

Supporting Trans, Non-Binary and Intersex Employees Policy			
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1.0 INTRODUCTION

- 1.1 Primary Care 24 is committed to equality for all staff and recognises the diversity of people, their needs and choices as individuals. As part of this commitment Primary Care 24 are dedicated to promoting equal treatment and protection at work for any Primary Care 24 staff who identify as trans, non-binary, intersex or who are transitioning while working for Primary Care 24 in any capacity (employee, worker, agency, volunteer).
- 1.2 The aim of this policy is to support Primary Care 24 in their commitment to preventing discrimination, valuing diversity and championing inclusion. Promoting a culture that actively values difference where people from different backgrounds and experiences can bring valuable insights to the workplace and enhance the way we work.
- 1.3 Primary Care 24 recognises the evidence for the need for this policy, and for improved awareness due to the inequalities recognised to be faced by trans, non-binary and intersex people in the workplace in the UK. The Stonewall 2017 key findings can be viewed here <https://www.stonewall.org.uk/sites/default/files/lgbt-in-britain-trans.pdf>

2.0 PURPOSE

- 2.1 The purpose of this policy is to assist in creating an inclusive and diverse work environment where the respect and needs of trans, non-binary, intersex and transitioning people are met and supported and a culture where trans, non-binary, intersex or transitioning staff can come to work without fear of discrimination, victimisation or harassment
- 2.2 This policy will provide guidance for Primary Care 24 staff in understanding gender reassignment, issues that are frequently encountered and how to support people who are transitioning, trans, non-binary or intersex.

- 2.3 This will ensure staff who are trans, transitioning or who have transitioned are aware of the support that they should receive.
- 2.4 Managers will have guidance in how to support someone who decides to transition while employed by Primary Care 24.
- 2.5 To celebrate our diverse workforce and promote inclusion and promote and foster positive relationships between all staff

3.0 SCOPE

- 3.1 This policy applies to all staff working at Primary Care 24. This includes employees who are substantive or fixed term, workers including agency, locum, temporary staff and volunteers.
- 3.2 The policy applies to staff who consider themselves to be trans, transitioning, non-binary, intersex or are considering or planning to undertake gender reassignment.
- 3.3 This policy provides managers with guidance on supporting a member of staff who is undertaking gender reassignment (transitioning).
- 3.4 Contractors and volunteers working on Primary Care 24 premises are expected to act in accordance with this policy to treat trans, non-binary, intersex and transitioning staff with respect and dignity.
- 3.5. This policy refers to trans, transitioning, non-binary and intersex people throughout; for the purpose of this policy these terms are used to describe all people who have a gender identity which differs from their sex at birth and the more fluid identities of 'genderqueer' people. Genderqueer – also known as non-binary, is a term that included gender identities that are not exclusively masculine or feminine. The term Genderqueer is further defined in the section – Definitions.

3.6 It is recognised that terminology and definitions do change on occasion and this policy will be updated to reflect these changes wherever possible.

4.0 RESPONSIBILITIES

4.1 All Primary Care 24 staff are responsible for:

- acting in accordance with this policy
- acting fairly and compassionately, treating colleagues who identify as transgender, non-binary or intersex with dignity and respect
- treating and respecting other staff as individuals
- respecting colleagues' privacy and dignity
- ensuring they do not discriminate, harass or intimidate colleagues or encourage other people to do so towards anyone who is transgender, non-binary or intersex
- taking account of their own behaviour and its effects on colleagues
- being mindful of their use of language and behaviour that could be perceived as, or have the effect of being hostile, demeaning or discriminatory and language that could cause upset or offence
- undertaking relevant equality and diversity training
- engaging in routine discussion regarding equality, diversity and inclusion as part of regular supervision
- informing their line manager if they become aware of any behaviour, particularly demonstrated by other staff that undermines this policy
- ensuring any gender identity related incident is logged on the Primary Care 24 Risk Management System.

All staff are encouraged to self-report information regarding their identification with a protected characteristic to support the organisation to respond in the most appropriate ways to the needs of its diverse workforce.

4.2 Board:

- ensuring the effective implementation and management of this policy

- demonstrating Primary Care 24's commitment to equality, diversity and inclusion through the Primary Care 24's business plans, vision and values and objectives
- ensuring that Primary Care 24 is free from harassment, victimisation and discrimination by making staff fully aware of their responsibilities and expectations with regard to their conduct and practice.

4.3 Line Managers:

- ensuring that staff have read and understood this policy
- challenging any member of staff who is discriminatory towards a person who is or is perceived to be transgender, non-binary or intersex and manage this in accordance with Primary Care 24's Disciplinary Policy
- being mindful of using inclusive language
- managing staff in a way that values and celebrates diversity and provides equality of opportunity
- incorporating equality, diversity and inclusion as a standard agenda item for discussion in supervisions and team meetings regularly
- acting as role models to their staff in treating all colleagues with dignity and respect
- invoking the zero tolerance policy for patients, carers, relatives or the public where discrimination against a member of staff who is transgender, non-binary or intersex takes place and does not cease upon initial requests to do so
- maintaining a safe environment for transgender, non-binary and intersex people to work
- encouraging staff, particularly those in disadvantaged groups to take up learning and development and career progression opportunities to enhance promotion and career development

4.4 PC24 Lead for Equality, Diversity and Inclusion:

- supporting the Senior Management Team and leaders across Primary Care 24 to develop and implement the Equality Delivery System (EDS2) and equality, diversity

and inclusion programmes of work that will improve equality outcomes within the organisation's workforce

- ensuring the leadership team has accurate and up-to-date information on current governance and compliance requirements in relation to supporting a staff member who is transgender, non-binary or intersex
- working closely with internal managers and leaders to provide expertise and advice on ensuring all the organisation's policies, processes, strategies and operations reduce discrimination and promote equality for all staff
- leading the development and implementation of local training and awareness programmes to raise the profile of gender identity equality
- liaising with the broader health and social care community regarding equality, diversity and inclusion and supporting the organisation to implement best practice
- monitoring Primary Care 24's compliance with standards and regulations
- providing active support for staff with protected characteristics and from disadvantaged groups

4.5 Human Resources Department:

- ensuring that advice and guidance is provided to staff on their rights and responsibilities under this policy
- ensuring that the concept of equality and diversity is an integral part of all of the employment policies
- ensuring that transgender, non-binary and intersex staff are given equal access to internal promotion opportunities
- ensuring that transgender, non-binary and intersex staff are given the opportunity to request flexible working practices and that these practices are promoted throughout PC24
- ensuring the regular review and improvement of internal processes, performance and outcomes in relation to workforce equality

5.0 DEFINITIONS

5.1 A list of useful definitions of current terminology

- **Androgyny** – The combination of masculine and feminine characteristics, where a person is neither clearly masculine or feminine in appearance. In the case of gender identity, terms such as non-binary, gender queer or gender neutral are more commonly used to refer to someone who is androgenous.
- **Cisgender** – When the sex a person was at birth is the same as the gender the person identifies with (Cis woman / female, Cis man / male)
- **Cross Dressing** – When a person wears items of clothing commonly associated with the opposite sex. Cross-dressing is a form of gender expression, not gender identity.
- **Gender Dysphoria** – When an individual feels that his or her sex at birth does not match their gender identity. This is called 'gender dysphoria' and is a recognised medical condition. A person can feel severe anxiety and stress due to gender dysphoria.
- **Gender** – This describes characteristics such as appearance, presentation and behaviour to identify gender (not sex). Characteristics could be masculine, feminine or androgynous.
- **Genderqueer** – also known as non-binary, is a category that includes gender identities that are not exclusively masculine or feminine. Genderqueer people may identify as either having an overlap of, or indefinite lines between, gender identity; having two or more genders (being bigender, trigender or pangender); having no gender (being agender, nongendered, genderless, gender free or neutrois); moving between genders or having a fluctuating gender identity (genderfluid); or being third gender or other-gendered, a category which includes those who do not place a name to their gender.
- **Gender Reassignment** – Gender reassignment refers to individuals who either/or:
 - have undergone, intend to undergo or are currently undergoing gender reassignment (medical and surgical treatment to alter the body)
 - who do not intend to undergo medical treatment but wish to live permanently in a different gender from their sex at birth.

- **Gender variance**, or gender nonconformity – Gender variance or gender nonconformity is behaviour or gender expression by an individual that does not match masculine and feminine gender norms. People who exhibit gender variance may be called gender variant, gender non-conforming, gender diverse, gender atypical or genderqueer, and may be transgender or otherwise variant in their gender identity. In the case of transgender people, they may be perceived, or perceive themselves as, gender nonconforming before transitioning, but might not be perceived as such after transitioning. Some intersex people may also exhibit gender variance.
- **Intersex** – A term used to cover a variety of different conditions where a person has sexual or reproductive anatomy that is outside of the definitions for male or female.
- **Non-Binary** – Non-binary people do not identify specifically as male or female and identify outside of usual gender binary.
- **Sex** – Determined by a person's physical traits, hormone levels, chromosomes, genitals, internal sex organs, and secondary sex characteristics.
- **Sexual Orientation** – Sexual orientation is about who a person is attracted to and wants to have relationships with. Sexual orientations include gay, lesbian, straight, bisexual, and asexual. Sexual orientation is about who a person is attracted to romantically, emotionally and sexually. Sexual orientation is different than gender identity; gender identity isn't about romantic, emotional or sexual attraction – it is about who a person is (male, female, non-binary / genderqueer etc).
- **Transgender** – Also called 'trans'. This is an umbrella term for people who do not always identify with the sex or gender they were born with. Trans people may live all of, or part of, the time in a gender which is different from the sex they were born with. A person can self-identify in a variety of ways which are individual to them, it does not need to involve a medical process or formal documentation. The term 'trans' is also becoming more frequently used as is 'gender variant'. The term 'transsexual' is less common, but an older service user group may recognise this term.
- **Trans man / Trans woman** – A trans man is someone who was identified as female at birth and is now male. A trans woman is someone who was identified as male at birth and is now female.
- **Transitioning** – In relation to gender reassignment, transitioning is the process of changing a person's gender presentation and/or sex characteristics to be in

accordance with a person's internal sense of gender identity. For transgender and transexual people, this process commonly involves gender [reassignment therapy](#) (which may include [hormone replacement therapy](#) and [sex reassignment surgery](#)). Transitioning might involve medical treatment, but it does not always involve it.

- **Transphobia** – A term used to describe a person with a fear or hatred of people who are transgender.

5.2 Types of Discrimination that are unlawful in the context of gender identity

- **Direct Discrimination** – Direct discrimination occurs when someone is treated less favourably than another person because of their gender identity or gender reassignment.
- **Discrimination by association** – This is direct discrimination against someone because they associate with another person who is transgender, non-binary, intersex, or who has undergone, or is going to undertake gender reassignment.
- **Perceptive Discrimination** – This is direct discrimination against an individual because others think they are transgender, non-binary, or intersex. It applies even if the person is not actually transgender, non-binary or intersex.
- **Indirect Discrimination** – Indirect discrimination can occur when a condition, rule, policy or even a practice that applies to everyone, happens to disadvantage someone because of their gender identity or gender reassignment.
- **Harassment** – Harassment is unwanted behaviour received due to being transgender, non-binary or intersex. Behaviour could be deemed offensive or make the individual feel humiliated or intimidated. This type of behaviour could be linked to other forms of discrimination. It can be a one off or isolated incident.
- **Victimisation** – Victimisation is when an employee is treated badly and suffers detriment because they have made a complaint about discrimination on the grounds of gender identity or gender reassignment or have supported someone who has been a victim of discrimination on this basis
- **Hate Crime** - A hate crime takes place when someone is subjected to hostility or prejudice because of actual or perceived characteristics – this can include someone's

gender status including being trans, transgender, intersex or non-binary. Hate becomes a crime if the victim or another person believes an incident to be motivated by a hatred of someone due the victim having actual or perceived characteristics. It does not matter if the victim or other person does not belong to the group with those attributes. Hate crimes can involve verbal or physical abuse, leaving offensive material around, assaults or threatening behaviour or property damage. Hate crimes can also include text messages, and messages posted on online chat rooms. If any member of staff is concerned that they have been subjected to a hate crime (whether in the workplace or wider community), they should be supported to report their concerns to the police even if they are making allegations against another member of staff. Staff who are concerned about hate crimes should be signposted to organisations that can provide advice or support such as [Stop Hate UK](#), [Stonewall](#), [GALOP](#) or other LGBTQ+ support organisations.

6.0 THE LEGAL FRAMEWORK

6.1 The Gender Recognition Act 2004

- 6.1.1. This legislation gives legal recognition to people who are transgender who currently have or have had gender dysphoria. Currently people must live a minimum of two years under medical support in the gender they wish to identify as, after two years the person is able to apply for a gender recognition certificate. If the certificate is approved the transgender person can request a new birth certificate and will be given a Gender Recognition Certificate (GRC). From this point onwards they legally identify as the approved gender. It is unlawful to ask to see a Gender Recognition Certificate. A birth certificate or alternative identification document such as a passport must be used if proof of identity is required.
- 6.1.2 People who are non-binary or intersex don't have any legal recognition under the current Gender Recognition Act. This continues to be an area of national debate.

6.2 The Equality Act 2010

6.2.1 The Equality Act 2010 states it is unlawful to discriminate against a person because of gender reassignment; one of the 9 protected characteristics under the Act. A person does not need to have undergone surgery in order to be protected under the gender reassignment characteristic. A person can be at any stage in their transitioning process from initial conversation or decision to transition, through to completed transition. While a wide scope of people fall under the gender reassignment heading, those who do not propose to change their gender in any way fall outside of the scope. Discriminating against someone who is transgender also extends to discrimination by perception and by association. It is important to recognise that the terminology used in the Equality Act 2010 is now dated and 'trans' or 'transgender' is preferred to 'transsexual'.

6.2.2 The Equality Act 2010 states:

- A person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.
- A reference to a transsexual person is a reference to a person who has the protected characteristic of gender reassignment.
- In relation to the protected characteristic of gender reassignment:
 - a) a reference to a person who has a particular protected characteristic is a reference to a transsexual person;
 - b) a reference to persons who share a protected characteristic is a reference to transsexual persons.

6.2.3 Intersex people (where a person has sexual or reproductive anatomy that is outside of the definitions for male or female) are not covered by the Equality Act explicitly however individuals should not be discriminated against or victimised because of their gender or perceived gender.

6.3 The Public Sector Equality Duty (PSED) 2011

6.3.1 The Equality Act 2010 also places a duty on organisations under the Public Sector Equality Duty (PSED). This is in place to promote equal opportunities and eliminate discrimination deemed as unlawful between those who identify with a particular protected characteristic and those who do not.

6.3.2 The Public Sector Equality Duty states the need for NHS and other public sector organisations to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

6.4 The General Data Protection Regulation (GDPR) 2018

6.4.1 In 2018, the General Data Protection Regulation (GDPR) superseded the Data Protection Act 1998.

6.4.2 Primary Care 24 will handle all information to a transgender, non-binary or intersex person using services in accordance with the GDPR and with the Gender Recognition Act and any information regarding the individual will only be shared with others with the documented consent of the individual themselves.

6.5 Gender Recognition (disclosure of information) Order 2005

6.5.1 Staff members can be prosecuted if a person holds a Gender Recognition Certificate and their personal history is disclosed without their permission. This is a criminal offence and can carry a financial penalty in line with the Data Protection Act 1998.

6.6 Human Rights Act 1998

6.6.1 The Human Rights Act 1998 brings the rights protected by the European Convention on Human Rights (UHR) into UK law. Under the UHR every individual has protected rights. The rights which most closely support transgender, non-binary and intersex people in relation to this policy include:

- Right to life
- Freedom from torture and inhuman or degrading treatment
- Respect for your private and family life, home and correspondence
- Freedom of expression
- Protection from discrimination in respect of these rights and freedoms

6.6.2 Where there is any doubt as to the current legislation in relation to the care and treatment of a transgender, non-binary or intersex person, the **INSERT JOB TITLE** or the Caldicott Guardian for Primary Care 24 should be consulted to ensure the most recent legislation is adhered to and boundaries understood.

6.7 The Care Act 2014

6.7.1 This sets out the responsibilities of local authorities in relation to safeguarding adults. In particular, Sections 42-47 gives more detail of the arrangements that need to be in place to help safeguard adults at risk. The application of the Act is set out in the [Care Act Statutory Guidance 2018](#).

6.8 Criminal Justice Act 2003 – Section 146

- 6.8.1 This increases sentences for crimes (such as harassment criminal damage) where the offender shows hostility towards someone because they are transgender (or believed to be). This also covers crimes directed at someone because of their actual (or perceived) disability, sexual orientation. Other characteristics are protected elsewhere in the Act.

7.0 PROCEDURE

7.1 Recruitment

- 7.1.1. Primary Care 24 Recruitment and Selection policy and process ensures that we select the best person for any job based on merit alone and free from bias on the grounds of factors relating to protected characteristics (such as age, disability, gender or race) that are not relevant to the person's ability to do the job.

Recruiting managers operate using Primary Care 24's recruitment and selection policy which provides a fair and equal application process for all candidates. Any information relating to a person's protected characteristics are not available to recruiting managers until the point of interview, preventing unconscious bias when candidates are being shortlisted for interview.

During the appointment and recruitment process, no judgement or discrimination towards any applicant, or prospective applicant must occur. Primary Care 24 welcomes applications from transgender, non-binary and intersex people and from people who may decide to transition while in employment. All people, regardless of their gender identity, are entitled to the same high quality, non-discriminatory recruitment and selection process.

7.2 Occupational Health

7.2.1 Gender reassignment has no Occupational Health implications, with the exception for the need for time off of work for appointments and recovery following any procedures or investigations. Primary Care 24 routinely has an Occupational Health screening for all candidates provided with a conditional offer of employment. In their discussion with Occupational Health the staff member may provide details of their history or it may become apparent through examination of the person or their medical records. The report from Occupational Health will disclose if someone is medically fit to work or not. Information will not be disclosed about the transition unless there is a direct reason linked to the change in gender which will impact of the person's ability in the role. In the event of this occurrence consent will be sought by Occupational Health prior to any report being returned to Primary Care 24.

7.3 Disclosure and Barring Service check (DBS)

7.3.1 A majority of positions within Primary Care 24 require a standard or enhanced DBS check prior to employment being offered. This application for a DBS check requires all previous names and aliases used by the individual, which is then checked and signed by the registered person. Understandably this can cause anxiety and worry for a job applicant who is transgender, non-binary or intersex. In order to ensure the applicant's dignity and privacy, there are detailed steps included on the DBS website they can follow which does not weaken or change the outcome results in any way. Only if an applicant has a criminal record prior to transitioning to a new name and gender will this show on the DBS report received.

Contact details for sensitive applications are: 0151 676 1452 or email sensitive@dbs.gsi.gov.uk

7.4 Recruitment Checks

To comply with pre-employment checks:

- NHS jobs applicants are not required to state any former names
- NHS identity verification is required, however the scope of the documentation allowed should enable applicants to bring documents which are in their acquired gender.
- Certificates and qualification information are required for some positions and may contain the previous name of the applicant. Where this is the case confidentiality must be ensured and respected, with sufficient measures taken to ensure it is maintained.
- Applying for gender recognition is completely optional for transgender people. Transgender, non-binary and intersex people who do not have gender recognition certificate:
 - can still change their name, title and gender on almost all records held by organisations
 - can still use the toilets, changing rooms and other single-sex facilities of their choice
 - can still get a driving licence and passport with their choice of male or female gender marker
 - are still entitled to respect for their gender identity from employers and other organisations
 - are still protected from discrimination, harassment and victimisation by equality legislation
 - information about them is still confidential and protected by the Data Protection Act
 - For transgender people who are successful in their application for a Gender Recognition Certificate (GRC), they will receive a full GRC and will also be entitled to a new birth or adoption certificate. **A Gender Recognition Certificate must never be requested as proof of identity. This is unlawful.**
 - The new birth certificate can be presented as proof of identity. **This must not be requested; it can only be volunteered by the individual.**
 - It may be harder for people from non-European Union countries or people who want to remain married or in a civil partnership after their transition to get identification (legal recognition is not able to be given unless the marriage is annulled). In these instances, flexibility should be given in providing a passport or utility bills with the preferred detail shown.

- Some examining bodies are not willing to provide certificates under a new name. Primary Care 24 requires proof of qualifications for certain roles within the organisation, for example Registered Nurses. In instances where the name shown is under a previous identity, the applicant will need to supply the required information in order to be appointed to the post. A discussion should take place to confirm the process of copying and recording the certificate information on the system to ensure confidentiality is maintained and that the person providing the information feels safe. Where qualification or certificate information which is required is not provided, Primary Care 24 holds the right to withdraw a conditional offer of employment.

7.5 Seeking and Providing References

- 7.5.1 Primary care 24 requires references for jobs held previously, and this could be difficult for a transgender, non-binary or intersex person if they were known under their previous identity in past job roles.
- 7.5.2 The person will be made aware of policies supporting equality, diversity and inclusion to ensure they feel safe providing reference details. Where reference details are withheld, a conditional offer of employment will be withdrawn by Primary Care 24.
- 7.5.3 Where Primary Care 24 is asked to provide a reference for a transgender, non-binary or intersex member of staff to another organisation, no mention will be given to the gender identity status of a person. The reference will be completed in the same manner as it would be for any other staff member.

7.6 Payroll and Record Keeping

- 7.6.1 Where a name/gender change takes place during employment with Primary Care 24, suitable documentation will be required as evidence. This should be presented to the HR Department for processing securely. **A Gender Recognition Certificate must not be requested as this is unlawful and is a criminal offence.** Accepted documentation includes:

- A letter from the person's Doctor or assigned gender specialist confirming that they are undergoing transition
- A driving licence or passport or another suitable evidence of change of name document.

On receiving this documentation Primary Care 24 will ensure that employment and personal details are amended to reflect the new information provided. This includes the individual's personnel file, HR database record, Primary Care 24's intranet directory entry for the staff member and any other references to the individual which may exist, such as historic intranet publications. This will prevent any breach of confidentiality.

7.6.2 Any previous documentation held about the individual will be replaced with copies of the new personal information, for example replacement birth certificate. It is the responsibility of the employee to provide new versions of documentation.

7.6.3 Any paper staff file or electronic staff file will have information replaced entirely (not crossed out and re-written) in order to maintain confidentiality.

7.7 Pensions

7.7.1 For state pension purposes, any person who is in receipt of a Gender Recognition Certificate will hold a pension in accordance with the gender they are now recognised as; not the sex or gender they were born with. State pension age for these people will be stated on their new birth certificate. Advice should be sought from the Finance Department in confidence for any queries relating to the NHS occupational pension scheme.

On rare occasions prior to gender recognition, records might need to be retained which relate to the gender a person was born as, usually for pension purposes. This only applies where there is no Gender Recognition Certificate; where one is in place new details must be provided.

8.0 Supporting Transitioning Staff

- 8.1 Managers and colleagues are expected to treat the person who is transitioning with respect and dignity. Depending on the individual transitioning, they may wish to identify at the point they start living as their preferred gender or they may prefer an alternative time.

Primary Care 24 will support the member of staff and colleagues with the transition. The transgender person has the right to live in the gender they identify as. There should be a discussion in how the person transitioning would prefer engagement, support and information sharing with their colleagues is managed.

- 8.2 If colleagues purposely use a persons previous name (deadname) or the incorrect gender pronoun ('her, 'his' etc.) or there are any instances of harassment, bullying, victimisation or discrimination due to the transition this will be managed through Primary Care 24 disciplinary policy.

8.3 Workplace Support Plan

- 8.3.1 Primary Care 24 recognises that people who decide to transition will require support to continue to work and to help them through their transition. To ensure both the individual who is transitioning and their line manager are fully aware of and engaged in the process and the needs of the person transitioning, a Workplace Support Plan should be completed. This should be created when the person advises their line manager that they will be transitioning and reviews should take place at agreed intervals throughout and post transition.
- 8.3.2 The member of staff should be given the opportunity to be accompanied by a Trade Union Representative or a colleague at all support planning meetings. The meetings should include discussions about:

- Transition timeframes
- How the manager can support the individual through their transition and anything they need to be mindful of
- The point at which the person will identify as their preferred gender and name
- The point at which the person will commence use of single sex toilets
- The point when colleagues will be informed and how this may best be done. For example, the colleague may wish to advise people themselves or may wish someone else to have this conversation on their behalf.
- Who the main point of contact will be throughout (usually this is the line manager)
- Discussing the dress code and when the individual may wish to dress as the gender they identify as
- Expected timescales and time off for medical procedures
- Remaining in post or relocation and redeployment
- How confidential records and intranet information will be changed and when
- Anything the person transitioning needs to be mindful of, for example when name change takes place colleagues may need time to adjust to saying the correct name

8.4 Briefing Colleagues and Training

- 8.4.1 Briefing colleagues can be a difficult and sensitive time for everyone involved. The Workplace Support Plan should evidence if the person wishes to inform their colleagues or if they would prefer the line manager to undertake the briefing. Primary Care 24 will inform colleagues based on the preference of the transitioning person.
- 8.4.2 It is common for a person to take some annual leave and return to work as their new gender. Depending on the agreement made in the Workplace Support Plan, this may be the time when colleagues are informed in preparation for the return of their colleague. If the person transitioning takes annual leave and staff are already aware, the opportunity should still be taken to refresh staff on appropriate conduct and expectations.

8.4.3 Where there is a need for awareness or training to take place the HR team should be contacted to discuss options depending on the training need.

8.4.4 Primary Care 24 has mandatory e-Learning for equality, diversity and inclusion which staff may benefit from undertaking, which includes elements of LGBT+ awareness. Specific awareness training on gender identity can also be arranged on request.

8.4.5 A specialist Transgender Awareness e-learning is available via the Gender Identity Research and Education Society and three modules can be access here:

<https://www.gires.org.uk/e-learning/transgender-awareness-for-employers-service-providers/>

8.5 Changing Areas and Use of Toilet Facilities

8.5.1 Gendered facilities such as changing rooms, showers and toilets can result in questions for a line manager in supporting a member of staff in their transition period. It can also be daunting for the person transitioning as they may be nervous about what colleagues may say about them using facilities they have not used previously. A person should be able to use the facilities of the gender they identify as at the point where they begin living as that gender, regardless of progress through the transition (or surgeries which may or may not take place).

8.5.2 Managers should allow disabled facilities to be used only if the person is disabled, and not as a workaround as a place for the transgender person to use in place of the facilities allocated to the gender they identify as. This is not acceptable practice or use of facilities.

8.6 Public Facing Roles

8.6.1 Some transitioning people may work in public or patient facing roles, making the changes they are going through unavoidably visible, especially in the early stages. Some staff may prefer to move to a less public facing role while they go through early

stages of transition, or until they transition fully. This should only ever be an option for the staff member undergoing transition at their request.

- 8.6.2 Primary Care 24 fully supports any person who is transitioning or is already fully transitioned to apply for public facing roles. Being transgender must not be a barrier to being appointed into any post.

8.7 Relocation and Redeployment

- 8.7.1 There are a number of reasons why a person working for Primary Care 24 may wish to be redeployed or relocated. Any decision to be relocated or redeployed should be discussed and a suitable length of time given in order all options and preferences can be considered prior to making any decision. Where individuals feel they are no longer able to continue in their current role, redeployment must be considered, and every effort made to find alternative, suitable employment. Where alternative employment is not able to be found after a period of time, then employment at Primary Care 24 may terminate. This is not a redundancy situation.

Line managers should seek advice from Human Resources.

8.8 Dress code

- 8.8.1 Transgender, non-binary and intersex staff are supported to wear the clothes that reflect their gender identity. Staff who are transitioning or have transitioned are subject to the Primary Care 24 dress code in the same way as all staff, and should dress in line with the Primary Care 24 policy.

Primary Care 24 respects the individual needs and well-being of all staff and will support staff decisions on dressing, providing dress code expectations and requirements are met as per policy.

8.9 Time Off For Treatment

- 8.9.1 Primary Care 24 appreciates that time away from work may be required to attend appointments and potentially for surgical procedures. Wherever possible, managers will discuss how much time is anticipated that the individual will need away from work.

Primary Care 24 will support any person who undergoes any surgical or medical treatment in relation to transitioning. Policies will be used to support this including the Attendance Management Policy, Special Leave Policy, Flexible Working Policy and Annual Leave Policy.

- 8.9.2 Time off for medical appointments will be dealt with by the line manager with a degree of flexibility to ensure the person can attend their appointments while patient safety within the service is maintained. People requesting time off for medical appointments which relate to transition will be treated in the same way as people who take time off for any other medical appointment. Where a person works part-time, they should arrange appointments on non-working days wherever possible, or at the beginning of the day. However, Primary Care 24 recognises this is not always possible.

9.0 MONITORING

- 9.1 Implementation of this policy will be monitored by the Quality & Workforce Committee and the committee will make onward recommendation for appropriate action to be taken where the results of equality and diversity monitoring indicate inequality and / or fall below standard equality and diversity practice.

Any changes to legislation or guidelines with regards to transgender people will be reflected through review of this policy to ensure accurate and up to date information is captured and implemented

10.0 GETTING HELP

- 10.1 The Human Resources Department should be contacted for any questions in relation to the implementation of this policy.

11.0 RELATED POLICIES

- 11.1 This policy should be read alongside the:
- Equality & Inclusion Policy
 - Attendance Management Policy
 - Special Leave Policy

12.0 INFORMATION, INSTRUCTION AND TRAINING

- 12.1 All staff should familiarise themselves with the policy. Additional ad-hoc training may be arranged to meet individual and departmental needs.

13.0 EQUALITY AND HEALTH INEQUALITIES

- 13.1 PC24 is committed to an environment that promotes equality, inclusion and a sense of belonging and embraces diversity in its performance as an employer and service provider. It will adhere to legal and performance requirements and will maintain equality and diversity principles through its policies, procedures and processes. This policy has been implemented with due regard to this commitment. To ensure that the implementation of this policy does not have an adverse impact in response to the requirements of the Equality Act 2010 this policy has been screened for relevance during the policy development process and a full equality impact analysis conducted where necessary. PC24 will take remedial action when necessary, to address any unexpected or unwarranted disparities and monitor practice to ensure that this policy is fairly implemented.
- 13.2 This policy and procedure can be made available in alternative formats on request

PC24 will endeavour to make reasonable adjustments to accommodate any employee/patient with particular equality and diversity requirements in implementing this policy and procedure. This may include accessibility of meeting/appointment venues, providing translation, arranging an interpreter to attend appointments/meetings, extending policy timeframes to enable translation to be undertaken, or assistance with formulating any written statements.

14.0 RECORDING AND MONITORING EQUALITY AND DIVERSITY

- 14.1 PC24 understands the business case for equality and diversity and will make sure that this is translated into practice. Accordingly, all policies and procedures will be monitored to ensure their effectiveness.
- 14.2 Monitoring information will be collated, analysed and published on an annual basis. The monitoring will meet statutory duties under the Equality Act 2010. Where adverse impact is identified through the monitoring process PC24 will investigate and take corrective action to mitigate and prevent any negative impact. The information collected for monitoring and reporting purposes will be treated as confidential and it will not be used for any other purpose.

15.0 MAIN REFERENCES

- 15.1 Below is a list of the relevant statutory provisions which influence Primary Care 24's operation in relation to the policy/procedure:
- Equality Act 2010.
 - Health & Social Care Act 2012.
 - Data Protection Act 1998.
 - The Human Rights Act 1998
 - The Gender Recognition Act 2004
 - GDPR 2018
 - Criminal Justice Act 2003



Equalities and Health Inequalities –

Version number: V1

First published: November 2016

To be read in conjunction with Equalities and Health Inequalities Analysis Guidance, Quality & Patient Safety Team, Primary Care 24, 2016.

Prepared by: Quality & Patient Safety Team.

Introduction

The purpose of this Screening Tool is to help you decide whether or not you need to undertake an Equality and Health Inequalities Analysis (EHIA) for your project, policy or piece of work. It is your responsibility to take this decision once you have worked through the Screening Tool. Once completed, the Head of your SDU or the Quality & Patient Safety Team will need to sign off the Screening Tool and approve your decision i.e. to either undertake an EHIA or not to undertake an EHIA.

The Quality and Patient Safety Team can offer support where needed. It is advisable to contact us as early as possible so that we are aware of your project.

When completing the Screening Tool, consider the nine protected characteristics and how your work would benefit one or more of these groups. The nine protected characteristics are as follows:

1. Age
2. Disability
3. Gender reassignment
4. Marriage and civil partnership
5. Pregnancy and maternity
6. Race
7. Religion and belief
8. Sex
9. Sexual orientation

A number of groups of people who are not usually provided for by healthcare services and includes people who are homeless, rough sleepers, vulnerable migrants, sex workers, Gypsies and Travellers, Female Genital Mutilation (FGM), human trafficking and people in recovery. Primary Care 24 will also consider these groups when completing the Screening Tool:

The **guidance** which accompanies this tool will support you to ensure you are completing this document properly. It can be found at:

<http://extranet.urgentcare24.co.uk/>

Equality and Health Inequalities: Screening Tool

A	General information					
A1	Title: Supporting Trans, Non-Binary and Intersex Employees Policy					
A2.	<p>What are the intended outcomes of this work?</p> <p>Primary Care 24 to evidence their commitment to preventing discrimination, valuing diversity and championing inclusion. Promoting a culture that actively values difference where people from different backgrounds and experiences can bring valuable insights to the workplace and enhance the way we work.</p>					
A3.	<p>Who will be affected by this project, programme or work?</p> <p>This policy applies to all staff working at Primary Care 24. This includes employees who are substantive or fixed term, workers including agency, locum, temporary staff and volunteers.</p> <p>This policy applies to staff who consider themselves to be trans, transitioning, non-binary, intersex or are considering or planning to undertake gender reassignment.</p>					
B	The Public Sector Equality Duty					
B1	<p>Could the initiative help to reduce unlawful discrimination or prevent any other conduct prohibited by the Equality Act 2010? If yes, for which of the nine protected characteristics (see above)?</p> <table border="1"> <tr> <td>Yes x</td><td>No</td><td>Do not know</td></tr> </table> <p>Summary response and your reasons: The Equality Act 2010 states it is unlawful to discriminate against a person because of gender reassignment; one of the 9 protected characteristics under the Act. The purpose of this policy is to assist in creating an inclusive and diverse work</p>			Yes x	No	Do not know
Yes x	No	Do not know				

	environment where the respect and needs of trans, non-binary, intersex and transitioning people are met and supported and a culture where trans, non-binary, intersex or transitioning staff can come to work without fear of discrimination, victimisation or harassment		
B2	Could the initiative undermine steps to reduce unlawful discrimination or prevent any other conduct prohibited by the Equality Act 2010? If yes, for which of the nine protected characteristics? If yes, for which of the nine protected characteristics?		
	Yes	No x	Do not know
	Summary response and your reasons:		
B3	Could the initiative help to advance equality of opportunity? If yes, for which of the nine protected characteristics?		
	Yes x	No	Do not know
	Summary response and your reasons: See above		
B4	Could the initiative undermine the advancement of equality of opportunity? If yes, for which of the nine protected characteristics?		
	Yes	No x	Do not know
	Summary response and your reasons: See above		
B5	Could the initiative help to foster good relations between groups who share protected characteristics? If yes, for which of the nine protected characteristics?		
	Yes x	No	Do not know
	Summary reasons:		
B6	Could the initiative undermine the fostering of good relations between groups who share protected characteristics? If yes, for which of the nine protected characteristics?		
	Yes	No x	Do not know
	Summary response and your reasons:		

C	The duty to have regard to reduce health inequalities						
C1	Will the initiative contribute to the duties to reduce health inequalities?						
	Could the initiative reduce inequalities in access to health care for any groups which face health inequalities? If yes for which groups?						
	<table border="1"> <tr> <td>Yes x</td><td>No</td><td>Do not know</td></tr> </table>	Yes x	No	Do not know			
Yes x	No	Do not know					
	Summary response and your reasons: See above						
C2	Could the initiative reduce inequalities in health outcomes for any groups which face health inequalities? If yes, for which groups?						
	<table border="1"> <tr> <td>Yes x</td><td>No</td><td>Do not know</td></tr> </table>	Yes x	No	Do not know			
Yes x	No	Do not know					
	Summary response and your reasons: See above						
D	Will a full Equality and Health Inequalities Analysis (EHIA) be completed?						
D1	<p>Will a full EHIA be completed?</p> <p>Bearing in mind your previous responses, have you decided that an EHIA should be completed? Please see notes. ¹ Please place an X below in the correct box below. Please then complete part E of this form.</p> <table border="1"> <tr> <td>Yes</td><td>Cannot decide</td><td>No x</td></tr> <tr> <td></td><td></td><td></td></tr> </table>	Yes	Cannot decide	No x			
Yes	Cannot decide	No x					
E	Action required and next steps						
E1	<p>If a full EHIA is planned:</p> <p>Please state when the EHIA will be completed and by whom.</p> <p>Name:</p> <p>Date:</p>						
E2	<p>If no decision is possible at this stage:</p> <p>If it is not possible to state whether an EHIA will be completed, please summarise your reasons below and clearly state what additional information or work is required, when that work will be undertaken and when a decision about whether an EHIA will be completed will be made.</p>						

¹ Yes: If the answers to the previous questions show the PSED or the duties to reduce health inequalities are engaged/in play a full EHIA will normally be produced. No: If the PSED and/or the duties to reduce health inequalities are not engaged/in play then you normally will not need to produce a full EHIA.

	<p>Summary reasons:</p> <p>Additional information required:</p> <p>When will it be possible to make a decision about an EHIA?</p>
E3	<p>If no EHIA is recommended:</p> <p>If your recommendation or decision is that an EHIA is not required then please summarise the rationale for this decision below.</p> <p>Summary reasons:</p>

<i>F</i>	<i>Record Keeping</i>		
Lead originator:	Steph Donnelly	Date:	May 2021
Director signing off screening:		Date:	
Directorate:		Date:	
Screening published:		Date:	

