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| **EQUALITY & DIVERSITY BASED AUDIT – JULY 2021** | | | | | |
| **Home:** |  | **Unit:** |  | **Date:** |  |

**Aims and Objectives:**

* To achieve consistency in our service around Equality & Diversity
* To ensure compliance to policies and procedures.
* To meet the Standards of the appropriate Regulatory Body/Bodies and equality partners
* This audit covers elements of the AIS and the CQ guidance around Culturally Appropriate Care.

<https://www.cqc.org.uk/guidance-providers/adult-social-care/culturally-appropriate-care>

<https://www.cqc.org.uk/guidance-providers/meeting-accessible-information-standard>

**Administration of Audit**

* This audit should be completed in June and Dec (in line with the C4Q audit schedule).
* All staff, in rotation should have the opportunity to complete this audit.
* The home manager is responsible for the collation of audits and scores.
* Audit Scores should be entered on to the Manager’s Monthly Report on the month of completion.

**Process**

* This audit across the home should be completed over the month and not necessarily in one day.

**Scoring:**

* One point is awarded for each positive answer.
* Where a question is not applicable, one point should be deducted from the overall possible score.
* Each section can be scored individually on the score sheet and collectively to achieve an overall percentage score.
* The percentage can be calculated by dividing the actual score by the possible score and multiplying by 100.
* The score should be added to the Monthly Manager Report for the month.

**HOME: DATE:**

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| --- | --- | --- | --- | --- | --- | --- |
|  | Criteria 1: Inclusive Recruitment & Workforce | Yes | No | N/A | Evidence source | Comments: |
| **1** | Has the service got a mission statement in place that demonstrates a commitment to Equality, diversity and human rights? |  |  |  | Check records |  |
| **2** | Have staff received training/awareness around equality and diversity?  <https://www.skillsforcare.org.uk/Learning-development/ongoing-learning-and-development/equality-and-diversity/Equality-and-diversity.aspx> |  |  |  | Check records |  |
| **3** | Are people’s diverse needs identified at recruitment level without discriminating? (Application forms not to include DOB or medical questionnaires not to be completed before shortlisting) |  |  |  | Check records |  |
| **4** | Are recruitment processes and practices adjusted to meet the support needs of individual applicants? |  |  |  | Check records |  |
| **5** | Do staff feel that they are treated equally, is this covered in the staff questionnaire? |  |  |  | Check with staff, check recent staff feedback, questionnaire |  |
| **6** | Do staff support people in culturally sensitive ways? |  |  |  | Check records, Observation |  |
| **7** | Do staff recognise when people’s preferences are not being taken on board or properly respected? |  |  |  | Observe, Check records |  |
| **8** | Are all staff aware of and have access to the whistleblowing policy? |  |  |  | Check records, Speak to staff |  |
| **9** | Does the service recognise any communication needs amongst the staff team and manage these appropriately? |  |  |  | Check records and observe practice |  |
|  | Criteria 2: Equality & Diversity | Yes | No | N/A | Evidence source | Comments: |
| **10** | Does the service have an equality and diversity policy? Is it up to date? |  |  |  | Check records |  |
| **11** | Is there an Equality & Diversity champion within the service? |  |  |  | Check information displayed, speak with staff. |  |
| **12** | Have staff received up to date training around equality and diversity? |  |  |  | Check training matrix |  |
| **13** | Carry out an audit of all care plans around religion, belief, age, disability, race – are the care plans in place reflective of people’s wishes and life choices? |  |  |  | Check care plans |  |
| **14** | Do end of life care plans contain relevant information around religion, belief and diversity? |  |  |  | Check care plans |  |
| **15** | Are service users values and goals reflected in their care plans? |  |  |  | Check care plans |  |
| **16** | Are service users values and goals reflected in practice – observe staff and check. |  |  |  | Observe |  |
| **17** | Is the environment accessible for individuals? |  |  |  | Walk around |  |
| **18** | Is the environment navigable for individuals? |  |  |  | Walk around, speaking to people who live and visit the home. |  |
| **19** | Are culturally appropriate choices available on the menu? |  |  |  | Speak with Chef, check records, check care plans. |  |
| **20** | Does the home offer support for people to interact with others from their own cultures and communities? |  |  |  | Observe, check records |  |
| **21** | Cultural considerations are taken into account around medicines and medical intervention? |  |  |  | Check records, speak with pharmacist |  |
| **22** | Activities are offered that are culturally relevant? |  |  |  | Check records, speak with activities co-ordintaors |  |
| **23** | Are all visitors made to feel welcome? |  |  |  | Observe and speak with visitors |  |
| **24** | Cultural needs are reflected in how premises are decorated? |  |  |  | Observe and speak with visitors & residents. |  |
|  | Criteria 3: Accessible Information Standard <https://www.cqc.org.uk/guidance-providers/meeting-accessible-information-standard> | **Yes** | **No** | **N/A** | Evidence source | Comments: |
| **25** | Has the service got a mechanism for Identifying for disability information or communication needs? |  |  |  | Check records |  |
| **26** | Does the service record those needs clearly? Are these records in place as part of the assessment and care planning process? |  |  |  | Check records, care plans etc |  |
| **27** | Does the service share information appropriately (with the appropriate consents)? |  |  |  | Check records, speak with staff. |  |
| **28** | Are various formats available for key documents and information? Such as Braille, audio, easy read or large print? |  |  |  | View accessible documents |  |
| **29** | Can people contact and be contacted by the service in accessible ways such as email, text or text relay? |  |  |  | Check records and processes |  |
| **30** | Can people be supported during appointments/consultations if required? Such as someone who speaks the same language or a sign language interpreter? |  |  |  | Check records and speak to staff and residents. |  |
| **31** | Are appropriate health care professionals involved to support people to communicate effectively such as hearing aids, opticians, talking books etc? |  |  |  | Check records and speak to staff |  |
| **32** | Are care plans specific in how information is to be communicated with people? |  |  |  | Check care plans |  |

**Score Sheet**

|  |  |  |  |
| --- | --- | --- | --- |
| Section | **Possible Score** | **Actual Score** | **%** |
| Criteria 1: Inclusive Recruitment & Workforce | **9** |  |  |
| **Criteria 2: Equality & Diversity** | **15** |  |  |
| **Criteria 3: Accessible Information Standard** | **8** |  |  |
| **Total Score:** |  |  |  |
| **Completed by: Designation:**  **Signature: Date:**  **Discussed & Approved by Home Manager**  **Signature: Date:** | | | |

Action Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Section** | **Problem identified** | **Action to be taken** | **Person responsible** | **Date to be achieved** | **Reviewed by:** |
|  |  |  |  |  |  |

**Completed by Designation: .……………………………………..**

**Signature: Date: ……………………………………………….**

**Discussed & Approved by Home Manager:**

**Signature: Date: ……………………………………………….**