INTERIM

This policy is currently under review following the supreme court ruling on 16th April 2025 and the EHRC's Statutory Code of Practice for services that came into force on 5 August 2026.

Leicestershire Partnership NHS Trust

Trans Employee Policy

This policy details the position the Trust takes in relation to trans employees (all staff including temporary staff) and the responsibilities under the Gender Recognition Act (GRA) 2004, Sex Discrimination Act (SDA) 1975 and the Equality Act (2006 & 2010) in relation.

It also provides guidance on expectations of patients, carers and visitors within the Trust and what staff can do in relation to managing this.

Key words: Trans, Transgender, Non-binary, Gender Dysphoria

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Policy On A Page

SUMMARY & AIM

This policy provides guidance for the Trust's employees (all staff including temporary staff), line managers and trans people on the expectations and other considerations that may be necessary to improve the experiences and opportunities of trans staff. Trans people are protected by legislative acts and where possible the Trust is committed to go above and beyond to protect employees on the grounds of gender identity and gender expression.

TARGET AUDIENCE:

This policy is relevant for all staff.

TRAINING

The trust has mandatory eLearning on Equality, Diversity and Inclusion that covers Transgender Topics. The trust also provides periodic Teams training that staff are encouraged to attend.

KEY REQUIREMENTS

Managers and Team leaders should work with staff proposing to transition to agree a plan. Managers and team leaders should also support their staff to challenge discrimination from patients. Managers should be aware that trans people undergoing medical, hormone and surgical procedures related to gender reassignment may require time off from work and they should be shown the same flexibility during this time as someone undergoing any other significant procedure.

Staff who are transitioning should engage with managers and HR around the logistics of transitioning in the workplace and report any instances of harassment or bullying, victimisation or discrimination.

All LPT Staff should, where possible and safe to do so, challenge staff and patients who discriminate. Staff must not harass or bully staff themselves. All staff should be aware that any inappropriate release of confidential information resulting in a trans member of staff being identified against their stated wish, whether internally or externally, will be regarded as gross misconduct. All staff should help to ensure all forms and surveys are inclusive of trans people, including non-binary people for both staff and patients.

The Trust recognises that staff will have different beliefs about gender, identity, and transitioning. Such philosophical beliefs are protected under the Equality Act 2010. The criteria for determining what is a "philosophical belief" are defined by the legislation: "that it must be genuinely held; be a belief and not an opinion or viewpoint based on the present state of information available; be a belief as to a weighty and substantial aspect of human life and behaviour; attain a certain level of cogency, seriousness, cohesion and importance; and be worthy of respect in a democratic society, compatible with human dignity and not conflict with the fundamental rights of others." (Equality Act 2010, Explanatory Notes). Therefore, LPT supports the rights of all staff to expressing their beliefs within these parameters. The intention of this policy is to ensure all staff are able to come to work without fear of discrimination, bullying, or harassment. Where any staff member's behaviour or actions are deemed to potentially amount to discrimination, bullying, or harassment, this will be dealt with under the terms of the Dispute Resolution in the Workplace and/or Disciplinary policies.

1.0 Quick look summary

Please note that this is designed to act as a quick reference guide only and is not intended to replace the need to read the full policy.

1.1 Version control and summary of changes

Version number	Date	Comments (description change and amendments)
1	July 2021	New Policy replacing Gender Reassignment Policy
2	April 2024	Changed the capitalisation of “Trans” “Transition”, “Transitioning” to “trans”, “transition”, “transitioning” add a line to 6.2, making it clear that the Trust will need to act to prevent and protect from discrimination from others. Added “or other staff” to the line in 10.5 about managers supporting staff to challenge discrimination from patients or the public. Added a section to 10.6 Responsibility of staff.
3	June 2024	Added Page 3, “Policy on a Page” information. Updated 6.10 and 6.11 around staff facility usage to clarify that the Trust’s policy is in line with Equality Act requirements and is in line with the Trust’s Privacy and Dignity Policy.
4	July 2024	Added definitions to page 4 for “Dead name”, “Transphobia” and “Sex”. Added a reference to the Trust’s Zero Tolerance campaign in 3.6. Added a reference to the health and wellbeing policy to section 6.6 and rephrased 6.15 for further clarity on informing patients about a staff transitioning. Corrected a number of capitalisations and punctuation inconsistencies. Removed a reference to personal files in section 6.3
5	October 2024	Updated section 6.10 and 6.11 and the Due Regard form.
6	February 2025	Updates to wording about protected philosophical beliefs, and updates to the Due Regard form. Additions to definitions section. Clarification updates to wording throughout.
6.1	October 2026	Update from Supreme court Ruling clarifying the definition of biological sex and how it is to be understood. Updated following NHSE Guidance in relation to this ruling paragraphs 6.6 and 6.7 amended.

For Further Information Contact:

Head of Equality, Diversity and Inclusion – LPT.EDI@nhs.net

1.2 Key individuals involved in developing and consulting on the document

Name	Designation
Accountable Director	Sarah Willis
Author(s)	Haseeb Ahmad
Wider consultation	Directorate Clinical Governance Leads
	Trust Policy experts
	All LPT Employees Bands 7 and above
	LPT's LGBTQ+ Staff Network Spectrum

1.3 Governance

Level 2 or 3 approving delivery group	Level 1 Committee to ratify policy
Workforce Development Group	People and Culture Committee

1.4 Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all. This document has been assessed to ensure that no one receives less favourable treatment on the protected characteristics of their age, disability, sex, gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

If you would like a copy of this document in any other format, please contact lpt.corporateaffairs@nhs.net

1.5 Due Regard

LPT will ensure that due regard for equality is taken and as such will undertake an analysis of equality (assessment of impact) on existing and new policies in line with the Equality Act 2010. This process will help to ensure that:

- Strategies, policies and procedures and services are free from discrimination.
- LPT complies with current equality legislation.
- Due regard is given to equality in decision making and subsequent processes.
- Opportunities for promoting equality are identified.

Having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics.
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people. Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

Please refer to due regard assessment (Appendix 4) of this policy.

1.6 Definitions that apply to this policy

Term used	Definition
Transgender people	Refers to a broad range of people who experience and/or express their gender differently from what most people expect, expressing a gender that does not match the sex listed on their original birth certificate (i.e. recorded sex at birth). Not all people who consider themselves (or who may be considered by others as) transgender will undergo a physical/hormonal process of gender reassignment.
Non-binary people	Those who identify outside of the gender binary of male or female and may include genderqueer, bi-gender, pangender, genderless, agender, neutrois, third gender and gender fluid people.
Gender dysphoria	A person with gender dysphoria can experience anxiety, uncertainty, or uncomfortable feelings about the sex they were born with. They may feel that they have a gender identity that is different from their recorded sex at birth.
Cisgender or Cis people or Non trans	Someone whose gender identity is the same as the sex recorded at birth.
Sex	Biological sex usually designated as male or female on the basis of the genitalia (sex organs), reproductive function, chromosomes, or hormone expression. Some people are born with mixed sex characteristics and are known as Intersex. Sex recorded at birth refers to the sex determined based on genital appearance at birth.
Gender	The characteristics of women, men, girls and boys that are socially constructed. This includes norms, behaviours and roles associated with being a woman, man, girl or boy, as well as relationships with each other. As a social construct, gender varies from society to society and can change over time (World Health Organisation definition).
Gender expression	Refers to all external characteristics and behaviours that are socially defined as either masculine or feminine, such as dress, mannerisms, and speech patterns.
Gender identity	This is an individual's internal self-perception of their own gender. A person may identify as a man, as a woman or as having a non-binary gender.
Bi-gendered	A person who considers themselves to be both male and female at different times.
Non-gendered	A person who does not identify with any gender.
Gender Reassignment	Is the term used to describe transitioning from one gender to the other. The process may involve different stages.
Dead name or deadnaming	A “deadname” is the name of a trans person prior to their transition. Deadnaming is the action of calling a trans person by their former name instead of their new name, whether intentional or not.
Transphobia	Characterised by showing prejudice, discrimination, or antagonism against a person or people on the basis of them being trans.
Misgender	The action of using the wrong pronouns for someone, or referring to them as the wrong gender. This may be intentional or not.

2.0 Purpose and Introduction/Why we need this policy

This policy provides guidance for the Trust's employees, line managers and trans people on the expectations and other considerations that may be necessary to improve the experiences and opportunities of trans people.

The Trust is committed to fully fulfilling its legal duties to provide protection on the grounds of gender identity and gender expression. This may involve balancing the needs of those with different protected characteristics and any disputes will be dealt with on a case-by-case basis.

The Trust celebrates and values the diversity of its workforce. It aims to create an environment in which all staff feel equally welcome and valued, and in which transphobic behaviour is not tolerated. The Trust recognises that there can be differences between a person's sex and their gender identity/expression. The Trust will not discriminate against people on the grounds of their gender identity. Where this policy refers to 'trans people', it has in mind people living with any of these identities (including non-binary). When it refers to 'gender identity', it covers both the fixed identity of people living in the gender of their birth and the more fluid identities of many trans people.

The purpose of this policy is to assist managers and trans employees in LPT with practical information on workplace support and guidance and ensure that the provision for trans employees is responsive to individual need, is prejudice free, and challenges any discrimination individuals may experience.

The Trust believes that trans employees are entitled to be treated with dignity and respect and to be supported to perform their roles free from harassment, unfair discrimination and unnecessary barriers.

All staff should act in accordance with our Trust leadership behaviours for all. A fundamental approach to developing our Leadership behaviours for all is our ability to both give and receive feedback in a positive and insightful way. The feedback method is based on defining; Context, Understanding, Behaviour and Effect (CUBE).

3.0 Duties within the Organisation

3.1 The Trust Board has a legal responsibility for Trust policies and for ensuring that they are carried out effectively.

3.2 The Trust Policy Committee is mandated on behalf of the Trust Board to adopt policies.

3.3 The Equality, Diversity and Inclusion (EDI) Workforce Group have the responsibility for this policy.

3.4 Divisional Directors and Heads of Service are responsible for:

- Ensuring that line managers adhere to this policy and procedure
- Ensure that all line managers and colleagues attend any training as required
- Ensure that they and others implement this policy in line with the Trust's Behaviours Framework

3.5 Managers and Team leaders are responsible for:

- Ensuring that all staff are aware of this policy and attend any relevant training

- Challenging staff who discriminate and ensuring that the relevant procedures are followed
- Supporting their staff to challenge discrimination from patients, the public or other staff
- Agreeing a plan with a staff member who is proposing to transition to ensure that they are supported throughout the process
- Supporting the employee in any way that is necessary and appropriate
- Ensuring that colleagues are informed about the employee's transition if requested by the trans employee

3.6 Responsibility of Staff:

- Engaging with managers and HR around the logistics of transitioning in the workplace
- Reporting any instances of harassment or bullying, victimisation or discrimination in line with our Zero Tolerance campaign and Dispute Resolution Policy
- Staff should treat others with dignity and respect and not harass or bully any other staff. Examples of harassment against trans or non-binary people can include, but are not limited to:
  - Unnecessarily asking an individual to evidence their trans status by providing a Gender Recognition Certificate (GRC)
  - Refusing to use the pronoun appropriate to someone's affirmed gender ("misgendering", for example calling a trans woman "he"), calling the person by the name they had before they transitioned ("deadnaming") or refusing to use a person's preferred non-binary pronouns such as they/them or ze/zir
  - Displaying or circulating transphobic images and literature
- Any incidents of discrimination, harassment or bullying, or breaches of confidentiality, should be dealt with in accordance with the Dispute Resolution in the Workplace Policy and Disciplinary Policy.

4.0 Principles

As well as ensuring that trans colleagues are fully supported, the Trust will demonstrate its commitment to trans equality in the following ways:

- Ensuring that all training courses that are delivered, where appropriate, take into account the needs of trans colleagues. This includes both face-to-face training and e-learning
- Marking important dates for the trans community
- Including trans people in publicity and marketing materials
- Ensuring that all forms and surveys are inclusive of trans people, including non-binary people for both staff and clients
- Including trans equality as a core part of the organisation's equality agenda and objectives
- Investigating fully all complaints of harassment or bullying, victimisation or discrimination on the grounds of gender identity, gender history, sex, trans identity or gender expression
- Monitoring the implementation of this policy

5.0 Equality Legislation

5.1 The Equality Act

The Equality Act 2010 (England, Scotland, and Wales) protects against discrimination because of gender reassignment in employment and service delivery. It bans direct and indirect discrimination and victimisation. The Act makes clear that it is not necessary for people to have any medical diagnosis or treatment to gain this protection; it is a personal process of moving away from the gender assigned at birth to the gender they would prefer.

5.2 People discriminated against because they are wrongly perceived to be trans, or who are discriminated against because of their association with trans people or issues are also protected. The Equality Act requires employers to take steps to prevent discrimination and to protect people from the discrimination of others. People discriminated against because they are wrongly perceived to be trans, or who are discriminated against because of their association with trans people or issues are also protected.

5.3 The UK Gender Recognition Act

The UK Gender Recognition Act (GRA) enables people aged over eighteen to gain full legal recognition for the gender in which they live. Applications are considered the Gender Recognition Panel. Once a person receives a Gender Recognition Certificate (GRC), they are of that gender for every legal purpose and have all the rights and responsibilities associated with that gender. Not all trans people will obtain or seek to obtain a GRC. Employment rights do not depend on whether a person has a Gender Recognition Certificate. Employers should not ask for a person's GRC and it should never be a pre-condition for transitioning at work. To make an application for a GRC, a person needs to show they have been living and working in that gender for at least two years.

5.4 The Gender Recognition Act gives anyone applying for or holding a Gender Recognition Certificate particular privacy rights. It is a criminal offence to pass on information acquired 'in the course of official duties' about someone's gender recognition, without the consent of the individual affected. 'Official duties' include employment, trade union representation, or supply of business or professional services. It is also an offence to pass on information relating to an individual's trans history or identity as a trans person without their consent, regardless of whether the individual has a GRC or not.

5.5 The Human Rights Act

Article 8 of the European Convention on Human Rights provides a "right to respect for one's "private and family life, his home and his correspondence", subject to certain restrictions that are "in accordance with law" and "necessary in a democratic society".

5.6 Genuine Occupational Requirement (GOR)

In the vast majority of cases, the sex of a worker is of no relevance to their ability to do a particular job. However, the Equality Act 2010 does allow for an exception where being of a particular sex is an 'occupational requirement' of that post. If this is the case for an employee transitioning at work, a redeployment process will be commenced in discussion with the individual.

6.0 Gender Transition

6.1 In order to support gender reassignment it is essential that line managers are supportive, sensitive and able to discuss with the person concerned how they want the process in relation to their continued employment to be handled. Managers should refer to the transition checklist in Appendix 1 for guidance on how to support a transitioning employee. It is important to document any agreement and any discussions to ensure confidentiality and sensitivity are maintained. These should be recorded in 1-1's and not disclosed to any third party unless the individual has given specific written permission to do so. Support should be sought as required from Occupational Health, HR, Equality & Diversity Advisors and Staff Side.

6.2 The process of diagnosis and treatment can take anything from a matter of months to a period of years. Real-life experience of living as the gender is currently a prerequisite to obtaining a Gender Recognition Certificate and to obtaining gender reassignment surgery in the UK.

6.3 If an employee states that they are intending to transition at work, their line manager, in conjunction with other appropriate colleagues, should aim to make this process as smooth as possible. Managers should be aware that it could be an extremely difficult step for someone to approach their manager about transitioning. The Trust is committed to reassuring all staff that they will be supported and respected. The transition process will be led by the individual concerned.

6.4 Throughout the transitioning period managers will need to meet regularly with the individual and agree a clear plan of action to consider the checklist in Appendix 1. In the majority of cases, it is not permitted to suggest a change in role as this will constitute discrimination with the exception of where this relates to a GOR (see 5.8 above). Every effort must be made to ensure that the individual can continue as before. However, some employees may themselves wish to suggest a temporary change of deployment e.g. from a public-facing role to an alternative support role. Efforts should be made to accommodate this if requested but staff must never be pressured into such a move or denied the opportunity to move back when they feel ready. Where a longer-term redeployment is necessary the appropriate policy will be invoked to facilitate this process.

6.5 Trans people undergoing medical and surgical procedures related to gender reassignment may require time off from work. Under the Equality Act (2010), staff are legally entitled to time off work for appointments related to transition the same way as if they were ill or suffered an injury. Cases will be managed under the Attendance Management and Wellbeing Policy.

6.6 The Trust will provide and manage workplace toilet, washing and changing facilities in accordance with legal requirements. Where facilities are designated as single-sex, access will be based on biological sex unless the Trust determines that alternative arrangements are required to meet its legal obligations. The Trust is committed to ensuring all staff are treated with dignity and respect and, where reasonably practicable, will provide or make available gender-neutral or individual facilities to support the needs of all staff. Any arrangements will be considered in line with the Trust's legal obligations and the circumstances of the workplace.

6.7 Where a concern arises about the use of workplace facilities, staff should discuss this with their line manager. Managers should seek advice from Human Resources and the Equality, Diversity and Inclusion Team to ensure that concerns are

managed fairly, sensitively and lawfully. This may include considering the use of alternative, gender-neutral or individual facilities where available. Any arrangements should be proportionate, determined on a case-by-case basis, and seek to balance the privacy, dignity and wellbeing of all staff.

6.8 In the majority of cases, it is expected that an employee will be able to continue in the same role they were employed in before they underwent gender reassignment. If for any reason the individual or manager believes this to not be possible, advice must be sought from HR and the Equality, Diversity & Inclusion team. Equally, if a role is being recruited for which there is a genuine occupational requirement for a person of a specific sex to take up that role, advice must be sought prior to advertising. Any exclusion must be shown to be objectively proportionate as a means of achieving a legitimate aim.

6.9 For an individual transitioning, unless the individual specifically asks for a change in role or work area this should not be discussed, unless the role is subject to a genuine occupational requirement for a post-holder of a particular sex. Every possible effort must be made to ensure that the individual can continue in their role. This means making specific adjustments so that they can work in an environment that is inclusive and promotes mutual respect.

6.10 There is no general need or obligation to inform colleagues, clients or the public whether a person is cis or trans. Staff that are transitioning may need to inform colleagues and patients, however the manager should discuss and agree with the trans person if and how the information should be given (please also refer to the checklist action plan attached as appendix 2).

6.11 It is recommended that the trans person takes the lead in informing those who need to know, and the individual can be assisted in deciding how this is to be done. In some circumstances the trans person may choose to make a personal disclosure to colleagues. In this case the Line Manager (if they are already aware of the situation) and/or the HR Representative can be informed of when disclosure is to take place and the depth of the disclosure so they can agree and provide the appropriate support for both the individual and the wider team.

6.12 The Line-manager will ensure that education takes place on two levels: general information about gender change and a specific briefing to outline the details of the person involved. Both the individual and the manager(s) should be provided with information on the process to ensure there is a mutual understanding about what needs to be done. At the point of public change in gender, it is common for trans people to take annual leave and then return in their new name and gender role. This may be a useful opportunity to brief staff ready for their return.

6.13 If a staff member requires a new uniform for their role following their transition, this should be arranged by the manager using the usual ordering process.

7.0 Record Keeping

7.1 Employees with a legal change of name and/or gender marker should notify HR. At the point when the person makes their transition public all documents, public references (such as telephone directories, e-mail accounts, circulation lists, rotas, Electronic Staff Records) and employment details should be amended to reflect the acquired gender of the person. It should also be undertaken following discussions with the person and their manager and HR.

7.2 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.

7.3 In some instances it may be necessary to retain records relating to an individual's identity at birth, for example, for the correct calculation of pension or national insurance prior to acquiring gender recognition. Once a person has obtained a Gender Recognition Certificate however these MUST be replaced with the new birth certificate details and HRMC notified of the changes by Payroll: https://www.gov.uk/employee-changes-gender

7.4 Access to records showing the change of name and any other details associated with the individual's trans status, (such as records of absence for medical treatment) must be restricted to staff who need the information to do their work.

7.5 Once a person has obtained a Gender Recognition Certificate there must be no disclosure of this information without the express written permission of the individual as this constitutes a criminal act.

7.6 Trans people in employment may choose voluntarily to disclose information at a secondary level, for example, answering an equal opportunities questionnaire, or asking for support from a line manager. Again, strict confidentiality should be observed as further disclosure must not be made without the express written permission of the individual.

7.7 Electronic records will be updated in a timely manner, to coincide with the date on which the workplace transition begins. Care will be taken to ensure that records do not link back to the former name; this may entail creating a completely new email address rather than simply changing the name on the existing one, for instance. The manager and employee will work together to ensure that nothing is missed. New ID badges (and any other identification documentation) with the correct name and a new photograph will be issued, without any replacement cost to the trans employee.

8.0 Disclosure and Barring Service (DBS Checks)

8.1. Where a post is subject to a Disclosure and Barring Service Check, the DBS process requires documentation of an individual's identity to be verified. Because this process would essentially disclose an individual's gender, the bureau has now devised a process which allows trans people to pass their details onto the DBS without first revealing them to the employer.

8.3 It should be noted that where a conviction or (in Enhanced Disclosure cases) other relevant information has been recorded in a previous name, this will be revealed on the Disclosure and as such details of any previous identity may be revealed. Where there are no convictions recorded, the details of any previous names that have been provided directly to the DBS will not be revealed on the Disclosure.

8.4 Trans applicants, whether they have a Gender Recognition Certificate or not, wishing to take advantage of this separate procedure should contact the DBS for further details.

8.5 For further information, please visit the applicant section of the DBS website www.homeoffice.gov.uk/dbs. Anyone wishing to use the process may contact the DBS Sensitive Applications Team directly on 0151 676 1452. Alternatively, the DBS

have a dedicated email address for enquiries regarding transgender applications: sensitive@dbs.gsi.gov.uk.

9.0 Dissemination and Implementation

9.1 This policy will be communicated through the EDI Workforce Group and the Spectrum Staff Support Network.

9.2 The policy will also be available on the Trust website and communicated through the staff newsletter.

9.3 Implementation of the policy will be carried out through appropriate training and communication.

10.0 Training needs

There is a need for training identified within this policy. In accordance with the classification of training outlined in the Trust Learning and Development Strategy this training has been identified as developmental.

11.0 Monitoring Compliance and Effectiveness

Page / Section	Minimum Requirements to monitor	Method for Monitoring	Responsible Individual /Group	Frequency of monitoring
	Any themes raised under the policy	Employee relations tracker	Workforce Development Group	Annually

12.0 Standards/Performance Indicators

TARGET/STANDARDS	KEY PERFORMANCE INDICATOR
Care Quality Commission registration standards (outcome 14) *Supporting Workers* (21) of the Health & Social Care Act (2008) (Regulated Activities Regulations 2010 CQC essential standards	That the trust maintains compliance with CQC registration standards, this policy supports outcome standards 14

13.0 References and Bibliography

The policy was drafted with reference to the following:

- Trans, A practical guide for the NHS - This is recommended reading formore detailed information and guidance, in particular Chapter 6: Employing and Retaining trans People
- Press For Change
- Gendys Network
- Gender Trust

- TransBareAll
- Christine Burns MBE, Plain Sense
- Office for National Statistics.

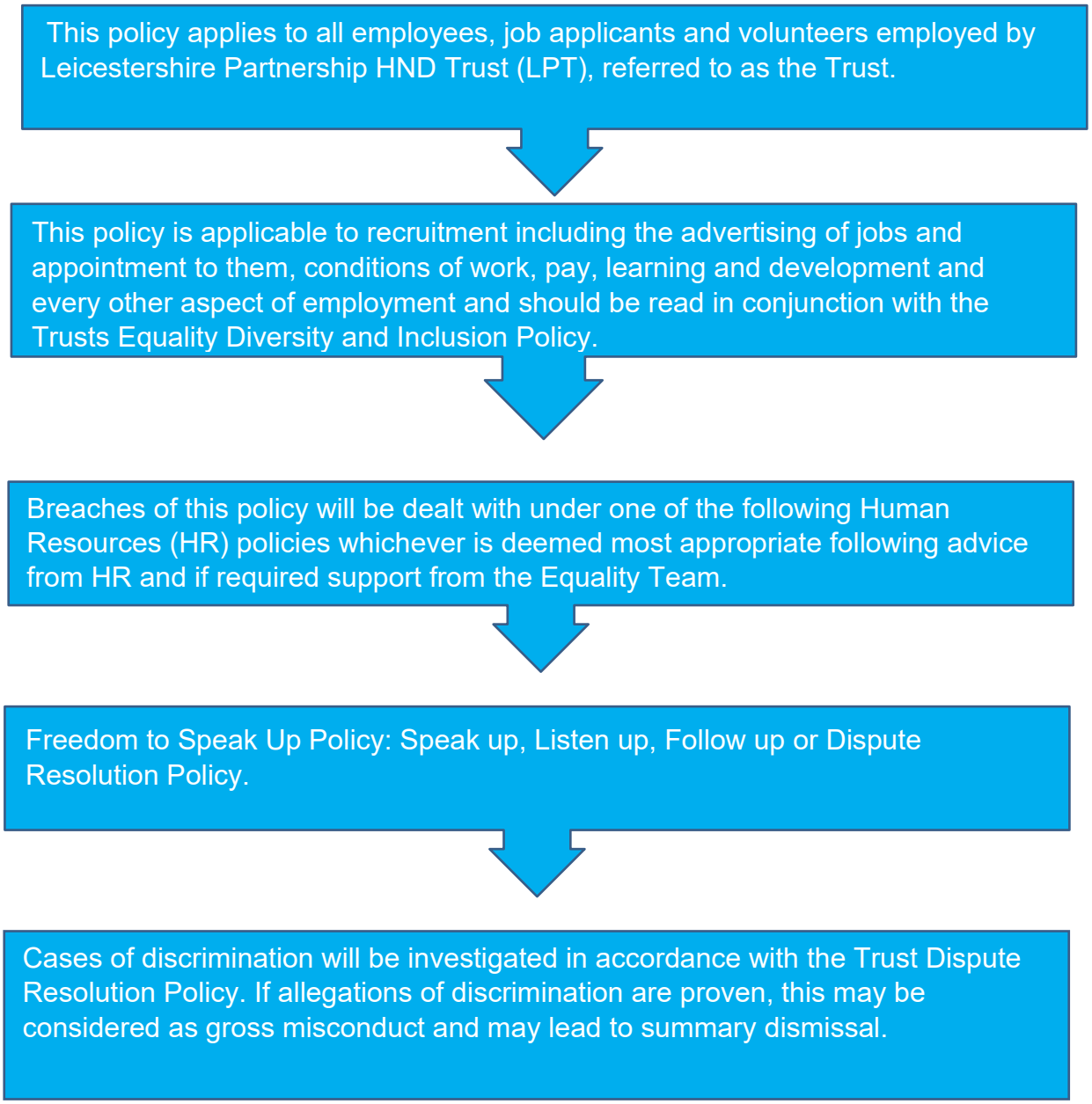
14.0 Fraud, Bribery and Corruption consideration

The Trust has a zero-tolerance approach to fraud, bribery and corruption in all areas of our work and it is important that this is reflected through all policies and procedures to mitigate these risks.

Fraud relates to a dishonest representation, failure to disclose information or abuse of position in order to make a gain or cause a loss. Bribery involves the giving or receiving of gifts or money in return for improper performance. Corruption relates to dishonest or fraudulent conduct by those in power.
Any procedure incurring costs or fees or involving the procurement or provision of goods or service, may be susceptible to fraud, bribery, or corruption so provision should be made within the policy to safeguard against these.

If there is a potential that the policy being written, amended or updated controls a procedure for which there is a potential of fraud, bribery, or corruption to occur you should contact the Trusts Local Counter Fraud Specialist (LCFS) for assistance.

15.0 Flowchart/Process chart



15.1 Text Description of the flowchart:

1. This policy applies to all employees, job applicants and volunteers employed by Leicestershire Partnership HND Trust (LPT), referred to as the Trust.

2. This policy is applicable to recruitment including the advertising of jobs and appointment to them, conditions of work, pay, learning and development and every other aspect of employment and should be read in conjunction with the Trusts Equality Diversity and Inclusion Policy.

3. Breaches of this policy will be dealt with under one of the following Human Resources (HR) policies whichever is deemed most appropriate following advice from HR and if required support from the Equality Team.

4. Freedom to Speak Up Policy: Speak up, Listen up, Follow up or Dispute Resolution Policy.

5. Cases of discrimination will be investigated in accordance with the Trust Dispute Resolution Policy. If allegations of discrimination are proven, this may be considered as gross misconduct and may lead to summary dismissal.

Appendix 1 Checklist / Action Plan for transition

Checklist / Action Plan for transition

Employee Name:	**Supporting Managers Name:**
What date does the employee plan to start their transition?	
What will the employees name and title be following transition? What pronouns will be used?	
Are there any temporary or permanent changes / adjustments to the role, which should be considered to support the employee? (considerations should include security aspects such as lone working and night working)	
Will time off be required? If so, how will this be managed? (flexible working options should be considered)	
If applicable, how will single sex working arrangements be managed?	
When and how should colleagues be informed of the transition?	
Is there any guidance material, which the employee wishes to share with managers and colleagues?	
If the employee encounters any unacceptable behaviour towards them from colleagues, patients, visitors or others who should this be reported to?	
Are there any actions not covered above that the employee wishes to include?	
Is there an agreed date for when this checklist will be disposed of in line with the requirements of the Data Protection Act and GDPR?	
Actions Agreed:	
Date of Review Meeting:	
Manager (sign and date):	
Employee (sign and date):	

Who needs to be informed of your transition?

	Who will tell them?	When?	Date completed
Senior Manager			
Line Manager			
HR Representative			
Team members			
Other colleagues			
Any others (please specify)			

Changes to records – name and pronouns will need to be in several areas:

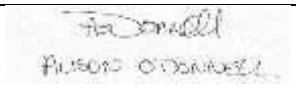
	Who will do this?	When?	Date completed
HR records (including ESR, personal files, Health roster, Occupational Health etc.)			
Personal file and related data			
Name badge / ID badge			
Email			
IT systems			
Website (if applicable)			
Voicemail			
Union membership			
Pension scheme			
Any lease / hire schemes			
Certificates/Awards			
Other:			

Details of meetings:

Date	Comments	Actions	Date of next meeting	Signatures: Supporting manager / employee

Appendix 2 Training Needs Analysis

Training required to meet the policy requirements must be approved prior to policy approval. Learning and Development manage the approval of training.

Training topic/title:	1. Equality Diversity and Inclusion 2. Transgender Training		
Type of training: (see Mandatory and Role Essential Training policy for descriptions)	**YES - Mandatory (must be on mandatory training register)** ☐ Role Essential (must be on the role essential training register) YES - Desirable or Developmental		
Directorate to which the training is applicable:	Yes- Directorate of Mental Health Yes - Community Health Services Yes - Enabling Services Yes - Estates and Facilities Yes - Families, Young People, Children, Learning Disability and Autism Yes - Hosted Services		
Staff groups who require the training: (consider bank /agency/volunteers/medical)	1. All staff groups		
Governance group who has approved this training:	EDI Group	Date approved:	August 24
Named lead or team who is responsible for this training:	EDI Team		
Delivery mode of training: eLearning/virtual/classroom/ informal/ad hoc	1. eLearning 2. eLearning/virtual/classroom		
Has a training plan been agreed?	Yes		
Where will completion of this training be recorded?	Yes - uLearn		
How is this training going to be quality assured and completions monitored?	uLearn compliance reports managers view EDI group review		
Signed by Learning and Development Approval name and date		Date: 30.9.24	

Appendix 3 The NHS Constitution

- The NHS will provide a universal service for all based on clinical need, not ability to pay.
- The NHS will provide a comprehensive range of services.

Shape its services around the needs and preferences of individual patients, their families and their carers	√
Respond to different needs of different sectors of the population	√
Work continuously to improve quality services and to minimise errors	√
Support and value its staff	√
Work together with others to ensure a seamless service for patients	√
Help keep people healthy and work to reduce health inequalities	√
Respect the confidentiality of individual patients and provide open access to information about services, treatment and performance	√

Appendix 4 Due Regard Screening Template

Section 1	
Name of activity/proposal	Revised Transgender Policy
Date Screening commenced	April 2024
Directorate / Service carrying out the assessment	HR/EDI Service
Name and role of person undertaking this Due Regard (Equality Analysis)	Haseeb Ahmad, Head of EDI
Give an overview of the aims, objectives and purpose of the proposal:	
AIMS: The transgender employee policy is being revised as it is three years out of date and requires a refresh.	
OBJECTIVES: To develop a transgender policy for employees that is current and fit for purpose.	

Section 2	
Protected Characteristic	If the proposal/s have a positive or negative impact please give brief details
Age	N/A
Disability	Neutral. The Trust has a Reasonable Adjustment Policy which would be used to support any staff affected by any aspect of the Trans Employee Policy. Should staff have difficulties around facility usage due to conditions such as PTSD, section 6.10 and 6.11 gives provisions on how this can be managed.
Gender reassignment	Positive impact as this policy ensures that the Trust is both legally compliant with the most current legislation and ensures that employees who are trans are treated with the upmost dignity and respect throughout the transitioning period and beyond.
Marriage & Civil Partnership	N/A
Pregnancy & Maternity	N/A
Race	N/A
Religion and Belief	Neutral, Staff with gender-critical or other beliefs may be impacted by the provisions around facility usage (6.10 and 6.11) if they object to using facilities with trans people. This section gives provisions on how this can be mitigated.
Sex	Neutral, Guidance around shared facilities protect women who do not present as stereotypically feminine from being excluded from facilities as has previously occurred in a nearby Trust. We have had a minority of comments raising concerns that some women would feel uncomfortable with the previous policy regarding the sharing of facilities with a Trans Employee. We are not aware of this issue occurring previously, but if it did so section 6.10 and 6.11 gives provisions on how this can be mitigated.
Sexual Orientation	Positive impact, as the guidance around shared facilities outlines how to respond if staff members object to sharing facilities on the basis of personal belief, such as objection to someone's sexual orientation.
Other equality groups?	N/A

Section 3			
Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please tick appropriate box below.			
Yes		No	
High risk: Complete a full EIA starting click here to proceed to Part B		Low risk: Go to Section 4. √	
Section 4			
If this proposal is low risk please give evidence or justification for how you reached this decision:			
The Trust has had a Gender Reassignment Policy in place for three years at least. It has an LGBT Staff Network and employs trans staff. The current policy involved the engagement of staff in its development and likewise this policy will be developed hand in hand with trans staff and where appropriate, members of the community.			
Signed by reviewer/assessor	Haseeb Ahmad	Date	11.02.2025
Sign off that this proposal is low risk and does not require a full Equality Analysis			
Head of Service Signed	Dan Norbury	Date	11.02.2025

Appendix 5 Data Privacy Impact Assessment Screening

Data Privacy impact assessment (DPIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet Individual's expectations of privacy. The following screening questions will help the Trust determine if there are any privacy issues associated with the implementation of the Policy. Answering 'yes' to any of these questions is an indication that a DPIA may be a useful exercise. An explanation for the answers will assist with the determination as to whether a full DPIA is required which will require senior management support, at this stage the Head of Data Privacy must be involved.			
Name of Document:	trans Employee Policy		
Completed by:	Haseeb Ahmad		
Job title	Head of EDI		**Date** 4 April 2024
Screening Questions		**Yes / No**	**Explanatory Note**
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.		No	The same mechanisms deployed to ascertain the gender reassignment status of employees currently in place remain unchanged.
2. Will the process described in the document compel individuals to provide information about them? This is information in excess of what is required to carry out the process described within the document.		No	
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?		No	
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?		No	
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.		No	
6. Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?		No	
7. As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.		No	
8. Will the process require you to contact individuals in ways which they may find intrusive?		No	
If the answer to any of these questions is 'Yes' please contact the Data Privacy Team via Lpt-dataprivacy@leicspart.secure.nhs.uk In this case, ratification of a procedural document will not take place until review by the Head of Data Privacy.			
Data Privacy approval name:	**Hannah Plowright**		
Date of approval	**26/06/2024**		