# A guide for mental health services and organisations

# to becoming more LGBT inclusive

# LGBT MENTAL HEALTH AUDIT TOOL



LGBT Health and Wellbeing



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# **The development of the audit tool**

LGBT Health and Wellbeing launched its Mental Health Demonstration project in July 2010. The project was the first of its kind in the UK. The project was funded by the Scottish Government and a key outcome of the project was to develop a practical and lasting tool that would support the development of LGBT inclusive practice within mental health services.

The tool was developed with input from a wide range of statutory and third sector representatives including advisory group members from the Scottish Recovery Network (SRN), Scottish Government, NHS Health Scotland, Consultation and Promotion Service (CAPS) and NHS Lothian. The audit tool was also shaped by our research with individuals who directly use mental health services.

The audit tool is designed to be used by any individual or team that provides a direct service to people. It is aimed at helping services think about their current practice and identify any further steps that they can take to improve their current practice.

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### **About LGBT Health and Wellbeing**

LGBT Health and Wellbeing creates and promotes opportunities to improve and equalise the social, emotional, physical and mental health and wellbeing of lesbian, gay, bisexual and transgender people in Scotland, through a programme of activities, events, courses and community groups.

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# **Being LGBT: current experience**

Attitudes towards lesbian, gay, bisexual and transgender (LGBT) people have undergone significant and positive change over recent decades. In many ways, LGBT visibility is much higher, and significant legislative advances such as the Equality Act (2010) have helped afford LGBT people greater legal protection from discrimination. However, ignorance, negative attitudes and stereotypes around LGBT people and identities continue to be prevalent in society.

LGBT people constitute a very significant minority: around **7-10%** of the adult population. This minority can at times be severely disadvantaged:

* **Two thirds** of LGBT people have been the victim of **hate crime** (Stonewall Scotland, 2010). As people get older and potentially more vulnerable, this can become increasingly worrying.
* LGBT people are **over three** **times more likely to have poor mental health** than the general population(‘Count Me in Too’, University of Brighton, 2007/See Me Scotland, 2014).

Background Context

Whilst increasing numbers of LGBT people are able to live open, happy and successful lives, many others face complex challenges. The day to day experience of many LGBT people in Scotland continues to be one of discrimination, prejudice, stigma, harassment and hate crime, based on their sexuality and/or gender identity.

Many LGBT people continue to face rejection (or fear of rejection) by family, friends, colleagues and neighbours, and therefore often avoid being “out” in many spheres of their lives. Whilst many LGBT individuals have no issues or concerns regarding their own identity, they may be contending with the concerns of others, the intolerance of other people, or a lack of understanding or acceptance from others.

Societal ignorance, marginalisation or outright hostility can result in acute health inequalities including a very high prevalence of psychological distress (increasingly referred to as “minority stress”) and poor mental health. Many LGBT people feel unable to access mental health services, even in a crisis.

Reasons may include previous experience of poor, non-inclusive treatment or support, and fear of having to explain or “out” themselves in order to correct or challenge a person’s incorrect assumption.

Coupled with these complex needs is a widespread lack of understanding of the day to day experiences and challenges faced by many LGBT people. This means the response of many mainstream health and support services often fails to fully meet the needs of LGBT people.

The quotes throughout are from a focus group of LGBT people who have experience of using mental health services.

**How** to use the audit tool

This tool can be used to gain an overall “snapshot” of your service and it will help you think about ways that you can continue to develop your practice in a way that supports LGBT inclusion. It is suggested that a number of staff get together to jointly complete the audit. You might also want to involve people who use your service in this process. Joint discussion around the completion of the audit tool in itself is helpful to generate ideas and explore ways of doing things.

**Why** use the audit tool?

* It will help you think about LGBT people's experience of your service. Recognising the diverse needs of individuals is a core component of providing good quality care and support – LGBT affirmative practice enhances people's overall experience of your service.
* It is easy to use, and designed to help you think about what practical steps you can take to develop your service so it meets the needs of the LGBT community. This tool is about recognising diversity and people's experience of your service. The aim of the tool is to help you ensure that your service / team / organisation provides LGBT inclusive practice.
* Some small changes can have a massive impact on the way that LGBT people experience your service. The tool can also be used to promote, share and celebrate good practice.
* The Equality Act 2010 consolidates many of the protections against discrimination in employment and the provision of goods and services. Any organisation delivering a public service must consider the needs of different groups who might use the service and commit themselves to tackling inequality. As well as ensuring you work within the law you can also use the tool to ensure that people accessing your service are treated fairly and equally.
* The Scottish Government Mental Health Strategy 2012-15 explicitly covers the need for Equal Access to mental health services under commitment 14 “Equality of Access to Services”

The audit tool process

You can start to use the audit tool at any time; however you will need to think about the circular nature of the review process. Once you have completed step 4 you will need to agree when you plan to start the process again. This will also help you identify the progress you have made and the practice you want to see continued.

**Who** should use the audit tool?

Any individual or team that provides mental health services could benefit from using the audit tool. The tool is designed to help you think about your practice and the practical steps that you can take to continue to improve your current practice. The audit tool has been developed with input from LGBT people and a wide range of statutory and third sector representatives.

# The audit tool focuses on five categories:

3. The service has relevant **policies and procedures** to support LGBT inclusive practice

2. The service is **safe and accessible** for LGBT people

1. Staff providing a service are supported to develop an **awareness of working with LGBT people**

4. The service undertakes relevant **equality monitoring** with sexual orientation and gender identity included

5. The service is proactive about its **promotion, publicity and engagement.**

The detail of the categories will be explored by a number of **key statements** against which you can evaluate your current practice. The key statements are not ranked in any specific order.

You are asked to score each key statement deciding if you:

1. don't currently meet (0 points)
2. partially meet (5 points)
3. fully meet (10 point)

The maximum score that can be achieved in the audit is 250 points (made up of 5 categories with 5 key statements each). It might be that you score higher in one category compared to another. The scoring aims to help you think about the good practice you currently have as well as identifying gaps that you want to address.

The scoring of these key statements will help you get a sense of where you are currently doing well and the areas that will need improvements. When you score the key statements it is important that you list evidence to substantiate your rating as well as listing actions for improvement.

The scoring will also help you compare year on year progress and achievements in developing your LGBT inclusive practice.

# Thinking about evidence gathering

* Review paperwork
* Daily case notes
* Assessment paperwork
* Complaints / Suggestions log
* Other service evaluations or self-assessments
* Training records and plans
* Induction records and development plans
* Service or organisational newsletters
* Relevant policies and procedures

You do not need to physically gather all this information, but the main thing is you know that it exists and you could use it to substantiate your rating. Evidence can be gathered from various sources, some examples may include:

* Service literature including brochures and leaflets
* Information contained on your website including signposting to LGBT specific organisations
* Results from annual surveys, inspections or consultations
* Discussions from staff teams, people who use your service, and carers

# **Category One:**

# Staff providing the service are supported to

# develop an awareness of working with LGBT people

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| **Key Statements** | **Examples of Evidence**  **and score** | **Agreed Actions**  **(*what you plan to do to achieve the key statement)*** | **Timescale for follow up action** |
| *1. All staff have received LGBT awareness training* |  |  |  |
| *2. Staff are aware of the specific mental health inequalities that LGBT people may face* |  |  |  |
| *3. Staff are comfortable in raising LGBT issues relating to those using the service and can confidently ask / answer questions relating to sexual orientation or gender identity* |  |  |  |
| *4. Staff are knowledgeable and confident to signpost people to relevant LGBT organisations* |  |  |  |
| *5. Staff actively challenge negative stereotypes especially from other people who use the service. Staff actively promote “safe space” (see support pack for an example)* |  |  |  |

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| Some examples of evidence   * LGBT awareness training is integral to staff induction and on-going development with the team. * The Service has adopted a “Safe Space” policy/statement which explicitly covers challenging prejudice from people who use the service and colleagues. * Staff have access to a database of LGBT organisations. Service web-page has signposting info to LGBT organisations. |
| Example actions that you might want to take to achieve the key statement   * Ensure that all staff receive LGBT awareness training. * The service will develop a “Safe Space” policy/statement which clearly sets out expectation of all staff to challenge discriminatory remarks. * Staff have easy access to information relating to LGBT health and wellbeing to help with signposting. |
| Scores of key statements - 1( ) 2( ) 3( ) 4( ) 5( ) |
| TOTAL SCORE FOR THIS CATEGORY = |
| Any other notes: |

# **Category Two:**

# The service is safe and accessible for LGBT people

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| **Key Statements** | **Examples of Evidence**  **and score** | **Agreed Actions**  **(*what you plan to do to achieve the key statement)*** | **Timescale for follow up action** |
| *1. Staff challenge negative stereotypes, especially from other people who use the service. The service does not tolerate discriminatory language or behaviour. Staff actively promote “safe space”.* |  |  |  |
| *2. The service environment is welcoming and there are visible signs that the service/organisation promotes LGBT inclusive practice.* |  |  |  |
| *3. The service displays targeted/appropriate service literature inclusive of LGBT people and LGBT services. Same sex partners and carers are fully involved in care/support planning.* |  |  |  |
| *4. The service is proactive in ensuring that staff and people who use the service are aware of policies relating to discrimination, bullying/harassment and how to complain – these are actively promoted to ensure that a “safe space” exists.* |  |  |  |
| *5. Staff help create open communication and do not use language that assumes heterosexuality. People who use the service are given clear information about bounds of confidentiality.* |  |  |  |

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| Some examples of evidence   * The organisation has a Safe Space policy/statement that is visible to everyone and used pro-actively by staff. * The organisation has a wide range of leaflets and other info that are relevant to the LGBT community. * The organisation has a “statement of care” or support that explicitly states that the service wants to work will all sections of the community – LGBT affirmative language is used. * People are reassured that they will be supported throughout the complaints process, and there are procedures in place that allow people to complain anonymously to avoid revealing their LGBT status. |
| Example actions that you might want to take to achieve the key statement   * Review of organisational policies and procedures – develop a “Safe Space” policy, and link this into staff induction and on-going training * Review service information/literature in reception areas. Review team knowledge about LGBT services and referral routes. Promote events like Pride Scotia and LGBT History Month * Ensure that the bounds of the confidentiality policy/statement is clear to all staff to ensure this is upheld |
| Scores of key statements - 1( ) 2( ) 3( ) 4( ) 5( ) |
| TOTAL SCORE FOR THIS CATEGORY = |
| Any other notes: |

# **Category Three:**

# The service has relevant policies and procedures

# to support LGBT inclusive practice

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| **Key Statements** | **Examples of Evidence and score** | **Agreed Actions**  (***what you plan to do to achieve the key statement)*** | **Timescale for follow up action** |
| *1. The service has policies in place that relate to information sharing regarding sexual orientation and gender identity.* |  |  |  |
| *2. The service has procedures in place that recognise the diversity of sexual orientation and gender identities.* |  |  |  |
| *3. Staff are clear about the expectations on them to challenge anti-discriminatory views or actions. The service has an anti-bullying policy that makes specific reference to LGBT people.* |  |  |  |
| *4. Learning and development plans allow staff to develop LGBT knowledge and skills to enhance their inclusive practice.* |  |  |  |
| *5. Policy, procedure and service development is undertaken within the context of the Equality Act and Equal Opportunities legislation.* |  |  |  |

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| Some examples of evidence   * General policy index – specific policies such as “Staff Concerns” or “Whistle blowing” are in place and form part of staff training/induction. * Policies and related complaints procedures are accessible/visible to staff and people who use the service. * Learning and development plans continue to look at ways to enhance LGBT affirmative practice. |
| Example actions that you might want to take to achieve the key statement   * Development of a staff charter or code of conduct. * People who use the service are made aware of organisational policies – people are involved in developing these. * Learning and development plans are updated each year to reflect team and individual need. * Links with LGBT organisations are established and specialist knowledge used to enhance practice. * Increase staff/management knowledge of requirements contained in the Equality Act. |
| Scores of key statements - 1( ) 2( ) 3( ) 4( ) 5( ) |
| TOTAL SCORE FOR THIS CATEGORY = |
| Any other notes: |

# **Category Four:**

# The service undertakes relevant equality monitoring

# with sexual orientation and gender identity included

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| **Key Statements** | **Examples of Evidence**  **and score** | **Agreed Actions**  (***what you plan to do to achieve the key statement)*** | **Timescale for follow up action** |
| *1. Staff understand why monitoring is important and feel comfortable in engaging in discussion about sexual orientation and gender identity with people who use the service. Monitoring information covers the spectrum of LGBT identities.* |  |  |  |
| *2. Monitoring information is regularly collated and used to identify trends and gaps in service delivery.* |  |  |  |
| *3. The service makes clear to people using the service the reasons why monitoring information is measured and how this information will be used.* |  |  |  |
| *4. The service actively promotes itself to the LGBT community and is proactive in seeking ways to make links with LGBT organisations and groups.* |  |  |  |
| *5. The service consults LGBT organisations when specialist knowledge is required.* |  |  |  |

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| Some examples of evidence   * Monitoring information on sexual orientation and gender identity are collected at outset of service and during annual service evaluation. * All forms of monitoring information cover the whole spectrum of LGBT identities. * Monthly, quarterly or annual reporting captures who the service works with. * People who use the service are made aware of gaps and how the service intends to address these. |
| Example actions that you might want to take to achieve the key statement   * Review of monitoring information to ensure they include the spectrum of LGBT identities. * Person from team or service to establish links with specialist LGBT services to help foster joint working. |
| Scores of key statements - 1( ) 2( ) 3( ) 4( ) 5( ) |
| TOTAL SCORE FOR THIS CATEGORY = |
| Any other notes: |

**Category Five:**

The service is proactive in developing promotion, publicity and engagement

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| **Key Statements** | **Examples of Evidence and score** | **Agreed Actions**  ***(what you plan to do to achieve the key statement)*** | **Timescale for follow up action** |
| *1. The service promotes its work in LGBT media, and promotes LGBT services and groups in its own communication materials. This kind of two-way communication is part of an overall promotional strategy.* |  |  |  |
| *2. The service has developed some resources that will specifically encourage LGBT people to access the service.* |  |  |  |
| *3. Web links on web page are varied and link people to specialist LGBT services.* |  |  |  |
| *4. The service promotes its “safe space” policy and celebrates the on-going learning and development of the staff team with regard to LGBT inclusive practice.* |  |  |  |
| *5. The service looks for opportunities to engage with LGBT people who might not ordinarily access the service. For example attending Pride, making links with LGBT specific services, ensuring service promotional material is available in LGBT specialist services.* |  |  |  |

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| Some examples of evidence   * Promotional material is developed with specific reference to the LGBT community. * The service ensures that their web page has good links to LGBT organisations and/or specialist information. * “Safe Space” policy is adopted and visible to all who come into contact with the service. * Social media and website strategy includes LGBT media. |
| Example actions that you might want to take to achieve the key statement   * Develop LGBT specific promotional material – include links to specialist LGBT organisations in general material. * Ensure the service has visible and readily accessible information relating to LGBT health and wellbeing – at reception, in resource library or on notice board. |
| Scores of key statements - 1( ) 2( ) 3( ) 4( ) 5( ) |
| TOTAL SCORE FOR THIS CATEGORY = |
| Any other notes: |

# Next Steps

**For more information, to request support,**

**or to give feedback on this tool, please contact:**

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Our overall score was ( )

Other things to consider

You might have also thought about other areas that do not necessarily fit into one of the 5 categories – you can capture these here.

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Completing the overall audit will have hopefully helped you think in detail about how your service is currently engaging with LGBT people and other ways that you could look to develop your LGBT inclusive practice.

* You will have identified some key action points from the key statements.
* It is important that you follow up the action points within the agreed timescale.
* Be realistic and ensure that a range of people follow upon these action points, as this will help your service keep the momentum going.
* Remember that the audit process is cyclical.