorded in the Care Plan and Risk Assessment.

5.28.2 Where reasonable adjustments have been identified these will be discussed with Registered Manager and implemented at Nursing Direct, where possible, for the Service User. All actions in regards to reasonable adjustments will be clearly documented as part of the care planning process.

5.28.3 When determining whether an adjustment is reasonable, Nursing Direct will consider several factors, including the specific needs of the Service User, the practicality and feasibility of the adjustment, and the cost and available resources. Additionally, the potential impact on the quality of care for both the individual and other Service Users will be assessed, alongside legal obligations under equality and human rights laws.

5.28.4 The effectiveness of the adjustment in addressing the intended needs is also a crucial consideration.

5.29 Challenging Discrimination, Bullying and Harassment

5.29.1 As part of formal training, all staff including Agency Workers will receive an education on Equality, Diversity and Inclusion, Safeguarding Adults and Children, as well as Whistleblowing.

5.29.2 Training will also be in place to support understanding for staff including Agency Workers of the personal, cultural, social and religious needs of service users, including how these needs may relate to their Care needs, how they can take these into account when delivering services, how this information should be recorded and shared with other services or providers.

5.29.3 Nursing Direct ensures that staff including Agency Workers have a clear understanding and sound knowledge base for recognising the traits of discrimination and abuse and what to do about it.

5.29.4 Staff including Agency Workers follow the procedures outlined in the policies regarding Raising Concerns, Freedom to Speak Up and Whistleblowing raise any concerns (if any), seeking support from the Registered Manager immediately.

6. DEFINITIONS

6.1 Staff including Agency Workers

6.1.1 Staff

Denotes the employees of Nursing Direct Healthcare Limited.

6.1.2 Agency Workers

Refers to individuals who are contracted with Nursdoc Limited or another employment business as an Agency Worker (temporary worker) provided to Nursing Direct Healthcare Limited to perform care services under the direction of Nursing Direct.

6.2 Nursing Direct

Nursing Direct, also known as Nursing Direct Healthcare Limited, is the entity regulated by the CQC (Care Quality Commission) and responsible for the care service provision, contracted to provide homecare services to service users in their homes, in placements, essential healthcare facilities and in the community.

6.3 Nursdoc Limited

As the sister company to Nursing Direct Healthcare Limited, Nursdoc Limited acts as an employment business, specialising in providing staffing solutions to the healthcare sector.

6.4 CQC (Care Quality Commission)

CQC throughout this policy, the term "CQC" refers to the Care Quality Commission (CQC) which is the independent regulator of health and social care in England.

6.5 Equality

The Equality and Human Rights Commission defines 'equality' as 'ensuring that every individual has an equal opportunity to make the most of their lives and talents and believing that no one should have poorer life chances because of where, what or to whom they were born or because of other characteristics'

6.6 The Equality Act 2010

Prohibits discrimination both in the workplace and the wider society based on protected characteristics which are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation. It combines several earlier pieces of legislation, such as the Sex Discrimination Act 1975, the Race Relations Act 1976, and the Disability Discrimination Act 1995. 'Protected Characteristics', that people must not be subjected to discrimination on the basis of, are laid out in Section 4.

6.7 Deprivation of Liberty Safeguards DoLS: Human rights protection

6.7.1 The Deprivation of Liberty Safeguards (DoLS) were set up as part of the Mental Capacity Act. They protect the rights of people aged 18 and over in hospitals and care homes, lacking mental capacity, who are deprived of their liberty, as required by the Human Rights Act Article 5

6.7.2 The DoLS do this by laying out a procedure defined in law, so that anyone subject to an authorisation under DoLS knows what has led to this authorisation, and also by laying out how it can be challenged

6.7.3 The protections for a person include:

- Any conditions attached to the authorisation
- Independent scrutiny of their Care Plan by a DoLS assessor
- Independent assessment by a DoLS assessor of their capacity to consent to the Care Plan
- The appointment of a relevant person's representative (RPR), usually a relative; this is someone to act for them
- The right to ask the Local Authority who granted the authorisation to review it or any part of it
- Their right of access to an Independent Mental Capacity Advocate (IMCA)
- Their right to go to the Court of Protection for a full hearing of their views and examination of the authorisation

6.7.4 An additional protection is that no authorisation can last for longer than 12 months and must then be re-assessed by the independent assessors

6.8 **'Acid Test' for Identifying Deprivation of Liberty**

It can be lawful under human rights and mental capacity law to deprive a person aged 16 and over of their liberty to give them necessary care or treatment, provided that the person lacks capacity to consent to the necessary arrangements to give them such care or treatment, and that this is authorised. The 'acid test' clarifies that a person lacking capacity to consent to arrangements to give them necessary care or treatment is deprived of their liberty if they are both not free to leave (meaning, even though they may go out accompanied, they must return) and under continuous supervision and control (meaning that staff always know approximately where they are and what they are doing).

6.9 **Mental Capacity Act 2005 (MCA)**

Defines capacity as the ability to make a specific decision at the time required. Individuals 16+ are presumed to have capacity unless assessed otherwise (The way it should be assessed is described in the MCA and its code of practice). The MCA balances the rights of service users to make their own choices (to live as they choose, express their wishes and make their own decisions as long as they are not harming others) while protecting those who lack capacity with the least restrictive options to meet identified needs in their best interests.

6.10 **Reasonable Adjustment**

Nursing Direct is required by the Equality Act 2010 to make adjustments for disabled service users or staff. Examples include accessible environments, alternate formats for information, and scheduling flexibility etc.

6.11 **Human Rights protected by Human Rights Act**

Human rights are the basic rights and freedoms that belong to every person in the world. In the UK, human rights are protected by the Human Rights Act 1998. The Human Rights Act 1998 incorporates into UK law the European Convention on Human Rights, and makes it unlawful for a public body, or anyone acting on behalf of a public body, to behave in a way that is incompatible with the Convention. The rights most likely to be relevant in health and social care are Article 3, Article 5, and Article 8. All the rights protected by the Convention are listed below, with some of their implications for adult social care.

6.12 **Human Rights Act 1998 (Article 8)**

Guarantees that every one has the right to live the way they choose and for the state not to interfere in their private life, including the freedom to maintain relationships. This includes the right to have contact with relatives and friends and to have privacy during those contacts, whether face to face, by letter, phone, or over the internet. Breaches are only allowed if necessary and proportionate, such as to prevent harm or infection spread (to protect public health).

6.13 **Article 2 (Article 1 is just the preamble): The right to life**

'Everyone's right to life shall be protected by law. No one shall be deprived of his life intentionally, save in the execution of a sentence of a court following his conviction of a crime for which this penalty is provided by law'.

6.13.1 Note that this makes so-called 'mercy killing' unlawful, though it is lawful and good practice sometimes to recognise when treatment should be withdrawn or not started in circumstances when it would lead to pain or distress without prolonging life

6.13.2 In addition, any adult can lawfully make advance decisions to refuse treatment under the Mental Capacity Act; these will then apply when the person has lost capacity to make their own decision to accept or refuse treatment

6.14 **Article 3: The complete prohibition of torture under any circumstances**

'No one shall be subjected to torture or to inhuman or degrading treatment or punishment'

6.14.1 It is a tragic fact that some so-called 'care' can include inhuman or degrading treatment or punishment; there is no place for this in care services, and any tendency, however slight, to bully, punish or degrade Service Users must be rooted out.

6.15 **Article 4: Prohibition of slavery and forced labour**

'No one shall be held in slavery or servitude

'No one shall be required to perform forced or compulsory labour'

6.15.1 This is now strengthened by the Modern Slavery Act 2015, which forbids slavery or forced labour, and includes trafficking. Nursing Direct must ensure that it is not, even unwittingly, employing people who do not enjoy the rights available to other staff including Agency Workers due to being trafficked or forced to pass on their pay to a trafficker

6.16 **Article 5: Right to liberty and security of person**

This is not an absolute right but no one shall be deprived of his liberty except in certain circumstances, which includes Article 5(1)(e) - 'the lawful detention of persons...of unsound mind'. If someone is to be deprived of their liberty, it must be 'in accordance with a procedure laid down in law' and Article 5(4) - 'Everyone who is deprived of his liberty...shall be entitled to take proceedings by which the lawfulness of his detention shall be decided speedily by a court and his release ordered if the detention is not lawful'

- This is why the deprivation of liberty safeguards (DoLS) were created, to ensure there is a framework to protect people lacking capacity. Before DoLS, this vulnerable group of people could be deprived of their liberty on the say – so of a doctor, for example, without any clear way of asking a court whether this was legal or not. DoLS can only be used in hospitals and care homes, to protect the rights of people aged 18 and over, who lack capacity to make relevant decisions
- The Article 5 rights of people who lack capacity in community settings (such as supported living or shared lives) or in their own homes, or of young people aged 16 or 17 in any setting, who are deprived of their liberty in their best interests, can at this time only be protected by application to the Court of Protection. This is usually arranged by the commissioner or the Local Authority

6.17 **Article 6: Right to a fair trial**

This includes being presumed innocent until there is evidence of guilt

6.18 **Article 7: No punishment without law**

Nobody can be found guilty of something which was not a crime at the time it was committed

6.19 **Article 9: Freedom of thought, conscience and religion**

This is not an absolute right but can only be limited when necessary in a democracy, 'in the interests of public safety, for the protection of public order, health or morals, or for the protection of the rights and freedoms of others.' It includes the right to decide to change one's religion

6.20 **Article 10: Freedom of expression**

This is not an absolute right and carries with it duties and responsibilities. It can be limited, where necessary, in a democracy, in a range of circumstances, including 'for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the reputation or rights of others'

6.21 **Article 11: Freedom of peaceful assembly with others**

This is the right to meet up with other people and, for example, join a trade union. This is not an absolute right, and can be limited, where necessary in a democracy, for public safety or protection or the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights of others. States have the right to restrict this right among armed forces, the police, and other areas of public administration

6.22 **Article 12: The right to marry**

Men and women of marriageable age can marry and found a family in accordance with national laws. Together with Article 8, this protects the rights of people with learning disabilities who have the capacity to consent to marriage, to enter into a marriage and have children

6.23 **Article 14: Prohibition of discrimination**

This is an absolute right. 'The enjoyment of the rights and freedoms set forth in this convention shall be secured without discrimination on any ground such as sex, race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth or other status.' This phrase 'other status' includes people choosing to express a different gender identity from the one they had at birth, or living with certain diagnoses (such as dementia or learning disability), or lacking mental capacity to make their own decisions, and highlights that human rights are for everyone

6.24 **Convention on the Rights of Persons with Disabilities (CRPD)**

- The UK is a signatory to the CRPD, and bound to work within it
- The CRPD aims to wipe out all discrimination and barriers to inclusion that face people with disabilities. This means the UK must develop and carry out policies and laws that secure the rights recognised in the Human Rights Act 1998, and abolish laws, regulations, customs and practices that constitute discrimination (Article 4)
- The UK is also committed to combatting stereotypes and prejudices, and promoting awareness of the capabilities of people with disabilities (Article 8)
- The CRPD demands guarantees that people with disabilities enjoy their inherent right to life on an equal basis with others (Article 10), ensures the equal rights and advancement of women and girls with disabilities (Article 6) and protects children with disabilities (Article 7) The CRPD guarantees that people with disabilities enjoy their inherent right to life on an equal basis with others (Article 10), ensures the equal rights and advancement of women and girls with disabilities (Article 6) and protects children with disabilities (Article 7)

6.25 **Special Category Data**

Is a category of data which is more sensitive than normal personal data. This includes data which relates to: Race, Ethnic origin, Politics, Religion, Trade union membership, Genetics, Biometrics (where used for ID purposes) Health, Sex life; or Sexual orientation and must be protected and handled carefully in compliance with data protection laws.

6.26 **Discrimination**

The act of unjustified or prejudicial treatment towards other people based on their Protected Characteristics. There are a number of types of discrimination, including distinctions between people based on the groups, classes, or other categories to which they belong or are perceived

6.27 **Disability Discrimination**

This includes direct and indirect discrimination, any unjustified less favourable treatment because of the effects of a disability, and failure to make reasonable adjustments to alleviate disadvantages caused by a disability

6.28 **Direct Discrimination**

Treating someone less favourably because of a protected characteristic, for example, rejecting a job applicant because of their Disability, Age, religious views or because of their sexuality. Direct discrimination can include associative discrimination, where a person is treated less favourably because of their association with an individual with a Protected Characteristic, and perception discrimination, where a person is treated less favourably because of the mistaken belief that they possess a Protected Characteristic.

6.29 Indirect Discrimination

A provision, criterion or practice that applies to everyone but adversely affects people with a particular protected characteristic more than others and is not justified. For example, requiring a job to be done full-time rather than part-time may adversely affect women because they generally have greater childcare commitments than men. Such a requirement would be discriminatory unless it can be justified

6.30 Harassment

This includes sexual harassment and other unwanted conduct related to a protected characteristic, which has the purpose or effect of violating someone's dignity or creating an intimidating, hostile, degrading, humiliating, or offensive environment for them

6.31 Sexual Harassment

- Any unwelcome conduct, advances, requests for sexual favours, or other verbal or physical conduct of a sexual nature that interfere with an individual's work performance or create an intimidating, hostile or offensive work environment
- Examples include unwanted comments, gestures, inappropriate jokes or any form of unwarranted sexual attention

6.32 Victimization

Retaliation against someone who has complained or has supported someone else's complaint about discrimination or harassment. This includes where someone mistakenly believes that the person victimised has done so. For example, Person A raised a complaint of being subject to discrimination, following which their manager subjected Person A to a disciplinary process

6.33 Bullying

This is categorised as offensive, intimidating, malicious or insulting behaviour involving the misuse of power that can leave an employee feeling vulnerable, upset, humiliated, undermined, or threatened


6.34 Disability

A physical or mental impairment which has a substantial and long-term adverse effect on an individual's ability to carry out normal day-to-day activities. The effect must have lasted for 12 months or be likely to last 12 months. An effect that is likely to recur is treated as continuing for this purpose.

OUTSTANDING PRACTICE

To be 'outstanding' in this policy area Nursing Direct could provide evidence that:

- Human rights values are central whenever decisions are taken about or for someone lacking capacity to make a specific decision or series of linked decisions, and there is evidence of all practicable attempts being made to enable them to make these decisions for themselves
- Staff including Agency Workers know about, and can discuss, the main human rights that are at risk of being breached in health and social care
- Care Plans show that human rights are always considered in finding the least restrictive option for meeting an identified need, and this is evidenced by direct quotes from the person or those who care for them
- The Service User's rights are always discussed in team meetings and individual supervision, and evidenced by recording evidence of creative person-centred planning
- Whenever Care Plans are reviewed, records show a proactive search for ways to enhance and promote the rights of individuals to live as they wish
- There is a clear approach to partnership working with other professionals and as part of a multidisciplinary team to create the best outcomes for the Service Users
- Nursing Direct provides training to all members of staff including Agency Workers on equality and diversity and keeps this training up to date
- Nursing Direct ensures that decisions for selection are always taken by more than one manager
- Nursing Direct considers taking positive action to remedy disadvantage, meet different needs or increase the participation of people who share a protected characteristic
- Nursing Direct offers training to members of staff including Agency Workers who have been absent for a period (maternity, paternity, ill-health due to a disability, etc.) to meet any need

COMPLETED DATE:	26.11.2025
SIGN OFF DATE:	26.11.2025
REVIEW DATE:	26.11.2026
SIGNED:	 Marc Stiff – Group Managing Director