**HWEI 2021 EVIDENCE AND SCORING GUIDELINE**

This document is to be used in conjunction with the HWEI submission document, designed to guide the gathering of evidence to obtain maximum points.

**NOTE: Due to Covid-19 and the move to a more sustainable culture e-Brochures and other electronic format forms and documentation are considered valid evidence for this index. If you have any questions about the evidence, you are providing please review the evidence against this guide or ask your Relationship Manager.**

**Participation Details**

**All participating employers must complete the Service Provider Details within the Submission Document.**

**These details include:**

* **data used for HWEI benchmarking across industries, regions and sectors**
* **confirmation regarding your recognition of participation**
* **additional Individual Award Nomination information**
* **Accuracy Statements and Disclosures**
* **contact details of the person handling your Submission**

**SECTION 1: STRATEGY, DEVELOPMENT, SERVICE PLANNING & PROVISION**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Staff Compliance with Policies and Practices** | | | **Foundation** |
| **Does this service have access to a working group that includes individuals with LGBTQ expertise and/or LGBTQ consumer experience to assist with the planning and ongoing development of LGBTQ inclusive services?** | For effective LGBTQ inclusive service delivery to be implemented within an organisation you need to have access to LGBT consumer voices and best practice knowledge.  This question looks at an organisations ability to engage those who identifying as part of the community as well as allies. Working groups/reference groups help inform LGBTQ inclusion initiatives within the organisation, acknowledging the importance of lived experience and expertise of LGBTQ people and how it informs their work. | *For maximum point allocation, please provide all of the requested pieces of information below:*   1. *evidence of access to LGBTQ expertise (this may include but is not limited to Pride in Health + Wellbeing, Rainbow Tick contacts, LGBTQ community expertise in Health)* 2. *the number of individuals with LGBTQ consumer experience within the working group* 3. *when the working group was last consulted regarding the planning & ongoing development of services* 4. *regularity of consultation with the working group (how often on average does the working group meet throughout the year)* | **a) 3 points** if evidence of access to LGBT expertise  **b) 2 points** if evidence of the number of attendees is provided  **c) 1 point** if evidence of the date of the last meeting is provided  **d)** **2 points** if evidence of regular consultation (at least quarterly), since the start of program within the calendar year  (for example, 4x if program has been around the entire year, 2x for half the year, 1x for only a few months)  *(A maximum of* ***8*** *points is available for all pieces of information provided in this question)* |
| 1. **LGBTQ Service Planning** | | | **Foundation** |
| **Have LGBTQ health disparities and the relevance of this information to your service been investigated and incorporated within your service planning?** | This question measures the organisation’s understanding of the health disparities of LGBTQ people and how this influences person-centred service provision.  You don’t need to provide the services however you do need to understand what referrals or further support an LGBTQ person may need by understanding the health disparities of LGBTQ people. | *For maximum point allocation, please provide both:*   1. *evidence of findings (listing the LGBTQ health disparities relevant to your service provision)* 2. *an explanation of how this information was incorporated into your service planning and/or ongoing development of services* | **a) 2 points** if evidence of the relevant health disparities being collected by your organisations is provided  **b) 2 points** for a good explanation of how you used your understanding of these disparities to make changes to the way you undertake your services/supports.  Please show disparities and a direct parallel to the changes you have implemented.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |
| 1. **Strategic Plan** | | | **Intermediate** |
| **Do you have a current strategy or continuous improvement plan in place that identifies LGBTQ inclusivity within service provision as a current area of strategic focus?** | This question benchmarks an organisation’s inclusion strategy which will guide you to implement effective cultural change. It allows you to commit to key actions, deliverables with a clear accountability structure.  Striving for continuous improvement as an organisation is imperative to the success of your inclusion strategy. Continuous improvement allows you to work toward your inclusion initiative, measuring your progress and impact along the way.  A strategy and associated documents should include (at a minimum):   * A diversity statement that specifically identifies the inclusion of gender and sexuality diverse people within your service. * Specific SMART goals relating to LGBTQ diversity to be achieved with a timeframe * Who is responsible for achieving these goals * How goals are measured and reported. | *For maximum point allocation, please provide both:*   1. *a copy of the LGBTQ component of your current strategy or continuous improvement plan* 2. *any associated working plans, reporting accountability or scheduled working groups aligned to the plan* | **a) 2 points** if the LGBT component is provided.  **Additional point** if strategy and plan is above and beyond expectations  **b) 2 points** if provided  **Addition point** if detailed and comprehensive.  *(A maximum of* ***6*** *points is available for all pieces of information provided in this question)* |

**SECTION 2: LGBTQ CULTURAL SAFETY**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Tracking LGBTQ Cultural Safety** | | | **Foundation** |
| **Do you have processes/strategies in place to identify, track, manage/respond to risks or situations that, could or have, jeopardised the cultural safety of LGBTQ people?** | Completing a risk analysis will support you in understanding what changes may need to be made for your organisation to be inclusive of LGBTQ people.  Risks should be identified, measured for the level of impact and have clear mitigating actions to help prevent the risk from occurring. If the risk does occur organisations need to have clear guidelines of how they will respond to mitigate and limit harm.  Risk can not only impact a person physically but can also affect a person psychologically. Risks may be internal and external to the organisation. | *For maximum point allocation, please provide both:*   1. *a list of any risks identified* 2. *a copy of any formally documented processes/strategies that enable you to identify, manage, respond to these risks should they occur* | **a) 2 points** if a list of LGBTQ related risks is provided  **b) 3 points** if processes and strategies for managing risks are provided.  **Note**: They must be able to clearly identify, manage, and respond to potential risks.  **Additional point** if comprehensive.  *(A maximum of* ***6*** *points is available for all pieces of information provided in this question)* |
| 1. **Staff Compliance with Policies and Practices** | | | **Foundation** |
| **Do you have any systems or processes in place to monitor staff compliance with your LGBTQ inclusion policies and practice outlines for inclusive service provision?** | Organisations who implement effective service inclusion initiatives have policy and procedures that guide and support inclusion. These policies and procedures allow management to hold staff accountable. Organisations then can measure the effectiveness of initiatives through consumer surveys, staff surveys, complaints registers, staff KPIs and one on one conversations.  Example of this may be during supervision staff are coached and monitored around their case planning for people who identify as LGBTQ and culturally appropriate interventions being applied where needed. | *For maximum point allocation, provide both:*   1. *Evidence of how and where staff can access all relevant policies and procedures* 2. *Evidence of how staff are notified of a new policy/procedure changes to policy or procedure and given any relevant communication and training to be competent in following any policy or procedure.* | **a) 2 points** if evidence provided that policies and procedures are clearly in place and accessible by staff.  **b) 2 points** evidence is provided on how staff are made aware of changes to policy/processes or any new practices and how their compliance in following them is monitored.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |

**Section 3: Visibility of LGBTQ Inclusion**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Website and Service Brochures** | | | **Foundation** |
| **Does your website *and* your service brochures clearly promote the LGBTQ inclusivity of your service?** | This question assesses if your organisation has visibility of LGBTQ people through its marketing and media content.  If an LGBTQ person goes to your website or takes a service brochure can they see themselves in the images and language you use? LGBTQ people look for these cues when choosing a service.  Note: URLs are generic information, whereas brochures are usually specific information about a service(s), but may be found on the website. | *For maximum point allocation, please provide both:*   1. *all public facing URLs where LGBTQ inclusion is clearly communicated* 2. *a copy of all service brochures where LGBTQ inclusion is clearly promoted* | **a) 2 points** if URLs are provided.  **Additional point** for a substantial amount of URLs.  **b) 2 points** if brochures (including electronic or online brochures) are provided.  **Additional point** for above and beyond the promotion of LGBTQ inclusion.  *(A maximum of* ***6*** *points is available for all pieces of information provided in this question)* |
| 1. **Customer Facing LGBTQ Collateral** | | | **Foundation** |
| **Do you display any community posters, rainbow flags or LGBTQ collateral within your service provision areas?** | Visibility is important for LGBTQ people due to the history of the trauma they have faced. Visual imagery can tell a person if a space is safe.  Does your organisation have visual cues of inclusivity? | *Please provide photographs of LGBTQ collateral displayed within service provision areas.*  *(****note:*** *please do not just show what symbols are displayed, points are awarded for evidence of these symbols in situ)* | **2 points** if photographs of collateral in service areas are provided.  **2 additional points** if multiple examples/areas provided.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |

**Section 4: Initial Engagement & Assessment**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Intake Forms** | | | **Foundation** |
| **Is the language used within forms/documentation that service users are required to complete, inclusive of LGBTQ people?** | This question benchmarks an organisation’s understanding of language and how this may impact LGBTQ people in a health care setting.  Heterosexuality and gender binary are the presumed norm, intake forms and documentation do not always allow a person to identify themselves or affirm their sexual or gender identity.  Information provided at intake such as privacy disclosures and service information need to acknowledge the diversity of LGBTQ people.  Have you made changes to your forms that allow an LGBTQ person to be able to select their gender or sexuality where appropriate? Is the language you use in your forms and documentation inclusive of LGBTQ people?  **Note:** this is specifically looking at forms at the commencement of services | *Please provide a copy of two intake forms/ documents that service users are required to complete.*  *(****Note****: if less than two intake forms/documents are provided then full points will not be given)*  *If you can provide more than two intake forms/documents, please add them to the ADDITIONAL WORK section at the end of this submission, in one row with the Item Name: “LGBTQ Inclusive Language.”* | **2 points** if sexuality / sexual orientation included  **Additional point** if the above options are detailed  **2 points** if gender identity is included  **Additional point** if the above options are detailed  **1 point** if intersex is included  *(A maximum of* ***7*** *points is available for all pieces of information provided in this question)* |
| 1. **On-going Documents** | | | **Foundation** |
| **Are your individual care assessment, care planning and/or case management documents explicitly inclusive of LGBTQ people, their support team and families?** | This question extends from Question 8 it measures an organisation’s services provision processes and the language that is used throughout the process. How are LGBTQ people written into case planning and formulation processes? Are the forms and frameworks used inclusive? Can a person who is LGBTQ select options that affirm their identity and provide culturally appropriate support and referral? Are families of choice understood and investigated in case planning?  **Note**: this is specifically looking at forms, processes and conversations that occur after intake to better support your clients’ needs. | *Please provide a copy of two forms/documents that are explicitly inclusive of LGBTQ people, their support team and their families within assessment, care or case management processes. (Note: Less than two forms/documents will result in partial point allocation.)*  *If you can provide more than two forms/documents, please add them to the ADDITIONAL WORK section at the end of this submission, in one row with the Item Name: “LGBTQ On-going Documents.”* | **1 points** if one form/evidence is provided.  **2 pts** if 2 forms are provided  **One Additional point** for each form if substantial evidence or if actioned in assessment and processes.  *(A maximum of* ***5*** *points is available for all pieces of information provided in this question)* |

**Section 5: LGBTQ Inclusivity & Disclosure TraIning/Resources**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Staff Development Opportunities** | | | **Foundation** |
| **Have you provided any development opportunities for staff over the assessed year to increase their understanding of LGBTQ people or LGBTQ inclusive service provision?** | This question looks at the training staff have received, the ongoing training plans that have been implemented, as well as the quality of the training.  Have staff engaged in LGBTQ Awareness training as well as industry-specific training that empowers staff to provide LGBTQ affirming care?  **Note:** If staff development provided by PIHW or ACON Pride Training in the assessed year then only evidence of date and number of attendees is required. | *For maximum point allocation, please provide all of the following:*   1. *total number of development opportunities specifically covering LGBTQ populations, awareness or inclusive service provision within the assessed year* 2. *a brief outline of LGBTQ content covered (evidence required for a maximum of 2 sessions)* 3. *duration of the LGBTQ content delivery within each of the sessions identified in (b) above* 4. *the approximate number of people who undertook each of the sessions identified in (b) above* | **a) 2 points** if evidence provided.  **b) 3 points** if provided.  Add an additional point if the outline is comprehensive.  Add another additional point if this is above and beyond expectations.  (**Note**: This can be up to a total of 5 points.)  **c) 2 points** if durations of sessions provided.  **d) 1 point** if the number of attendees for each session is provided.  *(A maximum of* ***10*** *points is available for all pieces of information provided in this question)* |
| 1. **Staff Guidelines** | | | **Intermediate** |
| **Understanding the sensitivity around disclosure for LGBTQ people, we provide staff/clinicians/practitioners with guidelines/factsheets on the management of LGBTQ sensitive information.** | This question benchmarks an organisation’s understanding of the sensitivity and risks associated with supporting LGBTQ people in health care.  Does the organisations understand the laws around health directives, HIV status disclosure, as well as the need to not out a person unintentionally?  Do staff have access to training, resources (printed & online) as well as support champions or subject matter experts within the organisations that can support them to adhere to privacy requirements? This is above and beyond having a standard organisational privacy policy. | *For maximum point allocation, please provide evidence of all of the following:*   1. *your organisations understanding of LGBTQ hesitations and sensitivities around disclosure* 2. *the importance of articulating why requested sensitive information is important to the service* 3. *knowing when to ask these questions and when it is not relevant or appropriate to ask these questions* 4. *the need to convey information in regards to data privacy i.e. how this information is shared/stored when collecting sensitive information*   *Please also provide:*   1. *details as to how this information is distributed to, or accessed by staff/clinicians/practitioners* | **a-d) 2 points** for partial evidence requested.  **Additional point** if all evidence requested has been provided.  **e) 1 point** if details of information distribution is provided.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |
| 1. **Trans / Gender Diverse Resource Services** | | | **Advanced** |
| **We provide education/resource materials and/or comprehensive training to frontline staff/clinicians/practitioners regarding the provision of respectful and inclusive services for Trans / Gender Diverse people (beyond general awareness training covered in Q10).** | This question follows on from question 11 and focuses on gender diversity.  Are staff trained in gender-affirming practices outside general awareness?  Do staff have access to training, resources (printed & online) as well as support champions or subject matter experts within the organisations? | *For maximum point allocation, please provide both:*   1. *a copy of the materials used, or table of contents detailing the material covered concerning inclusive service provision for Trans/Gender Diverse service users* 2. *details as to how staff/clinicians/practitioners access this information or how this information is distributed (if training – how many sessions were run over the assessed year)* | **a) 2 points** if a list of materials or resources is provided.  **b) 2 points** if how staff can access these resources or how frequently training is provided.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |
| 1. **Intersex Resource Services** | | | **Advanced** |
| **Do you provide education/resource materials and/or comprehensive training to frontline staff/clinicians/practitioners in regard to the provision of respectful and inclusive services for Intersex people (beyond general awareness training covered in Q10)?** | This questions extends from questions 11 & 12 and focuses on people with an intersex variation.  Are staff trained in culturally appropriate support for people with an intersex variation outside general awareness? Do staff have access to training, resources (printed & online) as well as support champions or subject matter experts within the organisations that can support them? | *For maximum point allocation, please provide both:*   1. *a copy of the materials used, or table of contents detailing the material covered concerning inclusive service provision for Intersex service users* 2. *Details as how staff/clinicians/practitioners access this information or how this information is distributed (if training – how many sessions were run over the assessed year).* | **a) 2 points** if a list of materials or resources is provided.  **b) 2 points** if how staff can access these resources or how frequently training is provided.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |

**Section 6: Referrals & Stakeholder Management**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Referrals to LGBTQ Inclusive Services** | | | **Intermediate** |
| **Are you able to refer those accessing your service to other LGBTQ inclusive service providers or practitioners?** | This question benchmarks if an organisation has created or has access to referral registers that identify organisations that provide inclusive and affirming services to LGBTQ people.  The list needs to be kept up to date and provide options that meet the needs of the consumers you provide services to. Having an understanding of the health disparities of LGBTQ people will support in the creation of a holistic list of service providers. | *For maximum point allocation, please provide both:*   1. *evidence of an LGBTQ inclusive provider list or referrals* 2. *details of how you source or ascertain the LGBTQ inclusivity of referral networks* | **a) 2 points** if evidence of an inclusive list for referrals is provided.  **b) 2 points** if you demonstrate the criteria for organisations inclusivity to be on the list is provided.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |
| 1. **Referrals to LGBTQ Inclusive Services** | | | **Advanced** |
| **Do you engage with other health services, wellbeing providers, professional associations or communities of practice on the topic of LGBTQ inclusive service provision?** | This question benchmarks the communities of practice, reference groups and other initiatives you engage with that have LGBTQ inclusion as a priority. By engaging in these types of initiatives, organisations can stay current on the issues LGBTQ people face and what programs and services are being offered in the community.  These groups may be in person, online or via teleconferences. You must attend regularly and contribute, they also must have a focus on LGBTQ health-related issues or an inclusion focus. | *Please provide evidence of engagement/participation such as minutes, agendas or outcomes from the meetings.* | **2 point** if evidence of working with other providers or associations specifically about LGBTI inclusion is provided.  **Additional 2 points** if engagement/participation is substantial.  *(A maximum of* ***4*** *points is available for all pieces of information provided in this question)* |

**Section 7: LGBTQ Community Engagement**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Communication of Services** | | | **Intermediate** |
| **Does your service promote/communicate services directly to the LGBTQ community?** | If you provide inclusive services to LGBTQ people it is important to promote this to the community. Finding services that are affirming and supportive are sometimes hard to find. This questions benchmarks what promotion and marketing you have done to communicate your inclusivity to the LGBTQ community. This could be online, print or on television. | *For maximum point allocation, please provide two examples of how your service was promoted directly to the LGBTQ community, including the date of the promotion and details of the method and reach of the promotion.* | **a) 2 points** if evidence of one promotion to the community is provided.  **b) An additional 2 points** if a second example is provided.  **An additional 2 points** can be given if comprehensive promotions.  *(A maximum of* ***6*** *points is available for all pieces of information provided in this question)* |
| 1. **Feedback Mechanism** | | | **Intermediate** |
| **Do you have a feedback mechanism that LGBTQ people can utilise to comment on the LGBTQ inclusivity of your service?** | This question focuses on the importance of an organisation being able to measure the success of their inclusive services delivery journey. By providing mechanisms for LGBTQ people and their families to provide feedback, it allows you to identify when a change needs to be made, and continue to improve the quality of your services. | *For maximum point allocation, please provide all of the following:*   1. *how this feedback was collected* 2. *when this feedback was last collected* 3. *any actions resulting from the feedback collected* | **a) 3 points** if the outline of feedback is provided.  **Additional point** if there are multiple ways of collecting feedback.  **b) 1 point** if the date of the last collection is provided  **c) 1 point** if actions as a direct result of this feedback have been taken  *(A maximum of* ***6*** *points is available for all pieces of information provided in this question)* |

**Section 8: Additional Work**

| **Question** | **Why this question?** | **Providing evidence** | **How points are allocated** |
| --- | --- | --- | --- |
| 1. **Additional Work** | | | **Foundation** |
| This section allows you to describe and provide evidence for any additional work completed throughout the assessed calendar year *that*   1. *has not already been included within this year’s index submission, or* 2. *you believe is significantly over and above what the index is asking for.*   *Has your organisation engaged in other work/activity throughout the assessed year to improve the LGBTQ inclusivity of your organisation, service, facility, hospital or practice that has not been covered within the above submission?*  **Item Name:**  *[Question No. or Item Name Here]*  *If referencing significant work over and above in relation to one of the questions or topics within the index, please state question number or index topic here and then provide evidence to the right.*  *If you have new work, the topic of which is not covered within the index, please add an appropriate heading here and then provide evidence to the right.* | Throughout the year there is work your organisation will complete that is above and beyond the benchmarking information requested above. This section allows for you to showcase any work you have done that is meaningful, that you would like to get acknowledgement for and can receive points towards your overall score. | **IMPORTANT: PLEASE COMBINE ALL RELATED INDEX WORK INTO ONE ROW.** For example, if you wish to claim for significant training, list all LGBTQ training within one row under the Item Name of “Training.” Only 1 point is available for all work about a particular topic/area – PLEASE do not split similar areas of index activity over multiple rows.  ***Please do not split work within the same topic area over multiple rows. All work about a particular question or topic must be contained within one row:***  *Examples may include but are not limited to:*   * *Dedicated LGBTQ support and/or client care contacts* * *Promotion of your LGBTQ inclusivity to other service providers* * *Being involved in LGBTQ service provision industry or community groups* * *Promoting positive LGBTQ health service user stories in industry magazines/press/at conferences* * *Assisting LGBTQ people in overcoming barriers in terms of being able to live their authentic selves.* | **1 point** per piece of valid evidence provided to a maximum of 8 additional points in Q18.  *(A maximum of* ***8*** *points is available for all pieces of information provided in this question)* |