



**Sheffield Health
and Social Care**
NHS Foundation Trust

Policy:

Affirming Gender Identity in the Workplace

Executive Director lead	Executive Director of People
Policy Owner	Head of Equality and Inclusion
Policy Author	Head of Equality and Inclusion

Document type	Policy
Document version number	Version 4
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Ratified by	People Committee
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Summary of policy – This policy sets out the organisations approach to supporting staff in affirming their gender identity in the workplace including how people, considering undergoing, undergoing and who have undergone gender reassignment will be supported. The policy sets out our approach to preventing discrimination, promoting equal opportunity and fostering good relations regarding the protected characteristic of Gender Reassignment and gender identity generally

The changes made to this version of the policy are summarised on page 3 (amendment log).

Target audience	Staff, people undertaking roles in the organisation that are not employees and people who have an interest in working for SHSC.
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Keywords	Gender Identity ,Gender Reassignment; Staff; Workplace
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Storage	This is Version 4.0 and is stored and available through the SHSC Intranet/Internet. This version supersedes the previous Version 3.0 2019
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Any copies of the previous policy held separately should be destroyed and replaced with this version.

Version Control and Amendment Log

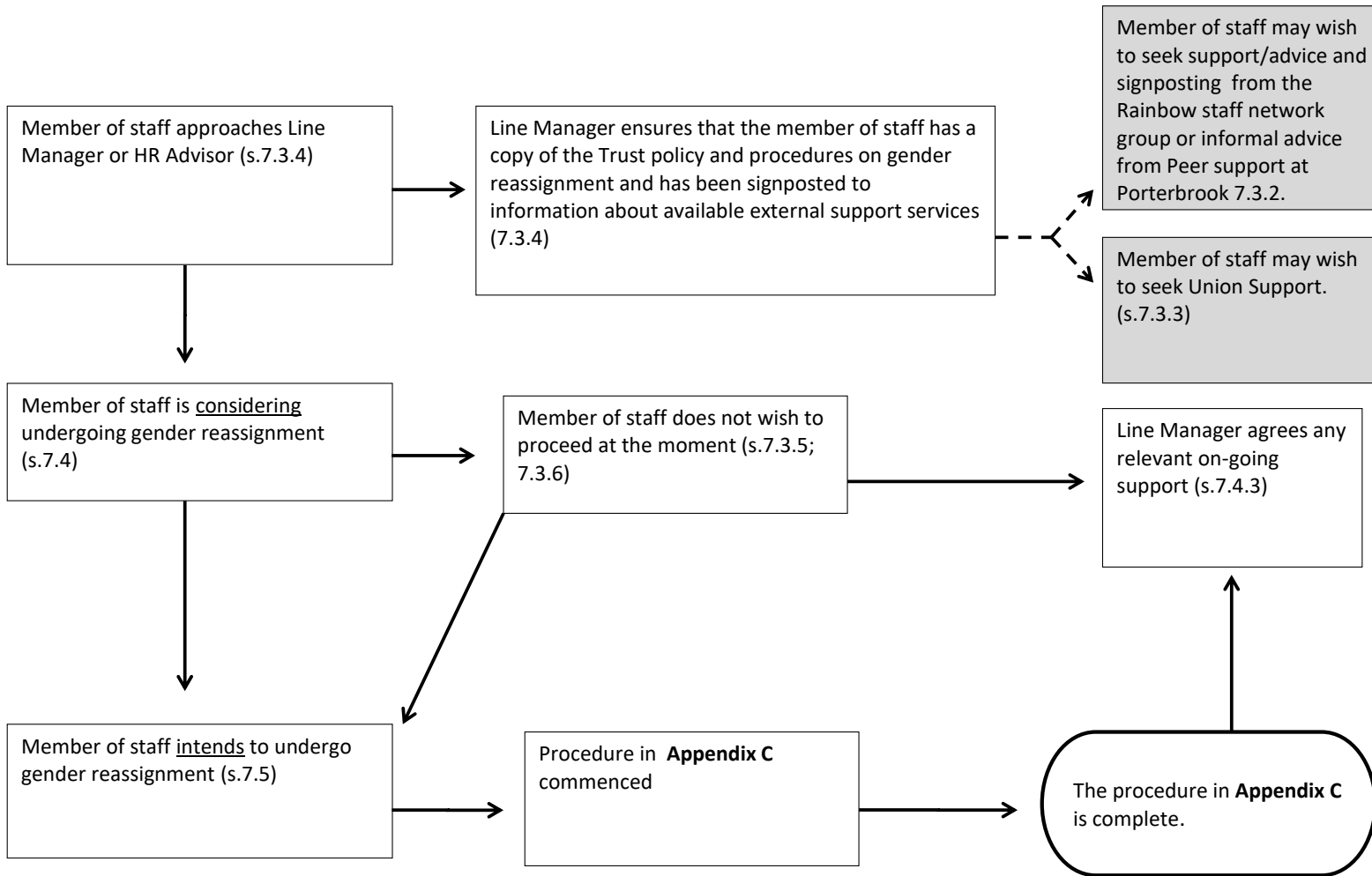
Version No.	Type of Change	Date	Description of change(s)
	New draft policy created	2012	New policy
1	Ratification and issue	November 2012	
2	Review / ratification / issue	Sept 2016	Full review completed as per schedule
3	Review / consultation / ratification / approval / issue	April to July 2019	<p>Full review completed as per the HR Policy Governance schedule.</p> <ul style="list-style-type: none"> -A footnote (footnote 10) has been included to note the awaited consultation outcome on the Gender Recognition Act 2004. -Section 7.8.1 Occupational Requirements (previously S6.8) has been updated to reflect the changing nature of case law in this area and the need to take specific advice if considering excluding a Trans person from a post. -Section 6.12.1 of Version 2.0 has been replaced by Section 7.12 to take account of the complexity and regularly changing nature of provisions regarding tax national insurance and pensions. -Section 7.11 note added re link to government guidance. -The need to consider changes required regarding payroll have been included in Section 7.12 -DBS Guidance updated (Appendix E).
4		November 2023 – February 2024	- Update purpose of the policy as setting out the organisations approach to supporting staff in affirming their gender identity in the workplace rather than only around gender reassignment as in original policy.

		<p>- New paragraph on focus of the policy Changed name from <i>Gender Reassignment in the Workplace</i> to <i>Affirming Gender Identity in the Workplace</i>.</p> <p>-Included reference to non – binary and gender fluid - noted the case law update on gender reassignment as a Protected Characteristic Includes non – binary and gender fluid now.</p> <p>- added reference to informal advice support and signposting available from the chair of the Rainbow Staff network and peer works at the Porterbrook service.</p> <p>-Taken out references to transsexual.</p> <p>-Propose keeping the flow chart and appendices around supporting gender reassignment.</p> <p>-Taken out reference to cross dressing.</p> <p>-New section on prefix and pronouns</p> <p>-Old policy included the Equality act guidance example on genuine occupational requirements we need to have this in the policy but have changed this so it says that policy it is our organisational policy to assume that any role advertised by our organisation <u>will not</u> have an occupational requirement around gender but any exception to this that may arise must be agreed by the Director of People to confirm this is to pursue a legitimate aim, this may include taking legal advice.</p> <p>Appendices C to G - section on pension advice updated.</p> <p>Policy and legal references and information updated.</p>
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Flowchart



1. Introduction

When we are born, we are assigned a sex at birth (male or female), based on our physical characteristics. Everyone has a gender identity. For most people their gender identity matches the sex they were assigned at birth. For transgender people, their gender identity does not align with the sex they were assigned at birth.

Trans people may change their gender presentation to bring it into alignment with their gender identity. This process is known as “transition”.¹

Many people have a gender identity of man or woman, for other people, their gender identity does not fit neatly into one of those two binary genders, non-binary are terms that encompasses many different ways to understand one’s gender expression outside of the binary model.

The Equality Act 2010 (The Act) protects people on the basis of gender reassignment from direct and indirect discrimination and harassment including people who identify as non-binary and gender fluid.

It is our intention that managers will have good information and guidance on gender identity and on the implications for people considering or undergoing gender reassignment. We will make training available through our Rainbow Badge training package and other routes. The policy is supported by specific **Procedures and Guidance** (see Appendices C - G)

It is essential that our organisation is clear about the legal framework relevant to gender identity and recognised good practice. It is also essential that staff, volunteers, and people applying for posts in our organisation can be confident that we have a clear and consistent policy supporting a positive approach to gender identity in the workplace, supporting staff to be themselves and applying good practice when staff are considering undergoing, are undergoing, or have undergone gender reassignment.

2. Scope

2.1 This policy is Trust wide and applies to all people applying for employment and employed by our organisation including those working under honorary contracts. Relevant aspects also apply to contractors and volunteers.

3. Purpose

Sheffield Health and Social Care are committed to equality of opportunity, preventing discrimination and harassment, and promoting positive relations between all people employed in our organisation. It is our intention that all staff, volunteers, applicants, and members of the public considering undergoing, undergoing or who have undergone gender reassignment and those whose gender identity is non-binary or gender fluid will experience respect and dignity as employees or potential employees or whilst undertaking roles in the organisation in other circumstances.

This policy is intended to:

3.1. Set out how we will aim to take this forward

¹ House of Commons Women and Equalities Committee Report – Transgender Equality January 2016

- 3.2. Set out how we will support gender reassignment from an employment perspective ensuring practice is in line with legal requirements and good practice guidance.
- 3.3. Set out our approach to supporting employees and job applicants whose gender identity is non binary or gender fluid
- 3.4. Set out how we will ensure that individuals whose gender identity is non-binary or gender fluid and those considering or undergoing gender reassignment or who have transitioned are treated with fairness and supported in recruitment employment and career development.
- 3.5. Set out our policy on applying appropriate procedures in recruitment.
- 3.6. Set out our policy on applying appropriate procedures and support processes when employees or volunteers are considering, are undergoing, or have undergone gender reassignment.
- 3.7. Set out how we will ensure that relevant members of staff have sufficient information and guidance and support so that they can provided sensitive and supportive management to staff whose gender identity is non-binary or gender fluid and to those who have informed us that they are considering, undergoing, or are undergoing gender reassignment.
- 3.8. Set out the action that we will take to ensure that people whose gender identity is non-binary or gender fluid and those that have undergone gender reassignment are treated with respect and their legal rights are maintained.

4. Definitions

4.1. Gender Dysphoria

Gender dysphoria is a term that describes a sense of unease that a person may have because of a mismatch between their biological sex assigned at birth and their gender identity.²

4.2. Gender Reassignment

Is the process of 'transitioning' away from a person's assigned gender.

4.3. Gender Reassignment as a Protected Characteristic Under the Equality Act 2010

- 4.3.1. The Equality Act 2010 (The Act) defines Gender Reassignment as a 'Protected Characteristic'. People who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex have the protected characteristic of gender reassignment.³

² NHS [Gender dysphoria - NHS \(www.nhs.uk\)](https://www.nhs.uk)

³ Equality and Human Rights Commission Employment Statutory Code of Practice 2.21 p.33 – last accessed on line February 2024

4.3.2. Case law has confirmed that protection extends to people who are gender fluid or non - binary

4.3.3. Under the Act 'gender reassignment' is a personal process, that is, moving away from one's birth sex to the preferred gender, rather than a medical process⁴

4.4. The terms 'Trans' and Transgender

Transgender is a term for people whose gender is different from their "assigned" sex at birth. Transgender can be abbreviated to 'trans', but transgender should always be used as an adjective, not a noun i.e., referring to 'transgender people' is appropriate but not "transgenders" which would be offensive.

4.5. Non-Binary

Someone whose identity falls outside of the gender binary model. They may not identify as male or female, but may experience their identity as 'blended', or leaning towards 'a binary expression'

4.6. Gender Fluid

Gender fluid is someone who moves between two or more gender identities.

4.7. Pronouns

Personal identifiers based on a person's own gender expression⁵

5. Detail of the policy

The broad overview of this policy is as described in the introduction

6. Duties

6.1. All staff should be aware of the policy as it applies to them as individual members of staff or volunteers.

6.2. All staff with leadership / managerial responsibilities must be aware of this policy and its related procedures and guidance and ensure that it is applied in their area of responsibility.

6.3. Specialist staff for example - People Directorate staff, workplace wellbeing etc. should have a good working knowledge of the policy and related procedures and guidance.

6.4. The Equality Diversity and Inclusion Team are responsible for ensuring the policy is up to date and is maintained in line with policy good practice and legislation.

6.5. Areas such as estates and IMST will work to support changes to the SHSC infrastructure and systems that may support the policy.

⁴ Equality and Human Rights Commission Employment Statutory Code of Practice 2.26 p.34 – last accessed on line February 2024

⁵ For more information about pronouns see [Pronouns.org](https://www.pronouns.org)

7. Procedure

7.1. Equity Dignity and Respect

- 7.1.1. This section applies to staff employed by SHSC as employees and to volunteers and Experts by Experience.
- 7.1.2. Gender reassignment being non-binary or gender fluid are protected under the Equality Act 2010⁶. Discrimination, harassment or victimisation of employees, Bank Workers volunteers, people undertaking activities in the workplace as Experts By Experience and job applicants that is associated with gender reassignment being non-binary or gender fluid will be challenged and acted on through relevant organisation policies.
- 7.1.3. Staff are legally protected from discrimination on the grounds of gender reassignment being non-binary or gender fluid irrespective of informing their employer of their status.⁷
- 7.1.4. We will do all that we can to promote dignity and respect for all our staff taking account of the diversity of gender identity and how this may be expressed.

7.2. Pronouns and Prefix

- 7.2.1. We will encourage and support employees' volunteers and applicants to use their preferred pronouns.
- 7.2.2. We will encourage and support employees and volunteers to include pronouns if they wish on name badges and other forms of identification.
- 7.2.3. Where we have direct control of our systems, we will use our best endeavours to provide options for people to identify themselves in a way that respects their gender identity and as set out in NHS guidance and digital information standards.

7.3. Staff considering undergoing gender reassignment

- 7.3.1. This section applies to staff employed by our organisation irrespective of the type of contract.
- 7.3.2. A member of staff who is considering undergoing gender reassignment may wish to initially seek support informal advice and signposting from the Rainbow Staff chair or peer support at the Porterbrook service. Staff may self-refer to Workplace Wellbeing, Workplace Wellbeing will sign post to this policy and related procedures.
- 7.3.3. Staff may also find it helpful to seek support from their trade union.

⁶ [Taylor v Jaguar Land Rover \[2020\]](#)

⁷ Equality and Human Rights Commission Employment Statutory Code of Practice 2.27 p.35 last accessed February 2024

- 7.3.4. member of staff considering undergoing gender reassignments is advised to initially approach their line manager or a member of the HR team. The line manager or the HR team should ensure that the employee is provided with a copy of this policy and related procedures.
- 7.3.5. We will respect the fact that a member of staff considering undertaking gender reassignment might decide not to proceed or might not plan to undergo gender reassignment immediately this should be taken into consideration when offering support in the workplace.
- 7.3.6. The line manager should agree with the member of staff what if any support will be helpful on an on-going basis.
- 7.3.7. The line manager must ensure that if a person has raised gender reassignment with them that any record made, or transfer of information is made to others is only made with the specific agreement of the employee.

7.4. Staff intending to undergo gender reassignment

- 7.4.1. If the member of staff decides to undergo gender reassignment and they have had opportunity to review the policy, they have the option to use the procedure set out in **Appendix C** or to talk to their line manager about an alternative approach
- 7.4.2. The procedure in **Appendix C** sets out what should take place to support an employee considering undergoing gender reassignment.
- 7.4.3. Good practice guidance⁸ suggests that an agreement regarding support for an employee should be set out as a '**memorandum of understanding**', signed by the member of staff and their line manager, and kept securely i.e., hard copies in a double sealed envelope and electronic copies password protected.

7.5. Staff undergoing gender reassignment

- 7.5.1. This section applies to employees, irrespective of the type of employment contract, undergoing gender reassignment.
- 7.5.2. People undergoing gender reassignment are usually expected by current protocols to 'live in role' for a period of time. They may then be prescribed hormone therapy. They may then choose to undergo surgical procedures. People who undergo gender reassignment may not undergo surgical procedures. A person is legally protected even if they never seek medical support.⁹
- 7.5.3. Staff must not be treated less favourably because they are undergoing gender reassignment. For example, if a person requires time off for an operation or medical appointment, they must be provided with time off from work under the organisations policies as they would apply to anyone else absent from work due to an operation or medical appointment. The manager should discuss with the member of staff what type of appointments or time off, they will require associated with gender reassignment.

⁸ Gender Identity Research and Education Society(GIRES) - Equality and Diversity Transgender Policy Guide for Employers 2015 - last accessed February 2024

⁹ Equality and Human Rights Commission Employment Statutory Code of Practice 2.24 p.34- last accessed February 2024

7.5.4. **Appendix C** sets out a procedure to be followed to support someone undergoing gender reassignment.

7.5.5. The Trust will maintain up to date information about support services available to a person undergoing gender reassignment and provide this information through the HR department.

7.6. Recruitment and New Employees

7.6.1. Employment recruitment procedures and practice will include provisions for ensuring that people are not discriminated against in the recruitment process.

7.6.2. New and current employees requiring DBS checks who are undergoing gender reassignment will be able to use the DBS special procedure. This involves contacting the DBS directly.

7.6.3. SHSC staff do not need information about a member of staff's gender history they must not ask about this during DBS checking.

7.6.4. DBS internal procedures ensure that relevant checks are made. Where a conviction or (in Enhanced Disclosure cases) other relevant information has been recorded in a previous name, this may be revealed on the disclosure and as such details of any previous identity may become apparent. Please note section 7.11 regarding confidentiality. See **Appendix G** - DBS check procedure.

7.7. Work Permits

7.7.1. Staff who are working in the organisation on a work permit or student visa are asked to comply with any work permit/visa regulations which may relate specifically to name change or gender reassignment in order that the work permit/visa continues to be valid.

7.7.2. The same requirements around confidentiality are also relevant to information that staff may have access to as part of Visa or Work permit applications.

7.8. References

7.8.1. References for someone moving to a new job must be provided in the name which will be used in the new job and not disclose a former name.

7.8.2. If a person must disclose a previous identity in order for references from past employers to be obtained strict confidentiality and respect for dignity must be applied and this information must be kept securely.

7.9. Occupational Requirements

7.9.1. The Equality Act 2010 has replicated exceptions for 'occupational requirements' that were in previous equalities legislation. The Equality Act 2010 makes it clear that any 'occupational requirements' for a role must 'pursue a legitimate aim' and 'the burden of showing that the exception applies rests on those seeking to rely on it' How this is applied in practice however is likely to change over time in light

of developments in the law and national policy it is our organisational policy to assume that any role advertised by our organisation will not have an occupational requirement. Any exception to this that may arise must be agreed by the Director of People to confirm this is to pursue a legitimate aim. This may include taking legal advice to support this.

7.9.2. When advertising roles the Trust policy on advertising posts which have Occupational Requirements must be referred to.

7.10. Gender Recognition Certificates

7.10.1. This section applies to new recruits irrespective of the type of contract and to staff who have undergone gender reassignment.

7.10.2. The Gender Recognition Act 2004 provides that where a person holds a Gender Recognition Certificate (GRC) they must be treated according to their acquired gender.

7.10.3. Anyone who has a GRC must be treated for all purposes as having their acquired gender.

7.10.4. Trans people must not be routinely asked to produce a GRC. Staff undergoing gender reassignment may choose to apply for a GRC, but they should not be required to do this.

7.10.5. People who have a GRC will be issued with a new birth certificate. This is confirmation of their legal gender.

7.11. Confidentiality

7.11.1. The organisation policy on confidentiality will apply however the following should be particularly noted.

7.11.1.1. Members of staff might gain information about a person's gender history in the course of their work. This information must be kept confidential,

7.11.1.2. If this information needs to be passed on then the specific permission of the person it relates to must be obtained, and

7.11.1.3. If the person has a Gender Recognition Certificate and this information is passed on without gaining the persons permission, the person passing the information on will be committing an offence.

7.12. National Insurance

Staff who change their name will need to inform the local social security office, providing the appropriate certificates and will pay NI contributions on the basis of their affirmed gender according to the GRC.

7.13. Pension and Payroll

7.13.1. Employees and employers will need to consider the implications of gender change in relation to payroll and pension. Guidance is provided through a specific government web page; this is an area that is regularly changing so employees and People Directorate advisors are advised to visit the following site for the latest guidance <https://www.gov.uk/employee-changes-gender>.

7.13.2. People Directorate staff will ensure that the payroll services are advised to access this site to ensure that any procedures in relation to payroll are undertaken correctly.

7.13.3. It is the responsibility of the employer to take steps to keep confidential the reason for an individual's apparently early or late retirement.¹⁰

7.14. Professional Registration

Staff who are professionally registered are advised to contact their professional bodies to find out whether there are any specific requirements in terms of name changes etc. If the employer must keep evidence of professional status or qualifications, he or she should discuss with the member of staff how to retain such evidence on file so as not to compromise or breach disclosure of protected information.

8. Development, consultation, and approval

Version 2

The original and previous version of this policy included the following consultation:

The original policy took account of guidance published by the Equality and Human Rights Commission. The Joint Consultative Forum was consulted on this policy and members of the HR and Workforce Strategy group. An early draft was also reviewed by a member of the Trans community.

As a result of consultation, the following changes were made:

- The title of the policy was amended
- The flow chart was improved.
- The role of the union in providing support was highlighted.
- The role of HR in advising about job roles during transition was made clearer in the text
- The section on application of the Trust managing sickness absence policy was reworded
- The time limited nature of workplace wellbeing support was noted

Version 3

Statutory Guidance, Government Guidance and Guidance provided by specialist organisations have been reviewed to ensure that this policy is in line with current statutory and good practice requirements.

Changes made to the policy as a result of the above:

- A footnote (footnote 10) was included to note the awaited consultation outcome on the Gender Recognition Act 2004.

¹⁰ Gender Identity Research and Education Society(GIRES) - Equality and Diversity Transgender Policy Guide for Employers – last checked February 2024

- Section 7.8.1 Occupational Requirements (previously S6.8) has been updated to reflect the changing nature of case law in this area and the need to take specific advice if considering excluding a Trans person from a post.
- Section 6.12.1 of Version 2.0 was replaced by Section 7.12 to take account of the complexity and regularly changing nature of provisions regarding tax national insurance and pensions.
- Section 7.11 note added re link to government guidance
- The need to consider changes required regarding payroll have been included in S 7.12
- DBS Guidance updated (Appendix G)

Policy considered by Joint Policy Group (Staff Side consultation) via email July 2019.
 HR colleagues and relevant influential managers reviewed April – June 2019.
 Noted in the verification document for the Joint Consultative Forum [31st July 2019].

Version 4

- Discussed with the Chairs of the Staff Network Group Policy Group agreed to widen scope of policy to affirming gender identity in the workplace. November 2023.
- Check of legal and policy updates and references completed.
- Draft reviewed by Experts by experience from the Porterbrook service January /February 2024.
- Reviewed by the Joint Policy Group February 2024 – all changes supported no additional comments or changes proposed.
- Agreed by the People Directorate Quality Risk and Governance Group 22nd February 2024.

9. Audit, monitoring, and review

Monitoring Compliance Template						
Minimum Requirement	Process for Monitoring	Responsible Individual/group/committee	Frequency of Monitoring	Review of Results process (e.g., who does this?)	Responsible Individual/group/committee for action plan development	Responsible Individual/group/committee for action plan monitoring and implementation
Describe which aspect this is monitoring	The policy will be reviewed via feedback to the People Directorate Senior Management Team	The Head of Equality and Inclusion. People Directorate Quality Risk and Governance Group	The policy will be monitored as it is applied feedback will be taken from the Rainbow Staff Network Group	People Directorate Senior Management Team (SMT)	Head of Equality and Inclusion / EDI Team / People Directorate Quality Risk and Governance Group	Head of Equality and Inclusion/ People Directorate Senior Leadership team (SLT).

The policy review date is February 2027.

10. Implementation plan

Action / Task	Responsible Person	Deadline	Progress update
Update the Rainbow Badge training to reference key areas of the policy	Corporate Governance via the Communications Team	April 2024	
Make HR team and wider Trust aware of new policy	Head of Equality and Inclusion via HR advisors and HRBP	February 2024	
Work with Comms team to publicise the policy and its intentions	Head of Equality and Inclusion Communications Team	February 2024	

11. Dissemination, storage, and archiving (version control)

Version	Date on website (intranet and internet)	Date of entry in Connect (all staff communication)	Any other promotion/ dissemination (include dates)
2.0	November 2016	-	HR intranet page November 2016
3.0	July 2019	July 2019	HR intranet page By September 2019
4.0	TBC	TBC	Staff Networks By April 2024

This is Version 4.0 and is stored and available through the SHSC Intranet/Internet.
This version supersedes the previous Version 3.0 – September 2019.
Any copies of the previous policy held separately should be destroyed and replaced with this version.

All versions of HR policies are stored on the HR Shared Drive by the policy author and the PA to the Director of People.

Word copies of final versions of policies can be obtained from Policy Governance via the PA to the Director of People.

12. Training and other resource implications

The Rainbow Badge training package will be updated to take account of the policy.

Relevant People Directorate staff will receive a training session on the policy

13. Links to other policies, standards, references, legislation (associated documents) and national guidance

- Promoting Attendance and Managing Sickness Absence Policy
- Recruitment and Selection Policy and Procedures
- Equal Opportunities and Dignity at work policy (*Equity in the Workplace Policy*)
- Confidentiality Code of Conduct
- Information Governance Policy
- [Equality and Human Rights Commission Guidance](#) (Gender Reassignment Discrimination Guidance)

14. Contact details

Job Title	Name	Phone	Email
Head of Equality and Inclusion	Liz Johnson	0114 27 16703	Liz.johnson@shsc.nhs.uk

Appendix A

Equality Impact Assessment Process and Record for Written Policies

Stage 1 – Relevance - Is the policy potentially relevant to equality i.e., will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

NO – No further action is required – please sign and date the following statement.
I confirm that this policy does not impact on staff, patients or the public.

I confirm that this policy does not impact on staff, patients or the public.
 Name/Date:

YES, Go to Stage 2

Stage 2 Policy Screening and Drafting Policy - Public authorities are legally required to have ‘due regard’ to eliminating discrimination, advancing equal opportunity, and fostering good relations in relation to people who share certain ‘protected characteristics’ and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don’t know and note reasons). Please see the SHSC Guidance and Flow Chart.

Stage 3 – Policy Revision - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	No	No	No
Disability	No	No	No
Gender Reassignment	The policy has been updated to take account of case law that includes	The policy has been updated to promote	The policy will support enhancing understanding of gender identity in the workplace

	non binary and gender fluid as protected from discrimination harassment and victimisation under the Equality Act 2010	affirming gender identity and to extend to staff who are gender fluid or non binary	
Pregnancy and Maternity	No	No	No
Race	No	No	No
Religion or Belief	No	No	No
Sex	No	No	No
Sexual Orientation	No	No	No
Marriage or Civil Partnership	No	N/A	N/A

Policy Amended

Completed by Liz Johnson February 2024

Appendix B

Review/New Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
Engagement		
1.	Is the Executive Lead sighted on the development/review of the policy?	Yes
2.	Is the local Policy Champion member sighted on the development/review of the policy?	Yes
Development and Consultation		
3.	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	N/A
4.	Is there evidence of consultation with all relevant services, partners and other relevant bodies?	Yes
5.	Has the policy been discussed and agreed by the local governance groups?	Yes
6.	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	N/A
Template Compliance		
7.	Has the version control/storage section been updated?	Yes
8.	Is the policy title clear and unambiguous?	Yes
9.	Is the policy in Arial font 12?	Yes
10.	Have page numbers been inserted?	Yes
11.	Has the policy been quality checked for spelling errors, links, accuracy?	Yes
Policy Content		
12.	Is the purpose of the policy clear?	Yes
13.	Does the policy comply with requirements of the CQC or other relevant bodies? (where appropriate)	Yes
14.	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	N/A
15.	Where appropriate, does the policy contain a list of definitions of terms used?	Yes
16.	Does the policy include any references to other associated policies and key documents?	Yes
17.	Has the EIA Form been completed (Appendix A)?	Yes
Dissemination, Implementation, Review and Audit Compliance		
18.	Does the dissemination plan identify how the policy will be implemented?	Yes
19.	Does the dissemination plan include the necessary training/support to ensure compliance?	Yes
20.	Is there a plan to i. review ii. audit compliance with the document?	Yes
21.	Is the review date identified, and is it appropriate and justifiable?	Yes

Appendix C - Undergoing Gender Reassignment Procedure

1. Planning

- 1.1. People considering and undergoing gender reassignment will have different preferences and priorities. The following procedures are intended to provide a framework to support this process, but they may be modified to meet individual needs.
- 1.2. It is important that service managers include the person in all aspects of planning and take the lead from the person undertaking the transition process. Confidentiality must be maintained.
- 1.3. Service managers may wish to seek advice from different sources including people directorate, EDI, or Rainbow Staff Network. Again, confidentiality must be maintained unless permission is gained from person.

2. Informing colleagues service users and carers and contacts

- 2.1. There is no requirement and there should be no obligation to inform colleagues, clients, or the public that a person is undertaking gender reassignment.
- 2.2. Where case work is being undertaken or a member of staff has a long-term caring relationship it may be considered appropriate to have a discussion with the service user if the relationship with that individual was established prior to their change of gender and is to continue. How to manage this should be discussed with the transitioning person.
- 2.3. Any inappropriate release of information resulting in the member of staff being identified against their stated wish, whether internally or externally, may be regarded as gross misconduct and subject to appropriate disciplinary action. It is therefore important to have a specific discussion at an early stage about who will be informed, at what stage and how.
- 2.4. It is recommended that the transitioning person takes the lead in informing others, but they may prefer that this is undertaken by the manager or a HR representative. It is important that the timing of disclosure is agreed as part of the planning
- 2.5. The manager will ensure that general information about gender change and any specific details about the current transition are made available.
- 2.6. At the point of public change in gender it is common for people to take annual leave and then return with their new name and gender role. This may be a useful opportunity with the persons consent to brief staff ready for their return.

3. Record keeping

- 3.1. At the point of transition all public documents, public references (such as telephone directories, e-mail accounts, circulation lists, rotas, Electronic Staff Records) and employment details need to be amended to reflect the acquired gender of the person. See **Appendix E** for practical details.

- 3.2. Wherever possible, the transitioning persons ID badge, and 'hello my name is' badge should be changed to reflect the persons acquired name.
- 3.3. 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.
- 3.4. In some instances, it may be necessary to retain records relating to an individual's identity at birth, for example, for pension or insurance purposes
- 3.5. Once a Gender Recognition Certificate (GRC) has been obtained and new birth certificate issued these must replace previously held copies.
- 3.6. Access to records showing the change of name and any other details associated with the individual's status (such as records of absence for medical treatment) must be restricted to staff who need the information to do their work.
- 3.7. Hard copies of any old documents that cannot be altered, or replaced, must be stored securely in sealed envelopes, marked strictly confidential, and kept separately from the files of other employees, rather than just in a filing cabinet. The name(s) of those who are allowed to open these envelopes must be clearly written on the outer one.

All IT records of the individual's personal life and medical history must be secured in line with GDPR , including password-protection. Any named person who needs to access this private information must still ask permission of the individual concerned, unless there is an emergency situation, and the individual is unable to give permission. The aim of these precautions is to prevent a member of staff accidentally coming across this sensitive information in the office.¹¹

¹¹ [Gender-Diversity-Policy-Guide-for-Employers-201908.pdf \(gires.org.uk\)](#) p.14

Appendix D - Meetings Guide and Checklists

		Date completed
Initial Meeting	<p><u>Suggested Agenda</u></p> <ol style="list-style-type: none"> 1) Agree who will initially be informed and or involved in supporting the employee. 2) Provide employee with details of the policy and Trust procedure. 3) Agree a date for a second meeting – this should take place as soon as possible and in agreement with the person. 4) What support would be helpful – agree how this can be met. 	
Planning Meeting 1	<p><u>Suggested Agenda</u></p> <ol style="list-style-type: none"> 1) Agree outline timescales including support/progress meeting timetable. 2) Agree who should/needs to be told when and how. 3) Does the person wish to stay in their current role during transition or be redeployed? 4) What support does the person need to be able to stay within their current role? 5) Are there any occupational requirements of the current or proposed role (NB these will be limited and must be objectively justified by the organisation)? 6) Can adjustments be made so that the person does not undertake these aspects of the role during transition? 7) Where a role requires on going contact with individual patients/service users discuss communication with these patients. 8) providing public information is not usually necessary but, if it is, then it must be a carefully drafted press release. No action may be taken without input from the person undergoing transition. GIRES provide advice on dealing with the media¹² 	
Planning Meeting 2	<p><u>Suggested Agenda</u></p> <ol style="list-style-type: none"> 1) Does the person wish to inform colleagues, external organisations and contacts personally, or should this be done on their behalf? 2) Agree how the tasks identified will be completed (who when etc) 3) When will use of chosen gender facilities begin. 	

¹² [Gender-Diversity-Policy-Guide-for-Employers-201908.pdf \(gires.org.uk\)](#)

	<p>4) How will negative or hostile reactions be managed</p> <p>5) Agree how to respond to any media interest taking account of point 8 above.</p> <p>6) Does any information need to be provided to colleagues?</p> <p>7) Agree final timetable for when key actions will take place.</p> <p>8) Discuss any concerns of the transitioning person</p> <p>9) Discuss any questions the line manager may have.</p>	
Progress Meeting 1	<p><u>Suggested Agenda</u></p> <p>1) Review Progress</p> <p>2) Check list of tasks completed / new tasks</p> <p>3) Review/revise timetable</p>	
Progress Meetings	<p>To take place in line with planning identified above</p> <p><u>Suggested Agenda</u></p> <p>1) Review Progress</p> <p>2) Review/revise timetable</p>	
Final meeting	<p>This should take place at a stage when the transitioning person feels that support should finish, or alternative on-going support should be agreed, and all tasks have been completed.</p>	

Commented [HG1]: As in comment above, Comms team involvement must be sought.

Appendix E - Practical Procedures and Considerations

1. Electronic Staff Record (ESR)

This is the system used in the NHS to keep staff records.

Option 1 – preferred name – a member of staff can change their preferred name on the system without providing any supporting information, so someone whose name is Peter Smith could indicate that they wish to be known as Petra Smith. If someone's preferred name is changed on the system, any official information linked to ESR records will still record the person's name as Peter Smith in this case.

Option 2 - Initiating a full change of name. Any member of staff can change their name, but the Trust policy is that this must be supported by some formal proof of name change (for example a marriage certificate). For people undergoing gender reassignment the requested name change should be supported by a 'statutory declaration' of name change ||

A name change can be facilitated by the person completing a change in personal details electronic form which their line manager will then authorise. A prompt will be given for how to provide the required information for a full name change to HR.

Commented [HG2]: Part of the requirement for a GRC is a legal change of name through Statutory Declaration or Deed Poll

2. Email log in etc

The IT department should be contacted to facilitate name changes on e-mail and any security or other log in systems.

3. National Insurance

Staff who change their name will need to inform the local social security office, providing the appropriate certificates and will pay NI contributions on the basis of their affirmed gender according to the GRC.

4. Pension

Staff should be advised to seek advice about their state pension and NHS pension eligibility. The NHS Business Services Authority have guidance on NHS Pensions and Gender recognition, they must be contacted though to ensure that the most up to date version of this guidance is referred to. [NHS Pensions factsheet template V1 \(nhsbsa.nhs.uk\)](https://www.nhs.uk/consult/condnhsbsa/pensionsandgenderrecognition).

Staff should also be advised to seek separate advice about their State Pension so that advice reflects the most up to date legal and policy position.

5. Professional Registration

Staff who are professionally registered are advised to contact their professional bodies to find out whether there are any specific requirements in terms of name changes etc. If the employer must keep evidence of professional status or qualifications, he or she should discuss with the member of staff how to retain such evidence on file so as not to compromise or breach disclosure of protected information.

Appendix F - Task List

Task	Who Will Complete?		Completed
	Manager	Other	
Legal change of name?			
Change name on ESR			
Change e-mail address			
Change name on IT systems			
Advise Professional Body (as per their policy)			
Change authorised signature mandate			
Change Payroll			
Order new Uniforms			
Inform National Insurance Office			
Pensions			
Chang of ID badge and hello my name is badge.			
OTHER – to be agreed at planning meetings			

Appendix G – DBS Checks

The following information is provided on line to transgender applicants undertaking DBS checks

Transgender Applications

Guidance and information regarding the sensitive applications route for transgender applicants.

The [Disclosure and Barring Service \(DBS\)](#) offers a confidential checking service for transgender applicants in accordance with the Gender Recognition Act 2004. This is known as the sensitive applications route and is available for all levels of DBS check - basic, standard and enhanced.

The sensitive applications route gives transgender applicants the choice not to have any gender or name information disclosed on their DBS certificate, that could reveal their previous identity.

The sensitive applications team

If you are asked to complete a DBS check and have a previous identity that you do not wish to be disclosed to your employer and/or on your DBS certificate, you should call or email the dedicated sensitive applications team before submitting your application. The team is experienced in dealing with sensitive cases and will advise you of the process and what you need to do.

How to contact the sensitive applications team

To contact the sensitive applications team, please telephone 0300 106 1452 or email sensitive@db.s.gov.uk. Please note, that the telephone number also has an out-of-hours answering machine where you can leave your details, and a member of the team will call you back.

If you are happy to have your previous identity disclosed on your certificate, you do not need to contact the sensitive applications team and can simply submit this information under the 'any other names' section of your application.

Please note, an applicant using the confidential checking service, will still complete the same application form as any other applicant.