EQUALITY, DIVERSITY AND HUMAN RIGHTS POLICY AND PROCEDURE

Primus PLUS
Healthcare

PRIMUS PLUS HEALTHCARE

CONTACT DETAILS

Main Office Address: 603 London Road, Westcliff on Sea, Southend on Sea, Essex, SS0 9PE

Bradford Address: 1436 Leeds Road, Bradford, BD3 7AA

Phone: 01702963009

Email: care@primusplus.co.uk

REGISTERED MANAGER/ PERSON IN CHARGE

Jonas Ayitevie

Date Created: February, 2026

Next Review Date: February, 2027

Signed By: Jonas Ayitevie

1. **PURPOSE**

At Primus PLUS Healthcare, we are committed to ensuring that all service users in our supported living services receive high-quality care and support that is inclusive, equitable, and tailored to their individual needs. This Equality, Diversity, and Human Rights Policy provides a framework to guide our practices and ensure that we meet our legal obligations, regulatory requirements, and ethical standards in the delivery of care.

The purpose of this policy is to:

Promote Equality, Diversity, and Inclusion

We strive to create an environment where every service user, irrespective of their learning disabilities, mental health needs, autism spectrum conditions, or any other characteristics, is treated with dignity, respect, and equality. Our services are designed to ensure that individuals are empowered to make decisions about their lives and receive care and support that meets their unique requirements.

This policy will ensure that reasonable adjustments are made, allowing individuals with disabilities to access and use services on an equal basis with others. This includes adjustments to physical environments, communication methods, and the use of accessible technology, ensuring that no one is left behind in accessing their care.

Support and Empowerment of Vulnerable Adults

We recognize that service users with learning disabilities, mental health needs, and autism spectrum conditions may face additional challenges in accessing services and exercising their rights. This policy outlines how we will work to understand and respect each individual's personal, cultural, social, and religious needs. Our staff are committed to understanding how these needs may relate to care requirements and integrating this understanding into the care delivery process. This person-centred approach will enable us to support individuals in achieving independence, dignity, and control over their lives.

Comply with Legal and Regulatory Standards

In line with the Care Quality Commission (CQC) standards and other relevant legislation, this policy ensures that Primus PLUS Healthcare meets its legal obligations, promotes fairness, and provides inclusive care that respects people's rights. This includes complying with the Equality Act 2010, the Human Rights Act 1998, the Accessible Information Standard, the UK General Data Protection Regulation (GDPR), and the Data Protection Act 2018.

By adhering to these legal frameworks, we ensure that:

- We prevent discrimination based on disability, ethnicity, gender, religion, or other protected characteristics.
- We safeguard sensitive information and ensure that it is only shared when appropriate, in line with service users' consent and regulatory requirements.
- We take appropriate action to address any bullying, harassment, or other unacceptable behaviour and promote a culture of respect and inclusivity.

Provide Accessible and Inclusive Services

Our policy sets clear guidelines on how we will:

- Make reasonable adjustments to ensure service users with disabilities can access and use services on an equal basis with others.
- Design technology systems (including telephone services and digital platforms) to be user-friendly and accessible to individuals with various needs.
- Address how we will respect and act on cultural, social, religious, and personal preferences to ensure that care is individualized and respectful of each service user's identity and beliefs.

Ensure Transparent Information Sharing and Record-Keeping

This policy outlines the procedures for how we will share information about individuals who use our services with other services or providers, ensuring that any information is shared appropriately and in accordance with legal requirements. It also establishes how we will record information about people in a confidential, secure, and accurate manner, and ensures that service users have access to their own information and the ability to request corrections.

Specialist Services for Autistic People and People with Learning Disabilities

As part of our specialist supported living services, this policy explicitly considers the unique needs of individuals with autism spectrum conditions and learning disabilities. It ensures that we:

- Provide tailored care that addresses the specific needs of these groups, making necessary adjustments to ensure they can fully access and benefit from the services we provide.
- Make adjustments to both the physical environment and care processes to accommodate these needs, ensuring that services are accessible and inclusive for individuals with learning disabilities and autism.

Relevant Legislation and Regulations

This policy is aligned with the following key UK legislation and standards:

- The Equality Act 2010: Provides protection from discrimination for individuals based on their disability, race, age, gender, religion, and other protected characteristics.
- The Care Quality Commission (CQC) Regulations: Ensures that supported living services are safe, effective, caring, responsive, and well-led. We adhere to key regulations such as Regulation 9 (Person-Centred Care), Regulation 10 (Dignity and Respect), and Regulation 11 (Need for Consent).
- The Accessible Information Standard: Ensures that individuals with disabilities have access to information in a format that meets their needs (e.g., large print, Braille, or Easy Read).
- The Human Rights Act 1998: Protects individuals' rights to privacy, dignity, and the freedom to make choices regarding their care.
- UK General Data Protection Regulation (GDPR) and The Data Protection Act 2018: Ensures the confidentiality and protection of personal data.
- The Autism Act 2009: Supports individuals with autism by improving access to services and ensuring they receive appropriate care.
- The Care Act 2014: Outlines the framework for adult social care, including eligibility and assessment procedures, with a strong emphasis on the person-centred approach to care.

2. SCOPE

This Equality, Diversity, and Human Rights Policy applies to all services provided by Primus PLUS Healthcare, specifically in the context of supported living services without personal care. The policy is designed to ensure that our care and support services are inclusive, respectful, and equitable for all service users, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions.

The policy outlines how we will provide care and services in a manner that aligns with the Care Quality Commission (CQC) standards and relevant UK legislation while ensuring equal access, dignity, and human rights for all service users.

Target Service Users

This policy is relevant to adults with the following needs:

- Learning Disabilities: Individuals with cognitive impairments that may affect their ability to process information, make decisions, and perform daily tasks independently.
- Mental Health Needs: Individuals with mental health conditions, including anxiety, depression, schizophrenia, or other psychiatric disorders that may require tailored care and support.
- Autism Spectrum Conditions: Individuals with autism, including a range of conditions such as Asperger's syndrome or classic autism, requiring specialized support for communication, social interactions, and behavioural challenges.

Services Covered by This Policy

This policy applies to all the supported living services without personal care offered by Primus PLUS Healthcare, which include:

- Accommodation and support services for individuals with learning disabilities, mental health needs, and autism.
- Assistance with daily living activities such as managing finances, maintaining a home, or accessing community services.
- Support for developing and maintaining independent living skills tailored to the specific needs of each individual.
- Access to external services, such as healthcare providers, community services, and other professionals, to ensure holistic care.

While this policy applies to services where personal care (e.g., assistance with bathing, dressing, eating) is not provided, it ensures that individuals who may require personal care services are still fully supported in other aspects of daily life. Primus PLUS Healthcare aims to deliver services that are adaptable to meet the needs of each individual, with the flexibility to work with personal care providers should the need arise.

Reasonable Adjustments

In line with the Equality Act 2010, the policy outlines how reasonable adjustments will be made to ensure that people with disabilities can access and use services on an equal basis to others. These adjustments may include:

- Physical changes to the environment to ensure accessibility (e.g., ramps, wider doorways, or easy-to-reach equipment).
- Communication adjustments such as providing written materials in accessible formats (e.g., large print, Braille, Easy Read, or audio formats) to meet the needs of individuals with visual impairments, learning disabilities, or other communication challenges.
- Adjustments to services based on individual needs (e.g., offering additional time or support for individuals with autism or learning disabilities to navigate the service environment).

The policy will ensure that these reasonable adjustments are continuously reviewed and updated to meet the evolving needs of service users.

Technology and Digital Services

As part of the reasonable adjustments, the policy also outlines how technology will be easy to use for individuals with learning disabilities, mental health conditions, or autism. This includes:

- Telephone systems, digital platforms, and any other communication tools being designed to be accessible and user-friendly.
- Clear guidelines for making sure that online and digital services are inclusive, with options for alternative methods of engagement where necessary (e.g., phone support, in-person assistance).

Understanding and Respecting People's Needs

This policy emphasizes the importance of understanding the personal, cultural, social, and religious needs of people using the service, and how staff will respect and integrate these needs into their care and support plans. It ensures that:

- Cultural Sensitivity: All staff are trained to understand how cultural, religious, and social backgrounds may influence service users' preferences and care needs.
- Person-Centred Care: Care plans are developed with respect for each individual's beliefs, values, and lifestyle choices, and are adapted to ensure they receive the support they need in a way that feels comfortable and empowering to them.

Information Sharing and Management

This policy also sets clear guidelines on information sharing and record-keeping to ensure compliance with the Data Protection Act 2018, UK GDPR, and the Equality Act 2010. It clarifies how and when information about service users may be shared with other services or providers, ensuring that:

- Confidentiality is maintained, with information only shared when necessary, and with the service user's consent unless there is a legal obligation to disclose.
- Service users have the right to access their own records and request corrections if they feel information is inaccurate.

Addressing Unacceptable Behaviour

The policy includes clear protocols for addressing bullying, harassment, or any form of unacceptable behaviour within the supported living environment. It outlines the steps to be taken in response to any such incidents, including:

- Reporting mechanisms for service users, staff, or other stakeholders to report unacceptable behaviour.
- Preventative measures and awareness training to ensure a culture of respect and inclusivity within the service.

This policy ensures that individuals feel safe and supported, and that any form of discrimination, harassment, or bullying is swiftly and appropriately addressed.

Legal Compliance and Regulations

This policy ensures that Primus PLUS Healthcare complies with the relevant legal frameworks and national regulations, specifically:

- The Equality Act 2010: Ensures services are provided without discrimination, making reasonable adjustments to ensure that individuals with disabilities can access services on equal terms.
- The Accessible Information Standard: Ensures information is provided in a way that is accessible to those with a disability.
- The Human Rights Act 1998: Guarantees that individuals' rights to privacy, dignity, and autonomy are respected.
- UK General Data Protection Regulation (GDPR) and Data Protection Act 2018: Guarantees the protection of personal information, ensuring it is handled securely and appropriately.
- Autism Act 2009 and The Care Act 2014: Focus on providing inclusive services for those with autism and learning disabilities, ensuring these groups receive the care and support they need to live independently.

Specialist Services for Autistic People and People with Learning Disabilities

Primus PLUS Healthcare recognizes the specific needs of individuals with learning disabilities and autism spectrum conditions. This policy ensures that:

- We have considered how individuals with autism and learning disabilities will be able to access and use the services we provide.
- Our service models are tailored to meet the needs of these individuals, with adjustments made to ensure full accessibility in communication, care delivery, and engagement.

3. POLICY STATEMENT

Primus PLUS Healthcare is committed to providing supported living services without personal care that uphold the principles of equality, diversity, and human rights. This policy establishes our approach to ensuring that all individuals, particularly adults with learning disabilities, mental health needs, and

autism spectrum conditions, receive high-quality, inclusive, and respectful care that respects their rights and promotes their well-being.

We understand that individuals with diverse needs face unique challenges in accessing care and services. At Primus PLUS Healthcare, we are dedicated to removing barriers to accessibility and delivering services that are person-centred, adaptable, and fully compliant with CQC regulations and UK legislation. This policy outlines our commitment to making reasonable adjustments, respecting cultural, social, and religious needs, protecting service user information, addressing unacceptable behaviour, and adhering to all legal requirements.

Commitment to Equality, Diversity, and Inclusion

Primus PLUS Healthcare acknowledges and embraces the diversity of the individuals we serve. We are committed to providing services that respect the personal choices, cultural preferences, religious beliefs, and individual rights of all service users. The services we deliver are designed to ensure that every individual is treated with dignity and respect, regardless of their background, race, gender, religion, sexual orientation, or disability.

We are determined to provide a service that ensures that every individual receives the care they need, in a manner that is aligned with their values, preferences, and specific support needs. This includes making reasonable adjustments for service users with disabilities or specific conditions, ensuring that they can access services on an equal basis with others.

Reasonable Adjustments

In compliance with the Equality Act 2010, we commit to making reasonable adjustments to ensure that individuals with disabilities can fully access and benefit from our services. This includes:

- Physical modifications to ensure accessibility (e.g., ramps, wider doorways, or assistive technology for service users with mobility impairments or communication challenges).
- Communication adjustments, such as providing materials in accessible formats (e.g., large print, Braille, audio, or Easy Read versions), and ensuring that staff can support service users in a way that suits their needs.
- Digital and technological accessibility, including making our telephone systems, websites, and other digital services easy to use, user-friendly, and suitable for individuals with various communication needs, including those with learning disabilities, mental health conditions, or autism spectrum conditions.

Understanding and Respecting People's Needs

We understand that the personal, cultural, social, and religious needs of our service users can influence their care needs. Our staff will receive ongoing training to ensure that they understand and respect these individual needs when delivering services. This includes:

- Developing person-centred care plans that account for cultural, social, religious, and individual preferences.
- Regularly reviewing and adjusting care plans to ensure that service users' needs are met in a way that is comfortable and empowering for them.

- Ensuring that staff are equipped to recognize and respect each service user's background and identity, incorporating these aspects into support plans and service delivery.

Information Sharing and Management

At Primus PLUS Healthcare, we value the privacy and confidentiality of all service users. We will ensure that service user information is handled responsibly, in accordance with the UK General Data Protection Regulation (GDPR), the Data Protection Act 2018, and other relevant privacy laws.

We will share information about service users only when necessary and with consent, except in cases where there is a legal obligation to do so (e.g., safeguarding concerns or emergency care). Information will only be shared with relevant healthcare providers, social services, or support organizations as required by the service user's care plan, and always with the best interests of the service user in mind.

Service users will have the right to access their information upon request and to make corrections where necessary.

Addressing Unacceptable Behaviour

We are committed to maintaining a safe, respectful, and inclusive environment for all service users and staff. Any form of bullying, harassment, or discrimination will not be tolerated. We have a zero-tolerance policy toward unacceptable behaviour and will take immediate action to address any incidents that compromise the safety, dignity, or well-being of service users.

Staff will receive training on how to identify, address, and prevent instances of discriminatory behaviour and bullying. Clear procedures are in place for reporting and addressing unacceptable behaviour, and we will ensure that every service user feels safe and supported.

Legal and Regulatory Compliance

Primus PLUS Healthcare is committed to adhering to the following legal frameworks and CQC standards:

- The Equality Act 2010: We will ensure that all services are non-discriminatory, accessible, and provide reasonable adjustments for individuals with disabilities.
- The Accessible Information Standard: We will make sure all information is available in accessible formats, including Easy Read, large print, and audio formats, to meet the needs of people with sensory impairments or communication difficulties.
- The Human Rights Act 1998: We will respect the fundamental rights of all individuals, including the right to privacy, dignity, freedom of choice, and autonomy.
- The UK General Data Protection Regulation (GDPR) and The Data Protection Act 2018: We are committed to protecting service users' personal data, ensuring it is handled securely and confidentially.
- Autism Act 2009 and The Care Act 2014: We recognize the need to ensure that our services are accessible to people with autism and learning disabilities, ensuring these individuals receive personalized and comprehensive support.

Specialist Services for Autistic People and People with Learning Disabilities

As a provider specializing in supported living services for individuals with learning disabilities and autism spectrum conditions, Primus PLUS Healthcare is committed to:

- Ensuring that our services are accessible to people with learning disabilities and autism, offering tailored support that addresses their unique needs.
- Designing services that consider the sensory, communication, and social support requirements of these individuals to enable them to lead fulfilling, independent lives.
- Providing specialized training for staff on how to support people with autism and learning disabilities in a way that respects their individuality and promotes their well-being.

4. OBJECTIVES

The primary objective of Primus PLUS Healthcare's Equality, Diversity, and Human Rights Policy is to ensure that all service users, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions, are provided with care and support that is equitable, inclusive, and tailored to their individual needs. This policy will guide our efforts in providing supported living services without personal care that respect the rights, dignity, and autonomy of every individual, ensuring that we meet all relevant legal and regulatory requirements while promoting a culture of respect, inclusion, and equality.

Key Objectives:

1. **To Provide Inclusive, Person-Centred Care**
    - Ensure that all service users, regardless of their disability, cultural background, gender, religion, or any other characteristic, are treated with dignity and respect.
    - Develop person-centred care plans that are tailored to each individual's unique needs, preferences, and aspirations, ensuring that care is delivered in a way that values their rights and individuality.
    - Empower service users to make decisions about their care and support, promoting independence and ensuring that their voices are heard and respected.
2. **To Ensure Accessibility through Reasonable Adjustments**
    - Make reasonable adjustments to ensure that people with disabilities, including those with learning disabilities, mental health needs, and autism spectrum conditions, can access and use services on an equal basis with others.
    - These adjustments may include environmental changes, communication adaptations, and support with daily living to remove barriers to accessibility and ensure that all individuals can fully participate in and benefit from the services provided.
    - Ensure that technology and digital services, including telephone systems, websites, and other platforms, are easy to use and accessible for individuals with varying abilities.
3. **To Respect and Integrate Personal, Cultural, Social, and Religious Needs**

- Promote a deep understanding of the personal, cultural, social, and religious needs of service users, and how these needs may influence their care preferences and well-being.
- Ensure that staff are trained to recognize, understand, and respect these needs when delivering services, and take them into account when planning care, delivering support, and interacting with service users.
- Develop care plans and support strategies that are sensitive to cultural and religious values, ensuring that the care provided aligns with the individual's identity, beliefs, and personal preferences.

4. To Safeguard Service Users' Rights and Ensure Information Management is Secure

- Ensure that all personal information about service users is managed in accordance with the UK General Data Protection Regulation (GDPR), Data Protection Act 2018, and other privacy regulations.
- Maintain clear guidelines about how and when information may be shared with other services or providers, ensuring that any sharing of personal data is done confidentially and with consent, except when required by law (e.g., safeguarding purposes).
- Provide service users with access to their records, allowing them to review, amend, and correct any information that is inaccurate, as part of ensuring their right to privacy and control over their personal data.

5. To Address and Prevent Unacceptable Behaviour

- Establish clear protocols for identifying, reporting, and addressing unacceptable behaviour, including bullying, harassment, or any form of discrimination.
- Promote a zero-tolerance policy towards bullying, discrimination, and harassment, ensuring that all service users, staff, and visitors are treated with respect.
- Provide staff with the necessary training and tools to recognize unacceptable behaviour, take appropriate action, and maintain a safe and supportive environment for all individuals.
- Ensure that service users have a safe space to report incidents of bullying or harassment without fear of reprisal and that these issues are dealt with promptly and appropriately.

6. To Comply with Legal and Regulatory Standards

- Ensure full compliance with all legal and regulatory requirements, including:
  - The Equality Act 2010: Ensure that the services we provide do not discriminate against any individual and that reasonable adjustments are made where necessary to meet the needs of those with disabilities.
  - The Human Rights Act 1998: Ensure that the human rights of all service users are respected, including their right to privacy, dignity, and autonomy in decision-making.

- The Accessible Information Standard: Ensure that all service information is provided in an accessible format that meets the needs of individuals with different disabilities.
- The UK General Data Protection Regulation (GDPR) and Data Protection Act 2018: Protect service users' personal data, ensuring it is handled securely and in compliance with data protection laws.
- The Autism Act 2009 and The Care Act 2014: Ensure that services for autistic individuals and those with learning disabilities are tailored to their specific needs, providing specialized support as required.

7. **To Promote Access to Services for Autistic People and People with Learning Disabilities**
    - Ensure that services are accessible and inclusive for individuals with learning disabilities and autism spectrum conditions.
    - Implement care models and strategies specifically designed to address the challenges faced by these groups, including communication barriers, sensory needs, and social integration.
    - Promote the independence and dignity of service users with autism and learning disabilities, ensuring that they are not marginalized and that their specific needs are met with respect and understanding.
8. **To Encourage Continuous Improvement and Service User Feedback**
    - Continuously monitor and evaluate the effectiveness of this policy to ensure that our services remain inclusive, accessible, and person-centred.
    - Gather feedback from service users, their families, and staff to identify areas for improvement in how we meet the needs of diverse service users.
    - Regularly review the equality, diversity, and human rights provisions in the service delivery model and update them in line with best practices, user feedback, and changes in legislation or regulations.

5. DEFINITIONS

This section defines the key terms, acronyms, and abbreviations used in the Equality, Diversity, and Human Rights Policy and Procedure to ensure clarity and consistency across the document. These definitions are aligned with CQC regulations, relevant UK legislation, and the specific needs of service users, including adults with learning disabilities, mental health needs, and autism spectrum conditions. Understanding these terms is essential to implementing the policy in a way that respects service users' rights, promotes inclusivity, and meets regulatory requirements.

1. Key Terms

a. Equality

The state of being treated fairly and without discrimination, regardless of an individual's protected characteristics (such as disability, gender, race, age, sexual orientation, religion, etc.). In the context

of this policy, equality refers to ensuring that all service users, regardless of their characteristics or needs, have access to the same level of care and service.

b. Diversity

The presence of differences within a given setting. In the context of this policy, diversity encompasses the range of cultural, social, religious, and individual differences among service users and staff. It recognizes and respects the uniqueness of each individual.

c. Human Rights

The fundamental rights and freedoms that every person is entitled to, such as the right to live free from discrimination, right to privacy, right to dignity, and right to participation in decisions that affect them. These rights are protected under various UK laws, including the Human Rights Act 1998.

d. Person-Centered Care

An approach to care that places the individual at the center of decision-making. This means that care plans and services are tailored to meet each service user's unique needs, preferences, and circumstances, ensuring that they are respected and supported in a way that upholds their dignity and rights.

e. Reasonable Adjustments

Modifications or changes made to ensure that people with disabilities have equal access to services, opportunities, and treatment. These adjustments may include changes to the physical environment, technology, communication methods, or care practices, and are required under the Equality Act 2010.

f. Advocacy

Support provided to an individual to help them express their views, make decisions, and ensure their rights are upheld. An advocate may act on behalf of a person who is unable to speak for themselves, particularly in situations where the person's capacity to express themselves is impaired, such as in cases involving learning disabilities or mental health needs.

g. Discrimination

Treating someone unfairly or less favorably because of one of their protected characteristics (such as disability, race, gender, age, sexual orientation, or religion). This may occur in the form of direct discrimination, indirect discrimination, harassment, or victimization.

h. Safeguarding

The actions and procedures put in place to protect individuals, especially vulnerable adults, from harm, abuse, or neglect. In the context of this policy, safeguarding refers to ensuring the safety and well-being of service users in supported living services.

i. Accessibility

The design and implementation of services and environments to ensure that individuals, particularly those with disabilities, can access and use them on an equal basis to others. This includes physical accessibility, communication access, and service provision that accommodates the needs of service users.

j. Confidentiality

The obligation to protect the privacy of service users by ensuring that their personal information is shared only with those who are authorized to have access. Confidentiality is essential in maintaining the trust of service users and upholding their rights to privacy.

k. Care Plan

A personalized document that outlines the care and support needs of a service user, including specific goals, services, and the support required to meet those needs. A care plan is developed in consultation with the service user and regularly reviewed to ensure it reflects their evolving needs.

l. Inclusion

The practice of ensuring that all individuals, regardless of their background, abilities, or identity, are fully integrated into society and provided with equal opportunities to participate in all aspects of life, including accessing services and making decisions about their care.

m. Capacity

A person's ability to make decisions for themselves. In the context of this policy, capacity is particularly relevant in situations where service users may have learning disabilities or mental health needs, and may require additional support to ensure they can make informed decisions.

n. Empowerment

The process of enabling individuals to take control of their own lives and make decisions that affect them. In this policy, empowerment means ensuring that service users are given the tools, support, and information they need to participate fully in decisions about their care.

2. Abbreviations and Acronyms

a. CQC

Care Quality Commission – The independent regulator of health and social care services in England. The CQC ensures that services provide safe, effective, compassionate, and well-led care and that they meet the required standards.

b. GDPR

General Data Protection Regulation – A regulation in EU law governing the protection of personal data and the privacy of individuals. The GDPR ensures that personal information is secure, protected, and used transparently.

c. EHRC

Equality and Human Rights Commission – A statutory body that promotes and protects human rights and equality across the UK. The EHRC works to ensure that people are treated equally, fairly, and with dignity in all aspects of life, including in the provision of health and social care services.

d. NHS

National Health Service – The publicly funded healthcare system of the UK, which provides health services to residents free at the point of use. The NHS is a key partner in the provision of holistic care for individuals with learning disabilities, mental health needs, and autism spectrum conditions.

e. DBS

Disclosure and Barring Service – A UK government service that helps employers make safe recruitment decisions by checking whether an individual has a criminal record or is barred from working with vulnerable individuals, including those in care settings.

f. PECS

Picture Exchange Communication System – A communication system that uses pictures or symbols to help individuals with autism spectrum conditions or other communication difficulties express their needs and desires.

3. Scientific and Technical Terms

a. Sensory Processing

The way in which individuals perceive and respond to sensory stimuli, such as sounds, lights, and textures. Sensory processing difficulties are often associated with autism spectrum conditions, where individuals may experience heightened or diminished responses to sensory input.

b. Neurodiversity

The concept that neurological differences, such as those seen in individuals with autism spectrum conditions, ADHD, or learning disabilities, are part of human diversity and should be recognized and respected as such. Neurodiversity promotes acceptance and inclusion for individuals with diverse neurological conditions.

c. Capacity Assessment

A formal process used to determine whether an individual has the mental capacity to make decisions about their care or treatment. This is particularly important for individuals with learning disabilities, mental health needs, or autism spectrum conditions, as they may need additional support to make informed decisions.

4. Other Key Terms

a. Supported Living

A form of housing and support for individuals with disabilities, mental health needs, or other long-term conditions that allows them to live as independently as possible in the community while receiving the care and assistance they need with daily living tasks.

b. Reasonable Adjustments

Changes or adaptations made to services or environments to ensure that individuals with disabilities have equal access to services and opportunities. This may include physical adaptations, changes in communication methods, or modifications to care delivery to meet specific needs.

c. Equality Act 2010

An Act of the UK Parliament that provides a comprehensive framework for ensuring that people are treated fairly and without discrimination in various areas of life, including employment, education, and access to services. It outlines protected characteristics, such as disability, race, and age, and requires service providers to make reasonable adjustments for people with disabilities.

6. LEGAL AND REGULATORY FRAMEWORK

At Primus PLUS Healthcare, we are committed to upholding the legal and regulatory standards that ensure we deliver high-quality care and support services in a manner that is inclusive, respectful, and person-centred. The Equality, Diversity, and Human Rights Policy is designed to meet the CQC regulations and align with relevant UK legislation and national best practices. This section outlines the legal and regulatory framework that underpins our approach, ensuring that our services for adults with learning disabilities, mental health needs, and autism spectrum conditions are in full compliance with all applicable laws and regulations.

1. Care Quality Commission (CQC) Regulations

The Care Quality Commission (CQC) is the independent regulator of health and social care services in England. Primus PLUS Healthcare is committed to meeting CQC's standards for care, which include ensuring that services are safe, effective, caring, responsive, and well-led. Our Equality, Diversity, and Human Rights Policy aligns with the CQC's Fundamental Standards of Care, which are mandatory for all providers of care services. Specifically, our policy addresses the following key CQC regulations:

- Regulation 9 - Person-Centred Care: We ensure that services are tailored to meet the specific needs, preferences, and choices of each service user. Our care plans are developed with input from service users, ensuring their individuality and rights are respected.
- Regulation 10 - Dignity and Respect: We are committed to providing services that treat people with dignity and respect. This includes ensuring our staff provide care that is sensitive to the personal, cultural, and religious needs of service users.
- Regulation 11 - Need for Consent: We ensure that services are delivered with the informed consent of service users, respecting their right to make decisions about their care and support. We have clear processes in place to assess and obtain consent for care activities.
- Regulation 12 - Safe Care and Treatment: We ensure that our services are provided in a safe environment, free from harm, and where reasonable adjustments are made to meet the needs of individuals with disabilities or other needs.
- Regulation 13 - Safeguarding Service Users from Abuse and Improper Treatment: Our policy includes strict guidelines for addressing bullying, harassment, and any form of unacceptable behaviour to protect vulnerable individuals from harm.

2. The Equality Act 2010

The Equality Act 2010 consolidates and strengthens previous anti-discrimination laws, providing protection against discrimination on the grounds of disability, race, gender, sexual orientation, religion or belief, age, and other protected characteristics. Primus PLUS Healthcare adheres to the principles of the Equality Act 2010 to ensure that our services are accessible and non-discriminatory.

- We make reasonable adjustments for individuals with disabilities, including those with learning disabilities, mental health needs, and autism spectrum conditions, so that they can access and use services on an equal basis with others.
- We ensure that no service user is discriminated against based on their protected characteristics, and we actively promote inclusive care that respects the rights and needs of every individual.

3. The Accessible Information Standard

The Accessible Information Standard requires health and care organizations to ensure that people with disabilities (e.g., visual impairments, learning disabilities, or communication difficulties) are provided with information in a way that is accessible to them. This policy ensures that we meet these requirements by:

- Offering information in accessible formats, such as large print, Braille, audio formats, or Easy Read.
- Ensuring that all communication methods, including digital platforms and telephone systems, are designed to be user-friendly and accessible to individuals with varying abilities.
- Ensuring that staff are trained to support service users in accessing the information they need in an accessible manner.

4. The Human Rights Act 1998

The Human Rights Act 1998 enshrines fundamental rights and freedoms, including the right to life, freedom from torture or inhuman treatment, right to privacy, and right to family life. Primus PLUS Healthcare is committed to ensuring that the rights of service users are protected in all aspects of care, including:

- Respecting privacy and confidentiality of service users' personal information.
- Providing care in a manner that respects service users' dignity and autonomy, ensuring they have the right to make decisions about their care and support.
- Ensuring that no individual is subjected to inhuman or degrading treatment and that services are delivered in a safe and supportive environment.

5. UK General Data Protection Regulation (GDPR) and Data Protection Act 2018

The UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018 govern the handling of personal data in the UK. These laws ensure that service users' personal data is handled responsibly, securely, and with respect for their privacy rights. Primus PLUS Healthcare adheres to the following principles:

- Confidentiality: Service users' personal information will be handled with the utmost confidentiality and will not be shared without their consent, except when required by law (e.g., safeguarding concerns).
- Transparency: Service users will be informed about how their data is collected, stored, and used. They will have access to their records and the ability to make corrections if necessary.
- Security: We will implement appropriate measures to protect the personal data of service users from loss, misuse, or unauthorized access.

6. The Autism Act 2009 and The Care Act 2014

The Autism Act 2009 is the first piece of legislation specifically addressing the needs of individuals with autism in the UK. The Care Act 2014 provides a framework for adult social care, ensuring that individuals receive care and support that is tailored to their needs.

- Primus PLUS Healthcare ensures that our services are tailored to meet the specific needs of individuals with autism spectrum conditions and learning disabilities, following the principles outlined in the Autism Act 2009 and ensuring that these individuals have access to services that are accessible and appropriate for them.
- Our care models are person-centred, ensuring that services are flexible and adaptable to meet the changing needs of individuals with learning disabilities, mental health needs, and autism spectrum conditions.

7. The Children and Families Act 2014

For service users transitioning from childhood to adulthood, the Children and Families Act 2014 ensures that individuals with special educational needs and disabilities receive appropriate support as they move into adulthood. Primus PLUS Healthcare ensures that:

- We support young people with learning disabilities and autism spectrum conditions during their transition into supported living services.
- We ensure that transitions are planned and executed in a way that supports the well-being and independence of young adults.

8. The Health and Social Care Act 2012

The Health and Social Care Act 2012 focuses on improving the quality of care and ensuring that services are effective, patient-centred, and accessible. It requires health and care providers to meet the needs of diverse groups and ensure that services are delivered in a manner that respects the rights and dignity of service users.

- Primus PLUS Healthcare is committed to adhering to the standards set by the Health and Social Care Act 2012 by delivering services that are person-centred, inclusive, and safe.
- We will ensure that our services are continuously evaluated and improved to meet the diverse needs of service users.

9. The Safeguarding Vulnerable Groups Act 2006

The Safeguarding Vulnerable Groups Act 2006 sets the framework for protecting vulnerable adults and children from harm. This includes ensuring that only suitable and safe individuals are involved in the care and support of vulnerable service users.

- Primus PLUS Healthcare has stringent safeguarding policies in place to ensure that service users are protected from abuse, exploitation, and neglect.
- We ensure that all staff undergo DBS checks (Disclosure and Barring Service checks) and receive appropriate training in safeguarding vulnerable adults.

7. KEY PRINCIPLES

At Primus PLUS Healthcare, we are committed to delivering high-quality, inclusive, and person-centered care to adults with learning disabilities, mental health needs, and autism spectrum conditions. Our Equality, Diversity, and Human Rights Policy is built upon a set of core principles that guide the delivery of care and ensure compliance with CQC regulations, UK legislation, and best practices.

These principles reflect our commitment to upholding the rights and dignity of every individual we support, ensuring that services are accessible, inclusive, and meet the diverse needs of our service users.

1. Person-Centered Care

We believe that every individual has the right to receive care that is tailored to their unique needs, preferences, and goals. Person-centered care means that we put the individual at the center of their care plan, ensuring that:

- Service users have choice and control over their care and support, empowering them to make decisions about their lives and wellbeing.
- Care plans are developed with input from service users, their families, and other key stakeholders, ensuring that the care and support they receive reflect their personal needs, values, and aspirations.
- Staff are trained to recognize and respond to the individual preferences of each service user, ensuring that their human rights and dignity are respected at all times.

2. Equality of Access

We are committed to ensuring that all service users have equal access to our services, regardless of their disability, age, ethnicity, religion, gender, or sexual orientation. This principle ensures that:

- Reasonable adjustments are made to ensure that individuals with disabilities (e.g., mobility impairments, sensory impairments, communication challenges) can access and use our services on an equal basis with others.
- Information and communication are provided in accessible formats, such as large print, Braille, audio, or Easy Read, to meet the needs of people with varying communication preferences or abilities.
- Technology used in service delivery, including telephone systems, digital platforms, and online services, is designed to be user-friendly and accessible to individuals with learning disabilities, mental health needs, or autism spectrum conditions.

3. Respect for Individual Needs and Diversity

We recognize and embrace the diversity of the individuals we serve, understanding that each person has their own personal, cultural, social, and religious needs that influence their care and support requirements. This principle ensures that:

- Staff are trained to understand the cultural, social, and religious needs of service users, ensuring these needs are respected and incorporated into their care plans and day-to-day support.
- Service users' values, beliefs, and identities are respected, and care is provided in a way that is consistent with their personal preferences and lifestyles.
- We adopt a flexible approach that recognizes the diversity of our service users and allows for adjustments in care delivery to meet their unique needs and aspirations.

4. Empowerment and Inclusion

We believe in empowering service users to live independently and make decisions about their care

and support. This principle underpins our approach to promoting inclusion in all aspects of life. We aim to:

- Support service users in making informed choices about their care, personal goals, and day-to-day activities, ensuring they are fully involved in decisions about their lives.
- Ensure that service users have equal opportunities to engage in social, educational, and recreational activities, allowing them to participate in their communities and lead fulfilling lives.
- Promote a culture of inclusion that encourages participation, encourages social integration, and celebrates the unique contributions of each individual.

5. Safeguarding and Protection

We are committed to ensuring that all service users are safeguarded from harm, abuse, and neglect. This principle ensures that:

- We protect vulnerable adults from harm by ensuring that safeguarding procedures are in place and are consistently followed. This includes providing a clear pathway for reporting concerns and taking prompt action to address any issues of abuse or mistreatment.
- All staff undergo regular safeguarding training and are equipped with the knowledge and tools to identify and address unacceptable behavior, including bullying, harassment, and discrimination.
- We maintain a zero-tolerance policy towards any form of abuse, bullying, or harassment, and actively promote a safe, respectful, and supportive environment for all service users.

6. Accountability and Transparency

We are committed to being accountable for the quality of care and support we provide. This principle ensures that:

- We maintain a transparent approach to care delivery, ensuring that service users and their families have access to information about their care plans, progress, and rights.
- Regular monitoring and evaluation of services ensure that we are meeting the needs of service users and adhering to legal and regulatory standards, such as those set by the CQC and other relevant bodies.
- We actively encourage feedback from service users, their families, and staff to ensure that services are continually improving and evolving to meet changing needs.

7. Legal and Regulatory Compliance

We are fully committed to meeting all legal and regulatory requirements set out by national bodies, ensuring that our services are compliant with the laws and regulations governing the provision of care for adults with learning disabilities, mental health needs, and autism spectrum conditions. This principle ensures that:

- We comply with all relevant legislation, including the Equality Act 2010, Human Rights Act 1998, The Accessible Information Standard, UK GDPR, and Data Protection Act 2018.

- We adhere to CQC regulations, ensuring that our services are safe, effective, caring, responsive, and well-led, with a strong emphasis on person-centered care.
- We maintain specialized care and support for individuals with autism spectrum conditions and learning disabilities, following best practices outlined in the Autism Act 2009 and Care Act 2014.

8. Continuous Improvement

We are committed to the continuous improvement of the services we provide. This principle ensures that:

- We regularly review and update our policies, procedures, and care models to ensure that they remain relevant and effective in meeting the needs of service users.
- We monitor and evaluate service delivery to identify opportunities for improvement and ensure that service users are receiving the best possible care and support.
- We engage with external bodies, such as CQC, to ensure that we are consistently meeting regulatory requirements and adopting the best practices in service delivery.

8. ROLES AND RESPONSIBILITIES

At Primus PLUS Healthcare, we are dedicated to ensuring that our supported living services for adults with learning disabilities, mental health needs, and autism spectrum conditions meet the highest standards of equality, diversity, and human rights. To achieve this, it is essential that everyone involved in the delivery of care understands their responsibilities and actively contributes to creating an inclusive, respectful, and supportive environment for all service users.

This section outlines the roles and responsibilities of all individuals involved in the provision of care and services to ensure that the Equality, Diversity, and Human Rights Policy is implemented effectively and consistently.

1. Management Team

The Management Team at Primus PLUS Healthcare is responsible for ensuring that the principles of this policy are incorporated into all aspects of the organization's activities. Their specific roles and responsibilities include:

- Policy Implementation and Oversight: The management team is responsible for overseeing the implementation of this policy across all services and ensuring that it is effectively communicated to staff, service users, and other stakeholders.
- Compliance with Legal and Regulatory Requirements: Ensure that the policy complies with CQC regulations, Equality Act 2010, Human Rights Act 1998, UK GDPR, and other relevant legislation. They must monitor changes in regulations and update the policy accordingly.
- Staff Training and Development: The management team will ensure that all staff receive regular training on equality, diversity, and human rights, and that training programs are regularly reviewed and updated to meet changing needs and best practices.

- Reasonable Adjustments: Ensure that reasonable adjustments are made for individuals with disabilities, including ensuring that services and technology are accessible, and that communication methods are tailored to individual needs.
- Reporting and Accountability: Oversee the monitoring of service delivery to ensure it is in line with this policy, addressing any issues or complaints raised by service users, families, or staff. The management team is responsible for reporting on equality and diversity progress to regulatory bodies, such as the CQC, and ensuring that feedback from service users and staff is used for continuous improvement.
- Safeguarding: Ensure that safeguarding protocols are followed, and that incidents of bullying, harassment, or discrimination are dealt with promptly and appropriately.

2. Service Managers

The Service Managers are responsible for the day-to-day implementation of the Equality, Diversity, and Human Rights Policy within their individual service areas. Their responsibilities include:

- Supervision and Support: Oversee the implementation of person-centred care plans and ensure that service users' personal, cultural, social, and religious needs are respected and integrated into their care. Service Managers are responsible for ensuring that staff provide care in a manner that is inclusive and sensitive to service users' needs.
- Ensuring Access to Services: Ensure that reasonable adjustments are made so that all service users can access and use services on an equal basis. This includes adapting physical environments, providing accessible formats of information, and ensuring that technology and digital services are user-friendly.
- Information Sharing and Confidentiality: Ensure that service user information is accurately recorded, shared in compliance with the Data Protection Act 2018 and UK GDPR, and only shared when appropriate with consent or legal requirement. They will ensure that records are stored securely and confidentially.
- Addressing Unacceptable Behaviour: Ensure that any incidents of bullying, harassment, or discrimination are dealt with in accordance with the organization's zero-tolerance policy. Service Managers are responsible for fostering a safe, respectful, and inclusive environment for service users and staff.
- Engagement with Service Users: Promote active involvement of service users in decisions regarding their care. Encourage feedback from service users about the care they receive, ensuring that this feedback is taken into account in future care plans and service delivery.

3. Care and Support Staff

Care and Support Staff play a key role in delivering the person-centred care that is at the heart of this policy. Their responsibilities include:

- Respecting Individual Needs: Provide care that is sensitive to the personal, cultural, social, and religious needs of service users. This includes adjusting care plans and approaches based on these factors and ensuring that service users feel understood and respected.
- Delivering Care in Compliance with Policy: Ensure that all aspects of care and support are provided in line with this policy. This includes ensuring that reasonable adjustments are made

for service users, such as offering accessible information or modifying care delivery to meet individual needs.

- Communication and Accessibility: Adapt communication methods to suit the needs of service users, including using alternative formats (e.g., large print, Braille, Easy Read) or assistive technology. Care and support staff must ensure that service users have equal access to information about their care.
- Reporting Concerns: If a staff member observes any incidents of unacceptable behaviour, discrimination, or harassment, they are required to report these incidents in line with safeguarding protocols. Staff should also be proactive in identifying potential barriers to equality and diversity and bring these issues to the attention of the Service Manager or management team.
- Promoting Independence and Empowerment: Support service users in making informed decisions about their care and daily lives, encouraging them to maintain control and independence.

4. Human Resources (HR) Team

The HR Team is responsible for ensuring that the principles of equality and diversity are reflected in the organization's recruitment, retention, and staff development practices. Their responsibilities include:

- Recruitment and Equality: Ensure that recruitment and selection processes are free from discrimination and are based on the principles of equality and fairness. HR should also ensure that reasonable adjustments are made during the recruitment process for individuals with disabilities.
- Staff Training and Development: Ensure that all staff are trained in equality, diversity, and human rights, and that ongoing training is provided to promote understanding and awareness of these principles in practice. HR should also support staff in accessing training on how to work with individuals who have learning disabilities, mental health needs, or autism spectrum conditions.
- Support for Staff: Provide staff with support and guidance on how to implement the policy in practice, and ensure they have access to resources that help them understand their role in promoting equality, diversity, and human rights.
- Monitoring Staff Well-being: Ensure that staff feel supported and are working in an environment where they are treated with respect and dignity. The HR team should regularly review workplace policies to ensure that they are conducive to staff well-being and inclusivity.

5. Service Users and Their Families

Service Users and their families have a critical role to play in ensuring that care is aligned with their needs, preferences, and values. Their responsibilities include:

- Involvement in Care Planning: Actively participate in the development and review of their person-centred care plans, ensuring that their personal, cultural, and religious needs are taken into account.

- Providing Feedback: Give regular feedback about the services they receive, including any barriers to accessibility or areas where reasonable adjustments could improve the service. Service users and families should feel empowered to express their preferences, concerns, and ideas for improvement.
- Advocacy: Service users and their families may also choose to engage in advocacy services if needed, to ensure their voices are heard and their needs are met in accordance with their rights.

6. External Agencies and Support Services

External Agencies and Support Services, such as advocacy services, healthcare providers, and community organizations, have a role in supporting service users to ensure they receive high-quality, equitable care. Their responsibilities include:

- Collaboration with Primus PLUS Healthcare: Work in partnership with Primus PLUS Healthcare to ensure that service users receive holistic, integrated care that meets their physical, mental, and social needs.
- Providing Specialized Support: For individuals with learning disabilities and autism spectrum conditions, external agencies may provide specialized assessments, therapy, or advice to enhance the care and support delivered by Primus PLUS Healthcare.
- Advocacy and Representation: External agencies can support service users in expressing their views and concerns about the care and services they receive, ensuring that their rights are respected.

9. TRAINING AND DEVELOPMENT

At Primus PLUS Healthcare, we understand that the successful implementation of our Equality, Diversity, and Human Rights Policy is not only dependent on clear policies and procedures, but also on the ongoing training and development of our staff. Providing high-quality, inclusive, and person-centred care requires that our staff are equipped with the knowledge, skills, and understanding to meet the diverse needs of adults with learning disabilities, mental health needs, and autism spectrum conditions.

Our training and development program will ensure that staff are well-prepared to deliver services that are aligned with CQC regulations, relevant UK legislation, and best practices. This program will focus on promoting a deep understanding of equality, diversity, and human rights, as well as the practical application of this knowledge in day-to-day care.

1. Equality, Diversity, and Human Rights Training

We will provide all staff with comprehensive training on the principles of equality, diversity, and human rights, ensuring that every individual is treated with respect, dignity, and fairness. The training will include:

- The Equality Act 2010: Staff will learn about the importance of providing services without discrimination, making reasonable adjustments, and ensuring that individuals with disabilities have equal access to services.

- The Accessible Information Standard: Staff will be trained on how to provide information in accessible formats (e.g., Easy Read, large print, Braille) for service users who may have communication challenges.
- The Human Rights Act 1998: Staff will be educated on the human rights of service users, ensuring they are aware of the need to respect rights such as privacy, dignity, and the freedom of choice in care and decision-making.

2. Understanding and Respecting Service Users' Needs

To ensure that care is person-centred and inclusive, all staff will undergo training that enhances their ability to understand and respect the personal, cultural, social, and religious needs of service users. This includes:

- Cultural Competence: Training to understand and appreciate the cultural backgrounds, religious beliefs, and personal values of service users, enabling staff to tailor care plans and support that align with these needs.
- Person-Centred Care: Staff will be trained to recognize the unique needs of each service user and how to integrate their cultural, social, and religious preferences into care plans. This will involve creating a supportive environment where service users feel valued, understood, and empowered.
- Disability Awareness: Special focus will be placed on understanding the specific needs of individuals with learning disabilities, mental health needs, and autism spectrum conditions, ensuring that staff know how to deliver care that is respectful of and sensitive to these conditions.

3. Reasonable Adjustments and Accessibility

Staff will receive training to understand their role in ensuring that reasonable adjustments are made so that service users with disabilities can access and use services on an equal basis to others. The training will cover:

- Making Reasonable Adjustments: Staff will be trained to identify where adjustments are needed, such as adapting the physical environment, adjusting communication methods, or providing assistive technology, to ensure service users with disabilities can access and participate fully in services.
- Accessible Technology: Staff will be instructed on how to support service users in using technology, including telephone systems, digital services, and any other technological tools, to ensure these services are accessible and easy to use for individuals with diverse needs.

4. Safeguarding and Addressing Unacceptable Behaviour

Ensuring that service users are protected from harm and treated with respect is a central tenet of our policy. Therefore, all staff will undergo training in:

- Safeguarding Vulnerable Adults: Staff will be trained in recognizing and reporting abuse, bullying, harassment, and other forms of unacceptable behaviour. This includes understanding the duty of care they have to protect vulnerable individuals and the procedures for reporting concerns.

- Zero-Tolerance Policy: Training will also cover zero-tolerance for discrimination, bullying, or harassment. Staff will understand how to address unacceptable behaviour and foster a culture of respect and inclusivity.
- Mental Health First Aid: Staff will be trained in mental health first aid to support individuals with mental health conditions. This will enable staff to recognize signs of distress or crisis and provide appropriate assistance, ensuring service users feel supported and safe.

5. Data Protection and Information Sharing

To meet the UK General Data Protection Regulation (GDPR) and Data Protection Act 2018, staff will be trained in the principles of confidentiality and information security. Training will focus on:

- Confidentiality and Privacy: Staff will understand the importance of keeping service user information confidential and how to securely handle personal data.
- Information Sharing: Staff will be trained on how to share information appropriately and legally, ensuring they know when and how to share information with other services or providers, particularly when it relates to safeguarding or coordinated care.
- Rights of Service Users: Training will also address the rights of service users to access their personal information, request corrections, and understand how their data is used.

6. Role-Specific and Specialized Training

In addition to the core training provided to all staff, there will be role-specific and specialized training for those working directly with individuals with learning disabilities, mental health needs, and autism spectrum conditions. This training will include:

- Autism Spectrum Disorder (ASD) Training: Specialized training for staff to better understand the unique challenges faced by individuals with autism, including sensory processing differences, communication challenges, and social interaction difficulties. Staff will learn strategies to provide support that is respectful and sensitive to the needs of individuals with autism.
- Learning Disabilities Training: Training focused on understanding learning disabilities, including the challenges faced by individuals in managing daily activities, decision-making, and communication. Staff will learn to offer support that promotes independence and dignity while accommodating these challenges.
- Mental Health Needs: Training for staff working with individuals who have mental health conditions, ensuring they understand the complexities of mental health disorders and how to provide appropriate care, support, and crisis intervention when necessary.

7. Ongoing Professional Development

To ensure that staff remain up-to-date with the latest developments in care practices, the training and development program will include:

- Continuous Professional Development (CPD): Staff will have access to ongoing training and learning opportunities to enhance their skills and knowledge in equality, diversity, inclusivity, and person-centred care.

- Regular Refresher Courses: Periodic refresher courses on safeguarding, disability awareness, cultural competence, and mental health will be provided to ensure that staff continue to provide care that is in line with the latest regulatory standards and best practices.
- Feedback and Evaluation: Training effectiveness will be assessed regularly through staff feedback, performance evaluations, and service user satisfaction surveys to ensure that the training is relevant, impactful, and up to date.

8. Evaluation and Effectiveness of Training

To ensure that training is effective and meets the needs of both service users and staff, we will:

- Evaluate Training Impact: Regular assessments will be conducted to evaluate the effectiveness of the training, focusing on whether it has led to improved practice in delivering inclusive care.
- Gather Feedback: Feedback from staff, service users, and families will be gathered to assess the relevance and applicability of the training provided.
- Adjust Training Programs: Based on feedback and evaluations, the training programs will be continuously adapted to meet the evolving needs of the service users we support.

10. INFORMATION SHARING AND MANAGEMENT

At Primus PLUS Healthcare, we recognize the importance of confidentiality, data protection, and information sharing as essential components of providing safe and effective care. We are committed to managing service user information responsibly and securely, ensuring that personal data is handled in compliance with relevant laws, regulations, and best practices. This section outlines our approach to information sharing and management in line with CQC regulations, UK legislation, and the Equality, Diversity, and Human Rights Policy.

1. Legal and Regulatory Compliance

Primus PLUS Healthcare ensures that all processes related to information management and information sharing comply with relevant UK legislation and CQC standards. This includes the UK General Data Protection Regulation (GDPR), the Data Protection Act 2018, and other applicable privacy and safeguarding laws.

- UK GDPR and Data Protection Act 2018: We will ensure that service user information is collected, stored, and shared in compliance with the principles of data protection outlined in the GDPR and Data Protection Act. This includes ensuring that all personal data is:
    - Processed lawfully, fairly, and transparently.
    - Collected for specified, legitimate purposes and not used in a manner incompatible with those purposes.
    - Accurate and kept up to date.
    - Kept in a form that allows identification of service users only for as long as necessary for the purposes for which it is processed.

2. Confidentiality and Privacy

We recognize that protecting service user privacy is fundamental to providing dignified and respectful care. As such, we are committed to safeguarding service user personal and sensitive data and ensuring confidentiality in all aspects of service delivery.

- Confidentiality: All service users' personal and sensitive data (e.g., health records, financial information, cultural and religious preferences) is treated as confidential. It will only be disclosed to third parties with the explicit consent of the service user, or when legally required (e.g., safeguarding concerns or emergency situations).
- Privacy: We respect the privacy of our service users and will ensure that any data shared is done so in a way that does not compromise their dignity or personal space.

3. Information Sharing

We understand that sharing relevant information between care providers, services, and support agencies is essential for holistic care. However, we are committed to ensuring that information sharing follows legal and ethical guidelines.

- When Information May Be Shared:
    - Information will only be shared when it is necessary to ensure the safety and well-being of the service user, to improve care coordination, or to comply with legal requirements (e.g., safeguarding concerns).
    - Information may be shared with other healthcare providers, support agencies, or care teams if it is essential for providing coordinated care or in the event of an emergency.
    - We will seek the service user's consent before sharing their information, unless the law permits or requires sharing without consent (e.g., in cases of abuse, neglect, or safeguarding concerns).
    - Information will also be shared with authorized regulatory bodies, such as CQC, local authorities, or other relevant organizations, in accordance with regulatory and legal requirements.
- How Information Will Be Shared:
    - Information will be shared securely and in line with data protection protocols. This includes using encrypted communication systems when sharing sensitive information electronically or ensuring secure physical storage for paper records.
    - Any shared information will be necessary, relevant, and limited to what is required for the specific purpose, and care will be taken to ensure minimal disclosure of sensitive information.

4. Recording Information

Accurate and up-to-date record-keeping is essential for the effective delivery of care and for meeting legal and regulatory standards. All service user information will be recorded in a manner that ensures transparency, accountability, and accuracy.

- Care Records: We will maintain comprehensive care records for each service user, documenting important information such as:

- Personal details (e.g., name, address, emergency contact).
- Health and care needs (e.g., medical history, mental health conditions, support requirements).
- Cultural, social, and religious preferences that are relevant to their care.
- Assessments of needs, support plans, and reviews of care.
- Consent forms and any records of information sharing.

- Electronic Systems: We will use secure electronic care record systems that ensure all data is accurate, up-to-date, and accessible only to authorized staff. These systems will also ensure that all information is readily available for review and auditing.
- Paper Records: In cases where information is recorded manually, all records will be stored securely and handled in compliance with data protection guidelines.

5. Consent and Service User Rights

Respecting the rights of service users is central to our approach to information management. We will ensure that all service users are fully informed about how their personal information is used and shared, and that their rights to access, amend, and withdraw consent are respected.

- Informed Consent: Before collecting or sharing any personal information, we will ensure that service users are fully informed about how their data will be used, and we will obtain their explicit consent for the sharing of their personal information, wherever possible. Service users will be provided with clear explanations regarding:
  - What information will be collected?
  - Why the information is being collected.
  - How the information will be used and who it will be shared with.
- Right to Access: Service users have the right to access their personal data and can request copies of any records we hold about them.
- Right to Amend: Service users have the right to request amendments to their records if they believe any information is inaccurate or incomplete.
- Right to Withdraw Consent: Service users can withdraw consent for the sharing of their information at any time, except where there is a legal obligation to share.

6. Data Security and Protection

We take the security of service user information very seriously and will implement robust measures to protect personal and sensitive data from unauthorized access, loss, or theft.

- Confidentiality and Data Protection Training: All staff will be trained on the principles of data protection, ensuring that they understand how to handle personal information responsibly and securely.
- Secure Systems: We will use secure electronic systems for storing and sharing information and ensure that physical records are stored in locked, secure areas.

- Access Control: Access to service user information will be restricted to authorized personnel only, and staff will be granted access to information based on their role and the specific needs of the service user.

7. Incident Reporting and Breach Management

In the event of a data breach or security incident, we will follow a clear protocol to mitigate the effects and prevent further issues. This includes:

- Immediate Reporting: Any staff member who becomes aware of a potential data breach must immediately report it to the Service Manager or designated Data Protection Officer.
- Investigation and Action: We will investigate any reported incidents to assess the impact, take corrective action where necessary, and notify the relevant authorities in line with GDPR requirements.
- Service User Notification: If a breach is likely to result in high risks to a service user's rights and freedoms, we will notify the affected individuals as soon as possible, outlining the nature of the breach and the steps taken to address it.

8. Compliance with CQC Regulations

Primus PLUS Healthcare will ensure that our information sharing and management practices comply with CQC regulations, specifically those related to records management, privacy, and safeguarding. This includes maintaining accurate and up-to-date service user records and ensuring that information is securely stored, properly handled, and shared in line with service users' rights and legal obligations.

11. ADDRESSING UNACCEPTABLE BEHAVIOR

At Primus PLUS Healthcare, we are committed to providing a safe, respectful, and inclusive environment for all service users, especially those with learning disabilities, mental health needs, and autism spectrum conditions. Our Equality, Diversity, and Human Rights Policy ensures that we uphold the dignity and rights of every individual while actively preventing and addressing any form of unacceptable behaviour. This section outlines the clear procedures and responsibilities for dealing with bullying, harassment, and other forms of discriminatory or harmful behaviour in line with CQC regulations and relevant UK legislation.

1. Definition of Unacceptable Behaviour

Unacceptable behaviour includes, but is not limited to:

- Bullying: Repeated and intentional behaviour intended to hurt or intimidate another individual. This can be verbal, physical, or emotional abuse.
- Harassment: Any form of unwanted, offensive, or intrusive behaviour that causes distress or harm, including racial, sexual, or disability-related harassment.
- Discrimination: Treating someone unfairly or differently due to their disability, race, gender, sexual orientation, age, religion, or any other protected characteristic as defined by the Equality Act 2010.

- Violence or Aggression: Any act that causes harm or threatens the safety and well-being of others, including physical and verbal aggression.
- Exploitation or Abuse: Any form of financial, emotional, or sexual exploitation, or abuse directed towards vulnerable individuals.

We acknowledge that service users in supported living arrangements may be at greater risk of experiencing these behaviours due to their vulnerability. As such, it is our responsibility to ensure that these behaviours are not tolerated, and swift action is taken to prevent harm.

2. Zero-Tolerance Policy

We operate a zero-tolerance policy for any form of unacceptable behaviour within our services. This means:

- Any incidents of bullying, harassment, discrimination, or abuse will not be tolerated.
- Any person found engaging in unacceptable behaviour, whether a service user, staff member, or visitor, will face appropriate action in line with our safeguarding and disciplinary procedures.
- We will create an inclusive environment where service users feel safe and confident in expressing concerns about any form of unacceptable behaviour without fear of retaliation.

3. Procedures for Addressing Unacceptable Behaviour

The following steps outline how we will address unacceptable behaviour:

Step 1: Reporting and Recording

- Immediate Reporting: All staff, service users, and visitors must report any incidents of unacceptable behaviour immediately to the designated Service Manager or Safeguarding Lead. Reports can be made verbally, in writing, or through designated reporting systems.
- Service User Support: If the individual affected is a service user, we will ensure that they receive immediate emotional support and that they feel safe while the situation is being investigated.
- Documenting Incidents: Every report of unacceptable behaviour will be documented in detail, including the nature of the incident, the parties involved, the time, date, and any actions taken.

Step 2: Investigation

- Initial Assessment: Upon receiving a report of unacceptable behaviour, the Service Manager or Safeguarding Lead will conduct an immediate assessment to understand the nature and severity of the incident.
- Investigation Process: If the behaviour involves harassment, bullying, or any serious incidents, an investigation will be launched. This may involve:
    - Speaking to the individual(s) involved.
    - Gathering witness statements or additional evidence, if available.
    - Ensuring that the service user affected by the incident is supported throughout the process.

Step 3: Addressing the Incident

- Support for Victims: Service users who are victims of unacceptable behaviour will be provided with immediate support. This may include emotional support, assistance in managing the impact of the incident, and access to advocacy services if necessary.
- Resolution and Action: Depending on the outcome of the investigation, appropriate action will be taken, which could include:
    - Mediation between the involved parties (if appropriate and agreed upon).
    - Training or awareness-raising sessions for the individual who exhibited unacceptable behaviour.
    - Disciplinary action for staff, including training, suspension, or dismissal in accordance with staff policies.
    - Changes to care plans or increased supervision to protect the affected service user, if needed.

Step 4: Prevention and Follow-Up

- Preventative Measures: Based on the outcome of the incident and investigation, preventative measures will be implemented to reduce the risk of similar incidents happening in the future. This may include:
    - Additional staff training on equality, diversity, and anti-bullying measures.
    - Modifications to the environment or support plans.
    - Regular service user reviews to identify any further concerns.
- Regular Monitoring: We will monitor the situation and ensure that the service user and others involved continue to feel safe and supported. We will conduct follow-up meetings to check on the well-being of everyone involved and ensure that any measures put in place are working.

4. Staff Training and Awareness

To ensure that staff are equipped to deal with incidents of unacceptable behaviour, we will provide the following training:

- Equality and Diversity Training: Staff will receive ongoing training to ensure they understand their responsibility in fostering an inclusive, respectful environment and are equipped to deal with discriminatory or harassing behaviours.
- Safeguarding Training: All staff will receive training on safeguarding vulnerable adults, including how to recognize signs of abuse, bullying, or harassment and how to report incidents appropriately.
- Conflict Resolution and De-escalation: Staff will be trained in conflict resolution and de-escalation techniques to help manage potentially harmful situations before they escalate, ensuring that service users and staff feel supported in managing challenging behaviours safely.

5. Reporting to External Bodies

In certain cases, if the behaviour involves serious abuse or safeguarding concerns, we will follow the necessary steps to report the incident to the relevant external bodies, including:

- Local Safeguarding Adults Board.
- CQC (Care Quality Commission).
- Police, if criminal behaviour is suspected.
- Local authority or social services if further intervention is required.

6. Service User Involvement in Addressing Unacceptable Behaviour

We believe in involving service users in the process of addressing unacceptable behaviour, ensuring they have a voice in the decision-making process:

- Service users will be encouraged to express their views and provide feedback on any incidents they are involved in, either as victims or perpetrators.
- Where appropriate, service users will be included in restorative practices or mediation to foster understanding and resolution.
- Advocates or family members can be involved to support the service user throughout the process.

7. Accountability and Review

- Accountability: All incidents of unacceptable behaviour will be handled with transparency and accountability, ensuring that service users and staff feel confident that their concerns are taken seriously and that appropriate actions are taken.
- Review Process: The Service Manager will regularly review incidents and the actions taken, identifying trends or recurring issues that may require systemic changes or further staff training.

8. Compliance with CQC and Legislation

Our approach to addressing unacceptable behaviour is aligned with the CQC regulations, including:

- Regulation 13 – Safeguarding Service Users from Abuse and Improper Treatment: This regulation requires that all service users are protected from abuse, discrimination, or mistreatment. This policy ensures that we meet these requirements by implementing a zero-tolerance policy and clear procedures for addressing unacceptable behaviour.
- Equality Act 2010: This legislation mandates that services do not discriminate against individuals based on protected characteristics. Our policy ensures compliance with this act by ensuring that any unacceptable behaviour, particularly discrimination or harassment, is swiftly addressed.

12. LEGAL REQUIREMENTS

At Primus PLUS Healthcare, we are committed to complying with all legal and regulatory requirements to ensure that our supported living services without personal care are inclusive,

respectful, and provide equitable care to all service users, including those with learning disabilities, mental health needs, and autism spectrum conditions. Our Equality, Diversity, and Human Rights Policy ensures that we meet the standards set by CQC regulations, UK legislation, and relevant national bodies. Below, we outline the key legal frameworks and requirements that underpin this policy.

1. The Equality Act 2010

The Equality Act 2010 is a significant piece of legislation that aims to eliminate discrimination, harassment, and victimization in the provision of services and public functions. The act requires all service providers to ensure that individuals with protected characteristics are treated equally and fairly. Primus PLUS Healthcare is committed to upholding the principles of the Equality Act 2010, which includes:

- Reasonable Adjustments: We will make reasonable adjustments to ensure that individuals with disabilities, including learning disabilities, mental health conditions, and autism spectrum conditions, can access services on an equal basis with others. This includes changes to our physical environment, communication methods, and services.
- Non-Discriminatory Practices: We ensure that services are delivered in a non-discriminatory manner, meaning no one will be treated unfairly because of their race, disability, gender, sexual orientation, religion, or any other protected characteristic.
- Inclusive Care: Our services are designed to be inclusive of all individuals, ensuring that the diverse needs of our service users are recognized, respected, and accommodated.

2. The Accessible Information Standard

The Accessible Information Standard (2016) sets out the requirement for organizations to ensure that individuals with a disability, including those with sensory impairments or learning disabilities, receive information in formats that meet their needs. This is a legal requirement for healthcare and social care providers in England. Primus PLUS Healthcare will comply with this standard by:

- Providing Accessible Formats: We will offer information in formats such as easy read, large print, Braille, or audio, ensuring that service users with visual, hearing, or cognitive impairments can access the information they need.
- Supporting Communication Needs: We will provide support where necessary, including the use of sign language interpreters or other assistive technologies to ensure effective communication for service users who may have specific needs due to their autism or learning disabilities.

3. The Care Quality Commission (CQC) Regulations

The CQC is the independent regulator for health and social care services in England, ensuring that care is provided safely and effectively. Primus PLUS Healthcare is committed to meeting the CQC regulations, particularly those related to:

- Person-Centred Care (Regulation 9): We ensure that our care plans are person-centred, reflecting the individual needs and preferences of each service user, with a strong focus on respect for cultural, social, and religious needs.

- Dignity and Respect (Regulation 10): We uphold the dignity and respect of our service users by promoting inclusive care and ensuring that all individuals are treated with fairness and respect.
- Safeguarding (Regulation 13): We ensure that our service users are protected from abuse, bullying, and harassment, as outlined in our zero-tolerance policy for unacceptable behaviour.

4. The Human Rights Act 1998

The Human Rights Act 1998 incorporates the European Convention on Human Rights into UK law. This act guarantees key rights, including:

- Right to Privacy (Article 8): We ensure that service users' privacy is respected and that their personal information is kept confidential and secure, in line with GDPR and the Data Protection Act 2018.
- Right to Freedom from Inhumane or Degrading Treatment (Article 3): We are committed to preventing any form of abuse, harassment, or degrading treatment, ensuring that service users are treated with dignity and respect at all times.
- Right to Family Life (Article 8): We recognize and support the right of service users to maintain family connections and ensure that care plans respect the importance of family relationships.

5. The UK General Data Protection Regulation (GDPR) and Data Protection Act 2018

The UK GDPR and Data Protection Act 2018 regulate the processing of personal data and protect the privacy of individuals. At Primus PLUS Healthcare, we are committed to complying with these regulations to ensure that personal information is handled responsibly and securely. This includes:

- Data Security and Confidentiality: We ensure that all personal information about service users is stored securely and is only accessible to authorized personnel. Data is kept confidential and is shared only with explicit consent or as required by law (e.g., safeguarding concerns).
- Service User Rights: Service users have the right to access, correct, and delete their personal data. We ensure that service users are informed of their data protection rights and are provided with easy access to their records.
- Training and Compliance: All staff will receive regular training on data protection, confidentiality, and the GDPR to ensure they understand their role in maintaining privacy and security.

6. The Autism Act 2009

The Autism Act 2009 is the first piece of legislation specifically focused on improving services for individuals with autism in the UK. Primus PLUS Healthcare is committed to ensuring that our services are fully inclusive of individuals with autism spectrum conditions by:

- Providing Specialized Support: We will develop tailored care plans that address the specific needs of individuals with autism, ensuring they receive the appropriate level of support in line with their unique needs, including communication and sensory requirements.

- Training and Awareness: Staff will be trained to understand autism and the challenges faced by individuals with autism, ensuring that services are delivered in a manner that respects their needs and promotes independence and well-being.

7. The Care Act 2014

The Care Act 2014 sets out the framework for adult social care services in England, including the provision of support for adults with disabilities, mental health needs, and other vulnerabilities. Primus PLUS Healthcare adheres to the principles of this Act by:

- Person-Centred Care: Ensuring that our services are tailored to meet the individual needs of service users, supporting them to live independently and with dignity.
- Assessment and Eligibility: We will ensure that all service users undergo a thorough needs assessment, and that care and support are provided in line with their eligibility and needs as defined by the Care Act.
- Well-being and Safeguarding: The Care Act emphasizes the well-being of individuals, which includes ensuring that service users are protected from harm and supported to make decisions about their care.

8. The Mental Health Act 1983 (Amended 2007)

The Mental Health Act 1983, as amended by the 2007 revisions, provides the legal framework for the care and treatment of individuals with mental health conditions. For service users with mental health needs, Primus PLUS Healthcare ensures:

- Mental Health Assessments: Individuals with mental health needs receive regular assessments to ensure that their needs are being met and that they are provided with appropriate care and treatment.
- Patient Rights and Safeguarding: Service users are provided with clear information regarding their rights under the Mental Health Act, ensuring they are supported to make informed decisions about their care.

9. The Children and Families Act 2014

For service users transitioning from childhood to adulthood, the Children and Families Act 2014 ensures that individuals with special educational needs (SEN) and disabilities receive appropriate support as they move into adulthood. Primus PLUS Healthcare ensures that:

- Transition Plans: Young adults with learning disabilities and autism spectrum conditions are supported during their transition into supported living services, ensuring a smooth and supportive move from child to adult services.
- Ongoing Support: We will continue to offer tailored care and support for individuals as they adjust to living independently, in line with their evolving needs and preferences.

13. SERVICES FOR AUTISTIC PEOPLE AND PEOPLE WITH LEARNING DISABILITIES

At Primus PLUS Healthcare, we are dedicated to ensuring that the services we provide to individuals with learning disabilities and autism spectrum conditions are person-centred, inclusive, and respectful. We recognize the unique challenges and needs of these individuals and are committed to providing supported living services without personal care that are adapted to meet their specific needs. This section outlines how Primus PLUS Healthcare ensures that services for individuals with autism and learning disabilities are accessible, appropriate, and compliant with relevant CQC regulations, UK legislation, and best practices.

1. Understanding the Needs of People with Autism and Learning Disabilities

Individuals with learning disabilities and autism spectrum conditions may face significant challenges in various aspects of daily life, including communication, social interaction, sensory processing, and understanding complex instructions. At Primus PLUS Healthcare, we ensure that these challenges are recognized and addressed through person-centred care and individualized support plans. Our staff are trained to:

- Recognize and understand the diverse needs of individuals with learning disabilities and autism, ensuring that all care and support provided is tailored to the specific requirements of the individual.
- Adapt communication methods to meet the needs of each person, using alternative formats (e.g., Easy Read, visual aids, sign language, or assistive technology) as appropriate to ensure information is accessible.
- Respect sensory sensitivities, including noise, lighting, or texture, and make necessary adjustments to the physical environment to support sensory needs.

2. Person-Centred Care and Support for Autistic People and Those with Learning Disabilities

At Primus PLUS Healthcare, we are committed to providing person-centred care that supports individuals in living as independently as possible. Our approach to care for people with autism and learning disabilities includes:

- Tailored Care Plans: Care plans are created with input from the individual, their family, and relevant professionals, ensuring that all aspects of care, including daily living activities, communication, and social interaction, are tailored to meet the person's preferences and abilities.
- Respect for Individual Preferences: We ensure that each person's preferences, interests, and personal goals are at the centre of the support provided. This includes considering the person's preferences for daily routines, communication methods, and involvement in social and recreational activities.
- Positive Behaviour Support: We apply the principles of positive behaviour support to help individuals understand and manage challenging behaviours in a way that supports their well-being and reduces triggers. We emphasize the use of positive reinforcement and ensure that strategies are tailored to each individual's needs.

3. Training and Awareness for Staff

Staff at Primus PLUS Healthcare receive specialized training to ensure they are equipped with the knowledge and skills required to work effectively with individuals with autism spectrum conditions and learning disabilities. This training includes:

- Autism Awareness: Staff are trained to understand the specific needs of individuals with autism, including the challenges they may face with social communication, sensory processing, and emotional regulation. They are taught strategies to create a supportive environment that accommodates these needs.
- Learning Disabilities Awareness: Staff are trained to understand the impact of learning disabilities on day-to-day life and how to provide person-centred support that promotes independence, dignity, and inclusion.
- Effective Communication: Training on the use of alternative communication methods, including sign language, symbol boards, picture exchange systems, and assistive technology, ensures that staff can effectively communicate with individuals who may have difficulty with speech or written communication.
- Positive Behaviour Support: All staff are trained in positive behaviour support techniques, helping them to manage challenging behaviour in a way that is respectful and non-punitive.

4. Reasonable Adjustments for Autistic People and Those with Learning Disabilities

In accordance with the Equality Act 2010, Primus PLUS Healthcare ensures that reasonable adjustments are made to ensure that individuals with learning disabilities and autism can access and use our services on an equal basis with others. These adjustments include:

- Physical Environment Adjustments: Changes to the physical environment (e.g., quiet spaces, sensory rooms, visual aids, clear signage) to accommodate the sensory needs of individuals with autism or learning disabilities.
- Adjustments to Communication: Offering information in accessible formats and adapting communication methods to ensure clarity and understanding. For example, using Easy Read, visual supports, or electronic aids for individuals who may have difficulties with traditional verbal or written communication.
- Support with Daily Living: Providing practical support to individuals with learning disabilities or autism to ensure they can engage with the wider community, manage personal tasks, and live as independently as possible, while maintaining their dignity and autonomy.

5. Collaboration with External Agencies

At Primus PLUS Healthcare, we recognize the importance of collaborating with external agencies to provide holistic care for individuals with autism spectrum conditions and learning disabilities. We work closely with:

- Specialist Autism and Learning Disability Services: We collaborate with organizations that specialize in autism and learning disabilities to ensure that our services are up-to-date with the latest evidence-based practices.

- Healthcare Providers: We work with healthcare professionals, including doctors, psychologists, speech and language therapists, and occupational therapists, to ensure that service users receive a comprehensive care package that meets their physical, mental, and social needs.
- Advocacy Services: We refer service users to advocacy services when necessary, ensuring that they have an advocate to help represent their interests and ensure that their voice is heard in decision-making processes.

6. Safeguarding and Protection for Individuals with Autism and Learning Disabilities

Primus PLUS Healthcare is committed to the safeguarding of all service users, particularly those with autism or learning disabilities, who may be at increased risk of abuse or neglect. Our approach to safeguarding includes:

- Safe and Secure Environments: We ensure that our supported living environments are safe, secure, and respectful, and that they provide an atmosphere in which service users feel protected and supported.
- Safeguarding Policies: We adhere to stringent safeguarding policies and procedures, ensuring that all staff are trained to identify potential risks and report any concerns. Our policies are reviewed regularly to ensure they are in line with local safeguarding protocols.
- Protecting from Exploitation: Individuals with learning disabilities or autism may be at higher risk of exploitation or financial abuse. We have robust measures in place to prevent exploitation and ensure that service users' rights and assets are protected.

7. Legal and Regulatory Compliance

Primus PLUS Healthcare ensures that our services for individuals with autism spectrum conditions and learning disabilities comply with all relevant legal and regulatory frameworks, including:

- The Equality Act 2010: We comply with the Equality Act 2010, ensuring that our services are non-discriminatory and provide reasonable adjustments to meet the needs of individuals with disabilities.
- The Autism Act 2009: We comply with the Autism Act 2009, ensuring that services for individuals with autism are tailored to meet their specific needs and that appropriate support is provided to promote independence, social inclusion, and well-being.
- The Care Act 2014: We ensure that our services align with the Care Act 2014, promoting the well-being of individuals and ensuring that care is person-centred and designed to support independent living.
- The Care Quality Commission (CQC): Our services are regularly monitored and inspected by the CQC to ensure that they meet the CQC regulations for quality care, including those related to dignity, respect, and safeguarding.

8. Monitoring and Continuous Improvement

We are committed to continuous improvement in the care we provide. We regularly review and evaluate our services for individuals with autism spectrum conditions and learning disabilities, gathering feedback from service users, families, and staff to ensure that:

- Care plans are effective, responsive, and up-to-date.
- Reasonable adjustments continue to be made to ensure full accessibility for individuals with disabilities.
- We are meeting the needs and preferences of all individuals and adapting services as required.

14. MONITORING AND EVALUATION

At Primus PLUS Healthcare, we believe that continuous monitoring and evaluation are essential for ensuring that our Equality, Diversity, and Human Rights Policy is effectively implemented, that our services meet the needs of our service users, and that we comply with CQC regulations and relevant UK legislation. This section outlines our approach to monitoring and evaluating the policy to ensure that it remains effective, responsive, and aligned with the needs of adults with learning disabilities, mental health needs, and autism spectrum conditions.

1. Purpose of Monitoring and Evaluation

The monitoring and evaluation process serves several purposes:

- Ensuring Compliance: To ensure that we meet the legal requirements set out in CQC regulations, Equality Act 2010, Human Rights Act 1998, UK GDPR, and other relevant legislation.
- Assessing Effectiveness: To assess whether our policy is delivering on its objectives of providing inclusive, person-centred care that respects the human rights, dignity, and autonomy of service users.
- Identifying Areas for Improvement: To identify areas where our services or policy implementation could be improved, ensuring that we continuously enhance the quality of care.
- Promoting Accountability: To maintain transparency and accountability in the implementation of the policy and to provide regular updates on progress to stakeholders, including service users, families, and regulatory bodies.

2. Methods of Monitoring and Evaluation

We use a range of methods to monitor and evaluate the effectiveness of our Equality, Diversity, and Human Rights Policy:

a. Service User Feedback

Service user feedback is a crucial part of evaluating our services and understanding their experience with the policy. We gather feedback through:

- Surveys and Questionnaires: Regularly distributed to service users to gather their thoughts on how inclusive and respectful they feel the service is.
- Service User Reviews: Routine care plan reviews and one-to-one meetings between service users and their assigned care managers will be used to assess whether care plans are meeting their needs and if reasonable adjustments are being made.

- Feedback Mechanisms: Service users are encouraged to speak up or provide written feedback about their experiences with unacceptable behaviour, accessibility, and any issues related to their care that might not meet the standards outlined in the policy.
- Family and Advocate Involvement: Families and appointed advocates are invited to provide input on the care and support their relatives receive. This helps ensure that the care aligns with the service user's preferences, cultural, and religious needs.

b. Staff Feedback and Engagement

Regular feedback from staff helps us understand the challenges they face in implementing the policy and highlights areas for improvement. We use the following methods:

- Staff Meetings and Discussions: Regular staff meetings where feedback on the policy's effectiveness can be discussed, and any concerns raised can be addressed.
- Staff Surveys: Surveys to assess staff satisfaction, including their perception of how well the Equality, Diversity, and Human Rights Policy is being implemented and whether they feel adequately supported.
- Supervision and Appraisal: Regular supervision sessions and appraisals for staff will assess their understanding of the policy and how they are applying its principles in practice.

c. Performance Audits and Data Collection

We conduct regular audits and collect data to assess the performance of the policy and the quality of care services provided. This includes:

- Monitoring of Reasonable Adjustments: Regular audits to assess whether reasonable adjustments (such as accessibility modifications and communication adaptations) have been effectively implemented and are meeting service users' needs.
- Incident and Complaints Monitoring: All incidents of unacceptable behaviour, discrimination, and harassment will be closely monitored, and their outcomes recorded. This helps ensure that we are responding appropriately and that patterns or systemic issues are identified and addressed.
- Care Plan Reviews: Regular audits of care plans to ensure they are person-centred and appropriately reflect the individual needs and preferences of service users. This also ensures that all aspects of care are in compliance with relevant regulations, including the Equality Act 2010 and the Care Quality Commission (CQC) standards.
- Training Effectiveness: Monitoring the effectiveness of training for staff on equality, diversity, and human rights. This will be evaluated through both staff surveys and service user feedback to assess whether staff are appropriately applying what they have learned in practice.

d. Compliance with Legal and Regulatory Standards

We ensure ongoing compliance with relevant legal and regulatory standards, including CQC regulations, GDPR, Equality Act 2010, and the Autism Act 2009. This includes:

- CQC Inspections and Reports: We actively engage with CQC inspections to assess compliance with the fundamental standards of care, including safeguarding, dignity, and respect.

- Internal Audits: We carry out regular internal audits to ensure that the Equality, Diversity, and Human Rights Policy is being adhered to, and that our services are compliant with all legal and regulatory requirements.

3. Review and Reporting

We will conduct a comprehensive review of the Equality, Diversity, and Human Rights Policy on a regular basis. This will include:

- Annual Policy Review: An annual review of the policy to assess its effectiveness, ensuring that it remains aligned with best practices, regulatory updates, and the evolving needs of service users.
- Action Plans: If issues are identified through monitoring or feedback, we will create action plans to address these concerns. These plans will be implemented within set timeframes and progress will be tracked.
- Reporting to Stakeholders: We will provide regular reports to key stakeholders, including CQC, service users, families, and staff, to demonstrate our commitment to continuous improvement. This will include a summary of key findings from monitoring activities, any corrective actions taken, and future goals for improvement.

4. Continuous Improvement Process

Our commitment to continuous improvement is at the heart of this policy. We will:

- Act on Feedback: We take feedback seriously, both from service users and staff. Based on the findings from feedback and audits, we will make necessary adjustments to improve service delivery, training, and accessibility.
- Regular Training and Updates: To keep pace with best practices and legislative changes, staff will receive refresher training and updated resources on equality, diversity, and human rights. Training will be evaluated regularly to ensure its relevance and effectiveness.
- Policy Updates: We will ensure that the policy is updated in response to new legislation, regulations, and feedback from stakeholders. Updates will be communicated to all relevant parties, ensuring that everyone is aware of any changes in the approach to equality and diversity.

5. Accountability

Primus PLUS Healthcare maintains a strong commitment to accountability in implementing this policy. The following will be held accountable for ensuring the policy is followed:

- Management Team: Responsible for the overall implementation of the policy and ensuring compliance across the organization. They will oversee the monitoring and evaluation processes and report findings to CQC and other regulatory bodies.
- Service Managers: Responsible for ensuring that the policy is applied in practice within their individual services, including care plans, reasonable adjustments, and staff training.
- Staff: All staff members are responsible for applying the principles of equality, diversity, and human rights in their daily interactions with service users and colleagues.

15. EQUALITY AND DIVERSITY ACTION PLAN

At Primus PLUS Healthcare, we are committed to creating an inclusive, supportive, and equitable environment for all our service users, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions. This Equality and Diversity Action Plan outlines the practical steps we will take to ensure that our Equality, Diversity, and Human Rights Policy is effectively implemented. This plan ensures that we meet our legal obligations and comply with CQC regulations, relevant UK legislation, and the needs of our service users. By committing to this plan, we aim to actively promote equality, diversity, and inclusivity in all aspects of service delivery.

1. Objectives of the Equality and Diversity Action Plan

The primary objectives of our Equality and Diversity Action Plan are to:

- Ensure that reasonable adjustments are made to meet the needs of service users with disabilities, ensuring they can access services on an equal basis with others.
- Respect the personal, cultural, social, and religious needs of service users and ensure that these needs are integrated into their care plans.
- Promote awareness and understanding of equality and diversity among staff and service users.
- Ensure compliance with CQC regulations, Equality Act 2010, Human Rights Act 1998, GDPR, and other relevant legislation.
- Address and prevent any form of bullying, harassment, or discrimination within the service.

2. Key Areas of Focus for the Action Plan

a. Reasonable Adjustments and Accessibility

- Objective: Ensure that all individuals, particularly those with learning disabilities, mental health needs, and autism, can access and use our services without barriers.
- Actions:
    - Conduct an audit of the physical environment and services to identify any barriers to accessibility.
    - Implement reasonable adjustments for individuals with sensory, mobility, or cognitive challenges, such as sensory-friendly environments, assistive technologies, and alternative communication methods (e.g., Easy Read, sign language).
    - Review and ensure that our technology (including telephone systems, websites, and digital services) is easy to use and accessible to people with different abilities, ensuring compliance with the Accessible Information Standard.
    - Establish a clear procedure for making reasonable adjustments based on individual needs and preferences.

b. Understanding and Respecting People's Needs

- Objective: Ensure that staff understand and respect the diverse personal, cultural, social, and religious needs of service users.
- Actions:

- Develop cultural competence training for staff to improve their understanding of cultural, social, and religious diversity and how these needs may relate to care delivery.
- Ensure that individual care plans are developed with input from service users and their families, and take into account their personal, cultural, social, and religious needs.
- Encourage staff to actively listen to service users' preferences and ensure that care plans reflect these needs while promoting autonomy and independence.

c. Promoting Equality and Diversity in the Workforce

- Objective: Ensure a diverse workforce that understands the importance of equality and inclusion in the delivery of care.
- Actions:
  - Implement diverse recruitment practices to attract a workforce reflective of the community we serve, ensuring equal opportunities for all.
  - Provide staff with training on equality and diversity as part of their induction, and ensure regular updates and awareness programs on inclusive care practices.
  - Establish clear policies and procedures for preventing and addressing discrimination, harassment, and bullying within the workplace.

d. Addressing Unacceptable Behaviour and Discrimination

- Objective: Prevent and address any form of unacceptable behaviour, discrimination, or harassment that may occur within our services.
- Actions:
  - Promote a zero-tolerance policy for bullying, harassment, and discrimination, ensuring all staff, service users, and visitors are aware of this policy.
  - Establish clear procedures for reporting and addressing unacceptable behaviour, ensuring that all incidents are dealt with promptly and appropriately.
  - Provide training for staff on how to identify and respond to discriminatory behaviours and micro aggressions, as well as how to de-escalate conflict in a safe and respectful manner.

e. Monitoring and Reporting on Equality and Diversity

- Objective: Regularly monitor and evaluate the effectiveness of the Equality and Diversity Policy to ensure it is achieving the desired outcomes and complies with relevant regulations.
- Actions:
  - Implement regular monitoring of services and policies to assess how well they are meeting the needs of service users from diverse backgrounds and those with disabilities.
  - Develop and maintain a system for recording and analysing complaints related to discrimination, bullying, and harassment to identify patterns and address systemic issues.

- Conduct regular surveys and feedback sessions with service users, their families, and staff to assess their satisfaction with the service's approach to equality and diversity.

f. Compliance with Legal and Regulatory Requirements

- Objective: Ensure compliance with all CQC regulations, UK legislation, and best practices related to equality, diversity, and human rights.
- Actions:
  - Ensure that all services are regularly audited to ensure compliance with CQC standards, including Regulation 9 (Person-Centred Care), Regulation 10 (Dignity and Respect), and Regulation 13 (Safeguarding).
  - Regularly update the Equality and Diversity Policy to reflect changes in UK legislation, CQC guidance, and best practice.
  - Engage with external audits and regulatory bodies to ensure that our services remain in compliance with relevant legal and regulatory standards.

3. Key Performance Indicators (KPIs) for the Action Plan

To measure the success of the Equality and Diversity Action Plan, we will track the following Key Performance Indicators (KPIs):

- Service User Satisfaction: Percentage of service users who report feeling respected and included in the care process.
- Reasonable Adjustments Implementation: Percentage of service users who require reasonable adjustments and have those adjustments fully implemented.
- Staff Training Completion: Percentage of staff who complete equality and diversity training and refresher courses.
- Incident Reporting: Number of incidents related to discrimination, harassment, or bullying and how effectively they were resolved.
- Workforce Diversity: Diversity of the workforce in relation to the communities served, including gender, age, ethnicity, and disability.
- CQC Inspection Scores: Compliance with CQC standards relating to equality and inclusivity.

4. Review and Update of the Action Plan

To ensure that the Equality and Diversity Action Plan remains relevant and effective:

- Annual Review: The plan will be reviewed annually to assess its effectiveness and identify areas for improvement. The review will consider feedback from service users, staff, and external audits.
- Stakeholder Involvement: Service users, family members, staff, and external advocacy organizations will be involved in the review process to ensure that the action plan continues to meet the needs of those it serves.
- Policy Updates: If necessary, the action plan will be updated to reflect changes in CQC regulations, relevant legislation, or feedback from stakeholders.

16. RISK ASSESSMENT AND MITIGATION

At Primus PLUS Healthcare, we are committed to ensuring that the care and services we provide to adults with learning disabilities, mental health needs, and autism spectrum conditions are safe, effective, and responsive to their needs. The Equality, Diversity, and Human Rights Policy is a vital part of this commitment. To ensure the policy is implemented effectively and that our services are consistently meeting the highest standards of care, we recognize the importance of risk assessment and mitigation. This section outlines the risk assessment process we follow, the risks identified, and the strategies we use to mitigate those risks in line with CQC regulations, relevant UK legislation, and the needs of the individuals we serve.

1. Purpose of Risk Assessment and Mitigation

The goal of this risk assessment is to identify potential risks related to the implementation of the Equality, Diversity, and Human Rights Policy, assess their impact, and implement effective mitigation strategies to ensure that all service users receive equitable, person-centred care. This process allows us to:

- Identify areas of potential risk related to the accessibility of services, discrimination, or bullying and harassment.
- Take proactive steps to prevent harm or breaches of human rights, ensuring that all service users are respected and treated fairly.
- Ensure that the policy aligns with CQC regulations, the Equality Act 2010, and other relevant UK legislation.

2. Identifying Risks

Through regular audits, feedback mechanisms, and consultations with service users and staff, we have identified several key risks related to the implementation of the Equality, Diversity, and Human Rights Policy. These include:

a. Accessibility Barriers

- Risk: Service users, particularly those with disabilities (e.g., learning disabilities, autism spectrum conditions, or mental health needs), may face barriers to accessing care and services due to insufficient adjustments to the physical environment, communication methods, or technology.
- Potential Impact: Service users may experience exclusion, dissatisfaction, or reduced engagement in their care if services are not accessible or inclusive.

b. Discrimination and Harassment

- Risk: Instances of discrimination or harassment may occur, either among staff or between service users, based on disability, race, gender, sexual orientation, or other protected characteristics.
- Potential Impact: Discrimination and harassment can lead to a hostile environment, emotional harm to service users, and damage to the reputation and effectiveness of the service.

c. Inadequate Staff Training

- Risk: Staff may lack the knowledge or skills necessary to fully understand and implement the Equality, Diversity, and Human Rights Policy, leading to inconsistent or ineffective care.
- Potential Impact: This may result in unintended discrimination, poor service delivery, or misunderstanding of service users' needs.

d. Ineffective Communication

- Risk: Service users with communication impairments (e.g., individuals with autism, learning disabilities, or mental health conditions) may not be able to express their needs or preferences effectively if communication methods are not adapted.
- Potential Impact: Failure to adequately address these communication needs could lead to misunderstandings, dissatisfaction, and the exclusion of service users from decision-making processes about their care.

e. Breach of Confidentiality

- Risk: Improper handling or sharing of personal information may violate service users' privacy rights, as outlined in the Data Protection Act 2018 and UK GDPR.
- Potential Impact: Breaches of confidentiality can damage trust, cause emotional harm to service users, and lead to legal or regulatory repercussions.

f. Inadequate Monitoring and Reporting

- Risk: Insufficient monitoring of the policy's implementation and a lack of timely reporting could result in unresolved issues, such as continued instances of discrimination or inadequate adjustments for service users.
- Potential Impact: This could lead to long-term dissatisfaction and non-compliance with regulatory standards.

3. Mitigation Strategies

To address and mitigate the risks identified above, Primus PLUS Healthcare has developed several strategies:

a. Accessibility Adjustments

- Actions:
    - Regular audits of physical and digital environments to identify and remove barriers to accessibility, including the use of assistive technology and easy-to-read formats.
    - Implementation of reasonable adjustments based on individual assessments, ensuring that each service user has the necessary accommodations to access care.
    - Training staff to be proactive in identifying accessibility needs and making appropriate adjustments, such as providing visual aids, sign language interpreters, or sensory-friendly spaces.
    - Consulting with service users to identify their specific accessibility needs and preferences.

b. Promoting a Zero-Tolerance Approach to Discrimination and Harassment

- Actions:
    - Clear policy and procedures for reporting and addressing incidents of bullying, harassment, or discrimination, ensuring service users and staff are aware of their right to a safe and respectful environment.
    - Regular staff training on equality, diversity, and anti-discrimination, ensuring that they understand how to identify, prevent, and address discriminatory behaviour.
    - Supporting service users in expressing concerns, providing advocacy services when necessary, and offering a clear pathway for resolving complaints.
    - Regular monitoring of incidents related to discrimination or harassment, with swift action taken to address any issues that arise.

c. Comprehensive Staff Training

- Actions:
    - Mandatory training on equality, diversity, human rights, and disability awareness for all staff, with refresher courses held regularly to keep staff up-to-date with changes in legislation and best practices.
    - Role-specific training for staff working with individuals who have learning disabilities, mental health needs, and autism spectrum conditions, ensuring that staff have the specialized knowledge needed to meet the diverse needs of service users.
    - Evaluation of training effectiveness through staff feedback, surveys, and monitoring to ensure that staff are successfully applying the training in their practice.

d. Improved Communication Systems

- Actions:
    - Tailoring communication methods to suit individual needs, including the use of augmentative and alternative communication (AAC) systems, picture exchange communication systems (PECS), or easy-read materials.
    - Engaging with service users to ensure that communication methods are effective and that their preferences for receiving information are met.
    - Training staff to identify communication barriers and to adapt their communication style, ensuring they are clear, empathetic, and respectful of individual needs.

e. Ensuring Data Protection and Confidentiality

- Actions:
    - Comprehensive training on data protection laws (GDPR and Data Protection Act 2018) to ensure that staff understand their responsibilities regarding confidentiality and secure handling of personal data.
    - Implementation of strict access controls and security protocols to ensure that personal and sensitive data is only accessible to those who are authorized.

- Regular audits to ensure compliance with data protection policies, identifying any areas where confidentiality may be at risk and taking corrective action where necessary.

f. Ongoing Monitoring and Reporting

- Actions:
  - Regular reviews of the Equality, Diversity, and Human Rights Policy to ensure it remains relevant and effective, incorporating feedback from service users, staff, and regulatory bodies.
  - Performance monitoring of key indicators, such as the number of incidents of discrimination, the effectiveness of reasonable adjustments, and the level of service user satisfaction with the services provided.
  - Regular reporting of monitoring outcomes to senior management and relevant stakeholders, ensuring transparency and accountability in how we address equality and diversity within the service.
  - Engagement with external agencies to conduct independent audits and ensure compliance with relevant regulations and best practices.

4. Regular Review and Continuous Improvement

To ensure the ongoing effectiveness of our risk assessment and mitigation strategies, we will:

- Conduct annual risk assessments to evaluate the effectiveness of current strategies and identify new risks as they emerge.
- Incorporate feedback from service users, families, staff, and external regulatory bodies to continuously improve our approach to equality and diversity.
- Review and update the Equality and Diversity Action Plan regularly, ensuring it reflects any changes in regulations, best practices, or service user needs.

17. EQUALITY AND DIVERSITY REPORTING AND ACCOUNTABILITY

At Primus PLUS Healthcare, we are committed to maintaining high standards of equality, diversity, and human rights in the care we provide to adults with learning disabilities, mental health needs, and autism spectrum conditions. It is essential to have clear reporting and accountability processes in place to ensure that our Equality, Diversity, and Human Rights Policy is effectively implemented, that any issues are swiftly addressed, and that we maintain transparency in our operations. This section outlines the reporting mechanisms and accountability structures that will ensure the policy is monitored, evaluated, and upheld.

1. Purpose of Reporting and Accountability

The primary purpose of reporting and accountability within the Equality, Diversity, and Human Rights Policy is to:

- Track progress in implementing the policy and ensuring it remains relevant and effective.

- Ensure transparency in the way equality and diversity are addressed within the service.
- Identify areas for improvement and take appropriate action when required.
- Ensure compliance with CQC regulations, relevant UK legislation, and the needs of service users.
- Maintain high standards of care and uphold the rights of service users, ensuring they are treated with dignity and respect.

2. Reporting Mechanisms

To ensure that the Equality, Diversity, and Human Rights Policy is properly implemented and that service users and staff have a means to voice concerns, we will establish the following reporting mechanisms:

a. Service User Feedback

- Surveys and Questionnaires: Service users will be regularly asked to provide feedback on their experience of care, with a particular focus on equality and diversity. These surveys will include questions about their experience with accessibility, reasonable adjustments, discrimination, and respect for personal needs (e.g., cultural, religious, and social).
- Service User Reviews: We will conduct regular care plan reviews where service users and their families can provide feedback on whether their individual needs have been met and whether they feel respected and included in the service delivery.
- Direct Feedback Channels: Service users will have access to a dedicated complaints and feedback system, either in person, through advocacy services, or via online platforms, where they can report any concerns related to equality or discrimination.

b. Staff Feedback

- Staff Surveys and Focus Groups: We will gather regular feedback from staff through surveys and focus groups to assess how well they understand and apply the principles of equality and diversity in their work. This also allows staff to raise concerns regarding any issues they encounter in implementing the policy.
- Supervision and Appraisals: Regular supervision sessions and performance appraisals for staff will ensure ongoing support and provide an opportunity for staff to report on the challenges they face in delivering inclusive care.

c. Incident and Complaint Reporting

- Reporting Discrimination or Harassment: Any incidents of discrimination, harassment, or unacceptable behaviour will be reported immediately through established procedures. This includes incidents that involve staff, service users, or third parties. These incidents will be thoroughly investigated, and actions will be taken according to the zero-tolerance policy for such behaviour.
- Incident Documentation and Resolution: All incidents will be documented and tracked. Reports will be reviewed to identify any patterns or recurring issues, and actions will be taken to ensure appropriate follow-up and resolution.

d. External Reporting to Regulatory Bodies

- CQC Reports: As part of our commitment to CQC regulations, we will submit regular reports to the CQC that detail our compliance with Equality, Diversity, and Human Rights standards. These reports will include data on reasonable adjustments, complaints, staff training, and service user feedback.
- Legal and Regulatory Bodies: If necessary, issues related to safeguarding, discrimination, or other legal concerns will be reported to relevant bodies, such as local safeguarding authorities, the Equality and Human Rights Commission (EHRC), or the Information Commissioner's Office (ICO) in cases of data breaches or privacy violations.

3. Accountability Structures

To ensure that accountability is maintained throughout the implementation of the Equality, Diversity, and Human Rights Policy, we will establish the following accountability structures:

a. Senior Management Team

The Senior Management Team at Primus PLUS Healthcare holds ultimate responsibility for the overall implementation of the policy and the ongoing monitoring of its effectiveness. Their key responsibilities include:

- Policy Oversight: Ensuring the policy is being followed and addressing any systemic issues or concerns related to its implementation.
- Reviewing Reports: Regularly reviewing the feedback from service users, staff, and external audits to assess compliance and identify areas for improvement.
- Decision-Making: Taking appropriate action based on feedback and data from monitoring activities, including changes to policies or procedures where necessary.

b. Service Managers

Each Service Manager is responsible for ensuring that the policy is implemented effectively within their respective services. Their responsibilities include:

- Monitoring Service Delivery: Ensuring that care provided is in line with the Equality, Diversity, and Human Rights Policy, including making necessary reasonable adjustments and promoting inclusivity in the service.
- Staff Supervision: Supporting staff in understanding and applying the policy in their day-to-day care delivery, providing guidance on how to respect the cultural, religious, and personal needs of service users.
- Addressing Complaints: Acting as the first point of contact for complaints related to equality and diversity, ensuring that they are handled appropriately and in line with company procedures.

c. Quality Assurance and Compliance Team

The Quality Assurance and Compliance Team will be responsible for ensuring that the services provided comply with CQC regulations and legal standards. Their responsibilities include:

- Audits and Reviews: Conducting regular internal audits to assess compliance with the policy, identifying any areas where the policy may not be fully implemented or adhered to.
- Reporting to Senior Management: Providing regular reports to the Senior Management Team on the outcomes of audits, incidents of discrimination or harassment, and the effectiveness of the policy.
- Ensuring Regulatory Compliance: Ensuring that all legal obligations are met, including compliance with the Equality Act 2010, Human Rights Act 1998, GDPR, and other relevant regulations.

d. Staff Accountability

All staff are responsible for following the Equality, Diversity, and Human Rights Policy in their daily practice. Their responsibilities include:

- Understanding the Policy: Staff must fully understand and apply the principles of equality, diversity, and inclusion in their interactions with service users, colleagues, and others.
- Reporting Unacceptable Behaviour: Staff must report any unacceptable behaviour they witness or are made aware of, including discrimination or harassment, through the appropriate channels.
- Training and Professional Development: Staff are responsible for engaging in ongoing training to ensure that their knowledge and practice reflect current best practices in equality and diversity.

4. Transparency and Reporting to Stakeholders

We are committed to transparency in our efforts to uphold equality and diversity. The following steps ensure that we provide clear and accessible reports to stakeholders:

- Regular Reporting: We will provide annual or quarterly reports on our progress in implementing the Equality, Diversity, and Human Rights Policy, including service user satisfaction, staff training outcomes, and any complaints or incidents related to discrimination or harassment.
- Service User Involvement: Service users and their families will be involved in the review process, and we will provide them with accessible information about how we are ensuring that their rights are upheld.
- External Audits and Independent Reviews: We may engage with external organizations, such as CQC or equality-focused audit bodies, to carry out independent reviews of our policies and procedures. These reports will be made available to relevant stakeholders to ensure accountability.

5. Continuous Improvement

We are committed to continuous improvement and will regularly update our Equality and Diversity Action Plan based on feedback, audit findings, and evolving best practices. This ongoing process ensures that:

- We are responsive to the changing needs of service users, particularly those with learning disabilities, mental health needs, and autism spectrum conditions.

- The policy remains in line with current legislation, CQC standards, and the expectations of service users, staff, and other stakeholders.

18. COMPLAINTS AND GRIEVANCES PROCEDURES (EXPANDED)

At Primus PLUS Healthcare, we are fully committed to ensuring that all service users, especially those with learning disabilities, mental health needs, and autism spectrum conditions, receive care that is not only inclusive and respectful but also compliant with CQC regulations and all relevant UK legislation. To ensure that we meet these high standards and provide a service that reflects the principles of equality, diversity, and human rights, we have developed comprehensive complaints and grievances procedures. These procedures empower service users and their families to raise concerns and ensure that we continuously improve the quality of our services.

This section outlines the detailed Complaints and Grievances Procedure in alignment with CQC regulations, the Equality Act 2010, Human Rights Act 1998, and other UK legislation to ensure fairness, accountability, and transparency in addressing complaints and grievances within our supported living service for adults with learning disabilities, mental health needs, and autism spectrum conditions.

1. Purpose of Complaints and Grievances Procedures

The Complaints and Grievances Procedure aims to:

- Provide an accessible, transparent, and non-discriminatory process for service users to raise concerns or complaints about the services they receive.
- Ensure that all complaints are dealt with in a timely, respectful, and confidential manner.
- Promote a culture of accountability and continuous improvement by using complaints as an opportunity for learning and service development.
- Uphold the rights of service users, ensuring they feel heard, respected, and supported throughout the complaints process.

2. Types of Complaints and Grievances

Service users, families, and other relevant stakeholders (e.g., advocates, support workers) can raise complaints or grievances regarding:

- Quality of Care: Complaints related to how care services are delivered, including failure to respect personal preferences, inadequate support, or discrimination.
- Accessibility: Issues related to the physical environment, technology, or reasonable adjustments that hinder access to services.
- Unacceptable Behaviour: Complaints about bullying, harassment, or discriminatory treatment experienced by service users or staff.
- Data Protection and Confidentiality: Concerns about breaches of privacy, confidentiality, or inappropriate sharing of service user information.

- Failure to Meet Legal or Regulatory Standards: Concerns regarding non-compliance with relevant CQC regulations, Equality Act 2010, or other legal frameworks.
- Service User Rights: Issues related to the violation or failure to uphold service users' rights, including their right to respect, dignity, and equal treatment.

3. Complaints Reporting Process

To ensure that complaints are managed efficiently and fairly, we have developed the following clear and accessible process for reporting complaints:

a. Informal Resolution

- Step 1: Initial Discussion: Service users or their representatives are encouraged to speak directly to their care provider or service manager about the issue. In many cases, issues can be resolved quickly at this stage through open communication and a respectful conversation.
- Step 2: Immediate Action: If the issue is related to day-to-day care (e.g., scheduling, communication), the service manager or staff member will take immediate action to resolve the matter, ensuring that the service user feels respected and heard.

b. Formal Complaints

If a complaint cannot be resolved informally or if the service user prefers a more formal approach, the following process will apply:

- Step 1: Submitting a Formal Complaint: Service users or their representatives can submit a formal complaint through the following channels:
    - In writing (email, letter, or complaint form).
    - In person to a member of staff or the service manager.
    - By phone or through an advocacy service if the individual requires assistance.
    - Via digital platforms (if accessible to the service user, ensuring compliance with the Accessible Information Standard).

  All complaints will be logged in the complaints register, and the service user will be provided with an acknowledgement receipt of their complaint.
- Step 2: Acknowledgement and Investigation: Complaints will be acknowledged within 48 hours of receipt. An investigation will be initiated within 5 working days, involving the following:
    - Review of the complaint details and any supporting evidence.
    - Interviews with relevant parties (e.g., staff, service users, family members).
    - Gathering of information from relevant documents (e.g., care plans, incident reports).

  The investigation will aim to identify the root cause of the complaint and determine whether the complaint is valid, ensuring the process is transparent, respectful, and fair.
- Step 3: Outcome and Resolution: Once the investigation is complete, the service user will receive a written response detailing:

- The findings of the investigation.
- The action taken or any corrective measures that will be implemented.
- Timescales for the resolution or follow-up actions.

If the complaint involves discriminatory behaviour, harassment, or safeguarding concerns, immediate action will be taken in line with our zero-tolerance policy for such behaviours.

c. Escalation to External Bodies

If the service user is not satisfied with the outcome of the internal complaints procedure, they can escalate their complaint to relevant external bodies:

- Care Quality Commission (CQC): Service users can file complaints directly with the CQC, especially if they feel the service is not compliant with CQC regulations or has failed to provide safe and effective care.
- Equality and Human Rights Commission (EHRC): In cases of discrimination or harassment based on protected characteristics under the Equality Act 2010, service users can approach the EHRC for further action.
- Local Authorities: Complaints related to safeguarding or adult social care services can be directed to the relevant local authority for further investigation.

4. Grievance Procedure for Staff

In addition to service user complaints, we also have a grievance procedure in place for staff to raise concerns regarding the implementation of equality and diversity in the workplace. This procedure ensures that staff feel safe, heard, and supported in raising issues related to:

- Discrimination or harassment within the workplace.
- Inadequate support for service users with disabilities or complex needs.
- Failure to follow the Equality, Diversity, and Human Rights Policy.

Staff grievances will follow a similar procedure to service user complaints, with an initial informal discussion, followed by formal submission and a structured investigation process. All staff grievances will be treated with confidentiality and resolved in accordance with workplace policies.

5. Monitoring and Reporting Complaints

We are committed to continuously improving our services and the effectiveness of our complaints and grievances procedures. As part of this commitment, the following monitoring measures are in place:

- Complaints Log: All complaints will be recorded in a central complaints register, including details of the complaint, investigation, actions taken, and outcomes. This log will be reviewed regularly to identify patterns or recurring issues.
- Regular Reviews: The Quality Assurance and Compliance Team will regularly review complaints and grievances to assess the effectiveness of our Equality, Diversity, and Human Rights Policy and ensure that appropriate actions are being taken to prevent future issues.
- Annual Reports: We will publish annual reports summarizing the number, types, and outcomes of complaints, as well as any corrective actions or improvements made as a result.

6. Accountability and Responsibility

- Service Managers are responsible for ensuring that complaints are managed in a timely and respectful manner and that the complaint process is transparent, consistent, and aligned with CQC regulations and relevant UK legislation.
- Senior Management will oversee the overall monitoring of complaints and grievances, ensuring that the Equality, Diversity, and Human Rights Policy is followed and that any systemic issues identified through complaints are addressed at the highest level.
- Staff are responsible for listening to service users, acknowledging complaints, and providing support during the complaints process. They will also ensure that any complaints or grievances related to unacceptable behaviour or discrimination are reported to the appropriate authorities.

19. SAFEGUARDING AND PROTECTION OF VULNERABLE ADULTS

At Primus PLUS Healthcare, we recognize that safeguarding and protecting vulnerable adults is paramount to providing safe, respectful, and person-centered care. Our commitment to safeguarding reflects our dedication to upholding human rights, promoting equality, and ensuring that every service user, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions, is protected from harm, abuse, or neglect. This section outlines our Safeguarding and Protection of Vulnerable Adults Policy, which ensures that we meet CQC regulations, relevant UK legislation, and the needs of vulnerable service users.

1. Purpose of Safeguarding and Protection of Vulnerable Adults

The Safeguarding and Protection of Vulnerable Adults policy aims to:

- Ensure that adults with learning disabilities, mental health needs, and autism spectrum conditions are protected from abuse, neglect, exploitation, or any form of harm.
- Comply with all CQC regulations, relevant UK safeguarding legislation, and the Equality Act 2010.
- Create a safe environment where service users feel respected, heard, and empowered to raise concerns about any form of mistreatment.
- Establish clear protocols for identifying, reporting, and responding to concerns of abuse or neglect.

2. Key Legislation and Regulations

We are committed to safeguarding vulnerable adults in compliance with the following legal and regulatory frameworks:

a. The Care Act 2014

The Care Act 2014 sets out the framework for adult safeguarding and care services, requiring all care providers to take appropriate steps to protect adults at risk of abuse or neglect. This includes:

- Ensuring that all individuals who may be at risk of harm or abuse are identified and given appropriate care and protection.
- Supporting service users to make informed decisions about their care and ensuring that their rights are respected.

b. The Safeguarding Vulnerable Groups Act 2006

This legislation establishes the Disclosure and Barring Service (DBS), which helps protect vulnerable individuals by barring those who pose a risk from working with them. Primus PLUS Healthcare ensures that all staff undergo thorough DBS checks to ensure their suitability to work with vulnerable adults.

c. The Equality Act 2010

The Equality Act 2010 requires care providers to ensure that individuals with protected characteristics, including disabilities, are not subject to discrimination or harassment. We are committed to ensuring that discrimination and harassment are not tolerated and that service users are treated with dignity and respect.

d. The Human Rights Act 1998

The Human Rights Act 1998 guarantees key rights to individuals, including the right to be free from inhumane or degrading treatment. We ensure that service users are protected from abuse and treated with respect, promoting their right to live free from harm.

e. The UK General Data Protection Regulation (GDPR) and Data Protection Act 2018

The GDPR and the Data Protection Act 2018 ensure that personal data is managed appropriately. We ensure that all confidentiality and data protection standards are met when safeguarding concerns are raised or investigated.

3. Identifying Vulnerability and Risk

At Primus PLUS Healthcare, we take a proactive approach to identifying vulnerable adults who may be at risk of harm, abuse, or neglect. We recognize that individuals with learning disabilities, mental health needs, and autism spectrum conditions may face increased risks due to their vulnerability.

a. Risk Identification

We identify risks by:

- Conducting thorough assessments of each individual's needs, vulnerabilities, and potential risks at the start of their care journey.
- Regularly reviewing care plans to ensure they are updated based on the service user's evolving needs.
- Engaging service users and families in the assessment process to understand their experiences, identify potential risks, and respond appropriately.

b. Risk Factors for Vulnerable Adults

Service users with the following characteristics may face heightened risks:

- Learning Disabilities: Service users with learning disabilities may struggle to communicate effectively, understand risks, or assert themselves in situations of abuse.
- Mental Health Needs: Individuals with mental health conditions may be at risk due to their reduced capacity to recognize harm or heightened vulnerability when experiencing mental health crises.
- Autism Spectrum Conditions: People with autism may face difficulties in social interactions, communication, and understanding social cues, making them more susceptible to exploitation or mistreatment.

4. Preventing and Addressing Abuse and Neglect

To safeguard service users, Primus PLUS Healthcare follows the principles of preventing, detecting, and responding to abuse and neglect.

a. Preventing Abuse

- Safeguarding Training: All staff will receive comprehensive safeguarding training that covers recognizing signs of abuse, neglect, and exploitation, as well as how to prevent such incidents.
- Staff DBS Checks: We will ensure that all staff undergo enhanced DBS checks to ensure their suitability to work with vulnerable adults.
- Promoting Respect and Dignity: We will actively promote a zero-tolerance policy for any form of discriminatory, harassing, or abusive behaviour. This will be addressed immediately through clear disciplinary procedures.

b. Detecting Abuse and Neglect

- Monitoring: We will regularly monitor care settings to identify any early signs of abuse or neglect, including through spot checks, supervision meetings, and reviews of service user feedback.
- Incident Reporting Systems: Any suspected cases of abuse or neglect will be reported through the established incident reporting system, ensuring swift intervention by the service manager or safeguarding lead.
- Engagement with Service Users: We actively encourage service users to speak up and report any concerns, providing accessible means of communication (e.g., through advocacy services or easy-read materials).

c. Responding to Abuse and Neglect

- Immediate Action: If abuse or neglect is suspected, we will take immediate action to protect the service user, including ensuring their safety and well-being, and suspending the alleged perpetrator, if necessary.
- Investigation: All incidents of suspected abuse will be thoroughly investigated by trained safeguarding professionals in accordance with local safeguarding procedures and CQC regulations. Investigations will be conducted with sensitivity, confidentiality, and respect for the service user’s dignity.

- Referral to External Authorities: Where necessary, we will refer incidents of suspected abuse or neglect to relevant external authorities, including local safeguarding boards, police, and CQC.

5. Safeguarding Procedures for Specific Groups

At Primus PLUS Healthcare, we take extra steps to ensure the protection of service users from specific groups who may face additional challenges. This includes individuals with learning disabilities, mental health needs, and autism spectrum conditions.

- Learning Disabilities: We ensure that individuals with learning disabilities have access to advocacy services and easy-to-read documentation to help them understand their rights and how to report abuse.
- Mental Health Needs: For individuals with mental health needs, we ensure that we adapt our safeguarding procedures to account for periods of crisis or vulnerability. Service users will have access to appropriate mental health services and support.
- Autism Spectrum Conditions: For individuals on the autism spectrum, we ensure that sensory sensitivities and communication challenges are taken into account when assessing their vulnerability and providing appropriate safeguards.

6. Staff Responsibilities in Safeguarding

All staff members at Primus PLUS Healthcare have the following responsibilities in safeguarding vulnerable adults:

- Recognize Signs of Abuse: Staff should be vigilant and able to recognize signs of physical, emotional, sexual, and financial abuse.
- Immediate Reporting: Any suspected abuse or neglect must be reported immediately to the service manager or designated safeguarding lead.
- Confidentiality and Sensitivity: Staff must handle all safeguarding concerns with confidentiality and sensitivity, ensuring that the privacy and dignity of the service user are maintained throughout the process.

7. Monitoring and Continuous Improvement

We will ensure that our safeguarding practices are continuously evaluated and improved:

- Annual Audits: We will conduct annual audits of safeguarding practices, including reviewing incident reports, staff training, and service user feedback, to identify any areas for improvement.
- Safeguarding Committees: We will establish regular meetings of a safeguarding committee to review policies, discuss cases, and ensure continuous compliance with CQC regulations and UK safeguarding legislation.

8. Reporting to CQC and Regulatory Bodies

- CQC Notifications: Any serious safeguarding incidents (e.g., abuse, neglect, or exploitation) will be reported to CQC in line with the CQC requirements for service providers to notify regulatory bodies of significant events.

- Local Authorities and Safeguarding Boards: We will collaborate with local safeguarding authorities and safeguarding boards to ensure that all incidents are investigated and followed up appropriately.

20. CULTURAL COMPETENCE AND TRAINING FOR STAFF

At Primus PLUS Healthcare, we are dedicated to fostering an inclusive environment where all individuals, particularly those with learning disabilities, mental health needs, and autism spectrum conditions, are respected and treated with dignity. One of the cornerstones of providing this person-centred care is ensuring that our staff have the cultural competence to understand, respect, and respond to the diverse cultural, social, and religious needs of our service users. This section outlines the importance of cultural competence and the training we provide to our staff to ensure they can effectively meet the needs of all individuals, in line with CQC regulations and relevant UK legislation.

1. Purpose of Cultural Competence and Training for Staff

The goal of cultural competence training is to ensure that Primus PLUS Healthcare staff have the knowledge, skills, and attitudes necessary to deliver care that is inclusive, respectful, and responsive to the diverse backgrounds and needs of service users, particularly those with learning disabilities, mental health needs, and autism spectrum conditions. This training will:

- Enable staff to understand and respect the personal, cultural, social, and religious needs of service users.
- Ensure that care is delivered in a way that respects service users' diversity, personal preferences, and values.
- Equip staff with the tools to provide person-centred care, acknowledging that each individual has unique needs shaped by their culture, religion, and background.
- Help staff understand how cultural, social, and religious needs may interact with care needs, ensuring that they can provide appropriate care in a dignified and respectful manner.

2. Cultural Competence Training Content

The cultural competence training provided to staff will cover a wide range of topics to ensure that they are equipped to work with individuals from diverse backgrounds and to meet their needs appropriately. The key areas of training include:

a. Understanding Diversity

- Cultural, Social, and Religious Awareness: Training will cover the diverse cultures, belief systems, and values that service users may identify with, and how these aspects of identity affect care preferences and needs.
- Intersectionality: Understanding how multiple factors (such as disability, gender, sexual orientation, and ethnicity) intersect and influence the experiences of individuals, particularly those with learning disabilities, mental health needs, or autism spectrum conditions.

b. Recognizing and Addressing Bias and Discrimination

- Implicit Bias: Training will help staff recognize their own unconscious biases and how these may impact their interactions with service users. Staff will learn strategies to counteract bias and deliver equitable care to all.
- Preventing Discrimination: Staff will be trained in the importance of ensuring that service users are not subject to discrimination based on any protected characteristic under the Equality Act 2010 (such as race, gender, age, disability, etc.).
- Zero-Tolerance for Harassment: All staff will understand the zero-tolerance policy for any form of harassment or bullying in line with the Human Rights Act 1998 and Equality Act 2010, and how to intervene when such behaviour is observed or reported.

c. Person-Centred Care and Cultural Sensitivity

- Adapting Care to Cultural Needs: Staff will be trained to deliver care that respects the cultural, social, and religious practices of service users. This includes dietary preferences, religious observances, language preferences, and cultural practices.
- Communication Skills: Special attention will be given to communication with service users from different cultural backgrounds, including individuals with learning disabilities or autism, who may have unique communication needs (e.g., non-verbal communication, reliance on visual aids, or the use of sign language).
- Respect for Personal Values: Staff will be taught how to respect and support service users' personal beliefs, whether those beliefs are cultural, religious, or social, while ensuring that their care is still effective and in line with best practices.

d. Understanding and Meeting Specific Needs of Vulnerable Groups

- Cultural Sensitivity in Mental Health: Given that we support individuals with mental health needs, staff will receive specific training on understanding how mental health issues may interact with cultural or religious beliefs, including how cultural attitudes toward mental health can influence care preferences and treatment acceptance.
- Autism Awareness: Training on understanding the unique needs of individuals with autism, including how cultural differences may affect their care and communication. This includes understanding sensory sensitivities, routine preferences, and communication methods that respect cultural diversity.
- Learning Disabilities: Understanding how cultural differences can influence the experience of individuals with learning disabilities, including their social integration, access to support, and expression of preferences.

e. Legal and Regulatory Compliance

- Equality Act 2010: The training will cover the requirements of the Equality Act 2010, ensuring that all service users, regardless of their protected characteristics, receive fair, equitable, and non-discriminatory treatment in every aspect of care.
- CQC Regulations: Staff will be trained on how to adhere to CQC regulations related to the provision of person-centred care, including compliance with Regulation 9 (Person-Centred Care), Regulation 10 (Dignity and Respect), and Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment).

3. Delivery of Cultural Competence Training

To ensure that all staff members at Primus PLUS Healthcare are fully equipped to meet the cultural and individual needs of service users, our cultural competence training will be delivered through a combination of the following methods:

- In-Person Training: Face-to-face sessions led by experienced trainers who specialize in cultural competence, equality, and diversity. These sessions will include interactive activities, case studies, and group discussions to help staff explore cultural issues in real-life contexts.
- Online Training Modules: For ongoing development and ease of access, online training modules will be provided that staff can complete at their own pace. These modules will cover essential aspects of cultural competence, disability awareness, and safeguarding.
- Workshops and Role-Playing: Practical workshops and role-playing exercises will be used to help staff practice real-world scenarios, where they can role-play interactions with service users from diverse cultural backgrounds or address challenges in meeting their cultural or religious needs.
- Reflective Supervision: Staff will participate in regular supervision sessions, where they can reflect on their learning, discuss any challenges they face in implementing cultural competence in their day-to-day work, and receive guidance and support from their managers.

4. Ongoing Training and Development

Cultural competence is an ongoing process, and Primus PLUS Healthcare is committed to ensuring that all staff remain up-to-date with the latest best practices in equality, diversity, and human rights. This includes:

- Annual Refresher Courses: Staff will be required to complete annual refresher courses to reinforce their knowledge of cultural sensitivity and person-centred care.
- Feedback and Evaluation: We will regularly collect feedback from service users, families, and staff to evaluate the effectiveness of the training and to identify areas for improvement.
- Continuous Learning Opportunities: We will encourage staff to attend external workshops, seminars, and conferences on cultural competence, mental health issues, and autism awareness to ensure they continue to develop their skills and knowledge.

5. Monitoring and Reporting

To ensure the success and effectiveness of cultural competence training, Primus PLUS Healthcare will monitor and evaluate the training process by:

- Tracking Completion: Keeping records of staff training completion and ensuring that all staff undergo mandatory training on cultural competence and equality.
- Regular Audits: Conducting audits of staff practice to ensure that cultural competence is being applied in day-to-day care and that service users' cultural, social, and religious needs are being respected.
- Feedback Collection: Gathering feedback from service users and their families to assess their satisfaction with how their cultural and individual needs are being met.

- Action Plans: Using the findings from training evaluations and audits to develop action plans for further improvement in care delivery and staff training.

21. SERVICE USER ENGAGEMENT AND FEEDBACK

At Primus PLUS Healthcare, we understand that service user engagement and the collection of feedback are essential components in delivering high-quality care that is both person-centered and responsive to the unique needs of each individual, particularly those with learning disabilities, mental health needs, and autism spectrum conditions. This section outlines how we ensure that service users are fully engaged in their care, and how their feedback is valued, respected, and acted upon to continuously improve our services. We aim to meet CQC regulations, as well as relevant UK legislation, by promoting transparency, inclusivity, and active participation in the care process.

1. Purpose of Service User Engagement and Feedback

The purpose of service user engagement and feedback is to:

- Promote a collaborative relationship between service users and staff, ensuring that care is tailored to the individual's needs, preferences, and values.
- Ensure that all service users have an active voice in their care and in decisions that affect them.
- Collect feedback to continuously improve the quality of care, ensuring that services remain person-centered, respectful, and inclusive of all individuals, including those with learning disabilities, mental health needs, and autism spectrum conditions.
- Comply with CQC regulations, including the Health and Social Care Act 2008, and ensure that services meet the standards set out by CQC for effective care and user involvement.

2. Methods of Service User Engagement

To ensure that service users are fully engaged in their care, Primus PLUS Healthcare uses a variety of methods that encourage communication, input, and active participation:

a. Person-Centered Care Planning

- Co-Production of Care Plans: Service users and their families or carers are actively involved in creating and reviewing care plans. This ensures that care is tailored to meet their personal and cultural needs. For example, we take into account communication preferences, dietary requirements, and social or religious needs.
- Regular Care Plan Reviews: These reviews provide an opportunity for service users to express their satisfaction with the care provided, highlight any concerns, and suggest any changes or improvements to their care.

b. Accessible Communication and Feedback Channels

- Multiple Communication Formats: In recognition of the diverse needs of service users, particularly those with learning disabilities or autism spectrum conditions, we provide accessible feedback forms in easy-read formats, use pictures, or symbols for individuals who may find written language challenging, and ensure verbal feedback is welcomed. This also includes the use of sign language interpreters where necessary.

- Regular Feedback Surveys: Service users, their families, and advocates will be encouraged to participate in anonymous surveys to provide feedback on the quality of care they receive. These surveys will be tailored to be as accessible as possible and will focus on aspects like care quality, respect, communication, and the accommodation of personal needs.
- Interactive Feedback Sessions: We host feedback meetings where service users can engage with staff directly, ask questions, and provide comments on their experiences. For service users who may find group discussions difficult, we offer one-on-one feedback sessions or allow feedback to be submitted privately.

c. Advocacy Services

- External Advocacy Support: For service users who may have difficulty expressing their views, we provide access to independent advocacy services. These advocates can help service users articulate their needs and concerns, ensuring their voice is heard.
- Family and Carer Involvement: We recognize that families and carers often have a significant role in a service user's care. We actively encourage family feedback and participation in care plan reviews, ensuring that families are well-informed and involved in decision-making.

3. Collecting and Analyzing Feedback

We use various methods to gather, analyze, and act on service user feedback:

a. Feedback Logs and Registers

- Feedback Logging: All feedback received from service users, families, carers, and external advocates will be recorded in a feedback log. This log will capture the type of feedback, whether positive or negative, and any actions taken in response.
- Data Analysis: The feedback data will be regularly analyzed to identify patterns and trends in service quality, ensuring that any recurring issues are addressed. This analysis will also help us identify areas for improvement and ensure we are meeting the Equality Act 2010 and CQC regulations.

b. Incident and Complaints Tracking

- Complaint Tracking: Formal complaints related to equality, discrimination, or any issues regarding cultural sensitivity, accessibility, or abuse will be tracked through our complaints management system. We ensure all complaints are addressed promptly, and actions taken are clearly documented.
- Incident Monitoring: Any incidents related to bullying, harassment, or unacceptable behaviour will be logged and thoroughly investigated, with the results used to improve future service delivery.

4. Acting on Feedback

To demonstrate our commitment to service user engagement and continuous improvement, we ensure that all feedback is acted upon in a timely manner:

a. Implementation of Improvements

- Action Plans: Based on feedback, we will develop and implement action plans that address any issues raised by service users. For example, if feedback reveals that a particular cultural or religious need is not being met, we will make necessary adjustments to care practices.
- Changes in Care Plans: If feedback indicates that a service user's preferences are not being respected or that reasonable adjustments are not being made, their care plan will be revised accordingly.

b. Communicating Outcomes

- Follow-up Communication: After a feedback session or survey, service users will be informed about the outcomes of their feedback. This includes details about any changes or improvements made as a result of their input. We are committed to transparency and accountability in how feedback is used to drive change.
- Staff Accountability: If feedback highlights areas where staff performance needs to improve (e.g., cultural competence or sensitivity to specific care needs), we will provide additional training and supervision for those staff members, ensuring they are fully supported in meeting service users' needs.

5. Engaging with Diverse Service User Groups

Given the diverse needs of our service user population, we ensure that engagement methods are appropriate and tailored to each group:

- Adults with Learning Disabilities: We offer easy-read materials, visual aids, and alternative communication tools (e.g., PECS, Makaton) to ensure that feedback mechanisms are accessible. Staff are trained to engage with individuals with learning disabilities using clear and simple language.
- Adults with Mental Health Needs: We ensure that service users with mental health needs are given the space and support to express their views. This includes providing privacy during feedback sessions and ensuring that responses are treated with sensitivity and respect.
- Autism Spectrum Conditions: For individuals with autism, we recognize the importance of predictable routines and structured environments. We offer visual schedules, and sensory-friendly spaces for feedback sessions to accommodate sensory sensitivities and reduce anxiety during feedback processes.

6. Monitoring and Reporting on Engagement and Feedback

We are committed to regularly monitoring the effectiveness of our service user engagement and feedback systems:

- Quarterly Reports: The Quality Assurance and Compliance Team will review feedback data every quarter and generate reports on engagement activity. These reports will highlight key findings, actions taken, and any areas for further improvement.
- Annual Service Review: An annual review of the Equality, Diversity, and Human Rights Policy will include an assessment of how well service user feedback has been integrated into the care process, and whether service users' cultural, religious, and individual needs are being fully met.

7. Continuous Improvement Based on Feedback

At Primus PLUS Healthcare, we strive for continuous improvement. The feedback we receive from service users, families, and other stakeholders will directly inform:

- The review and enhancement of care plans to ensure they are person-centered and reflect the diverse needs of service users.
- Training programs to ensure that staff are equipped with the knowledge and skills needed to respect and respond to service users' cultural, social, and religious needs.
- The overall quality of care, ensuring that all service users receive care that respects their human rights and equality under the Equality Act 2010 and other relevant regulations.

22. ACCESS TO ADVOCACY SERVICES

At Primus PLUS Healthcare, we are committed to ensuring that all service users, particularly adults with learning disabilities, mental health needs, and autism spectrum conditions, have access to the support they need to express their views, make decisions, and ensure their rights are respected. As part of our Equality, Diversity, and Human Rights Policy, we provide access to advocacy services to ensure that service users can make informed choices about their care, raise concerns, and navigate systems of support with confidence. This section outlines how Primus PLUS Healthcare ensures that service users are fully supported through advocacy services, and how we comply with CQC regulations and relevant UK legislation to empower those we care for.

1. Purpose of Access to Advocacy Services

The purpose of access to advocacy services is to:

- Empower service users to speak up about their care and any issues they encounter in the supported living service, ensuring that their voice is heard and respected.
- Ensure that service users' rights are protected, particularly those who may face difficulties in expressing their views or understanding their rights due to learning disabilities, mental health needs, or autism spectrum conditions.
- Promote active participation in the care planning and decision-making processes, enabling service users to make informed choices about their lives and care.
- Ensure that we meet our legal obligations under the Equality Act 2010, Human Rights Act 1998, and the Care Act 2014, which ensure the right to independent advocacy for individuals who are at risk of harm or who may find it challenging to represent their own interests.

2. Definition of Advocacy

An advocate is someone who can represent the interests of a service user, ensuring their voice is heard and their rights are upheld. The advocacy service will provide independent support to service users, particularly when they:

- Have difficulty understanding or expressing their needs due to their disability.
- Need help in making decisions about their care or expressing dissatisfaction with their service.

- Require assistance in accessing services or navigating complex systems.

Advocates work with service users to ensure their concerns are communicated and that they are involved in all decisions about their care. They act in the best interest of the service user, ensuring that the person's wishes and preferences are respected.

3. Legal and Regulatory Framework for Advocacy Services

Access to advocacy services is a key requirement under several pieces of UK legislation and CQC regulations, ensuring that service users can express their views and protect their rights.

a. The Care Act 2014

The Care Act 2014 mandates that individuals who have care and support needs must have access to independent advocacy services when they are unable to make decisions for themselves. This applies particularly when they face difficulties in participating in decisions about their care.

- Section 67 of the Care Act explicitly states that local authorities must provide advocacy services to support individuals in making decisions about their care, including the care and support planning process, reviews, and decisions about assessments.

b. The Equality Act 2010

Under the Equality Act 2010, services are required to make reasonable adjustments to support individuals with disabilities. This includes ensuring that advocacy services are available to individuals who may face barriers in expressing their needs or accessing services, ensuring equal treatment and the protection of human rights for all service users.

c. The Human Rights Act 1998

The Human Rights Act 1998 guarantees individuals the right to participate in decisions that affect their lives, including the right to freedom of expression and the right to access effective representation in cases of dispute or when decisions are being made regarding their care.

d. The Accessible Information Standard

Under the Accessible Information Standard, care providers are required to ensure that information is provided in a way that individuals can understand. This includes making reasonable adjustments for service users who require additional support, such as access to advocacy services, to help them engage with and understand the information being shared with them.

4. How Service Users Access Advocacy Services

At Primus PLUS Healthcare, we ensure that service users have clear and easy access to advocacy services in the following ways:

a. Initial Care Plan and Needs Assessment

- During the initial care planning process and needs assessment, we will identify if a service user may require advocacy services. If the individual expresses a need for advocacy, or if it is clear that they would benefit from support in understanding their rights or decisions, we will make the appropriate referrals.
- We will also involve family members or carers in identifying advocacy needs if the service user agrees, particularly for individuals who may have difficulty communicating their needs.

b. Information on Available Advocacy Services

- Service users will be informed of their right to access independent advocacy services at the start of their care journey and will be provided with a list of local advocacy providers.
- We will provide this information in accessible formats, including easy-read documents, visual aids, or alternative communication methods, where necessary, to ensure service users fully understand their options for accessing advocacy.

c. Ongoing Support for Advocacy

- Throughout the service user's journey, staff will regularly check in with them to ensure they continue to have access to advocacy support if required. This will be done during care plan reviews, regular supervision meetings, and when concerns are raised by service users about their care.
- We will also monitor the effectiveness of the advocacy service and adjust referrals as necessary to ensure service users continue to receive the support they need.

5. Types of Advocacy Available

We provide access to several types of advocacy services, depending on the service user's needs:

a. Independent Advocacy

Independent advocates are impartial and work solely in the best interests of the service user, providing support in areas such as:

- Making decisions about care (e.g., agreeing to assessments or care plans).
- Communicating with service providers or external agencies to ensure the service user's needs and preferences are considered.
- Representing the service user's wishes if they feel they are not being heard or respected.

b. Citizen Advocacy

Citizen advocacy services pair service users with volunteers or community members who help them navigate their care and support needs. These advocates are typically long-term and work with the service user to ensure their voice is represented and their wishes are prioritized.

c. Family or Carer Advocacy

Family members or carers can also serve as advocates for service users, particularly in situations where service users may need additional help in decision-making. This form of advocacy should always be carried out in consultation with the service user and in a way that respects their wishes.

6. Ensuring the Quality of Advocacy Services

We are committed to providing high-quality advocacy services to our service users by:

- Partnering with reputable advocacy organizations that specialize in supporting individuals with learning disabilities, mental health needs, and autism spectrum conditions.
- Ensuring that all advocacy services comply with the standards set by the Care Act 2014, the Equality Act 2010, and other relevant legislation.

- Monitoring and reviewing the effectiveness of advocacy services through feedback from service users, family members, and advocates, ensuring that these services meet their needs.

7. Training and Support for Staff Regarding Advocacy

All staff at Primus PLUS Healthcare will receive training on the following:

- The role of advocacy and its importance in empowering service users.
- How to recognize when a service user may need advocacy support, particularly those with learning disabilities, mental health needs, and autism spectrum conditions.
- The processes for referring service users to advocacy services and ensuring ongoing support for those who need it.
- How to respect and collaborate with advocates to ensure service users' rights are upheld.

8. Monitoring and Review

- Feedback from Service Users: We will gather regular feedback from service users regarding their experience with advocacy services. This feedback will be used to evaluate the effectiveness of the service and make improvements where necessary.
- Annual Review of Advocacy Service Utilization: Each year, we will review how often service users have accessed advocacy services, assess any barriers to access, and explore opportunities to increase awareness and access to these services.
- CQC Inspections: We will ensure that our practices related to access to advocacy services are compliant with CQC standards and will make necessary adjustments based on findings from CQC inspections.

23. CONFIDENTIALITY AND DATA PROTECTION IN EQUALITY AND DIVERSITY

At Primus PLUS Healthcare, we are committed to upholding the highest standards of confidentiality and data protection in the provision of care, particularly for adults with learning disabilities, mental health needs, and autism spectrum conditions. We recognize the importance of safeguarding personal and sensitive information while ensuring that our services are inclusive and person-centered. This section outlines how we manage confidentiality and data protection in the context of equality and diversity, ensuring compliance with CQC regulations, relevant UK legislation, and best practices.

1. Purpose of Confidentiality and Data Protection in Equality and Diversity

The purpose of maintaining confidentiality and data protection in the context of equality and diversity is to:

- Protect the privacy of service users by ensuring that their personal and sensitive information is handled securely and in accordance with the law.
- Ensure that service users’ cultural, social, and religious needs are respected, and their personal preferences are kept confidential, while allowing access to the necessary parties involved in their care.

- Comply with CQC regulations and relevant legislation, such as the General Data Protection Regulation (GDPR) and the Data Protection Act 2018, which set standards for the protection of personal data in health and social care settings.
- Ensure that data is collected, stored, and shared only when necessary and in a way that maintains service users' dignity, autonomy, and human rights.

2. Legal and Regulatory Framework

To ensure that we maintain high standards of confidentiality and data protection, Primus PLUS Healthcare adheres to the following legal frameworks and regulations:

a. The General Data Protection Regulation (GDPR)

The GDPR governs how personal data is handled and ensures that service users' personal information is:

- Processed lawfully, fairly, and transparently.
- Collected for specified, legitimate purposes and not used in ways that are incompatible with those purposes.
- Accurate and kept up to date.
- Stored securely and protected from unauthorized access.
- Retained only for as long as necessary for the purposes for which it was collected.

b. The Data Protection Act 2018

The Data Protection Act 2018 works alongside the GDPR and provides additional provisions for data protection in the UK. It ensures that individuals' rights to privacy and confidentiality are protected, particularly in the context of sensitive personal data, including information related to healthcare, disability, and cultural or religious beliefs.

c. The Equality Act 2010

The Equality Act 2010 requires care providers to ensure that service users are not discriminated against based on protected characteristics such as disability, gender, race, sexual orientation, religion, and age. Confidentiality and data protection practices are integral to ensuring that service users' protected characteristics are respected and that they are not subject to discriminatory practices in the handling of their personal information.

d. The Care Act 2014

The Care Act 2014 emphasizes the importance of person-centered care and the rights of individuals to make informed decisions about their care. Confidentiality is a key aspect of this, as individuals have the right to control how their personal information is shared, particularly in the context of making decisions about care, support plans, and the services they receive.

3. Confidentiality and Data Protection Principles

At Primus PLUS Healthcare, we adhere to the following core principles to ensure that service users' personal data is handled appropriately:

a. Lawful, Fair, and Transparent Processing

- Consent: Where applicable, service users will be asked for their explicit consent before any personal data is collected or shared. In situations where consent is not required, service users will still be informed about how their data will be used and shared.
- Purpose Limitation: Data will only be collected and used for specific, legitimate purposes related to the care and support of the service user. For example, healthcare information may be shared with medical professionals or social care providers when necessary to provide appropriate care.

b. Data Minimization

- We will only collect personal data that is necessary for providing care and support services. This includes relevant information regarding health conditions, communication needs, cultural preferences, and any reasonable adjustments required to support the service user.
- We will ensure that no excessive or irrelevant data is collected or stored.

c. Accuracy

- Service user information will be kept accurate and up-to-date. We will encourage service users to review and update their details regularly, ensuring that all personal information remains accurate and relevant.

d. Security and Protection of Data

- Data Security: All personal and sensitive data will be stored in secure systems that are protected by encryption, secure passwords, and access control measures. These systems will be regularly reviewed and updated to ensure they meet current security standards.
- Access Control: Only authorized personnel will have access to personal data. Staff will be trained on the importance of data protection and confidentiality, and access to personal information will be restricted to those who require it to provide care.

e. Retention and Disposal of Data

- Personal data will be retained for no longer than is necessary for the purposes for which it was collected. After the relevant period, data will be securely destroyed or anonymized.
- Service users have the right to request that their personal data be deleted when it is no longer required for care or legal purposes.

f. Data Sharing

- Sharing with Third Parties: Service user data will only be shared with third parties (e.g., healthcare providers, social services, or advocacy services) when it is necessary for the service user's care or treatment, and always with the service user's consent or as required by law.
- Information Sharing Protocols: We will adhere to clear information-sharing protocols, ensuring that all parties involved in care are aware of and respect data protection principles and the service user's rights.
- Confidentiality Agreements: Any third-party service providers or partners involved in the delivery of care will be required to sign confidentiality agreements to ensure that they comply with our data protection policies.

4. Service User Rights in Relation to Their Data

Under GDPR and the Data Protection Act 2018, service users have several rights in relation to their personal data, including:

- Right to Access: Service users have the right to request a copy of their personal data held by Primus PLUS Healthcare. Requests will be responded to within one month.
- Right to Rectification: If a service user's personal data is inaccurate or incomplete, they have the right to request that it be corrected.
- Right to Erasure (Right to be forgotten): Service users can request the deletion of their personal data when it is no longer necessary for the purposes for which it was collected.
- Right to Restrict Processing: Service users can request that their personal data be restricted or suppressed if they contest its accuracy or if they object to its processing.
- Right to Data Portability: Service users have the right to obtain and reuse their personal data across different services for their own purposes.

5. Training and Awareness for Staff

All staff at Primus PLUS Healthcare will receive regular training on the following:

- Confidentiality and the importance of maintaining the privacy of service users' personal information.
- Data protection principles under the GDPR and Data Protection Act 2018, including how to securely handle and store service user data.
- The importance of ensuring that any reasonable adjustments for learning disabilities, mental health needs, or autism spectrum conditions are handled confidentially and respectfully.
- Information sharing protocols and the appropriate steps to take when sharing personal data with third parties.

6. Monitoring and Compliance

To ensure compliance with this Confidentiality and Data Protection policy:

- Audits will be conducted regularly to assess the effectiveness of our data protection practices and identify any areas for improvement.
- Regular reviews of the data protection and confidentiality practices will be held, with adjustments made as necessary to align with changes in CQC regulations, GDPR requirements, or service user feedback.
- Incident Reporting: Any breaches of confidentiality or data protection will be reported immediately and investigated according to our incident management procedures.

24. REVIEW AND CONTINUOUS IMPROVEMENT

At Primus PLUS Healthcare, we are committed to ensuring that our Equality, Diversity, and Human Rights Policy is not only compliant with CQC regulations and relevant UK legislation, but also reflects

our ongoing commitment to delivering inclusive care that is person-centered, respectful, and responsive to the diverse needs of our service users, including adults with learning disabilities, mental health needs, and autism spectrum conditions. This section outlines our approach to review and continuous improvement to ensure that we remain responsive to the evolving needs of service users and that we continue to meet and exceed regulatory and legal requirements.

1. Purpose of Review and Continuous Improvement

The purpose of reviewing and continuously improving the Equality, Diversity, and Human Rights Policy is to:

- Ensure compliance with CQC regulations, Equality Act 2010, Human Rights Act 1998, and other relevant UK legislation, ensuring that we uphold the rights of all service users.
- Evaluate the effectiveness of our policy and procedures in meeting the needs of adults with learning disabilities, mental health needs, and autism spectrum conditions, ensuring that their equality and diversity needs are met consistently.
- Identify areas for improvement and take proactive steps to enhance the delivery of care, with a focus on service users' personal, cultural, social, and religious needs.
- Promote a culture of inclusivity and respect, ensuring that all service users receive care that upholds their dignity, rights, and well-being.
- Demonstrate a commitment to continuous learning and adaptation in line with service user feedback, changing legal requirements, and evolving best practices in the field of equality and diversity.

2. Regular Reviews of the Policy

To ensure that the Equality, Diversity, and Human Rights Policy remains effective, relevant, and compliant, we will conduct regular reviews. These reviews will be scheduled at least annually and will assess the following:

a. Compliance with Legal and Regulatory Requirements

- Review of legislation: We will review any updates or changes in CQC regulations, the Equality Act 2010, the Human Rights Act 1998, the Data Protection Act 2018, the General Data Protection Regulation (GDPR), and other relevant UK legislation to ensure the policy remains compliant.
- CQC Inspections: We will review any findings from CQC inspections and ensure that our policy addresses any areas of non-compliance identified during inspections.
- Feedback from regulatory bodies: We will consider feedback and recommendations from relevant regulatory bodies, such as the Equality and Human Rights Commission (EHRC), to ensure that the policy continues to meet the needs of service users.

b. Effectiveness in Meeting Service User Needs

- Service user feedback: We will assess the impact of the policy on service user satisfaction, particularly regarding how their cultural, social, and religious needs are being met. This feedback will be gathered through surveys, care plan reviews, and direct interviews with service users and their families or carers.

- Adapting to changing needs: We will ensure that the policy remains responsive to the changing needs of our service users, particularly as they may have different cultural or religious preferences, or evolving learning disabilities or mental health needs. For example, if a service user's needs change or new cultural requirements arise, the policy will be updated accordingly to reflect those needs.

c. Alignment with Organisational Goals

- Review of organizational goals: We will evaluate whether the Equality, Diversity, and Human Rights Policy is aligned with our overall mission and vision for service delivery, ensuring that the policy supports Primus PLUS Healthcare's commitment to person-centered care and the empowerment of service users.

3. Continuous Improvement Process

To ensure the ongoing improvement of our services, we will implement the following processes:

a. Feedback Loops and Stakeholder Engagement

- Regular feedback: We will collect feedback from service users, families, advocates, and staff on the effectiveness of the policy and how well their cultural, religious, and disability-related needs are being met.
- External consultation: We will engage with external advocacy groups and specialist organisations to get additional input on improving the inclusivity and effectiveness of the services we provide.
- Internal consultations: Staff meetings and focus groups will be held to gather insights from staff on how the policy is being applied and what improvements could be made in areas such as training, support, and service delivery.

b. Staff Training and Development

- Ongoing training: All staff will receive regular training on the principles of equality, diversity, and human rights, with a focus on any updates to CQC regulations and UK legislation. This will include ensuring that all staff are familiar with the Accessible Information Standard, reasonable adjustments for disabilities, and how to respond to the diverse needs of service users.
- Continuous professional development: We will provide opportunities for staff development and learning, encouraging staff to stay updated with the latest guidance and best practices in the care of vulnerable adults, autistic people, and those with learning disabilities.

c. Service User Engagement and Participation

- Service user involvement: We will involve service users directly in the review and improvement process by providing opportunities for them to share their experiences and suggest areas for improvement.
- Person-centered reviews: Each service user will have regular care plan reviews, which will include an assessment of their cultural and diversity needs. This review will ensure that any necessary adjustments or changes to care plans are made to improve the service user's experience.

4. Tracking and Reporting Outcomes of the Review

The Quality Assurance and Compliance Team will track and report on the outcomes of the policy reviews and continuous improvement activities to ensure transparency and accountability.

a. Annual Review Report

- We will produce an annual report that includes the findings from the policy review process, the actions taken in response to feedback, and any changes made to the policy or practices.
- The report will also highlight any areas for improvement identified during the review process, along with the action plan to address those areas.

b. Action Plans

- If any issues or gaps are identified in the review process, an action plan will be developed to ensure the necessary improvements are made.
- The action plan will be shared with senior management to ensure that resources are allocated appropriately and that improvements are implemented across the organization.

5. Commitment to Service User-Centered Care and Equality

As part of our commitment to continuous improvement, we will ensure that the Equality, Diversity, and Human Rights Policy is always aligned with the principles of person-centered care, dignity, respect, and empowerment. This means that:

- Service users will be at the center of all improvements and their feedback will be the driving force behind any changes to the policy or practices.
- Equality and diversity will be at the core of our service delivery, ensuring that every individual, regardless of disability, race, culture, gender, age, or religion, receives fair, equitable, and respectful care.

25. FORMS

1. Equality, Diversity, and Human Rights Policy Acknowledgment Form

Purpose: To ensure that all staff have read, understood, and committed to the principles outlined in the Equality, Diversity, and Human Rights Policy.

Form Details:

- Name of Staff Member: _____
- Job Title: _____
- Date of Acknowledgment: _____
- Signature: _____

Tick boxes:

- ☐ I confirm that I have read and understood the Equality, Diversity, and Human Rights Policy.
- ☐ I understand my responsibilities in implementing the policy.

Comments Section:

- _____

2. Service User Equality and Diversity Needs Assessment Form

Purpose: To assess the cultural, religious, and disability-related needs of a service user and ensure that their care plan is appropriately tailored.

Form Details:

- Service User Name: _____
- Date of Birth: _____
- Assessment Date: _____

Personal Needs (Cultural, Religious, Disability-related):

Need Area	Description of Need	Specific Adjustments Required	Priority (High/Medium/Low)
Cultural Needs	e.g., dietary preferences, language needs	_____	[ ] High [ ] Medium [ ] Low
Religious Needs	e.g., prayer times, dietary restrictions	_____	[ ] High [ ] Medium [ ] Low
Disability-Related Needs	e.g., mobility aids, communication support	_____	[ ] High [ ] Medium [ ] Low
Sensory Needs	e.g., noise sensitivity, light sensitivity	_____	[ ] High [ ] Medium [ ] Low

Staff Comments:

- _____
- _____

Service User's Consent to Adjustments:

- ☐ Yes, I agree to the necessary adjustments being made for my care.
- ☐ No, I do not consent to the adjustments outlined above.
- Signature of Service User or Guardian: _____

3. Reasonable Adjustments Request Form

Purpose: To document and manage requests for reasonable adjustments from service users.

Form Details:

- Requestor Name: _____
- Date of Request: _____
- Details of Adjustment Requested: _____

Tick boxes for Adjustment Types:

- ☐ Accessibility (e.g., wheelchair access, ramps)
- ☐ Communication Support (e.g., sign language, easy-read formats)
- ☐ Adjustments to Care Plan (e.g., dietary needs, routine changes)
- ☐ Technology or Equipment Adjustments (e.g., screen readers, assistive devices)

Reason for Request:

- _____

Approved by (Staff):

- ☐ Approved
- ☐ Not Approved
- Signature of Approving Staff: _____

Action Taken/Follow-Up:

- _____
- _____

4. Staff Training Record Form (Equality, Diversity, and Human Rights)

Purpose: To document all training related to equality, diversity, and human rights that staff members have completed.

Form Details:

Staff Name		Training Date	Training Type	Trainer Name	Staff Signature	Completion Status
_____		_____	_____	_____	_____	[ ] Completed
_____		_____	_____	_____	_____	[ ] Completed

Tick boxes for Training Types:

- ☐ Equality and Diversity Awareness
- ☐ Disability Awareness
- ☐ Cultural Competence Training
- ☐ Safeguarding and Protection
- ☐ Mental Health and Autism Awareness

5. Service User Feedback Form

Purpose: To collect feedback from service users regarding their experience of care, particularly in relation to equality, diversity, and respect for human rights.

Form Details:

- Service User Name: _____
- Date of Feedback: _____

Feedback Questions:

1. Do you feel that your cultural, religious, and disability needs are respected?
    - ☐ Yes
    - ☐ No
    - ☐ Not Sure
2. How would you rate your overall experience of the care services you receive in terms of respect for your needs?
    - ☐ Excellent
    - ☐ Good
    - ☐ Fair
    - ☐ Poor
3. Are there any areas where you feel adjustments could be made to improve your care?
    - _____
4. How well do you feel your care plan reflects your individual preferences?
    - ☐ Very Well
    - ☐ Well
    - ☐ Not Well
    - ☐ Not At All
5. Additional Comments:
    - _____
    - _____

6. Incident and Complaint Form (Equality, Diversity, and Human Rights Related)

Purpose: To report and address any incidents or complaints related to discrimination, harassment, or failure to make reasonable adjustments.

Form Details:

- Name of Complainant: _____
- Date of Incident/Complaint: _____
- Location: _____
- Details of Incident: _____

Tick boxes for Type of Complaint:

- ☐ Discrimination
- ☐ Harassment
- ☐ Failure to Provide Reasonable Adjustment
- ☐ Other: _____

Action Taken:

- ☐ Immediate intervention by staff
- ☐ Investigation initiated
- ☐ Referral to management
- ☐ Follow-up with service user
- ☐ Other: _____

Resolution/Outcome:

- _____

Signature of Complainant: _____
Signature of Staff Member: _____

7. Advocacy Access Form

Purpose: To request and document access to advocacy services for service users who need assistance in making decisions, expressing concerns, or navigating care options.

Form Details:

- Service User Name: _____
- Date of Request: _____
- Reason for Advocacy Request: _____

Advocacy Service Details:

- Advocate Assigned: _____
- Contact Information: _____
- Date of First Meeting: _____

Service User's Consent:

- ☐ Yes, I agree to the involvement of an advocate.
- ☐ No, I do not consent to the involvement of an advocate.

Signature of Service User: _____

8. Data Protection and Confidentiality Agreement Form

Purpose: To ensure all staff members understand and agree to comply with data protection and confidentiality standards.

Form Details:

- Staff Member Name: _____
- Job Title: _____
- Date of Agreement: _____

Agreement:

- ☐ I confirm that I will handle personal data in compliance with the GDPR and Data Protection Act 2018.
- ☐ I will respect confidentiality and ensure that service user information is not shared inappropriately.
- ☐ I understand that any breach of confidentiality or data protection laws may result in disciplinary action.

Signature: _____

9. Cultural and Religious Sensitivity Feedback Form

Purpose: To gather specific feedback from service users regarding their cultural and religious needs, ensuring that they feel respected and accommodated.

Form Details:

- Service User Name: _____
- Date of Feedback: _____
- Cultural/Religious Needs: _____
- Feedback on Service Provision (cultural respect, dietary needs, religious practices, etc.):

  _____

- Suggestions for Improvement:

  _____

10. Accessibility Assessment Form (Physical and Digital)

Purpose: To evaluate whether the physical environment and digital services are accessible and provide the necessary adjustments for service users with learning disabilities, mental health needs, and autism spectrum conditions.

Form Details:

- Service User Name: _____
- Location/Area Evaluated: _____

Physical Environment:

- ☐ Ramp/Accessible Entrances
- ☐ Clear Signage
- ☐ Quiet Spaces
- ☐ Other: _____

Technology and Digital Services:

- ☐ Accessible Websites
- ☐ Clear Instructions for Digital Services
- ☐ Software for Communication Assistance
- ☐ Other: _____

Service User Feedback:

- _____

11. Equality and Diversity Improvement Action Plan

Purpose: To outline the actions taken to address feedback, complaints, or areas of improvement identified through reviews, incidents, or surveys.

Form Details:

- Date: _____
- Issue Identified: _____
- Action Plan:
    1. _____
    2. _____
    3. _____
- Person Responsible for Action: _____
- Timeline for Completion: _____
- Follow-Up Date: _____

12. Equality, Diversity, and Human Rights Policy Review Form

Purpose: To document the results of the annual or periodic review of the Equality, Diversity, and Human Rights Policy, ensuring it is up-to-date and effective.

Form Details:

- Date of Review: _____
- Reviewed by: _____
- Key Changes:

  _____

- Areas for Improvement:

  _____

- Review of Compliance with CQC Regulations:

  [ ] Fully Compliant

  [ ] Partially Compliant

  [ ] Non-Compliant

- Recommendations for Action:

  _____

13. Incident and Complaint Form (Equality, Diversity, and Human Rights Related)

Purpose: To report and address any incidents or complaints related to discrimination, harassment, or failure to make reasonable adjustments.

Form Details:

- Name of Complainant: _____
- Date of Incident/Complaint: _____
- Location: _____
- Details of Incident: _____

Tick boxes for Type of Complaint:

- ☐ Discrimination
- ☐ Harassment
- ☐ Failure to Provide Reasonable Adjustment
- ☐ Other: _____

Action Taken:

- ☐ Immediate intervention by staff
- ☐ Investigation initiated
- ☐ Referral to management
- ☐ Follow-up with service user
- ☐ Other: _____

Resolution/Outcome:

- _____

Signature of Complainant: _____

Signature of Staff Member: _____

26. REFERENCES

1. Care Quality Commission (CQC). (2014). *The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014*. Available at: https://www.cqc.org.uk
2. Equality and Human Rights Commission (EHRC). (2010). *Equality Act 2010*. Available at: https://www.equalityhumanrights.com
3. Government of the United Kingdom. (2018). *Data Protection Act 2018*. Available at: https://www.gov.uk/data-protection
4. Department of Health and Social Care. (2014). *Care Act 2014*. Available at: https://www.gov.uk/government/publications/care-act-2014-statutory-guidance
5. National Health Service (NHS). (2019). *NHS Long Term Plan*. Available at: https://www.longtermplan.nhs.uk
6. UK Government. (2018). *General Data Protection Regulation (GDPR)*. Available at: https://www.gov.uk/government/publications/guide-to-the-general-data-protection-regulation
7. Social Care Institute for Excellence (SCIE). (2020). *Promoting Equality and Diversity in Social Care*. Available at: https://www.scie.org.uk
8. Skills for Care. (2020). *Workforce Development Standards*. Available at: https://www.skillsforcare.org.uk
9. National Autistic Society (NAS). (2009). *The Autism Act 2009*. Available at: https://www.autism.org.uk
10. The Accessible Information Standard. (2015). *Accessible Information Standard: Information for providers*. Available at: https://www.england.nhs.uk

Additional Resources

1. Mencap. (2020). *Learning Disabilities and Advocacy Services*. Available at: https://www.mencap.org.uk
2. The Social Care Institute for Excellence (SCIE). (2020). *Good Practice in Equality and Diversity for Social Care Providers*. Available at: https://www.scie.org.uk
3. Autism Alliance UK. (2017). *Autism and Human Rights*. Available at: https://www.autism.org.uk
4. National Institute for Health and Care Excellence (NICE). (2019). *Autism: Recognition, Assessment, and Diagnosis*. Available at: https://www.nice.org.uk
5. Department of Health and Social Care (DHSC). (2016). *Transforming Care for People with Learning Disabilities*. Available at: https://www.gov.uk/government/publications/transforming-care-for-people-with-learning-disabilities