

## **Equality and Human Rights Policy and Procedure**

#### **Summary:**

Human rights underpin all interactions in health and social care. The Human Rights Act 1998, the Convention on the Rights of Persons with Disabilities, the Mental Capacity Act 2005, and the Equalities Act 2010, all prohibit inhuman and degrading treatment, and set boundaries on when a person's rights to liberty or to a private and family life can be breached. When human rights are the framework for providing care and treatment, there is far less risk of callous or thoughtless cruelty or neglect within services, especially for people with significant care and support needs.

This policy has been reviewed with additional content added in relation to reasonable adjustments across the policy, procedure and definitions and further amended in order to include overall management responsibility of the policy. Further content has also been added in relation to the Accessible Information Standard and Record Keeping. References have been checked and updated to ensure they remain current.

## **Relevant Legislation:**

- 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
- UK GDPR
- Health and Social Care Act 2012 Section 250 (Information Standards)

#### **Underpinning Knowledge**

- Author: Equality and Human Rights Commission, (2019), Equality and human rights in social care [Online] Available from: <a href="https://www.equalityhumanrights.com/human-rights/human-rights-health-and-social-care?return-url=https%3A%2F%2Fwww.equalityhumanrights.com%2Fsearch%3Fkeys%3Deugli</a>
- Author: Equality and Human Rights Commission, (2019), What do we mean by reasonable?
  [Online] Available from: <a href="https://www.equalityhumanrights.com/guidance/business/employing-people-workplace-adjustments/what-do-we-mean-reasonable?return-url=https%3A//www.equalityhumanrights.com/search%3Fkeys%3DWhat%2Bare%2</a>
   <a href="mailto:Breasonable%2Badjustments%253F">Breasonable%2Badjustments%253F</a> [Accessed: 10/09/2024]
- Author: Equality and Human Rights Commission, (2020), The United Nations Convention on the Rights of People with Disabilities [Online] Available from: <a href="https://www.equalityhumanrights.com/sites/default/files/uncrpdguide\_0.pdf">https://www.equalityhumanrights.com/sites/default/files/uncrpdguide\_0.pdf</a> [Accessed: 10/09/2024]







- Author: CQC, (2023), Our updated human rights approach [Online] Available from: <a href="https://www.cqc.org.uk/about-us/our-updated-human-rights-approach#:~:text=As%20a%20human%20rights%2Dfocused,rights%20issues%20that%20we%20find">https://www.cqc.org.uk/about-us/our-updated-human-rights-approach#:~:text=As%20a%20human%20rights%2Dfocused,rights%20issues%20that%20we%20find</a>. [Accessed: 10/09/2024]
- Author: NHS England, (2020), Accessible Information Standard [Online] Available from: https://www.england.nhs.uk/ourwork/accessibleinfo/ [Accessed: 10/09/2024

## 1. Purpose

- **1.1** To enable Clover Care Group Ltd to meet the legal requirements to promote and protect the equality and human rights of Service Users, including any reasonable adjustments that might be needed.
- **12** To promote the autonomy, wellbeing and independence of Service Users by respecting and enhancing their human rights.
- **13** This policy focuses on the promotion of equality and human rights for Service Users. Equality and human rights for staff are not addressed in this policy.

1.4

Key Question	Quality Statements
CARING	QSC1: Kindness, compassion and dignity QSC3: Independence, choice and control
EFFECTIVE	QSE6: Consent to care and treatment
SAFE	QSS4: Involving people to manage risks QSS5: Safe environments
WELL-LED	QSW1: Shared direction and culture QSW2: Capable, compassionate and inclusive leaders

#### **1.5** Relevant Legislation

- 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
- UK GDPR







Health and Social Care Act 2012 Section 250 (Information Standards)

## 2. Scope

- 2.1 Roles Affected:
  - All Staff
  - Volunteers
- 2.2 People Affected:
  - Service Users
- 2.3 Stakeholders Affected:
  - Family
  - Advocates
  - Representatives
  - Commissioners
  - · External health professionals
  - Local Authority
  - NHS



## 3. Objectives

**3.1** Clover Care Group Ltd has a clear and ongoing commitment to promoting and respecting the rights of all individual Service Users, regardless of their situation and protected characteristics.

Clover Care Group Ltd provides Care fairly and indiscriminately by ensuring that each Service User is treated as an individual and Care is tailored specifically to meet their needs.

- **3.2** 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.
- **3.3** Individual 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
- **3.4** Staff show, by their actions, a commitment to equality and diversity, by enabling Service Users to maintain or create hobbies and interests, community links, friendships and memberships of religious or community organisations.







- **3.5** Clover Care Group Ltd reflects, through staff, volunteers or proactive community involvement, the cultural, religious and social make-up of the local community, so that Service Users do not feel distanced from those who share their culture or background.
- **3.6** To ensure that the five outcomes of the Accessible Information Standard are met and staff at Clover Care Group Ltd understand them and have processes in place to meet the standards.
  - Ask
  - Record
  - · Highlight
  - Share
  - Act

## 4. Policy

- **4.1** The Registered Manager, Mary Dunn, and Nominated Individual, Mary Dunn, of Clover Care Group Ltd, have overall management responsibility for this policy and procedure. This is in line with the Policy Management Policy and Procedure at Clover Care Group Ltd.
- **4.2** Actions and decisions that affect Service Users are compliant with relevant human rights law, that is, 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.

#### 4.3 Person-Centred Care

Care Plans demonstrate the importance that Clover Care Group Ltd gives to protecting the human rights of Service Users, by being clearly person-centred and individual, and reflecting a real commitment to people's rights to live as they choose.

**4.4** Clover Care Group Ltd is committed to identify and remove any 'blanket rules' governing how Service Users live, demonstrating this by person-centred planning that enables, for example, specific religious or cultural practices that are important to an individual.

#### 4.5 The Importance of Communities

Clover Care Group Ltd operates a continuous commitment to equal opportunities, diversity 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.

Clover Care Group Ltd recognises the importance of providing opportunities for Service Users to connect with their individual community.

#### 4.6 Protected Characteristics

Clover Care Group Ltd recognises that everyone is different and wants to make sure its service practices respect and promotes and celebrates these differences. It will not tolerate unlawful discrimination, victimisation, bullying or harassment of any kind, including the protected characteristics outlined in the Equality Act 2010:

Age







#### Disability

- · Gender reassignment or self-identification
- · Marriage and civil partnership
- · Pregnancy and maternity
- Race (this includes ethnic or national origins, colour or nationality)
- Religion or belief (this includes lack of belief)
- Sex (male and female)
- Sexual orientation

**4.7** Human rights, equality and diversity, and the wishes and feelings of individual Service Users, are considered in all supervisions and team meetings.

#### 4.8 Partnership Working

Clover Care Group Ltd 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.

## 4.9 Reasonable Adjustments

Where Service Users require reasonable adjustments under the Equality Act 2010, Clover Care Group Ltd will ensure these are reviewed on an individual basis and detailed within the Service User's Care Plan.

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#### 5. Procedure

- **5.1** 'Care that respects people's rights is 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'**. The CQC 2023
- **5.2** Clover Care Group Ltd provides all Service User Care using a person-centred approach, respecting the individual needs, wishes and capabilities of the Service User and promoting their human rights.

This is reflected in the company values that support an open and transparent culture, which is dedicated to cultivating rights-respected care.

**5.3** Clover Care Group Ltd 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. Clover Care Group Ltd is committed to delivering care and support in a way that promotes and enhances the human rights of all.

#### 5.4 Right to Life







Article 2 - Everyone has the right to life. Clover Care Group Ltd takes reasonable steps to protect and maintain a Service User's life except in circumstances where it is reaching its inevitable and natural close.

Clover Care Group Ltd has clear policies and procedures on supporting individual Service Users' end of life wishes and their Care provision, which includes:

- Advance decisions to refuse treatment
- Powers given by a 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 Clover Care Group Ltd for further information.

## 5.5 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

**5.6** 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 a 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 Clover Care Group Ltd is likely regarding any Service User that they should cease contact by all available means with a relative or friend.

#### 5.7 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.

#### **5.8 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 which can be located here.

#### 5.9 Accessible Information Standard

Clover Care Group Ltd recognises the importance of sharing information in a way that is accessible and that people understand.

Clover Care Group Ltd has a clear policy in place to ensure that, as part of the individual Service User Care Plan process, Service Users' communication needs are assessed and discussed. Staff can refer to the Accessible Information Standard Policy and Procedure for more information.

Following this, Clover Care Group Ltd takes a proactive approach and ensures that there are consistent methods in place for recording, flagging, sharing and meeting the information and communication support needs of Service Users and carers as well as any changing needs.

Staff are trained in the Accessible Information Standard through induction, the Care Certificate and continual learning in relation to communication. This will form part of supervisions and appraisals and continually monitored via the compliance process at Clover Care Group Ltd.

For more information please refer to the Accessible Information Standard Policy and Procedure and Supporting Communication and Sensory Needs Policy and Procedure at Clover Care Group Ltd.

#### 5.10 Record Keeping

Clover Care Group Ltd has rigorous record keeping protocols which ensure that daily care notes are accurate, transparent and reflect the individual person-centred Care provided in real time.

Clover Care Group Ltd 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 staff can refer to the suite of Data Protection and UK GDPR Policies and Procedures.

Staff can also refer to the Record Keeping Policy and Procedure and Consent Authorisation Policy and Procedure for more detailed information on these areas.







#### 5.11 Reasonable Adjustments

As part of the Care Plan process Clover Care Group Ltd will ensure that reasonable adjustments are considered and identified for all Service Users. These will be documented within their individual Care Plan.

Where reasonable adjustments have been identified these will be discussed with Mary Dunn and implemented at Clover Care Group Ltd, where possible, for the individual Service User. All actions in regards to reasonable adjustments will be clearly documented as part of the care planning process.

When deciding whether an adjustment is reasonable Clover Care Group Ltd will consider:

- How effective the change will be in avoiding the disadvantage the disabled person would otherwise experience
- Its practicality
- · The cost
- The resources and size of Clover Care Group Ltd
- The availability of financial support

Examples of reasonable adjustments may include:

- Providing information in a specific format for a Service User
- Conducting assessments at a time of day that is more suitable for the Service User such as afternoon rather than morning
- Having accessible technology available such as an accessible telephone systems
  or online/digital systems that supports the needs of all Service Users. All technology
  should be user-friendly and user training provided where required. The opportunity for
  feedback and providing technical support will also be in place
- Arranging for an advocate to support a Service User

#### **5.12 Challenging Discrimination**

As part of formal training, all staff will receive an education on the following topics:

- Equality, Diversity and Inclusion
- Safeguarding Adults
- Whistleblowing

Training will also be in place to support understanding for staff of the personal, cultural, social and religious needs of people, 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.

Clover Care Group Ltd ensures that staff have a clear understanding and sound knowledge base for recognising the traits of discrimination and abuse and what to do about it.

Staff must follow the procedure outlined in the Raising Concerns, Freedom to Speak Up and Whistleblowing Policy and Procedure and raise any concerns, seeking support from the Registered Manager immediatel







#### 6. Definitions

#### 6.1 Mental Capacity Act 2005 (MCA)

- In England and Wales, the MCA defines capacity as the ability to make a specific decision at the time it needs to be made
- Everyone aged 16 or over is presumed to have this capacity unless there are reasons to question it, in which case the person's capacity should be assessed in the way described in the MCA and its code of practice
- The MCA balances the rights of {Service\_user\_text}s to live as they choose, express their wishes and make their own decisions as long as they are not harming others, against the requirement to protect people who lack mental capacity, by finding the least restrictive options to meet identified needs in the best interests of the person

#### 6.2 '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 in order 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)
- · This relates to Article 5 in health and care settings

#### 6.3 Human Rights Act 1998: Article 8

- Everyone has the right to live as they choose, and for the State not to interfere in their private life
- 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
- These rights can be breached if the breach is necessary and proportionate to prevent harm to the person or to protect public health, for example, by preventing the spread of infection.
- However, in health and social care settings, interference with this right should usually be extremely rare, and always proportionate to the risk and likelihood of harm if no action is taken
- Where it is unavoidable, the effects on the person must be recognised and mitigated as far as possible

#### 6.4 Human Rights Protected by the 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

- 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'.
  - 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
  - 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
- 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'
  - 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\_user\_text}s must be rooted out
- 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!
- This is now strengthened by the Modern Slavery Act 2015, which forbids slavery or forced labour, and includes trafficking. {reg\_provider} must ensure that it is not, even unwittingly, employing people who do not enjoy the rights available to other staff due to being trafficked or forced to pass on their pay to a trafficker
- 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
- Article 6: Right to a fair trial. This includes being presumed innocent until there is evidence of guilt
- Article 7: No punishment without law. Nobody can be found guilty of something which was not a crime at the time it was committed
- 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
- 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'
- 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
- 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
- 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

#### 6.5 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)

## 6.6 The Equality Act 2010

- This Act makes it unlawful to discriminate against people, both in the workplace and in wider society
- 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. They are:
  - Age
  - Disability
  - · Gender reassignment
  - Marriage and civil partnership
  - Pregnancy and maternity
  - Race
  - Religion or belief
  - Sex

## CLOVE Sexual orientation

#### 6.7 Deprivation of Liberty Safeguards DoLS: Human rights protection

- 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
- 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
- The protections for a person include:
  - Any conditions attached to the authorisation
  - Independent scrutiny of their {Care plan name} by a DoLS assessor
  - Independent assessment by a DoLS assessor of their capacity to consent to the {Care\_plan\_name}
  - 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
- 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 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'

#### 6.9 Reasonable Adjustment

- As part of the Equality Act 2010, {Client\_Name\_Official} must ensure reasonable adjustments are in place to meet the needs of disabled people where required
- Examples of reasonable adjustments include
  - Making a building or environment accessible for a disable person, such as ramps and techological aids
  - Providing information in a format that supports the person for example audio, large print or offering clear written information
  - Adjusting the timing of meetings to a time of day that suits the person, such as a {Care\_plan\_name} review in the afternoon rather than the morning
  - Arranging for an advocate to support the {Service\_user\_text} where required

## 7. Key Facts - Professionals

Professionals providing this service should be aware of the following:

- The Human Rights Act 1998, and, where relevant, the Mental Capacity Act 2005, provide the essential framework for decisions and actions in health and social care
- Rights can be absolute (such as Article 3, the complete prohibition of inhuman or degrading treatment) or qualified (such as Article 5, the right to liberty, and Article 8, the right to a private and family life) but are the starting point for good care
- The Mental Capacity Act 2005 and its code of practice provide detailed guidance on human rights for people who lack mental capacity
- Any breach of a person's human rights is a serious matter and all attempts must be made to avoid it or minimise its extent and effects on the person

## 8. Key Facts - People Affected by The Service

People affected by this service should be aware of the following:

- You can expect to receive indiscriminate Care that reflects your individual needs
- You, or your relatives, have legal rights under the Human Rights Act 1998 and, where relevant, the Mental Capacity Act 2005
- Any inference by a public authority (or anyone commissioned by it) in someone's







rights must be the least restrictive option that can be found and can be challenged in court

- Some rights can never be taken away or lessened; these include a person's right never to be tortured or treated in a way that is degrading or inhuman. This is explained in the Human Rights Act, Article 3
- Some rights can be restricted, but only if it is in your best interests (or those of your relatives or friends who receive services) or to protect public health. These are your rights to liberty (Article 5) and your right to live as you choose, including free contact with those you care about (Article 8)





