

The LGBTQ+ Learning Framework Toolkit

Developing affirmative services in adult social care

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1. Introduction

The [learning framework for working with LGBTQ+ people in later life](#) identifies and articulates systematically, key topics that should underpin best practices with LGBTQ+ older people and their carers in social care. It aims to direct learners, educators, leaders and practitioners, providers and commissioners in social care to the essential knowledge, skills and values that help to underpin and enable more positive engagement with the delivery of better care for LGBTQ+ people in later life.

The 19 topics across four domains in the learning framework can be used in different contexts and in flexible ways, for example by embedding the relevant topics, areas, guidance and learning resources into recruitment, induction, supervision, appraisal and career progression processes, to inform the curriculum in higher and further education and/or as modules tailored for different professional groups in training.

The freely available resources within each subject can also be used as a source for self-directed learning or within teams and with people drawing on care and support and carers to stimulate discussion and formulation of action plans. Training providers can use the framework to underpin the core knowledge requirements that they deliver in this area and map these to their own training programmes or qualifications framework.

Purpose

This toolkit complements the learning framework by providing further guidance and suggested learning activities for organisations wishing to get started or to strengthen their commitment to LGBTQ+ affirmative care. It draws on best practice examples from organisations active in this area which demonstrate how engagement with the learning framework is informing change. This toolkit provides suggested activities to support organisations in demonstrating evidence of how it is addressing the needs of LGBTQ+ people in its key activities. Benchmarking activities to the learning framework can be useful for case audits/quality assurance exercises and to demonstrate legal compliance during statutory regulation and inspections.

2. Structure of the Toolkit



Heart: Engaging with LGBTQ+ people in later life, with compassion and humanity.



Head: Engaging, listening and understanding the specific issues impacting this community.



Action: Making this part of the culture through learning, discussion and commitment to change.

Those active in developing LGBTQ+ affirmative care in their organisations have identified three key anchors that guide their equality, diversity and inclusion activities to promote gender and sexual diversity in social care.

The essence is firstly active engagement through awareness of the direct experiences of older LGBTQ+ people, carers and staff with compassion, empathy and humanity. Secondly, being exposed and interacting with the evidence in order to actively, listen, understand and articulate the specific issues that impact LGBTQ+ ageing and care experiences. The third anchor is one of making a commitment to taking positive action that can lead to demonstrable change and better outcomes for everyone in the care community.

This toolkit provides examples and activities that speak to staff at different levels different within the social care workforce.

3. Engaging with the heart

Engaging with LGBTQ+ people in later life, with compassion and humanity.



3.1: Engaging with LGBTQ+ people in later life - developing awareness and engagement with compassion and humanity

A person-centred approach to LGBTQ+ people in later life should be informed by a lifecourse approach which recognises the circumstances, strengths, resilience and cultures of an individual person, their families of choice, their advocates, friends and community networks.

The framework has captured and mapped a range of freely available resources which have been developed from research findings for the purpose of exchanging knowledge to inform policy and practice. These resources give particular emphasis to the personal stories and narratives of people with lived experience and allow their voices and experiences to be heard. Interactive activities such as storytelling, which include the voices of LGBTQ+ people in later life (such as video clips and vignettes) are more likely to enhance learning that is experiential, work-based and reflective.



3.2: Case studies

Case study 1



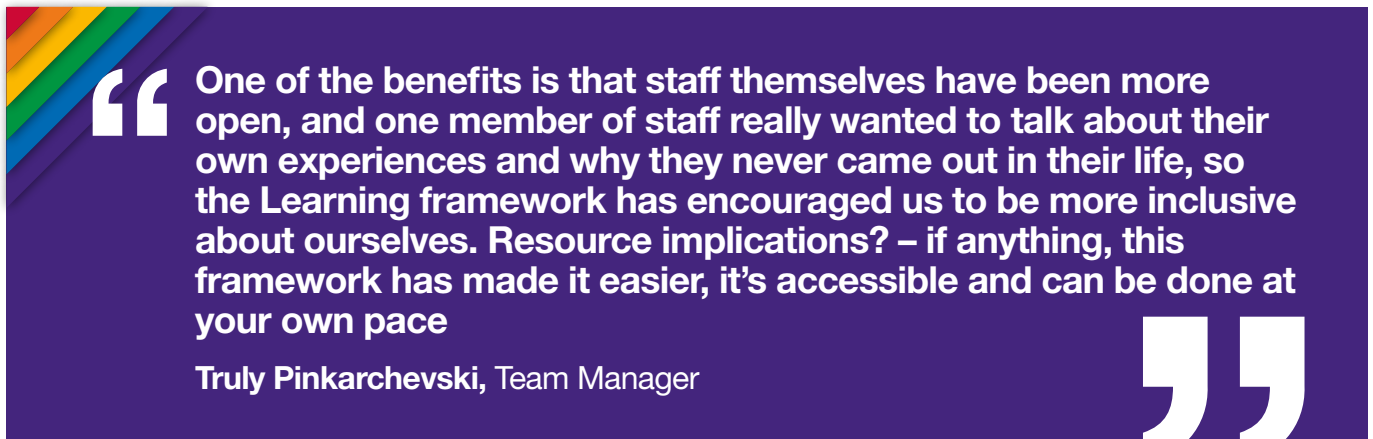
“ The biggest impact of the framework for me was thinking of how we need to just integrate elements from it into everything we were doing, so that was my big takeaway ”

Jo Cleary, Learning and Development Manager

Unique Senior Care has integrated several subject areas of the learning framework into their existing training activities and the care planning process:

1. A review of new staff induction: where short video clips from Appendix 1 of the learning framework were combined with questions for discussion and reflection on gender and sexual diversity so that staff are introduced to the needs of diverse individuals and the organisational equality, diversity, and inclusion values from the outset.
2. Reviewing all training content and learner activities at the time they are delivered to adapt the language and commonly used scenarios to make it more usual to bring examples of different gender and sexual diverse characteristics into training in a natural way. For example, in a case study about administering medication which isn't concerned with sexual identities, the 'married couple' in the scenario are a same sex couple which reinforces legislative rights and challenges heteronormative thinking. Just changing this feature of the case study evoked different conversations and reflections with staff.
3. Reviewing Unique Senior Care's bespoke care planning and assessment tool 'The Good Life Journey' in which they monitor protected characteristics to support equality, diversity, and inclusion. This assessment tool was redesigned to provide more choices on gender identity including 'non-binary' or 'trans', and on sexuality to include 'pansexual' and 'asexual'. This gives people broader options and opportunities to discuss an individual's identities and reflects greater choice around describing their partner or relationships with staff and the support needed to meet their aspirations and desires within intimacy and relationships. These diverse choices are also discussed in training on the 'Good Life Journey' to reinforce the organisation's values on recognising person-centred uniqueness in care planning.
4. Making sure that staff are ready to use their own and other's pronouns and trained how to do this confidently, especially in relation to Unique's 's policy of making every contact count.
5. Collaborating and supporting a trans member of staff to make a video about her experiences of working in care to include in Unique's gender diversity resources training pack.
6. Including a video clip and guide from Subject 15 in the learning framework in Unique's end-of-life care workshop.

Case study 2



“ One of the benefits is that staff themselves have been more open, and one member of staff really wanted to talk about their own experiences and why they never came out in their life, so the Learning framework has encouraged us to be more inclusive about ourselves. Resource implications? – if anything, this framework has made it easier, it’s accessible and can be done at your own pace ”

Truly Pinkarchevski, Team Manager

The Reablement and Sensory Service at West Berkshire District Council has been working as a staff team to bring the learning framework to those they are working with every day.

They have taken every opportunity to ‘talk LGBTQ’ in their day-to-day work. For example, by:

- talking with care homes in their local area about the framework and raising awareness of the Learning framework when they visit to encourage dialogue
- starting a discussion within their sensory impairment service on how to redesign care plans that include choices on expressing gender and sexual identities and consulting with the team on how they want this to be taken forward
- staff routinely sharing their own pronouns
- using team meetings and supervision to talk about how to introduce, educate and discuss these changes with older heterosexual and cisgender individuals who sometimes do not understand and, on occasions, object to being asked about their gender and sexual diversity. Discussions with colleagues are used to support each other when issues arise
- sending out short snippets about the learning framework in the service’s regular newsletter to older people in the community often posing a thoughtful question for people to consider for example around ageing, sex and intimacy as well as the inclusion of sexual diversity
- raising awareness of the learning framework within interdisciplinary regional forums with health and third-sector partners
- exploring how they might set up an allyship forum
- using resources from the framework in supervision and thinking about how to provide more support to LGBTQ+ individual staff

3.3: Suggested activities

Activity 1

One approach is to make use of storytelling video clips in the learning framework resource section - [appendices 2 and 3](#) to build up learners' awareness of LGBTQ+ issues in later life combined with some independent reading and resources. The cultural humility approach encourages participants to examine their own lives, values and experiences of privilege and discrimination. To engage in honest and open conversations, participants must feel safe to share their experiences based on their comfort level, with clear ground rules in place.

Learning methods could include:

- 1-on-1 paired activities where participants are paired up with each other and asked to role-play or discuss a topic from the training, e.g. familiarising themselves with appropriate terminology and developing confidence in discussing identities with an older person and get feedback
- individual reflective activities embedded into online learning resources.

An example might include:

[Peter and Geoff's story](#)  (3 mins)

In this video, learners will find out about one couple's experiences of discrimination because of their sexual identity. Their story explores legislative changes that have taken place during their 37-year long relationship, including the 1967 Sexual Offences Act and how legislation has helped to change the lives of many LGBTQ+ people.

Ask learners to reflect in small groups or in an individual reflective exercise:

- what they learned from Peter and Geoff about what it was like growing up in a society that criminalised homosexuality and how this compares to the experience of people today
- what forms of discrimination did Peter and Geoff experience and how did this affect them? What might be their concerns if one or both need to use social care in the future?
- ask learners to visit the [Stonewall website](#) to learn about key changes in UK legislation that have impacted LGBTQ+ equality, particularly the most recent changes from the 2000s onwards.
- consider how Peter and Geoff's story compares with their own family stories and what this means for their own learning.

Activity 2

[Gay, lesbian and bisexual inclusion](#) ▶ (9 mins)

In this video, learners will see and hear members of the LGBTQ+ community with different identities talk about what they would like to see in a care home and some of their concerns, wishes and requirements for themselves and their loved ones.

Ask learners to reflect in small groups or in an individual reflective exercise.

1. What did they learn about the key issues and concerns from these members of the community?
2. How are these the same or different to the issues that other people in later life might wish for themselves when moving to a care home?
3. Ask the learner to reflect on what this means for their own skills, knowledge and experience for supporting LGBTQ+ people in later life and to identify 3 areas that they would like to develop to increase their awareness and confidence further so that they feel more confident in addressing concerns.
4. Ask learners to visit the LGBT Foundation website and read the [short summary on monitoring sexual orientation and trans status](#) and [understanding pronouns](#).

Give the learners opportunities to practice introducing themselves and others using pronouns.

Activity 3: Testing your knowledge of LGBTQ+ quiz

This quiz could be used with individuals or groups, online or face-to-face and can be tailored further. It can also be used as an independent learning exercise encouraging the learner to use the Learning framework resources to do their own research. The answers can also cause surprises and validation. Here are some questions and sources to get started:

- What percentage of the population is estimated to be lesbian, gay or bisexual? See [here](#)
- Which communities do these flags represent? (You can research all the flags and include more or different ones)



Asexual



Pansexual



Trans



Bisexual

1. On what month is PRIDE celebrated? **June**
2. In what month is trans day of remembrance and visibility? **November**
3. When was male homosexuality decriminalised in a) England and Wales b) Scotland c) Northern Ireland? **a)1967, b)1980, c) 1982**
4. When was being lesbian or gay de-classified as a mental disorder by the World Health Organisation? **1992**
5. What national or local organisations are you aware of that support the networks and activities for the LGBTQ+ community?
6. How many people from the LGBTQ + community experience domestic violence? **There are no official figures - GALOP suggest that domestic violence within the LGBTQ+ community is widely underreported, with an estimated 60-80% of incidents reported (GALOP, 2020). Safelives (2019:9)'s national datasets found that 'just 2.5% of people accessing support from Insights domestic abuse services identified as LGBTQ'**
7. How many pieces of legislation can you name that protect the rights of LGBTQ+ older people?
8. Give two names of LGBTQ+ people from history who have made a significant contribution to significantly to society **(Try www.advocate.com)**

These questions are not exhaustive, and you can add/change them to suit your own learners.

4. Using the head

Engaging, listening and understanding the specific issues impacting this community.



4.1 Engaging, listening and understanding the specific issues impacting this community

Inequalities in outcomes for LGBTQ+ people in later life are attributed to a number of issues which it is important for the workforce, people drawing on care and support and carers to understand so that they can take positive action to promote equity in their approach to service delivery and design. This should trigger active engagement with disenfranchised groups using targeted methods rather than more broad/universal approaches (i.e. we treat everyone the same).

Inequalities are attributed to a lifetime of exposure to prejudice and associated minorities, the anticipation or experience of discriminatory attitudes among care providers and associated delay in access or lower uptake of services that impacts health and wellbeing. Education and service development activities will focus on improved assessment and use of evidence to identify inequalities in personalised care and systems that exclude or discriminate against LGBTQ+ people, working with intersectionality and the redesign and arrangement of services that are proactive in supporting health and wellbeing and dealing with discrimination.



4.2 Case studies

Case study 3



The Framework is fantastic, a very comprehensive piece of work. I refer back to it when I go to design anything around wellbeing and inclusion. This is not separate or standalone, but I include and incorporate it where we can in all diversity in existing projects

Aaron Ingham, Learning and Development Consultant

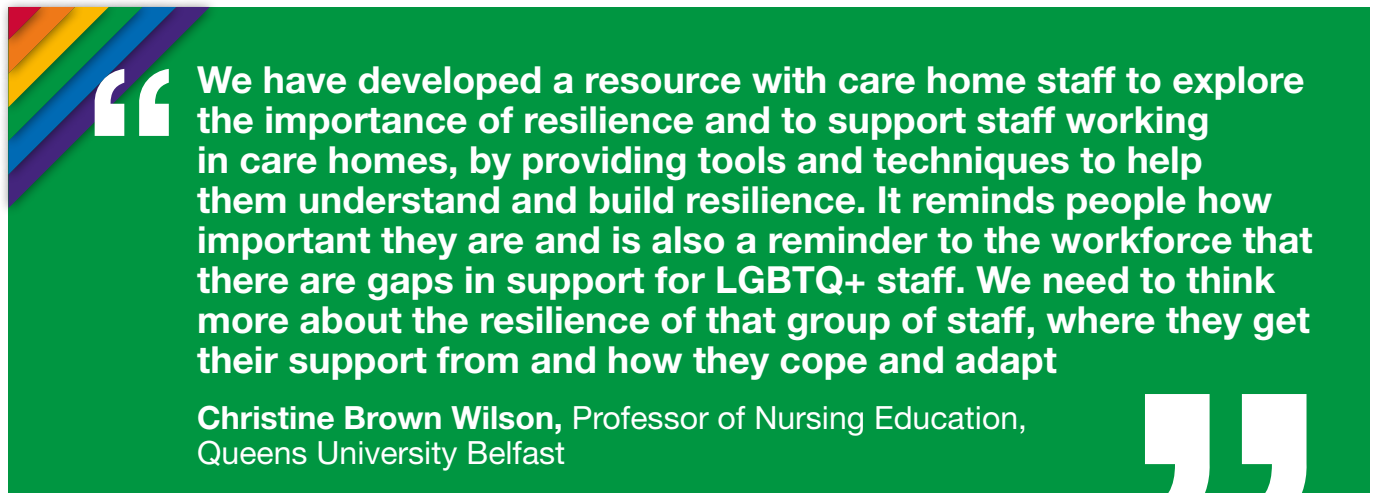


Abbeyfield have been working with the framework in the background to formulate a comprehensive plan and strategies for the coming year which will help the organisation bring it to life. This involves incorporating this into their diversity projects holistically so that LGBTQ+ is included. The main principle for Abbeyfield is to refer to the learning framework when they design anything around wellbeing and inclusion. To date this involves:

- pulling together a questionnaire on attitudes and awareness to establish the baseline and to evaluate the priorities for change and improvements. This will be incorporated into the annual staff wellbeing survey and is something to include each time going forward
- setting up a working group to review where to collect data from staff for example during onboarding
- mapping the internal audits to the framework to form a basis for staff and management consultation on what outcomes they are looking for in both the short and longer term
- engaging those involved in the EDI strategy to ensure that an intersectional approach is embedded
- raising awareness of the learning framework in the people and communication strategy focusing on developing LGBTQ+ terminology in organisational documentation and embedding some of the resources from Subject 2)
- starting more conversations with managers and staff on what will help to deal effectively with harassment and how this is reported and recorded
- including LGBTQ+ issues into Abbeyfields's new courses on unconscious bias.

Requiring managers to formulate their own local action plans and to display these as a visual poster in their service. This will help to connect the service plans with staff, customers, family and visitors and will be supported by a local LGBTQ+ champion who can drive plans forward and network across the organisation.

Case study 4



We have developed a resource with care home staff to explore the importance of resilience and to support staff working in care homes, by providing tools and techniques to help them understand and build resilience. It reminds people how important they are and is also a reminder to the workforce that there are gaps in support for LGBTQ+ staff. We need to think more about the resilience of that group of staff, where they get their support from and how they cope and adapt

Christine Brown Wilson, Professor of Nursing Education,
Queens University Belfast

This resource on resilience for care home staff has been shared as a good model of co-design and whilst designed for all staff, it may be particularly useful for LGBTQ+ staff who may be more liable to adverse working conditions and burnout. This relates to Subjects 18 and 19 in the learning framework on leadership and transforming services for LGBTQ+ individuals and communities and creating inclusive learning environments. The resource developed by Queens University can be accessed via www.resilienceresource.co.uk

It states the importance of recognising and working through the challenges that come with equality and diversity work and developing resilience in selearning framework and others to adapt to setbacks and disappointments.

Leaders can promote and adapt the resource to develop and nurture care environments. They can develop their own ideas on consulting and developing strategies for recognising, validating and valuing LGBTQ+ staff and building capacity for their contribution and leadership. There is a focus on recruitment and retention through good HR practices. This resource demonstrates a good model of co-design on three key areas; how to build and maintain resilience and self-care when resilience is low.

Case study 5



“ What is important about the framework is that somebody who is not confident about sharing their life story with a care provider can experience a significant and emotional impact which means that their care is fundamentally flawed. A person may literally have to live a lie

Steve Roberts, Independent Trainer

”

Alium has considered how to build in existing practice and make the first step in engaging with the framework an easy one for care homes to take. Their focus is on relationships as the cornerstone of quality of life and define life. Focusing on the seismic change for a person moving into a care home, their training offer includes looking at areas such as:

- where you live - from your home, to the community it is part of
- who you live with
- who you interact with and how?
- the routines and activities that make up your day
- financial status
- loss of tenancy rights or those that come with home ownership

Alium works with providers to help identify, map and plan to support relationships, to maintain them when a person moves into a care home. This is an ideal opportunity to gain trust and to gently explore the nature of those relationships. Their holistic approach doesn't necessarily use terminology that overtly explores sexuality and gender identity, who a person lives with, spends time with, laughs with, trusts. The range and value of shared experiences however can lead to discussions about touch and intimacy, and which forms the foundation for a conversation between residents and staff about sex, sexuality and gender identity.

Their suite of training and consultancy services therefore includes support with:

- understanding the Learning framework to promote LGBTQ+ affirmative care
- ensuring that policies and procedures reflect the framework
- supporting cultural change to implement and embrace the framework
- revising recruitment practices to reflect the framework
- revising assessment and support planning to reflect the framework.

Support to become a 'Centre of Excellence' in meeting the needs of people who identify as LGBTQ+

4.3 Suggested activities

In this area, it is not enough for learners to use correct terminology or identify people but ideally, they should be able to place an individual or a group's lived experiences within their social, historical and political context so that a deeper understanding, assessment and outreach can shape responses. This will focus on how disenfranchised groups such as LGBTQ+ with intersectional identities experience social and health inequalities and structural systems of oppression. Learners may not be aware of how they use their own social power and privilege within services to perpetuate these disparities and in-depth examination in specific areas such as dementia, end of life care can increase LGBTQ+ affirming attitudes.


Learning methods could include:

- Group exercises: Small or whole-group exercises asking participants to engage with the other people in the room to reinforce understanding of the topics being discussed and find ways to incorporate the new knowledge into their work.
- Case studies: to expose learners to real-life scenarios of LGBTQ+ people's challenges in accessing services, and practical strategies that would help alleviate the barriers they face. These can incorporate short video clips from the subject resources in Domain C on Personal Care and Support.
- Outreach and direct engagement with LGBTQ+ people with lived experience, their advocates and organisation to inform collaboration and build trust for co-design of support.
- Participants with lived experience and extensive experience with LGBTQ+ issues or subject expertise can be both respected and engaged by being asked to contribute their expertise and experience and to highlight areas that the facilitator may need assistance with.
- Facilitation in this area should consider in advance how to handle difficult situations where experienced staff in the subject are potentially defensive, particularly where there are potential conflicts between learners' personal beliefs and their job roles, withdrawal, and difficult group dynamics.

[Appendix 6 in the learning framework resource section](#) provides resources to support best practices in designing, delivering and evaluating training.

Some examples might include:

Activity 4

Diversity in care environments: This is a [series of six podcasts](#)  about social inclusion, housing and the experiences of older people from socially diverse backgrounds. Each podcast includes a summary of each podcast contributor and key questions to consider for each podcast.

An example of episode one is given here about Ann:

Ann is a woman in her late 60s, who has lived in an extra care housing scheme for the last nine years. Her career as a nurse saw her working in the field of mental health and with people with learning disabilities. She grew up as a black woman in a largely white neighbourhood. During her childhood, Ann experienced racism from other children which included physical attacks. However, whilst in the minority as a black woman, she does not perceive that she has experienced racism where she is currently living.

In the accompanying podcast, Ann describes how, whilst she enjoys living at her housing scheme, the attitudes of a minority of residents make living there difficult. She speaks of feeling encouraged by how the staff at her scheme have responded to resolve the situation.

Ask learners to listen to the podcast and/or download the transcript and to consider and discuss the following questions as suggested on the Diversity in Care Environments site:

- How does your organisation seek to challenge discrimination and to support the social inclusion of residents?
- What processes exist in your organisation for residents to report discrimination?
- How can scheme staff get to know new residents and what matters to them?
- How can staff and managers encourage a more respectful environment amongst residents?
- How can staff and managers ensure that residents feel that their concerns matter and that they will be acted upon?
- What are the roles of staff and managers in recognising social difference and making residents feel safe and valued?
- What does a whole-community approach to social inclusion look like within housing schemes?

Suggested key learning points:

- It is important for scheme staff and managers to develop relationships of trust with residents. Such relationships will ensure that residents feel that they can approach staff and managers and that managers and staff will also feel able to enter discussions with residents where there may be difficult relationships and potential conflict. This includes ensuring that residents are aware of the processes for reporting discrimination.
- Housing providers need to provide staff and managers with equality and diversity training, which includes training in inclusive language. Training for staff in how to respond to and mediate difficult resident relationships should also be mandatory. Staff need to ensure that they model attitudes of respect and inclusion in their own practice and conduct.
- The visibility of posters and affirming images (such as pictures of people in same-sex couples or of ethnically diverse people and groups) within communal areas of schemes can send a message that housing communities support inclusion and value resident differences.

Learners can also research the key legislation via the [Equality Act 2010](#) – race and disability are protected characteristics under the Act.

Activity 5

Trans ageing

In this [video](#), a trans woman, Fran (68 years old) talks about the turning points in her life and the problems and discrimination she faces as she grows older.

Learners can also visit the [Trans Ageing Project website](#) to conduct more in-depth research on the background issues. This further information and reading can be discussed in supervision, in team meetings, perhaps in a reading group activity over a month dedicated to learning about trans. Encourage learners to:

- do a presentation or share a summary of the issues and facilitate with colleagues, an action plan on what makes their assessment, care planning and provision more trans affirmative
- identify their nearest trans organisation and make contact with them to research what services they provide and to share any local issues that you can work on together
- include sources in your service information that are informed by authentic sources such as trans organisations or follow relevant organisations on social media to keep up to date with issues and developments in trans care.

Further information and reading recommended by the Trans Ageing project:

Age UK (2018). Factsheet 16: Transgender issues and later life.
www.ageuk.org.uk

Stonewall website: The truth about Trans. www.stonewall.org.uk

General Medical Council (no date). Trans healthcare - advice based on GMC guidance.
www.gmc-uk.org

Activity 6

LGBTQ+ issues in social work practice education, placements and the Assessed and Supported Year in Employment (ASYE)




The development of this resource was led by Dr Karl Mason, project team manager, at Royal Holloway University of London and funded by the West London Social Work Teaching Partnership. The resource was developed to provide support for practice educators and ASYE assessors to support thinking about how LGBTQ+ issues might arise and be worked with on social work student placements including how these issues might come up in supervision.

The resource includes discussions on scenarios that might arise as a way of opening up discussion and reflection and is also relevant to social work and social care managers.



It comprises six videos that can be used for selearning framework-guided reflection and can be used by those supporting students or newly qualified social workers in practice, on practice education programmes or in practice educator and ASYE assessor forum.

Facilitators might utilise the following from the resource which is explained in this [video](#) .

A highlight of this resource is the activities for supporting students who identify as LGBTQ+.

- LGBTQ+ students and newly qualified colleagues face all the usual power dynamics of being assessed but may face additional challenges. This may occur due to norms that exclude or silence their identities by treating heterosexuality or cisgender identity as the assumed 'normality'. This is referred to as heteronormativity. It can play out through assumptions, language, apparently innocuous personal questions or practices that include gendered language. In some instances, however, LGBTQ+ social work workplaces can be directly homophobic, biphobic or transphobic and people can experience micro-aggressions. Practice Educators should be prepared to work affirmatively with all students including those who are LGBTQ+.
1. Use [Video 1](#)  to discuss supporting a social work student / ASYE social worker who is uncertain about coming out in the workplace.
 2. Use [Video 2](#)  to discuss supporting a social work student / ASYE social worker who encounters discriminatory language in the workplace.
 3. Use [Video 3](#)  to discuss supporting a social work student / ASYE social worker who identifies as trans and is about to join the team. Inch (2017) argues that social work students are less likely to feel confident about practice with trans people, so this is a particularly important area for practice educators to familiarise themselves with.
 4. When watching the videos, ask learners to think about what their initial response to the scenario would be and whether we captured all of this in the discussion. If using it with a student, you could also think about how the video.

The resource also deals with supporting practice with LGBTQ+ people who use services.

5. Use [Video 5](#)  to discuss how practice educators might support students to work with people who are LGBTQ+ when undertaking a carers assessment with a gay couple.
6. Use [Video 6](#)  to discuss how practice educators or ASYE assessors might support a student or newly qualified social worker to work with an adult with learning disabilities who identifies as LGBTQ+ and has been called names in the community.

This resource enables facilitators and learners to be familiar with issues that people who are LGBTQ+ may face when accessing social work or social care. This is important in terms of preparedness for student or ASYE questions and being clear about the importance of readiness for this work.

5. Taking action

Making this part of the culture through learning, discussion and commitment to change



5.1 Making LGBTQ+ affirmative care part of the culture through learning, discussion and commitment to change is essential to the leadership role in social care.

Training alone cannot support the organisational change needed to tackle deep-seated prejudice and exclusionary practices within care organisations. Commitment and action can be affected by a lack of resources and under-supported by demotivated individuals and teams. Therefore, strategies to develop the workforce and improve professional practice with service development needs a holistic programme of activities designed to promote LGBTQ+ inclusion and to encourage staff to recognise their own learning needs and responsibilities for their own development.

5.2 Case studies

Case study 6

Safe Ageing No Discrimination (SAND) is a community organisation whose goal is to improve the experiences and increase the expectations of LGBTQ+ people as they age in Shropshire, Telford and Wrekin. They aim to fundamentally influence the way in which LGBTQ+ people and those who care for them experience and expect to experience ageing. They do this by identifying and addressing the barriers that impact LGBTQ+ wellbeing in later life, bringing about change in organisations' working practice and tapping into influential policy-making channels.



Thirty organisations have signed up to our basic covenant, and we had a conference with 24 of those signed up. Some of those can provide really good examples for others to learn from and highlights how sustainable the approach is that we use... it's taken quite a few years of conversations, going to things, people coming to things. It's the heart, head and hands, and we've learned that you've got to get people's hearts first otherwise it doesn't resonate

Sal Hampson, Director



SAND's campaign to encourage health and social care providers and other organisations, groups and services which people may want to access as they age to make 'pledges' – practical actions to ensure their service is welcoming and inclusive. Pledges take the form of a Covenant to be revisited and celebrated and groups and organisations sign up to 5 broad commitments and agree an annual action plan for change. Participating groups and organisations are invited to feed back and share their next year plan at an annual event.

The 5 Commitments are:

1. Commit to providing the best possible quality services for older and old LGBTQ+ people
2. Commit to learning what life can be – and has been – like for different LGBTQ+ people.
3. Commit to vocally and visually supporting groups working with and for older and old LGBTQ+ people
4. Commit to creating meaningful opportunities for LGBTQ+ people and groups to 'influence' what you do.
5. Commit to assess and evidence change, including work carried out to engage LGBTQ+ people (within the group/organisation and outside it)

The action plan is based on what is realistic in terms of size, capacity, and available resources by outlining why the organisation is undertaking this work, its specific actions, the changes expected to result and the evidence to be collected to illustrate the changes.

SAND have indexed all their resources against the learning framework ([example](#)) which are now searchable for each domain in the learning framework, primarily Domains A and B on history, terminology and social care delivery.

They have also developed resources around the leadership, tagging against each of the learning framework subject areas. Providers can use this to search and identify a tailored eLearning package. SAND's work helps providers to benchmark what they have already done with their pledges and the Covenant against the learning framework. As SAND works in a structured and systemic way, this has been motivating for organisations to develop capacity to engage with the learning framework in a sustainable way.

SAND has produced the following three short case-study films for Skills for Care to accompany the learning framework. These also form part of a larger suite of practical resources produced as part of a project in Shropshire, Telford & Wrekin to embrace A culture of inclusion, where cross-sector service providers working with and for older people have made a commitment to embed and sustain inclusive practice.

The first short film highlights where and how service providers have actioned different subjects in the learning framework. They talk about practical steps, organisational change and impact on staff and/or clients. The footage was captured during the first 'Small Steps Big Difference Conference' in Shrewsbury in October 2023.

Taking steps towards inclusion

www.youtube.com 

The second short film highlights why it matters to give thought and attention to a forgotten generation of LGBTQ+ people so that they can be their whole selves in later life.

Gay in Care - We want to talk about 'that sort of thing'

www.youtube.com ▶

The third short film highlights the key factors at play in a local initiative to embed inclusion into the practice of organisations providing services to older people across Shropshire, Telford & Wrekin.

A Seismic Shift to embrace A Culture of Inclusion

www.youtube.com ▶

Case study 7



“ Having recommissioned our residential care, the learning framework provided the opportunity to examine how equality, diversity and inclusion could be improved and strengthened and following the equality impact assessment of all services

Chris Davies, Commissioning Manager ”

Brighton and Hove conducted a recommissioning review with 84 care homes across the city for all the care homes and specialist homes. They met up with colleagues across the voluntary and third sector and identified the Inclusion Care Award provided by Brighton Switchboard. Which supports and celebrates LGBTQ+ inclusive practice across health and social care and developed in partnership with communities and from research.

Brighton and Hove Commissioning team have inserted new clauses on equalities into their new contract as follows:

- The Service Provider will ensure that the Service will be non-discriminatory and meet the requirements of the Equality Act 2010. The Service Provider will promote maximum accessibility and ensure equity of provision, taking all practical steps to ensure that all people who require the service are able to access the service. The Service Provider will actively challenge any prejudice or discrimination against its Staff at work and Residents.
- The Service Provider will apply an intersectional approach to supporting Residents in the Service, to understand the ways that multiple forms of inequality or disadvantage sometimes compound themselves and create obstacles that often are not understood among conventional ways of thinking.
- The Service Provider will be LGBTQ+ inclusive and respect and adhere to residents' wishes around their use of name, pronouns and gender expression.
- Service Providers must achieve the [Brighton & Hove Switchboard](#) Inclusive Care Award during the term of the Contract. The award encourages services to strive to achieve a Bronze, Silver or Gold Award by meeting a flexible range of criteria for inclusion that will benefit all Residents and especially LGBTQ+ people. The award is also informed by CQC requirements, NICE guidelines, and the Equality Act Public Sector Duty.

- Service Providers must utilise the [Skills for Care learning framework for working with LGBTQ+ people in later life](#). The framework aims to provide a base for identifying the insights, knowledge, understanding and skills that the social care workforce needs to help them work affirmatively, inclusively and effectively with Residents from gender and sexually diverse communities.

These contract clauses are linked to Brighton and Hove's Quality Requirements Matrix, a set of quality assurance measures being developed on EDI. They are looking to establish measurable, accreditation awards and framework requirements to certify providers to enhance their commitment equalities and service inclusiveness.

Brighton and Hove also provide a lot of free equality, diversity and inclusion awareness training. The LA will require service providers to enhance their commitment to service inclusiveness for the LGBTQ+ population through the following clauses in their contract which spans 8 years from 2024. Brighton and Hove have since put out their specification and framework for recommissioning supported living which includes an expectation that all staff must have LGBTQ+ awareness training within community support, supportive living and home care.

See www.brighton-hove.gov.uk for more information.

Case study 8



“ We have lots of renewed interest in organisations wanting to achieve our Pride in Care award particularly since the early adopters who have come back to re-engage after the pandemic ”

Martha Margetson, Pride in Care Training Officer

The Pride in Care quality standards is awarded by Opening Doors to all UK organisations assessed as providing quality care and support to LGBTQ+ people over 50. This is a quality assurance and accreditation scheme which is tailored to organisations who sign up voluntarily and is attained through a guided, step-by-step process through specialist LGBTQ+ quality advisors. Opening Doors offers policy reviews, staff survey assessments, internal training and ongoing consultancy advice. Attainment of the award raises the organisation's equalities profile and UK-recognised branding and registered award status.

www.openingdoors.lgbt

Pride in Care have identified that the learning framework can be a valuable resource for their providers to benchmark some of the areas they have identified for improvement and will encourage them to work towards higher standards. It also provides further support for the organisation to do its own development before, during and after registering for the award.

5.3 Suggested Activities

Managers and professionals will need to develop their own leadership style and model to achieve change using participator and distributed methods. This will involve engaging staff in transforming care environments, sometimes evolutionary and occasionally revolutionary, by considering specific support and engagement strategies for LGBTQ+ employees, volunteers and collaboration with LGBTQ+ communities. Achieving positive change is about identifying improved outcomes for LGBTQ+ people in later life based on clear service standards, performance indicators and methods of evaluation that are visible, tangible and can be measured or audited.

Methods could include:

- using the learning framework to develop your own audit tool based on selecting those subjects and domains that are most relevant and deemed a priority for your service
- using existing mechanisms to add opportunities to collect information and feedback about the experiences of LGBTQ+ staff, people drawing on care and support and carers such as through staff surveys, suggestions, complaints and representations and management information
- including LGBTQ+ improvements in any audits or evaluation
- carrying out formal and informal tailored consultations with LGBTQ+ people to listen to their experiences and feedback
- publicise your intentions and achievements in your service literature including good news stories
- make active links with LGBTQ+ advocacy organisations and staff networks to collaborate on local issues and joint aims for service improvements. Utilise their expertise and experience in all areas as much as possible. Capture good news stories.

One of the most effective ways to create training goals and objectives is to apply the SMART concept. SMART is an acronym for the criteria used to set objectives that are specific (S), measurable (M), attainable (A), relevant (R) and timely (T).

In many deliverables, this type of evaluation may be referred to as “performance measures” and will also include specificity in terms of number of people reached, etc.

How to write a SMART Objective using a formula:

1. To (increase/decrease)
2. The (specific knowledge, attitudes, skills, behaviours)
3. among (specific population)
4. from-to (from baseline to desired level)
5. by (time frame)

Activity 7:

LGBT Common Outcomes Framework

This Framework is available from the [LGBT Consortium](#) and produced in collaboration with a range of LGBT+ groups. It seeks to act as an initial reference point for organisations to critically reflect on what outcomes they are best placed to achieve and potential areas of collaboration with others.

In creating this framework, the Consortium aims to help LGBTQ+ voluntary and community sector organisations identify the difference that their everyday activities have on the people and communities they work with. It has a list of suggested outcomes and measures and can be used as a tool to help organisations of all sizes demonstrate that they are working towards the most pressing priorities for LGBTQ+ people in the UK.

The framework sets out a standardised structure of five core areas of impact and associated sub-outcomes, as well as three underlying principles. [View the full framework.](#)

The five core areas comprise:

1. Improved wellbeing
2. Social connectedness
3. Safe equal communities
4. Improved service provision
5. Improved policy making and delivery.

Use the framework to prioritise outcomes for your service for the relevant area in the short term, intermediate or long term. For example, for core area 1, these may be:

- changes in awareness, knowledge and attitudes following a training programme
- changes in how services are delivered, for example a specialist service for trans older people or improved satisfaction from LGBTQ+ carers or increased uptake of services by LGBTQ+ people with dementia
- changes in organisational structure or policies such as improved end of life care plans.

The outcomes framework also contains information about and links to different instruments that may help you measure outcomes within the framework as a starting point for organisations to explore well-used, tested and accepted research and survey instruments; rather than commit resources to designing their own.

Organisations can use the outcomes framework in strategic and operational team away days and forums including interdisciplinary partnerships to develop action plans and measures and to plan reviews in relation to short, intermediate and long-term outcomes.

Activity 8

Lesbian, Gay, Bisexual, Trans and Queer Good Practice Guide: Guidance for service providers on how to develop LGBTQ+ affirmative practices

This good practice guide was designed by 'Mind out' as a set of tools for organisations to ensure equal access to and more positive experience of mental health services for people and communities that face multiple discrimination and disadvantage. [Access the guide.](#)

Here are some examples from the good practice guide that organisations can focus on such as:

- providing a welcoming environment
- public displaying of your non-discrimination statement
- positive LGBTQ+ imagery
- leaflets and details of local LGBTQ+ services
- communicating your confidentiality and record-keeping policies
- inclusive language
- asking for preferred gender pronouns at first contact
- using gender neutral language
- acknowledging coming out and following this up with an informed discussion about any adjustments needed as a result.
- communicating a zero-tolerance of discriminatory language
- recognising intersectionality in LGBTQ+ communities
- training and supervising staff on inclusive language
- having clear mechanisms and policies for addressing discrimination and publicising these.
- engagement with the LGBTQ+ community
- establish opportunities for consultation with LGBTQ+ people drawing on care and support, carers, staff and volunteers.
- build relationships with local LGBTQ+ organisations
- attend and support local LGBTQ+ events such as Pride
- consult with local LGBTQ+ community and organisations on your strategic developments
- follow LGBTQ+ organisations on social media and encourage them to follow you.
- support LGBTQ+ staff
- make space to consult with LGBTQ+ staff informally and formally
- resource and support networking internally and external to the organisation
- record and monitor incidents of discrimination and harassment at work and learn from investigations to improve staff experiences
- consider developing LGBTQ+ peer support and mentoring schemes
- provide a forum for LGBTQ+ staff to meet with non-LGBTQ+ staff to meet and discuss LGBTQ+ issues with the aim of promoting understanding and diversity.

6. Further resources

6.1 Relevant blogs and publications about the framework for sharing with staff.

Publications

Shawn Major (2023) Learning to Deliver Affirmative Care to LGBTQ+ people in later life. Blog for British Association of Social Work (BASW) [swu-union.org.uk](https://www.swu-union.org.uk)

Care England Agenda Magazine 07/2023 www.careengland.org.uk

Victoria Grimwood (2023) Supporting people who identify as LGBTQ+. Blog of the NIHR Policy Research Unit in Health and Social Care Workforce at King's College London. blogs.kcl.ac.uk

Trish Hafford-Letchfield (2024) Intersecting sex and gender diversity with sexual rights for people living with dementia in later life: an example of developing a learning framework for policy and practice <https://www.frontiersin.org>

UK Parliamentary Committee (2023) Debate on LGBTQ+ Care in Care Homes. House of Commons. Recording: parliamentlive.tv

Transcript: hansard.parliament.uk

This toolkit was produced by Trish Hafford-Letchfield, Professor of Social Work at the University of Strathclyde and funded by Skills for Care.