

Trans and Non-Binary Employees UHL Policy

Approved By:	Policy and Guideline Committee
Date of Original Approval:	19 August 2011
Trust Reference:	B38/2011
Version:	2 – October 2018
Supersedes:	UHL Gender Reassignment Policy for Staff (Ref: B38/2011)
Trust Lead:	Shaheen Mulla – Equality Coordinator Haseeb Ahmad – Equality Lead
Board Director Lead:	Director of People and Organisational Development
Date of Latest Approval	6-Month Review Date Extension Approved at PGC on 15/03/2024
Next Review Date:	September 2024

CONTENTS

Section		Page
1	Introduction and Overview	3
2	Policy Scope – Who the Policy applies to and any specific exemptions	4
3	Definitions and Abbreviations	4
4	Roles – Who Does What	6
5	Policy Implementation and Associated Documents-What needs to be done.	8
6	Education and Training	15
7	Process for Monitoring Compliance	15
8	Equality Impact Assessment	16
9	Supporting References, Evidence Base and Related Policies	16
10	Process for Version Control, Document Archiving and Review	16

Appendices		Page
1	Appendix 1 – Policy Monitoring Table	17

REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

March 2018 – Significant re-write including format change. Name change from “Gender Reassignment Policy”. Other changes include more detail on some of the definitions and the addition of some new definitions such as non-binary gender people and genderqueer to ensure this policy reflects most current legislation on this subject. Acknowledgement that the policy has been taken from Nottingham Healthcare NHS Foundation Trust. Their policy has been well researched and has been nationally recognised as an example of best practice

KEY WORDS

Gender Reassignment Policy, Trans Policy, Transgender Policy, Gender Transition Policy, Non-Binary, Trans, Transgender.

1 INTRODUCTION AND OVERVIEW






- 1.1 This policy applies to all employees, job applicants and bank staff employed by University Hospitals of Leicester NHS Trust (UHL). Additionally it also applies to volunteers.
- 1.2 This policy is applicable to recruitment including the advertising of jobs and appointment to them, conditions of work, pay, learning and development and every other aspect of employment.
- 1.3 Breaches of this policy will be dealt with under one of the following Human Resources (HR) policies whichever is deemed most appropriate following advice from HR:

- Anti-Bullying and Harassment UHL Policy
- Disciplinary UHL Policy
- Freedom to Speak Up Raising Concerns (Whistleblowing) UHL Policy
- Staff Grievance and Disputes UHL Policy

Other policies which may be relevant are:

- Disability UHL Policy
- Sickness and Management UHL Policy

- 1.4 Cases of discrimination will be taken seriously and may be considered gross misconduct and subject to summary dismissal.
- 1.5 All staff behaviours must be consistent with UHL's Values:

1. We treat people how we would like to be treated	
2. We do what we say we are going to do	
3. We focus on what matters most	
4. We are one team and we are best when we work together	
5. We are passionate and creative in our work	

- 1.6 In line with this the University Hospitals of Leicester NHS Trust is committed to ensuring that it treats its employees fairly and with respect and that it does not discriminate against individuals or groups on the basis of any of the “protected characteristics” outlined in the Equality Act 2010: especially on the grounds of disability or by reason of a person’s association with a disabled person, gender, marital status, race, colour, ethnic origin or national origin, nationality, age, sexual orientation, gender re-assignment, religion or any other unjustifiable conditions or requirements. Additionally, the Trust recognises its responsibilities as a signatory to the Mindful Employer Charter which aims to increase awareness of mental ill health. The Charter is a demonstration of the Trust’s commitment to being positive about mental health in the recruitment and retention of staff.
- 1.7 UHL is committed to to equality of opportunity, both in the provision of services and in its role as an employer. It is the organisation’s intention that all staff, volunteers, applicants and members of the public have the right to be treated with fairness, dignity, respect and professionalism.

2 POLICY SCOPE – WHO THE POLICY APPLIES TO AND ANY SPECIFIC EXCLUSIONS

- 2.1 The purpose of this policy is to provide guidance and practical ‘best practice’ advice to enable the Trust and its manager to understand the need of Trans and Non-Binary people and in doing so enable the Trust as an employer to deliver fair, equitable and inclusive services.
- 2.2 The Trust recognises and values the diversity of its staff and seeks to attract, recruit and retain people of the highest caliber by applying the principles of fairness, consistency and equality in employment practices, systems and processes.
- 2.3 The Trust believes that Trans employees are entitled to be treated with dignity and respect and permitted to perform their roles free from harassment, unfair discrimination and unnecessary barriers.
- 2.4 This policy sets out how the Trust will meet its duty and requirements under current and forthcoming equality legislation and statutory duties and support Trans staff.

3 DEFINITIONS AND ABBREVIATIONS

- 3.1 There is a broad range of terminology when it comes to describing Trans individuals. It is important to recognise the fact that language changes and evolves as understanding and perceptions change, and that different Trans communities will adopt different terms and usage.
- 3.2 **‘Transgender’** is a generic ‘umbrella’ term generally used by those who identify themselves as Transgender, Trans, gender variant, non-binary and others who

have some diversity of gender identity or presentation e.g. people who cross dress.

3.3 **‘Non-binary gender people’** are those who identify outside of the gender binary of male or female and may include genderqueer, bi-gender, pangender, genderless, agender, neutrois, third gender and gender fluid people. **Genderqueer** may be used by some members of the Trans community as an umbrella term for gender identities other than man and woman, thus outside of the gender binary. People may identify as one or more of the following:

- both man and woman (bigender, pangender);
- neither man nor woman (genderless, agender);
- moving between genders (gender fluid); or
- third gender or other-gendered. This includes those who do not place a name to their gender having an overlap of, or blurred lines between, gender identity and sexual orientation. Some individuals may refer to this as genderqueer.

Some non-binary people prefer to use gender-neutral pronouns such as one, ze, sie, hir, co, ey or, more commonly, the singular "they", "their" and "them"; while others prefer the conventional binary pronouns "her" or "him". Some genderqueer people prefer to be referred to alternately as he and she (and/or gender neutral pronouns), and some prefer to use only their name and not use pronouns at all.

3.4 The terms **‘Transsexual’** and **‘Transvestite’** are medically defined terms which appear in diagnostic guides. However, these terms are often seen as offensive and stigmatising and are generally best avoided.

3.5 A person who **‘Cross Dresses’** (previously defined as a Transvestite) is someone who enjoys wearing the clothing of the ‘opposite’ gender for periods of time. People who cross dress do not generally seek physical reassignment; they can be male or female.

3.6 For the sake of clarity and simplicity the word **‘Trans’** will be used in this document to include all people at whatever stage they are in their transition.

3.7 **‘Gender dysphoria’** is a term that is used both as a diagnosis and as a descriptive term to describe the discomfort or distress that an individual may feel due to incongruence between their birth assigned sex and their gender role, expression or identity. This might be accompanied by a desire to have treatment such as cross-sex hormones or surgery to make their body more congruent (International Classification of Diseases 10 (ICD- 10), [F64.0]; and Diagnostic and Statistical Manual of Mental Disorders (DSM-5).

3.8 There has been considerable debate as to whether Trans related issues should

exist as a diagnosis in a mental health classification **as the condition is not considered to be a mental illness**, although there **may be accompanying mental distress** due to stigmatisation and discrimination; sometimes referred to as minority, or marginalisation stress. The forthcoming International Classification of Diseases 11 (ICD-11 is likely to use the category 'Gender Incongruence' which will be removed from the mental health chapter and is likely to be situated in a newly created chapter entitled 'Sexual, Reproductive and Gender-related Health Conditions'.

- 3.9 Accordingly **'Trans'** is the terms of choice most often adopted by individuals in the UK. Many Trans people change their name and personal details and live as a member of the gender with which they identify i.e. their true gender. The process is referred to as **'gender reassignment'**. They may or may not seek treatment such as cross-sex hormones and surgery. Birth assigned males who transition to a female gender role are referred to as Trans women when it is appropriate to refer to their Trans status. Similarly, birth assigned females who transition to a male gender role are referred to as Trans men when it is appropriate to refer to their Trans status. However, usually a Trans person's Trans status is not relevant and they should be simply referred to as women and men, female or male.
- 3.10 **'Transitioning'** is the process by which a public change of gender presentation takes place with accompanying formal change of gender with associated documentation. At present it is difficult for people who identify outside of the gender binary of male or female to alter their gender on many documents, however this is changing.
- 3.11 A Trans person can change all their official documentation to reflect their acquired/ affirmed gender identity of male or female at the time of transition except their birth certificate. Their birth certificate can only be changed by applying for a **'Gender Recognition Certificate'** (GRC). A Trans person may apply for and may be successful in being granted a GRC when they have lived in their chosen gender for a minimum of two years irrespective of whether they are taking cross-sex hormones and/or have had gender surgery. Application for a GRC requires two clinical reports with respect to the Trans person's diagnosis and treatment. A GRC and new birth certificate gives full legal recognition of a Trans person's gender irrespective of whether a person has had any physical interventions such as cross-sex hormones or gender surgeries.
- 3.12 The Trust expects Trans people who have been consistently living in their preferred gender role to be treated for all purposes as a person of that role irrespective of whether they have obtained a Gender Recognition Certificate or not. Please remember that disclosure of 'protected information' (as defined by Section 22 of the Gender Reassignment Act) is a criminal offence.

4 ROLES – WHO DOES WHAT

4.1 Responsibilities within the Organisation

- a) **The Director of People and Organisational Development, Executive Directors, Clinical Directors, General Managers, Heads of Service and The Equality Team** all have a responsibility to ensure that the Trust is compliant with Equality and Human Rights legislation and as such promote a culture of valuing diversity in its fullest sense.
 - b) **All Managers** have a responsibility to create a culture in which offending behaviour is not tolerated and where everyone is treated with dignity and respect. Where instances of such behaviour do arise, managers are responsible for addressing the concerns swiftly, thoroughly and confidentially, respecting the feelings of all those concerned. Those behaviours may constitute harassment and are covered by other policies and procedures as well as the law and should be dealt with in line with the Trust's Anti-Bullying, Policy and Grievance Policy.
 - c) **All employees** have a responsibility to treat their colleagues with dignity and respect; be accountable for their own behaviour and actions and must understand the way in which their behaviour may affect others.
 - d) **The Trust** will ensure that all employees are aware of the content of this policy and procedure and ensure that any concerns are treated seriously and addressed swiftly, sensitively and appropriately.
- 4.2 **Trans people** have no obligation to disclose whether they have a Gender Recognition Certificate or if they identify as Trans, the whole purpose of the law is to provide them with privacy.
- 4.3 As many Trans people choose not to have a Gender Recognition Certificate, it is important that you keep what you know about them private, unless they tell you specifically that you need not.
- 4.4 It is now considered to be good practice to assume that a Trans person, who has changed their name by statutory declaration or deed poll, is a member of their new gender for all purposes, unless you are told otherwise. Knowledge about a Trans person's history should be regarded as being on a 'need to know' basis. Even then, if you have obtained the information in your official capacity i.e. in work, the information cannot be passed on unless the Trans person has formally told you (preferably in writing) that you may tell other specific people. This is in line with our existing procedures regarding sensitive personal information.
- 4.5 Once public transition to the new gender role has taken place, the Trust expects all its staff to treat the Trans member of staff in a manner appropriate to the new gender and to use forms of address which refer to the new gender and to use the new name and appropriate pronouns. Failure to do so could lead to disciplinary action under the Trust's Disciplinary Policy and Procedure.

5 POLICY IMPLEMENTATION AND ASSOCIATED DOCUMENTS –WHAT TO DO AND HOW TO DO IT

5.1 GENDER TRANSITION

- 5.11 Trans people will come into contact with the Trust either during the recruitment phase or by making their intentions known during their employment. Managers should be aware that the Sex Discrimination Act provides protection in employment before, during and after the transition process.
- 5.12 Trans people experiencing gender dysphoria, a recognized medical condition, often live for many years in the gender role that society expects of them until, finally, their distress becomes intolerable and they undergo transition to live permanently according to the gender role that is more comfortable for them.
- 5.13 Trans people are legally entitled to treatment on the NHS but may also choose to be treated privately. Whatever their choice in terms of treatment this is the point when they are most likely to make contact for the first time with their line manager regarding their transition.
- 5.14 In order to support the transition from one gender to another it is essential that line managers are supportive, sensitive and able to discuss with the person concerned how they want the process in relation to their continued employment to be handled. It is important to document any agreement and any discussions to ensure confidentiality and sensitivity are maintained. These should be recorded in staff personal files and not disclosed to any third party, unless the individual has given specific written permission to do so. It will be useful to establish a timeline of events to ensure appropriate support and timely interventions are actioned as agreed involving where appropriate Occupational Health, HR, Equality Team and Staff Side. No action should be taken without the written consent and knowledge of the individual.
- 5.15 The process that a person goes through to present themselves permanently in their new gender may include, but is not limited to, a pathway of specialist psychiatric evaluation, hormone treatment, a period of real-life experience and sometimes reassignment surgery.
- 5.16 The process of diagnosis and treatment can take anything from a matter of months to a period of years. The initial diagnosis may be followed by a real life experience which is usually supported by hormone therapy. The real life experience is currently a prerequisite to obtaining a gender recognition certificate and to obtaining gender reassignment surgery in the UK. Some people also choose other pathways including paying for procedures at private clinics e.g. breast reduction can be undertaken without hormone therapy.
- 5.17 Throughout the transitioning period managers will need to meet regularly with the

individual and agree a clear plan of action to consider the following issues:-

- Discuss the impact on their role now and following transition. It is not permitted to suggest a change in role as this will constitute discrimination. Every effort must be made to ensure that the individual can continue as before. However some employees may themselves wish to suggest a temporary change of deployment – e.g. from a public-facing role to an alternative support role. Efforts should be made to accommodate this if requested but staff must never be pressured into such a move or denied the opportunity to move back when they feel ready;
- Practical issues regarding the use of and access to facilities post transition.
- Agreeing a procedure for adhering to any pre-required dress code;
- The expected timescale of absence for the medical and surgical procedures and medical treatment they may choose to undergo;
- Communication to colleagues and disclosure – who and when;
- How to handle any potential problems, confidentiality, disclosure;
- Support available and who will provide this;
- Amending Records – paper and electronic, change of title and/or name.

5.18 Trans people undergoing medical and surgical procedures related to gender reassignment may require time off from work, and this should be considered in accordance with the UHL Special Leave Policy. Typically there can be a period of one or more years before the individual is accepted for reassignment surgery and the recovery time required for this will vary greatly from one week to around 12 weeks, depending on the nature of the surgery undertaken. There is no specific minimum or maximum time employers should grant to a person undergoing medical and/or surgical treatment related to their gender reassignment treatment. The service will show the same flexibility during this time as for someone undergoing any other significant operation. Individuals may also wish to apply for flexible working options to support their treatment and recover.

5.19 Complications may arise as a result of medical treatment, resulting in prolonged incapacity for work. As with any other long-term illness the individual will be supported and monitored by Occupational Health, their GP and local management. If incapacity continues beyond normal expectations for the process undergone, consideration will be given to suitable redeployment for the Trans employee, retirement on medical grounds, or dismissal in the same way as any other person who becomes unfit for employment.

5.110 In almost all circumstances the Sex Discrimination Act applies to everyone who is “planning to undergo, undergoing or has undergone” gender reassignment. This applies to all aspects of employment, vocational education and the provision of goods, facilities, services and housing. There are almost no exceptions, and those “Genuine Occupational Qualifications” (GOQs) which were originally written into the legislation have been set aside by the Employment Appeals Tribunal when tested. The GOQs also do not apply when an employee has obtained legal recognition under the Gender Recognition Act, as they are then treated as a

member of their acquired gender for all purposes in law. This means that although the law may appear to contain a GOQ relating to shared accommodation, it should not be assumed that this can be automatically applied.

Managers would need to be able to show that they have explored all reasonable means to attempt to work around any aspects of shared staff accommodation which would prevent a Trans person who has not undergone genital reassignment from sharing accommodation with people of their acquired gender. Usually there are simple and low cost means that can be found to preserve privacy and dignity, and it should be remembered that putting these in place will most likely be of benefit to all staff.

Trans people who have attained legal recognition must always be accommodated according to their acquired gender, regardless of their stage of treatment. Trans people who have not obtained legal recognition, but who have commenced permanent transition to their new gender, must never be required to use accommodation and facilities (including toileting and bathing facilities) intended for members of their birth gender.

- 5.111 There are only very limited circumstances where a Genuine Occupational Qualification (GOQ) might lawfully apply – and even these exceptions cease to apply when an applicant has a Gender Recognition Certificate. Following legal recognition of an individual, the entire body of employment law will be interpreted on the basis that they are regarded, for all purposes, as a full member of their acquired gender. This means that a male to female transsexual person (a transsexual woman) could only be lawfully discriminated against in a situation where it would be lawful to discriminate against any other woman. The fact that the law lists any GOQs at all doesn't mean that they necessarily apply in every circumstance. Some GOQs have been set aside by Employment Appeal Tribunals and higher courts dealing with specific cases.

In order to lawfully decide that a post is not open to someone who is in the process of transition or has not obtained a Gender Recognition Certificate the exclusion must be shown to be objectively proportionate as a means of achieving a legitimate aim (e.g. accommodating staff in sleeping accommodation whilst maintaining their privacy, dignity and safety). An employer would need to show that there was no other way of accommodating a Trans employee alongside others within the available premises to achieve that goal. For these reasons it is advisable to assume by default that Trans people are eligible for jobs and to seek expert advice in any rare circumstances where you think otherwise. If you have professionally assessed that a GOQ does apply to the post, it would be best practice to state that in the job description and person specification, and include the reasons why.

Trans people are not under any obligation to identify themselves as such in applications, at interview or on recruitment – especially if they have received legal recognition. Therefore, by clearly stating the limited circumstances in which you have determined you would not be able to employ them, you offer the opportunity for such people to qualify themselves out.

However, as stressed above, you must be able to show that you have genuinely explored ways to overcome the obstacle that engages the GOQ and that you have exhausted every possibility. Doing this in a transparent and honest fashion is the best way of avoiding / defending possible claims of unlawful discrimination.

- 5.112 Unless the individual specifically asks for a change in role or work area this should not be discussed, unless as in 5.10, the role requires a GOQ. Every possible effort must be made to ensure that the individual can continue in their role. This means making specific adjustments so that they can work in an environment that is inclusive and promotes mutual respect.
- 5.113 There is no general need or obligation to inform colleagues, clients or the public that a person is undertaking gender reassignment. Such information may be considered appropriate where the relationship with that individual was established prior to their change of gender and is to continue. In such a case an explanation may be considered necessary, however the manager should discuss and agree with the Trans person if and how the information should be given.
- 5.114 Any deliberate or inappropriate release of confidential information resulting in a Trans member of staff being identified against their stated wish, whether internally or externally, will be regarded as gross misconduct and subject to appropriate disciplinary action.
- 5.115 It is recommended that the Trans person takes the lead in informing those who need to know and the individual should be assisted in deciding how this is to be done. In some circumstances the Trans person may choose to make a personal disclosure to colleagues. In this case the HR Representative, Line Manager (if they are already aware of the situation) will need to know when the disclosure is to take place and the depth of the disclosure so they can agree and provide the appropriate support for both the individual and the wider team.
- 5.116 The Line Manager will ensure that education takes place on two levels: general information about gender change and a specific briefing to outline the details of the person involved. Both the individual and the manager(s) should be provided with information on the process to ensure there is a mutual understanding about what needs to be done. At the point of public change in gender, it is common for Trans people to take annual leave and then return in their new name and gender role. This may be a useful opportunity to brief staff ready for their return.
- 5.117 Staff should recognise that Trans people are not only gender variant, but may also be people of ethnicity, be lesbian, gay or bisexual, of different ability, age etc. and that they may hold beliefs about religion and the world in the same way as anyone else. Staff should acknowledge that Trans people may also face oppression because of any one or more of these factors.

5.2 RECORD KEEPING

- 5.21 At the point when the person makes their transition public all documents, public references (such as telephone directories, e-mail accounts, circulation lists, rotas, Electronic Staff Records) and employment details should be amended to reflect the acquired gender of the person. It should also be undertaken following discussions with the person and their manager and HR.
- 5.22 Where documents have been seen and copies taken at the point of starting employment (such as a birth certificate) every effort should be made to replace those with equivalent documents in the new name and gender. This will prevent any breach of confidentiality.
- 5.23 In some instances however, it may be necessary to retain records relating to an individual's identity at birth, for example, for pension or insurance purposes prior to acquiring gender recognition. Once a person has obtained a Gender Recognition Certificate however these **MUST** be replaced with the new birth certificate details.
- 5.24 Access to records showing the change of name and any other details associated with the individual's Trans status, (such as records of absence for medical treatment) must be restricted to staff who need the information to do their work.
- 5.25 Once a person has obtained a Gender Recognition Certificate there must be no disclosure of this information without the express written permission of the individual. As previously stated this constitutes a criminal act, subject to a fine.
- 5.26 Trans people in employment may choose voluntarily to disclose information at a secondary level, for example, answering an equal opportunities questionnaire, or asking for support from a line manager. Again, strict confidentiality should be observed as further disclosure must not be made without the express written permission of the individual.

5.3 DISCLOSURE AND BARRING SERVICE (DBS) CHECKS

- 5.31 Where a post is subject to a Disclosure and Barring Service Check, the DBS process requires documentation of an individual's identity to be verified. Because this process would essentially disclose an individual's gender, the bureau has now devised a process which allows Trans people to pass their details onto the DBS without first revealing them to the employer.
- 5.32 The DBS has a separate application procedure, which allows Trans applicants to exclude previous names from the Disclosure Application Form. Applicants however will still be required to send details of their previous identity in a

separate letter directly to the 'Sensitive Casework Manager' within the DBS. The DBS will then check the data sources held against both current and previous names. This avoids the need for disclosure about gender history or former name to the employer at the application stage, but allows the DBS to carry out the requisite checks against any previously held identities.

- 5.33 It should be noted that where a conviction or (in Enhanced Disclosure cases) other relevant information has been recorded in a previous name, this will be revealed on the Disclosure and as such details of any previous identity may be revealed. Where there are no convictions recorded, the details of any previous names that have been provided directly to the DBS will not be revealed on the Disclosure.
- 5.34 Trans applicants wishing to take advantage of this separate procedure should contact the DBS for further details.

5.4 LEGISLATIVE COMPLIANCE

- 5.41 In 1996 it was made unlawful to discriminate against Trans people in the workplace. In 1999, gender reassignment treatment was made a legal right on the NHS. In 2002, the European Court of Human Rights established that Trans people should be afforded legal status in the gender that they live in, and resulted in the Gender Recognition Act 2004.

The Equality Act 2006 amends the Sex Discrimination Act 1975 to place a statutory duty on all public authorities, when carrying out their functions, to have due regard to:

- To eliminate unlawful discrimination and harassment
- To promote equality of opportunity between men and women

- 5.42 The main pieces of legislation are the Gender Recognition Act (GRA) 2004, the Sex Discrimination Act (SDA) 1975 and the Equality Act (2010)

The GRA gives legal recognition of a persons' acquired gender for all legal purposes for people who satisfy the Gender Recognition Panel that they:

- have or have had gender dysphoria, and
- have lived in the acquired gender for two years prior to the application, and
- intend to live permanently in the acquired gender.

The Gender recognition panel or the Secretary of State; can also apply for medical evidence, marital status and other information, which must be given for an application to be successful.

Following a successful application, a Trans person will acquire the rights and responsibilities of their acquired gender from the date of recognition.

The Sex Discrimination (Amendment of Legislation) Regulations 2008 extended Part III of the Sex Discrimination Act 1975 to render discrimination against Trans people in the provision of goods, facilities, services and housing unlawful.

In employment and related fields and vocational training (including further and higher education), for people who intended to undergo, are undergoing or have undergone gender reassignment. This is reiterated by the Equality Act (2010)

5.43 The wide range of other legislative provision which relates to gender identity also includes:

- The Employment Rights Act 1996
- The Human Rights Act 1998
- The Pensions Act 1995
- The Protection from Harassment Act 1997

5.44 Gender Recognition Certificates

Trans people who have officially changed their name, have been living full-time in their acquired gender as a man or a woman for over 2 years and intend to do so permanently may go through a formal process of applying for a Gender Recognition Certificate (GRC).

This is a legal process set out in the Gender Recognition Act . It enables those who were born in the UK to have a new birth certificate. Once a person has their GRC, they must be regarded as a member of their new gender for all legal purposes. That includes all legal records. Surgery or any other gender reassignment treatment such as hormone therapy is NOT a pre-requisite for a person to obtain a Gender Recognition Certificate.

The gender recognition process ensures that Trans people are afforded all the rights and responsibilities appropriate to that gender, from that point forward. In addition the Data Protection Act gives protection by ensuring no information is communicated to others without prior written permission.

Managers should bear in mind that if such an individual is in possession of a Gender Recognition Certificate, it is unlawful to disclose their gender history without their express written consent.

5.5 HELP AND ADVICE

- 5.51 Managers can seek advice from the UHL Equality Team. The telephone number for the service is **0116 258 4382** or email, equality@uhl-tr.nhs.uk.
- 5.52 Managers can seek advice from Human Resources via the Generalist Helpline number **0116 258 5495** or email, HRGeneralistAdvice@uhl-tr.nhs.uk.

6 EDUCATION AND TRAINING REQUIREMENTS

- 6.1 Face to face Equality and Diversity training will include Trans issues going forward and the Equality and Diversity e-learning module will be developed to include the same.
- 6.2 Managers should consider specific Trans training for staff if any members of the team are transitioning.
- 6.3 If a training programme is developed for staff in response to a member of staff transitioning, it is good practice to involve any Trans staff in the planning and design phases, should they choose to be involved. Keep in mind that some Trans staff may choose not to be publicly identified as such; when consulting, confidentiality is paramount, until they indicate that they are comfortable being “out”.

7 PROCESS FOR MONITORING COMPLIANCE

- 7.1 The numbers of Trans staff will be monitored through the staff Electronic Record System (ESR) and through the Recruitment and Selection data. This will be a self declaration process and be reported as part of annual sharing of information on the workforce in accordance with the Equality Act 2010.
- 7.2 Feedback will be reviewed via:
- The NHS Staff Survey Results
 - the confidential Anti-Bullying and Harassment Advisor Service.
 - The confidential Disability Advisory Service
 - The confidential Equality Mailbox

- 7.3 In future The Equality Team will be setting up a LGBT (Lesbian, Gay, Bisexual, and Trans) Network for staff so feedback will also come via this group.

8 EQUALITY IMPACT ASSESSMENT

- 8.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
- 8.2 As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

9 SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES

- Anti-Bullying and Harassment UHL Policy **(B5/2016)**
- Disciplinary UHL Policy **(A6/2004)**
- Disability UHL Policy **(B31/2011)**
- Freedom to Speak Up Raising Concerns (Whistleblowing) UHL Policy **(A15/2001)**
- Staff Grievance and Disputes UHL Policy **(A7/2004)**
- Sickness and Management UHL Policy **(B29/2006)**
- Trans A practical guide for the NHS - This is recommended reading for more detailed information and guidance
- Employing and Retaining Trans People -
- Press For Change
- Gendys Network
- Gender Trust
- TransBareAll
- Christine Burns MBE Plain Sense Ltd

10 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW

- 10.1 This is version 2 of the Gender Reassignment (Staff) Policy. It replaces version 1 which was published in 2011.
- 10.2 This version was produced by the Equality and Diversity Lead in August 2018. The next review will be in August 2021.

POLICY MONITORING TABLE

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements Who or what committee will the completed report go to.
Issues brought to the Equality Team	Equality Team	Monitoring of issues raised	Quarterly	Discussed at Equality Advisory Group meetings and Equality Board
Grievances	Equality Team and HR Team	Monitoring of grievances raised	Annually	Recorded as part of annual Equality reports
Bullying and harassment cases via the helpline	Equality Team	Monitoring of client cases	Quarterly	Recorded as part of quarterly Anti-Bullying reports
Issues taken to Occ Health	Occupational Health	Monitoring of client cases	Quarterly	Recorded as part of quarterly reports provided to Anti-Bullying Stakeholders
AMICA – support for staff that are transitioning	AMICA	Monitoring of client cases	Quarterly	Recorded as part of quarterly reports provided to Anti-Bullying Stakeholders and incorporated into Annual Anti-Bullying report