Trans and gender diverse-inclusive practice audit tool for homelessness services

About the audit tool

This audit tool has been adapted by the LGBTI homelessness project team (www.lgbtihomeless.com/) from the LGBTI-inclusive practice audit tool developed by GLHV@ARCSHS, La Trobe University with their kind permission. The content is informed by the literature, research findings from interviews with homelessness services and LGBTI people, and advice from a broad range of TGD individuals and organisations in Victoria.

It is designed for services to understand how trans and gender-diverse (TGD)-inclusive they are, and as a preparation for TGD training. It can assist to identify achievements and to determine where improvements are required. The results of the audit can inform forward planning including change management, systems redesign/improvement and cultural reform.

The audit tool follows the six Rainbow Tick Standards. Each of the Standards is accompanied by its own set of quality-based indicators that organisations can use to gauge how well their current systems, practices and protocols are meeting the intent of that particular Standard. (www.glhv.org.au/LGBTI-inclusive-practice).

The six LGBTI-inclusive practice Standards are:
- Organisational capability
- Workforce development
- Consumer participation
- A welcoming and accessible organisation
- Disclosure and documentation
- Culturally safe and acceptable services.

Please tick one of the three columns for each indicator:
> **Achieved**
> **Needed**
> **Not needed**

We will ask you to complete the tool again after staff training and a period of time to embed any changes, and reflect on improvements and further developments needed.

Standard 1 - Organisational capability and culture

The organisation embeds TGD-inclusive practice across all its systems and continuously seeks opportunities for improvements.

Indicator	Achieved	Needed	Not needed
1.1 TGD-inclusive practice is reflected in the organisation's policies and procedures including position descriptions, service contracts, performance management system, service models, quality management plan, and anti-discrimination policy.			
1.2 The organisation facilitates TGD inclusion amongst staff and volunteers, including recruitment and selection.			
1.3 The organisation has an integrated TGD client feedback system that ensures continuous TGD- quality improvement and planning.			
1.4 The organisation's service delivery risk management system includes strategies to identify and manage potential risks to the cultural safety of TGD clients.			

Standard 2 - Workforce development

All staff and volunteers understand their responsibilities to TGD clients and are trained and able to deliver TGD-inclusive services.

Indicator	Achieved	Needed	Not needed
2.1 The organisation has a systematic process for assessing the TGD-inclusive practice professional development needs of the Board, leadership team, staff and volunteers.			
2.2 The organisation facilitates access to professional development to the Board, leadership team, staff and volunteers that includes their legal responsibilities, TGD cultural safety and a consideration of the impact of employees' attitudes and beliefs on TGD- inclusive practice.			

Standard 3 - Consumer participation

TGD clients are consulted with, and participate in the planning, development, and review of the service.

Indicator	Achieved	Needed	Not needed
3.1 The organisation works with TGD clients and community representatives to identify TGD clients' needs and develop and continuously improve their provision of TGD-inclusive services.			
3.2 The staff is willing and able to advocate for the needs of their TGD clients within the broader health and services sector.			
3.3 The organisation engages a TGD liaison officer to assist with meeting TGD client needs.			

Standard 4 - A welcoming and accessible organisation

TGD clients can easily and confidently access services because the physical and virtual environments, including information, structures, resources and processes, are welcoming.

Indicator	Achieved	Needed	Not needed
4.1 The organisation's communication and educational materials are TGD-inclusive (e.g. inclusive language and images, and TGD specific information where relevant).			
4.2 The organisation effectively communicates its services to the TGD community.			

Standard 5 - Disclosure and documentation

TGD clients, staff and volunteers feel safe to provide personal information, including their sexual orientation, gender identity and/or intersex status, because they know information will be treated respectfully and that there are systems in place to ensure their privacy.

Indicator	Achieved	Needed	Not needed
5.1 The organisation has systems for collecting, storing, using and sharing TGD client's personal information, including their gender identity, sexual orientation, intersex status and/or relationship status, and preferred contact person.			
5.2 The organisation only collects information about a client's gender identity, sexual orientation, intersex status and/or relationship status from the client themselves or from their nominated representative.			
5.3 Staff understand the significance to TGD people of disclosing their gender identity and that the organisation has strategies to ensure that staff respond in a respectful and affirming way to disclosure.			
5.4 The organisation ensure that TGD clients understand that their gender identity information is confidential and that they will be consulted on whether, how and why this information is recorded, stored and shared.			
5.5 Staff and volunteers can support TGD clients to change identity documentation (e.g. birth certificates, Medicare or Centrelink identity) to affirm their gender			

Standard 6 - Culturally safe and acceptable services

Services and programs identify, assess, analyse and manage risks to ensure the cultural safety of TGD clients.

Indicator	Achieved	Needed	Not needed
6.1 The organisation understands the specific needs of TGD clients and addresses these needs in the design and delivery of services and programs.			
6.2 The organisation has a code of conduct for all clients including a zero tolerance approach to discrimination and harassment on the basis of gender identity, sexual orientation and intersex status			
6.3. The organisation uses language that is TGD inclusive, including - use of client-preferred pronouns - use of client-preferred name - recognition of non-binary gender identification - recognition of diverse voices on the phone			
6.4 The organisation ensures that TGD clients are placed in residential services with sleeping and bathroom arrangements that are safe, appropriate, and acceptable to the client.			
6.5 Staff and volunteers understand and are inclusive of diversity among TGD clients including cultural, indigenous and faith-based identification, disability, and sex worker status.			
6.5 The staff can refer TGD clients to TGD-specific clinical, social and peer support services as needed.			
6.6 The organisation disseminates information about TGD cultural safety across its programs and services and to other organisations.			