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1. Overview & Introduction

NHS Highland is committed to leading and promoting Equality, Diversity and Inclusion, equal opportunities and supporting human rights in terms of the provision of health services for the community it serves and in its practice as a leading employer.

This guidance outlines NHS Highlands responsibilities as an employer of transgender and non-binary people, in line with 'Once for Scotland' Policies.

Transgender, or trans, refers to anyone whose gender does not align with their sex recorded at birth. It is used as an umbrella term to describe a diverse range of people, who may describe their gender in different ways. It includes trans men, trans women, and non-binary people. For example, a transgender woman is someone who identifies as a woman and was assigned male at birth, and a transgender man is someone who identifies as a man and was assigned female at birth. A non-binary person is someone who identifies as having a gender which is in-between or beyond the two categories 'man' and 'woman', as fluctuating between 'man' and 'woman', or as having no gender, either permanently or some of the time. You can find these definitions and more in appendix A.

Transitioning is a process in which a trans person adjusts their life and/or their body to better reflect their gender. Transitioning is a unique process for each individual and may include any number of changes to a person's life. It could involve dressing differently, changing official documents, telling friends, family, colleagues or other social, administrative or legal changes to better reflect their gender.

Scotland's Census included a new question on trans status or history in 2022. It found that 19,990 people were trans or had a trans history. This is 0.44% of people aged 16 and over.

A Freedom of Information request by BBC Scotland News revealed that at the end of 2023 there were about 5,300 people in total on waiting lists for Scotland's [gender identity clinics \(GICs\)](#). Long wait times for gender clinic appointments can further complicate access to support for gender affirming healthcare.

Transgender people experience significant challenges in the workplace. The report 'Scottish Trans and Non-binary Experiences' published by Scottish Trans in 2024 identified:

- 29% of trans and non-binary people were in precarious employment, compared to 17% of the general population
- 42% of respondents said they had had at least one negative experience in the workplace

This included:

- Someone disclosing your trans status, history or gender identity without your permission – 26%

- Verbal harassment, insults or other hurtful comments – 24%
- Exclusion from events or activities – 10%
- Having to leave your position, job or career – 9%
- Threat of physical or sexual harassment or violence – 6%
- Sexual harassment or violence – 4%
- Physical harassment or violence – 3%
- Any other negative experience – 18%

Transgender people of Black and Minority Ethnicities face increased discrimination in comparison to their white counterparts¹, and in rural areas of Scotland, LGBT people are up to 81% likely to have experienced prejudice and discrimination, as detailed in the 'Further Out' report by the Equality Network².

Transitioning is a personal and individual choice. A transgender person does not have to be under medical supervision or have a gender recognition certificate to have the protected characteristic of gender reassignment. For example, a transgender person who simply changes their name is protected under the Equality Act regardless of whether or not they wish to take any hormones or have any surgeries. They must be treated in accordance with their gender identity.

The fundamental directive of this protocol is that all transgender and non-binary people will be respected as their chosen gender at all times.

Discrimination should be challenged, whether the discrimination is direct or indirect, stems from fellow staff members, people who use services or a member of the public.

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2. Scope and Application

This guidance applies to all departments and staff groups.

There are no exceptions to this guidance

3. Background

Under the Equality Act 2010, all employers have a legal obligation to prevent and respond to discrimination and harassment in the workplace. This guidance and supporting appendices, detail how a transgender or non-binary person should be treated in a dignified, non-discriminatory way. Its aims are to support NHS Highland

¹ [Trans Murder Monitoring 2023 Global Update - TvT \(transrespect.org\)](#)

² [LGBT-Rural-Report.pdf \(equality-network.org\)](#)

to be an inclusive employer and ensure it meets its statutory obligations with regards to the Equality Act 2010.

The aim of this guidance is to support the organisation in its delivery of inclusive services and ensure the organisation acts in line with relevant legislation and good practice.

Staff must be respected in accordance with their self-declared gender regardless of whether they are under medical supervision or have a gender recognition certificate. A transgender person is protected by equalities legislation if they are proposing to undergo or undergoing any part of a gender transition.

As both an employer and deliverer of care for transgender and non-binary people we will aim to ensure that trans health and life experience are not diminished but rather enhanced through celebrating and embracing diversity. This contributes to the overall wellbeing of our whole workforce.

We will develop a shared understanding and response to the needs of transgender and non-binary people and become a catalyst for change, taking our understanding back to the communities where we work to challenge attitudes and discrimination that perpetuate and contribute to poor health outcomes for all marginalised groups.

4. Definitions

- **Definitions** see Appendix A

5. NHS Highland's Approach

5.1 Commitment

NHS Highland is committed to providing an inclusive workplace and service, and does not tolerate discrimination on the basis of any protected characteristic, including gender reassignment. Trans and non-binary staff and service users are entitled to dignity, privacy, and freedom from discrimination.

NHS Highland does not discriminate in any way based on sex, sexual orientation, or gender reassignment, and will endeavour to address any concerns relating to discrimination as swiftly as possible, in line with the Equality Act and Public Sector Equality Duty. The Equality Act 2010 prohibits gender reassignment discrimination, harassment and victimisation in many areas including the provision of goods, facilities and services. Furthermore, the Public Sector Equality Duty places on NHS Highland a duty to eliminate unlawful treatment, advance equality of opportunity and foster good relations between people with protected characteristics and those without.

This guidance does not anticipate every situation that might occur with respect to transgender and non-binary employees. Each person will have unique needs and as such, a person-centred approach will be taken. The aim is to ensure the safety and healthy staff development free from discrimination, harassment, and victimisation.

NHS Highland recognises:

- That everyone may have a:
 1. Sex assigned at birth
 2. Gender identity (including identifying as non-binary or with no gender identity i.e. agender)
 3. Gender expression and
 4. Sexual orientation (including identifying as bisexual, pansexual or with no sexual orientation i.e. asexual)(see appendix for definitions of these and other terms)
- That traditional gender stereotypes can negatively impact our employees and service users.
- That people have the right to make decisions about their own bodies and how they live their lives, such as choosing to change their name, appearance, access hormone treatment or surgery, or whether to apply for a Gender Recognition Certificate (GRC). If a trans person chooses not to undergo any medical intervention or to gain a GRC, they are still entitled to dignity, respect and privacy and remain protected from discrimination under the Equality Act.
- For a member of staff who is in transition in our workplace, any changes to working conditions or access to facilities should be agreed between the staff member and their manager

5.2 Scope of the Guidance

This guidance provides information for NHS Highland employees on the expectations and other considerations that may be necessary for transgender and non-binary colleagues. It also applies to NHS Highland employees who are trans and non-binary and reinforces that all colleagues, should be treated with respect and dignity by managers, colleagues, and the public.

All staff will be expected to comply with the guidance at all times and positively challenge colleagues and users of services who act in a manner that breaches the legal aspects of NHS Highland's responsibilities, in terms of but not limited to:

- The Equality Act 2010
- The Equality Act 2010 (Specific Duties) (Scotland) 2012
- The Gender Recognition Act 2004
- General Data Protection Regulation (GDPR)
- Public Sector Equality Duty
- European Convention Human Rights (ECHR)

5.3 Our responsibilities as an employer

NHS Highland is committed to supporting and respecting diversity in all aspects of its functions, including those relating to our responsibilities as an employer. The

organisation views discrimination against employees as unacceptable in any form, in line with current legislation and the aims of the Public Sector Equality Duty of the Equality Act 2010. Transgender employees have the right to equal treatment and protection from discrimination and harassment, as per Equality Act 2010 and in line with Once For Scotland Bullying and Harassment policy.

To support work in these areas, NHS Highland will:-

- Ensure all employees can work in an environment without fear of prejudice, discrimination or harassment
- Provide management and staff with guidance on the rights of transgender and non-binary employees and the legal context for this
- Commit to improving Equality and Diversity training available to staff as part of their Equality and Diversity competency requirements.
- Ensure that employees who intend to undergo, are undergoing, or have undergone gender reassignment are treated with fairness and support in all aspects of their employment.
- Support staff to contribute to culture change within this organisation.

NHS Highland recognises that some staff may hold beliefs that conflict with this guidance, and the guidance is not intended to stifle those beliefs. However, all staff are expected to treat colleagues and services users with respect, and in line with NHS Scotland values of care and compassion, dignity and respect, openness, honesty and responsibility, and quality and teamwork.

5.4 Respecting Our Colleagues

Everyone employed by NHS Highland is responsible for eliminating discrimination either from those it delivers services to or from staff, advancing equality of opportunity in practice and fostering good relations between those who share a 'protected characteristic' and those who do not³.

Discrimination or harassment from staff, other patients or the public will not be tolerated. Managers are responsible for taking timely action where misconduct occurs on the grounds of an employee's gender identity, in line with relevant harassment policies.

Transgender and non-binary people should be addressed and respected as the gender they identify with in line with NHS workforce policies and Equality Legislation.

5.5 Harassment

³ <https://www.gov.uk/government/publications/public-sector-equality-duty> [Accessed 23/5/24]

NHS Highland adopts an all-encompassing anti-harassment stance to protect employees. This means harassment will not be accepted be it perpetrated by staff, visitors, or service users.

Transphobic (discriminatory behaviour based someone's transgender status) attitudes not only impact on the health of transgender people but on the health and wellbeing of family and friends. Children of transgender people and other family members and friends could also, through association, face verbal and physical abuse. Discrimination by association or perception, based on gender reassignment, is prohibited under the Equality Act⁴.

Transgender people may experience some or all of the following examples of potentially discriminatory practice (this list is not exhaustive):

- People refusing to associate with or ignoring them because of their transgender status
- Not being addressed as belonging to their gender, deliberate or intentional misuse of pronouns, or not having their new name used
- Having their personal life, medical history and relations probed into
- Having malicious gossip spread about them
- Having confidential information relating to their transgender status released without their consent, or being 'outed'
- Not being allowed to use sanitary facilities that are appropriate
- Being treated less favourably than others regarding sickness or other absences
- Being refused access to services, facilities or premises due to prejudice from staff or other service users
- Being verbally abused or physically assaulted because of their transgender status.

5.6 Genuine Occupational Requirements (GOR)

The Equality Act 2010 provides limited exemptions for Genuine Occupational Requirement positions to restrict access to members of a particular gender. These exemptions can only be applied in order to achieve a legitimate operational need. All efforts should be made to enable transgender employees to work in positions, including those covered by GOR, consistent with the gender with which they identify.

Where a person has a gender recognition certificate they must be regarded as being that gender for the purposes of GOR positions. As the gender history of an employee is a matter of strictest confidentiality, this information should never be shared with service users.

⁴ <https://www.acas.org.uk/discrimination-and-the-law/direct-discrimination> [Accessed 31/7/24]

Where an employee undergoing gender reassignment currently works in a GOR position restricted to the gender they were assigned at birth, every effort will be taken to work collaboratively with them to either adapt the duties of the post to enable them to continue working in it or to redeploy them to a suitable alternative post.

If you have any queries about the application of GOR in a staff role, please contact recruitment (if not yet employed) or people services.

6. Gender Reassignment – Points for Consideration

6.1 Supporting Staff going through gender transition

The successful support and management of an employee's transition at work crucially depends on taking account of the individual's views on how to proceed (see Appendix C for suggestions on topics to discuss and agree with any individual considering transitioning).

It should be noted that the first contact from an employee to a manager may be just to confide in and not to request support. The individual's expectations should be clarified at the outset. Some transgender or non-binary people may take several months or years to gradually explore the possibility of transitioning. Some may only change their outward gender presentation after a period of varying gender expression. When a member of staff considers transitioning, the initial point of contact may also vary according to the nature of the workplace and preference of the individual, but could be; an immediate line manager, a senior manager, Union representative, Occupational Health Department, or any other appropriate member of staff.

Even if a person is declaring their intention to transition, they may not yet have a clear plan of how they will progress this and when, and so managers should be flexible when discussing a staff member's expectations and desires for their transition at work. Similarly, some parts of their transition may be impacted by their confidence and how other aspects of their transition are received, and some parts may be out of their control, such as when they can expect to receive gender affirming medical treatment. Because of this, managers should not expect staff to produce clear timelines of when different aspects of their transition will take place.

Confidentiality must be maintained except as agreed otherwise by the individual. It is vital to assure the employee that NHS Highland will be supportive and that it does not tolerate discrimination against or harassment of employees.

Managers (and any other member of staff acting as a point of contact) must ensure they are familiar with this protocol and any other resources or systems in place to support the individual. Managers should also be aware NHS Workforce policies, such as Interim Menopause and Menstrual Wellbeing policy, Breastfeeding and Maternity Leave policies, apply to all employees who meet eligibility criteria irrespective of a workplace transition.

Through discussion with the employee, an NHS Highland main point of contact will be agreed. A meeting will be arranged with the nominated person to have a more detailed discussion and support the employee in the process of transitioning at work.

The manager and/or employee can seek guidance or advice from People Services or the Equality, Diversity and Inclusion (EDI) team. They may also wish to bring a friend or support with them to a first meeting, including Trade Union representative or an Advocate.

6.2 First Meeting

Depending on the circumstances the employee may be anxious at the first meeting, so it is important to spend time building trust and rapport. Discuss with the employee where they might feel most comfortable having this conversation.

If an employee is transitioning it is good practice for the manager to consult with them sensitively about their needs in the workplace and whether there are any reasonable and practical steps that can be taken to help the employee as they undergo their transition.

It may help to support discussion to use Appendix C as a guide to work with the staff member as a plan for managing the transition at work.

This, along with any other notes of the meeting, must be kept strictly confidential in a secure location.

6.3 Developing a Workplace Support Plan

The circumstances of each individual's transition will be different, and the level of support may need to be tailored following a discussion with the individual concerned. Listed below are areas that you may wish to discuss with your employee where appropriate. Employees may need to discuss some, all or none of the following: -

- The anticipated point or phase of change of name, personal details and social gender. This is the time that the employee may change their gender expression, name and pronouns; but bear in mind that transition is not usually a single moment, and not necessarily a linear process.
- If appropriate, date or time period of changing their gender presentation at work, including any change of uniform/dress code if appropriate.
- The amendments that will need to be made to records, emails and IT systems as well as notification to the relevant professional bodies (if applicable).
- Establishing regular dialogue and open communication on supportive measures in place and where further changes can be made i.e. When a person might feel ready to begin using single sex facilities such as toilets, changing rooms and

showers in their affirmed gender.

- Discussion with the employee should inform any actions relating to communication with colleagues, which may be done by the employee, their line manager or other suitable person. The employee should remain in control as to who performs the task, what is disclosed, and when.
- Consideration should be given to whether any related/appropriate training is needed prior to or in conjunction with communicating to colleagues about an individual's transition. The staff member may prefer the manager or identified other person/advocate/mentor to do this.
- If the employee has a clinical role, agreement should be reached regarding communication with any existing and returning patients.
- Whether the employee's job role has a Genuine Occupational Requirement to be a particular gender. (See section 3.3).
- Time off required for medical treatment as a reasonable adjustment (if known). This may vary considerably in accordance with the needs of individuals concerned and can be discussed with the Occupational Health Department.
- All documents held by NHS Highland with personal details should be identified so that a discussion can take place as to documents and systems that are to be/can be updated.
- Where an employee has any gender identity other than male or female, they should be sensitively informed that due to current lack of legal gender recognition for non-binary people, their gender in payroll and other systems linked to legal requirements is limited to male or female options only.
- For island and remote/rural areas: whether the employee has disclosed their intention to transition with others in the community, and what degree of confidentiality they would require from their manager about their intention to transition. As transitions are not always be linear, this discussion should be ongoing when disclosure remains sensitive to the individual.

Any information relating to an individual's transition should be securely destroyed unless there is an essential reason for keeping it. If such reasons can be evidenced, the documents should be secured to restrict access to authorised personnel and must not be passed to any third party without the specific consent of the member of staff. If unsure, please contact Occupational Health and Data Protection Department for advice (See section 7).

The individual should be treated with dignity and respect at every point from disclosing their intention to transition in the workplace. It is expected that once notified, all staff must refer to the transgender person by their preferred/chosen name and use the pronouns the person has indicated for themselves. This includes situations where the person is not present.

If a trans person has asked for their gender and trans status to be kept confidential because they are not 'out' yet (e.g. they request that you continue using their old pronouns in front of others), this too should be respected.

It's expected and understandable that there is usually a short adjustment period when someone in a workplace undergoes a gender transition. Managers can support teams by encouraging staff to apologise briefly if they use the wrong name or pronouns and continue with the corrected name/pronouns, as well as correct each other if the person is not present.

If further information is required managers or colleagues can be directed to the Equality and Diversity intranet page for further resources.

6.4 Social Transition

When the employee indicates that they are ready to begin working in their affirmed gender, the plans agreed to under the previous section should be implemented.

It is important to allow the employee to be in control of the timetable for this and for managers to be flexible about such a timeline.

At the planning stage, it would be appropriate to identify all records and documents that may require to be updated. This may include eESS, any ID badge, email address via SPOC request, eRoster (list not exhaustive).

Documents may be seen and copies made at the start of employment which will refer to a previous name and gender. If desired, a trans employee may wish to update these documents providing copies relating to their new name and gender – managers should support this.

To maintain confidentiality, new records may need to be produced; for instance:

- the cover of a personnel file should be replaced, and a new name included rather than the name on the old file crossed out and replaced.
- E-Health may need to set up a new email address and account relating to a new name

Where a trans employee does not have a Gender Recognition Certificate, their records should still be updated as much as possible to reflect any change of name, title, and gender marker, as far as the employee wishes to make these record changes.

6.5 Informing and Supporting Colleagues

How colleagues are informed of a member of staff's transition is a decision to be made by the member of staff who is transitioning. They should be offered a choice as to which colleagues are informed, and how the information is communicated. They can choose who they would like to inform their colleagues, and what method of communication they would like to be used.

NHS Highland **must not** inform colleagues, clients or the public that an employee is intending to undergo or is undergoing or has undergone gender reassignment without the employee's **explicit consent**.

Such disclosure may result in a criminal offence if the person concerned has a Gender Recognition Certificate (GRC) and it is done without the explicit consent of the individual concerned.

In island and rural areas, communities are often closer knit than urban areas, and it may be the perception that information about someone's transgender status is 'common knowledge' or already known within the community. Managers should discuss with any employee who discloses a historical transition the degree of disclosure they should adhere to, and respect the employee's wishes regarding the privacy of their trans status.

If information about those who have transitioned or are transitioning between genders includes specific information or inference about someone's health (or any other specific category such as sexual orientation or sex life), it is considered special category data in accordance with Article 9 of the UK GDPR.⁵ Even where it is not special category data, this information should be treated very carefully. There could also be requirements for handling this type of information under other legislation such as the Gender Recognition Act 2004.

Section 22 of the Gender Recognition Act 2004 makes it a criminal offence, with a fine of up to £5000 on conviction, for any person to disclose information which they have acquired in an official capacity about an individual's application for a Gender Recognition Certificate. If a person has a Gender Recognition Certificate or it could be assumed they might have a Gender Recognition Certificate (for example they are living permanently in their affirmed gender), then this cannot normally be disclosed further in a way which identifies the person involved without that person's express consent or, more exceptionally, a specific order by a court or tribunal.

Section 22(4) of the Gender Recognition Act 2004 states specific exempt circumstances where it is not an offence to disclose protected information about a person's application for a Gender Recognition Certificate, or about that person's gender history:

- The information does not enable that person to be identified;
- That person has agreed to the disclosure of the information;
- The disclosure is in accordance with an order of a court or tribunal;
- The disclosure is for the purposes of preventing or investigating crime.

[The Gender Recognition \(Disclosure of Information\) \(Scotland\) Order 2005](#) provides a further limited exceptions permitting disclosure. See legislation for more details.

⁵ <https://ico.org.uk/action-weve-taken/data-security-incident-trends/glossary-of-terms/data-type/>
[accessed 23/5/2024]

Regarding the change of name, all staff must refer to the transgender person by their preferred name and pronouns.

Transgender people do not need to show a Gender Recognition Certificate in order to change over their identity documents or to use the toilet facilities of their affirmed gender. Indeed, as it is necessary to 'live fully' in the affirmed gender for at least two years before applying for a Gender Recognition Certificate, a refusal by an employer or service provider to allow these changes at the start of an individual's gender reassignment process would unfairly prevent that individual from later being able to apply for a Gender Recognition Certificate and would likely be discriminatory under the Equality Act 2010.

Advice can be provided to staff from Scottish Trans and the LGBT Scotland Helpline. You can find more details in the resources section at the end of this guidance.

6.6 Staff in Public Facing Roles

A member of staff's gender transition may be unavoidably visible to the public. There is no general need or obligation to inform colleagues, clients or the public that a person is transitioning. However, such information may be considered appropriate where the relationship with that individual was established prior to their transition and is to continue.

This however should only be completed with permission from the member of staff who is transitioning. Each situation is different and the ways in which people are informed should be considered on a needs-led basis. The manager should discuss and agree with the staff member if and how the information should be given. It is important that managers or other staff do not presume that an individual's transition or trans status will be difficult for others to understand, poorly received, or will necessarily draw negative attention.

Some staff may elect to move to a non-public facing role during transition; however, they cannot be required to do so. Similarly, the way someone looks and the negative reactions this might be expected to elicit from certain members of the public must not be a barrier to people undertaking a public facing role.

Managers should take a person-centred and needs-based approach to supporting the employee in public facing roles, understanding the level of support an employee may wish to have during this time may differ between individuals and should be agreed with the employee to best suit their ongoing needs.

Sometimes patients may legitimately request for a particular gender of healthcare worker to ensure psychological safety, such as for intimate examinations after sexual abuse. To avoid discrimination against employees, requests should be handled sensitively on a case-by-case basis. British Medical Association (BMA) have

produced helpful guidance on managing discrimination from patients: [Introduction \(bma.org.uk\)](https://www.bma.org.uk) and [Exceptions \(bma.org.uk\)](https://www.bma.org.uk)

6.7 Time off for appointments

In line with Once For Scotland Special Leave Policy, employees will be given reasonable time off for hospital appointments and travel to/from. The manager and employee should discuss and agree what time is required. If there is a requirement to attend a hospital outwith Highland then the manager should be flexible when considering leave for travel to and from hospital appointments for gender-affirming care, as with any other medical appointment any staff member may need to attend.

If an individual undertakes any elective gender-affirming surgeries or procedures as part of their transition, this absence should be handled in line with NHS Scotland workforce attendance and special leave policies. Managers and employees may need to discuss reasonable adjustments to sickness absence trigger levels to account for absences relating to gender affirming care.

Managers should offer occupational health referrals for any longer-term absences relating to gender affirming surgeries.

6.8 Staff Facilities

NHS Highland supports the right to use the facilities that all staff feel are most appropriate to them. This includes male, female, gender neutral and accessible toilets. NHS Highland aims to provide for non-binary people with appropriate neutral or non-gendered facilities in line with their gender identity wherever possible and consider the needs of non-binary employees in the ongoing development and reviewing of NHS Highland estate buildings, in addition to single sex facilities.

An appropriate stage for using the facilities of their affirmed gender is likely to be the change of social gender, but this should be led by the individual. An individual may start to use the facilities for their affirmed-gender at any time from the point where they begin to socially transition, irrespective of the progress of surgical procedures. The point at which transgender people feel comfortable using different facilities can vary, so it is important to offer an open dialogue and acknowledge that a trans person maintains the autonomy to decide for themselves what facilities they use, as any other employee has the autonomy to do for themselves.

Where sex specific facilities do not afford reasonable levels of privacy for staff (shared changing areas etc) measures will be taken to make reasonable adjustments to meet this need. Where changing or shower facilities are open plan, then it is good practice to review this for the benefit of all staff and at least make some provision for dignity and privacy (e.g. curtained spaces) where staff need not

be in a state of undress in the presence of others. This is to ensure that all members of staff, irrespective of their age, disability, sex, gender reassignment status, race/ethnicity, religion/belief or sexual orientation are accorded the right to privacy. It should also be considered whether any adjustments to single sex facilities may be required to support trans employees, such as:

- including period product bins in men's toilets if needed
- redesignating some single-sex toilets into all-gender or gender-neutral toilets to include non-binary staff and visitors.

Should there be any objections to the facilities staff members are using, the objections will be dealt with by a manager in a sensitive and understanding way while not denying anyone access to facilities most appropriate to them, including trans people. Transgender and non-binary people should additionally not be denied access to facilities appropriate to their affirmed gender simply because they are transitioning. It is not good practice to allocate specific facilities for the individual who is transitioning.

Subject to considering the reasonable objections of other staff as mentioned in the above paragraph, it would not normally be acceptable to expect an individual undergoing transition to use facilities designated for use by the gender they were assigned at birth, or solely to use gender neutral facilities when they identify in a binary way.

Trans people must not be asked, expected, or required to use accessible facilities allocated for people with disabilities (unless they have a disability which requires this). Where any staff member freely prefers to use accessible gender-neutral facilities this should be permitted, recognising the wide variety of needs people have that may benefit from accessing accessible spaces.

NHS Highland will ensure that any arrangements for toilet/shower/changing facilities are satisfactory to all staff as appropriate. Any unsatisfactory practical arrangements must be reported to the designated manager as soon as possible.

6.9 Uniform & Dress Code

Within NHS Highland, uniforms and clothing must be compatible with NHS Highland Uniform Policy and Dress Code which aims to minimise the risk of cross infection, whilst always maintaining staff and patient safety. As with any healthcare organisation it is vital that all staff portray a positive and professional image to enhance public trust and confidence.

Transgender employees will be fully supported regarding the clothing they feel best represents themselves and their gender, as with any other employee.

6.10 Work Experience

People, including young people under 18, may be entering work experience programmes during or after a gender transition, or wish to explore using a new name or pronoun during a work experience program. Due to the short nature of a work experience programme, if a transgender or non-binary identity is disclosed before or during a work experience trial, a discussion can be held with a view to establishing what would work best for the young person to make their experience a positive one. The role of named supervisors of work experience candidates is as outlined for managers in section 1, and all young people undertaking a work experience placement should always be respected as their chosen gender. Where someone under 18 is conducting work experience, any decisions should remain in line with [UN Children's Rights Convention](#) obligations.

7. Personal Data and Information

7.1 Personal Data and Information Considerations

In the UK, anyone can start using a new name whenever they want. You can change your forename and/or surname, add or rearrange your names. Transgender people may choose to change their name to reflect their gender identity. For many UK institutions there is no legal process required for using a new name or gender marker, and a transgender person does not need to hold a Gender Recognition Certificate (GRC) to update their records. A GRC is only needed to legally recognise someone's gender on specific legal documents⁶. It is also legal to use two different sets of names at the same time, including on documents. The exception is when the intention is to defraud.

There are some circumstances which require a formal change of name or a Gender Recognition Certificate before you can use it. This can be done by making a statutory declaration or change of name via General Registers Office or Deed Poll.

7.1 Retention of Personal Data

Employees at all levels who learn (or may learn) about an individual's transgender history in the course of their work need to be aware of how to handle information. This could apply to:

- The information that can be entered into workforce files where other staff might have access
- Discussion about an individual's application form and applicant's job interview.
 - Please note it is possible that certificates may not use their birth name and gender.
- The contents of Occupational Health Reports

⁶ <https://www.gov.uk/apply-gender-recognition-certificate> [accessed 29/8/24]

- Information that can be passed from one medical professional to another during a referral or when discussing a case
- Information stored in medical records where others could access that data.

Any such information must be treated with the utmost confidentiality and included only as “sensitive data” in any records which must not be available to or accessible by anyone not specifically authorised or agreed with the specific employee to have access.

All employees are entitled to have all their workplace records changed to reflect the name, title, and gender that they have adopted. Managers should take reasonable actions to inform employees where documents contain old information and update accordingly, where this data remains within the control of the employer. There are, however, some documents, such as pensions, National Insurance and tax-records, that require someone to have changed their birth certificate with a Gender Recognition Certificate to be amended. In cases where an employee has changed their personal information on some documents but not others it is important for employers/managers and People and Culture staff to consider if different documents are stored, who has access to them and ensure data is secured such that the employee is not inadvertently “outed” if a member of staff is able to link up old and new documents.

7.2 Pensions

A transgender person with a Gender Recognition Certification (GRC) will be able to change their name and gender on their birth certificate, and subsequently for their state and workplace pension⁷, national insurance and tax records⁸.

As state pension age equalised in 2018, most employees will not have a difference in pension entitlement regardless of their GRC unless they have remained in work beyond their state retirement age.

7.3 Proof of right to work in UK

A passport, national identity card or Home Office issued residence document are the relevant primary identification documents that Recruitment should request in order to prove a person has the right to work in the UK. A birth certificate should only be requested if none of those documents are available.

⁷ <https://www.ageuk.org.uk/information-advice/money-legal/pensions/state-pension/changes-to-state-pension-age/> [accessed 28/08/24]

⁸ <https://www.gov.uk/tell-hmrc-change-of-details/gender-change> [accessed 28/8/24]

It is possible for a transgender person who is a UK national to obtain a UK passport with their new gender marker at the start of their transition. Gender markers for UK passports are currently restricted to 'M' or 'F' but other countries include wider options.

If a transgender person does not have a UK passport which reflects their current gender or name, their birth or current name and gender may be present on other documents which could be used to establish identity. In such cases, Recruitment should explain that retaining a copy of the document on the employee's record is a legal requirement imposed by the UK Government. They should also explain that if the employee later gains a new document then can replace the document kept on file. Confidentiality must be maintained.

7.4 Record Keeping

All workplace records should be updated to reflect the new name, title, and affirmed gender on receipt of a written request from the transgender person. If a request is made verbally, this should be confirmed in writing for avoidance of doubt. No formal evidence is required in support of the written request, although many transgender people may choose to provide a statutory declaration or deed poll confirming their change of name. Records must be updated regardless of whether the transgender person has any medical treatment or a GRC.

UK GDPR includes a right for individuals to have inaccurate personal data rectified or completed if it is incomplete. An individual can make a request for rectification verbally or in writing. You have 28 days to respond to a request⁹.

A transgender member of staff is under no obligation to provide a GRC to their employer; nor, should anyone be asked if they hold one unless it is strictly necessary. For most purposes, trans staff members with and without GRC's should be treated the same.

Managers must seek prompt advice from People Services and the Data Protection team on the current legislative requirements in relation to record keeping. Managers should ensure that all documents, public references (such as telephone directories, web biographies etc) are updated and do not disclose gender history.

7.5 Work Permits

Staff who are working in the Health Board 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 recorded on file in order that the work permit/visa continues to be valid.

⁹ <https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/individual-rights/individual-rights/right-to-rectification/ICO> [Accessed 14/8/24]

7.6 National Insurance

Staff who change their name will need to inform the Department of Work and Pensions.

7.7 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.

Where the organisation has to keep evidence of professional status or qualifications, it should be discussed with the member of staff how this information will be retained so as not to compromise or breach disclosure of protected information.

8. Recruitment and Selection

8.1 Recruitment

There should be no barriers to a person who identifies as transgender or people with transgender histories from applying for employment within NHS Highland.

All those involved in the recruitment and selection process must be made aware of their responsibilities to select fairly and without prejudice.

8.2 Confidentiality within the recruitment and selection process

Applicants do not have to disclose their transgender status during the recruitment and selection process including at interview, or as any condition of employment.

If applicants choose to disclose their status this must not be used as a reason for not offering the person employment with the organisation. Non-disclosure or subsequent disclosure are not grounds for dismissal.

8.3 Protection of Vulnerable Groups (Scotland) Act 2007

Specific guidance for transgender people completing a Disclosure form is available for information on the Disclosure Scotland website. Disclosure Scotland operates an application process for transgender people to assist in ensuring discretion is afforded to such individuals who do not wish the gender assigned at birth (and names) to be disclosed to the person or organisation requesting the Disclosure. Any questions on this process should be directed towards Disclosure Scotland Helpline on 0870 609 6006 (please ask to speak in confidence with the Operations Manager).

Existing employees may also seek advice from Recruitment to assist with this process.

9. Roles and Responsibilities

9.1 Role of Managers

Every manager employed by NHS Highland is responsible for promoting equal opportunities in practice and, where applicable, preventing patient and staff discrimination.

Line managers are responsible for: -

- ensuring that all staff are aware of this guidance and participate in any relevant training
- challenging staff who discriminate and ensuring that the relevant procedures are followed i.e. Bullying & Harassment policy
- supporting their staff to challenge discrimination from patients or the public
- agreeing a plan with a staff member who is proposing to transition or currently transitioning to ensure that they are supported throughout the process
- ensuring that a transgender person is addressed by their name and title of choice and treated as the gender they identify with
- Seeking personal development opportunities to improve their own knowledge on transgender and non-binary inclusion.

9.2 Role of Individual Staff

All employees have a personal responsibility to support the equal and fair treatment of colleagues, in line with NHS Scotland 'Once for Scotland' workforce policies. It is everyone's duty to ensure patients are treated consistently in a non-discriminatory manner and in line with Codes of Conduct and best clinical practice. All staff members are responsible for challenging/reporting discriminatory practice or language and can do this via their Manager or the available [Speak Up channels](#).

10. Monitoring Document Compliance and Effectiveness

- Monitored and reviewed in 12 months or when any updated relevant Once For Scotland guidance is published, whichever is sooner. Thereafter every 3 years.
- Monitoring will be undertaken by the NHS Highland Equality, Diversity & Inclusion Workforce Lead

11. Equality Impact Assessment (EQIA)

[2024-10 EQIA - Supporting Trans and Non Binary Staff Guidance \(October 2024\)](#)

12. Armed Forces Covenant

All NHS Boards and trusts across the UK are required by law to adhere to the principles of the Armed Forces Covenant (AFC) and to consider the needs of the Armed Forces and Veterans (AF&V) community when developing, reviewing or amending controlled documents.

Further information can be found via the link below:

[Armed Forces and Veterans \(scot.nhs.uk\)](https://scot.nhs.uk)

13. Data Protection

NHSH is committed to the protection of personal information in the development of its controlled documents. All policies must comply with the data protection principles in the Data Protection Act 2018.

[Data Protection \(scot.nhs.uk\)](https://scot.nhs.uk)

[Data protection notice | NHS Highland](#)

scot.nhs.uk

14. Consultation Details and Communication Plan

Consultation: List persons / group(s) included in consultation. Indicate whether feedback used / received and no suggested changes (FU), not used (FNU) or not received (NR).

Name/s of person or group	State which corporate services/staff groups the person or group represents	Date	Response: FU/FNU/NR
Area Partnership Forum	Senior Managers and staffside	11/10/24	NR
HR Sub Group	People services, staff side, operational management	03/10/24	FU
Acute LPF	All staff in Acute Services and staffside	22/08/24	NR
Community LPF	All staff in North Highland HSCP and staffside	23/07/24	FU
Corporate LPF	All staff in Corporate services and staffside	31/07/24	FU

Medical & Dental Bargaining	Medical Senior Managers	22/08/24	NR
Argyll & Bute JPF	All staff in A&B HSCP and A&B council	27/08/24	FU
All Staff Survey	All staff in organisation	26/08/24 –23/09/24	FU
EDI Oversight Group	Senior Managers, colleagues and staffside	23/07/24	FU

Communication plan: State in the box below how practice in this document will be rolled out across the organisation and embedded. A communication plan may be requested for review by the approving committee – if applicable, add owner details.

- Initial launch planned in conjunction with the launch of the refreshed phase 2.2 OFS workforce policies tabled for early 2025
- Storage and retrieval NHS Highland policies library
- Communicated to all managers and staff via Round Up publication
- Distribution for cascade to all SLT's, Staff Side organisations.
- Link on EDI intranet page

15. Abbreviations

List all abbreviations or acronyms in alphabetical order (even if they are explained within the document as well), for example.

GIC	Gender Identity Clinic
GRC	Gender Recognition Certificate
ECHR	European Convention of Human Rights
GDPR	General Data Protection Regulation
GOR	Genuine Occupational Requirement
EDI	Equality, Diversity and Inclusion
BMA	British Medical Association

16. References and Associated Documents

See Appendix D

17. Appendices

- Appendix A – Terminology Definitions and commonly used terms
- Appendix B – Case Studies
- Appendix C - Points to discuss or consider for Supporting Staff Transitioning
- Appendix D – Sources of help and additional information

Definitions and commonly used terms

Gender identity: a person's deeply felt internal and individual experience of gender, which may or may not correspond to their sex recorded at birth

Gender expression: a person's external gender-related behaviour and appearance, including clothing

Transgender or trans person: a person whose gender identity does not correspond to the sex they were assigned at birth. This includes trans men, trans women and non-binary people.

Trans man: a person whose sex was recorded as female at birth, but identifies and lives as a man

Trans woman: a person whose sex was recorded as male at birth, but identifies and lives as a woman

Non-binary person: a person who does not identify as solely male or female. They may identify as both, neither or something entirely different

Gender fluid: having a gender identity which varies over time

Transsexual person: legal/medical term for someone who lives (or wishes to live) permanently in the 'opposite' gender to that assigned at birth. Older terminology that is only appropriate to use if that is how a person refers to themselves

Gender incongruence: characterised by a marked and persistent incongruence between an individual's experienced gender and the assigned sex.

Gender dysphoria: medical term for deep-rooted and serious discomfort or distress because of a mismatch between a person's biological sex and gender identity; overwhelming desire to live in a different gender to that assigned at birth. This term is still used but has been updated in ICD 11 to 'gender incongruence'.

Gender reassignment: The protected characteristic used in the Equality Act 2010 to refer to those who are proposing to undergo, are undergoing, or have 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. This includes, but does not require, social and medical aspects of transition.

Intersex / Variation in sex characteristics: Umbrella term used for people who are born with variations in sex characteristics, which do not always fit society's perception of male or female bodies. Intersex is different from gender identity or sexual orientation.

Legal sex: The sex recorded on your birth certificate. Rarely relevant at work. Currently binary in the UK. Changed by applying to Gender Recognition Panel for a Gender Recognition Certificate and using this to change the sex listed on your birth certificate

Gender Recognition Certificate: Document issued by the Gender Recognition Panel which allows an individual to change the sex listed on their birth certificate. While this does afford some enhanced privacy rights, it is not necessary for a trans person to have obtained a Gender Recognition Certificate to change most of their identity documents or to be treated as their acquired gender at work or for administrative purposes

With thanks to Scottish Trans & Unison 'Transgender Workers Rights' Factsheet 2024

Appendix B - Case Studies

Difficulties with pronouns

Elliot has recently come out in the workplace to their colleagues with the support of their manager. Their Manager, Gina, has found some colleagues have struggled to adopt Elliot's new pronouns, which are they/them/theirs. Gina has also noticed Elliot seems despondent at work around these colleagues, when initially after coming out they had seemed in good spirits.

Gina asks Elliot in their regular catchup meeting how they have been getting on with colleagues and whether they are feeling supported in their transition, and that she had noticed some colleagues appeared to struggle a bit more with their pronouns. Elliot said that although they understand why some might find it hard to use singular they pronouns at first, they have found it tiring and demoralising when they are routinely needing to correct people and have altogether stopped correcting colleagues on their pronouns to avoid conflict.

Gina is disappointed to hear this, reassures Elliot, and suggests a few ways she can help them deal with this issue:

- Encouraging all colleagues in the team to complete the trans awareness training on TurasLearn
- Training from specialist external source on trans awareness
- Encouraging colleagues to update their email signatures to include their pronouns if they are comfortable to do so

Gina also discusses with Elliot how they would like colleagues to address others making mistakes with their pronouns and come to an agreement that the best way to handle mistakes. Elliot agrees that they'd like everyone to help with correcting pronouns in the team, including when they are not present.

Gina agrees with Elliot a helpful script to share via email after a team meeting where this issue will be raised:

Person A: "X has left his bag behind"

Person B: "Oh, you mean their bag. I'll see them in my next meeting"

Person A: "Oh sorry, of course. If you could let them know, I'll keep their bag safe until they pop back. Thanks"

All Elliot's team are happy to correct each other on Elliot's pronouns, and with the inclusion of pronouns in email signatures.

New employee checks disclose a person's trans history

Gabriel has submitted documents as part of onboarding checks when Recruitment colleague Adam notices don't match the information he provided on JobTrain.

Gabriel is contacted by Adam sensitively, using the name and gender provided on JobTrain. Adam mentions noticing a discrepancy between his ID documents and the information given in his application and asking to confirm the names and gender marker he would prefer to use for employment purposes. Gabriel confirms he wishes to use the name and gender he applied on JobTrain with, and that he has a deed poll to demonstrate legal name change if needed.

Adam confirms via the deed poll that Gabriel is using his legal name, assures Gabriel his documents and trans identity will not be shared with his manager and that it is up to him if he feels comfortable disclosing this. To facilitate his onboarding more swiftly, Adam signposts Gabriel to the guidance available for trans people around PVG checks.

[Information for transgender and non-binary disclosure applicants - mygov.scot](https://mygov.scot/information-for-transgender-and-non-binary-disclosure-applicants)

Employee returning to work following surgery

Sara is not out to her colleagues about her transgender status and has had gender affirming surgery which required a period of absence from the workplace to recover.

Her manager Ruaridh has made contact, and it seems Sara may be ready to return to work soon but has explained her surgeon has mentioned no heavy lifting was required for a certain number of weeks, and that she is still quite fatigued. Ruaridh agrees with Sara that an early occupational health referral would be useful to get some advice on what adaptations could be made to her role to facilitate her smooth return to work without hampering her recovery progress.

Sara meets with Occupational Health who suggest lighter duties and a phased return is needed for a time limited period, which Sara is happy with. Ruaridh implements this adjustment into the rota planning ahead of her return date.

Before Sara returns, Ruaridh reminds Sara that as with any other medical procedure, she is entitled to privacy regarding her medical history and discusses whether she has thought about how she might handle questions about her absence. They agree together a suitable way to handle colleagues' queries politely and without disclosing more than she is comfortable sharing.

Brief for Front Facing Staff/Reception Staff

This guidance can only be used with the employee's permission

Where patients have not previously met face-to-face with the transitioning employee, there should not be any need to link the two names or provide any explanation.

Patient: Can I have an appointment with John Smith?

Response: You may not as yet be aware of a recent change within the Department/Directorate/Clinic but John Smith will now be known as Mary Smith. The first available appointment with Mary Smith will be.....

Patient: No, I want to see someone else

Response: Okay, I can offer you an appointment with someone else on.....

Patient: Are you telling me that John Smith is now a woman?

Response: Yes, John Smith will now be known as Mary Smith. The department/Directorate/Clinic is very supportive of this change, and we can reassure you that this change will not have an impact at all on the care that we deliver.

Would you like me to make you an appointment with Mary Smith? I can offer give you the first available appointment which will be on.....

Patient: So has John Smith left?

Response: No, John Smith will now be known as Mary Smith. The department/Directorate/Clinic is very supportive of this change and we can reassure you that this change will not have an impact at all on the care that we deliver. Would you like me to make you an appointment with Mary Smith? I can offer give you the first available appointment which will be on.....

A manager supporting a workplace gender transition which isn't 'linear'

Manager Lucy is approached by her employee Emma, who wants to have a conversation about something private. Lucy arranged to meet Emma in a quiet room where they're able to have a chat, and Emma shares she thinks she might be a trans man. Lucy listens openly to Emma's concerns and arranges to speak with Emma over a few meetings as there seems a lot to discuss.

After a few weeks, Emma discusses thinking about changing her name to Ed and pronouns to he/him. Lucy is supportive, and checks in about what name she should use in the workplace, or in 1:1 meetings. Emma isn't sure, so continues to go by Emma and she/her pronouns at work. Lucy assures Emma she is happy to practice using a different name if needed on a 1:1 basis, and that she would fully support new pronouns in the workplace, and model using them to colleagues. Emma is grateful but doesn't want to go ahead with informing all colleagues until she is sure its the right decision for her and takes more time to consider it.

Proactively Lucy completes trans awareness training on Turas and understands that gender transitions can be a time of exploration and self-reflection, so checks in with Emma regularly on her wellbeing at work.

After a few months, Emma shares trying using new pronouns in other contexts with trusted friends and at trans community groups. She decided he/him pronouns don't feel quite right, but she/her pronouns and they/them pronouns both feel right. They let Lucy know they settled on a new name of Emrys and would like to go ahead with changing their name in the workplace as some other documents have been changed now. They'd like to use both she/her and they/them pronouns, and Lucy discusses with Emrys how best to reflect their new identity when speaking to others. Emrys would like to be introduced to colleagues with they/them pronouns, but doesn't mind how patients refer to them as most patients will likely use she/her. Lucy and Emrys agree for Emrys to let colleagues know by email, and Lucy to reaffirm Emrys' message with a reply that affirms the supportive approach to their new pronouns.

Appendix C - Points to discuss or consider for Supporting Staff Transitioning

A Person Centred approach should be taken and all discussions/actions should be discussed and agreed on a 1:1 basis with the individual concerned.

Discussion points and Action Plan

Are there any temporary or permanent changes / reasonable adjustments to the role which should be considered to support the employee? Considerations should include security aspects such as lone working, night working, or possibility of returning to a previous name/pronouns following a trial period.	
Is any time off required? If so how will this be managed? Consider flexible working methods, if appropriate	
What will the employee's title and name be, if known? What pronouns will be used? When will they start using these? Will there be any phased steps, such as a phased return to work or between introducing a staff member's name and pronouns to internal staff and public?	
Are there any dress codes to be considered? Are new uniforms needed?	
If applicable, how will single sex working requirements be managed?	
When and how should colleagues be informed of the transition? Does the employee want other colleagues to be informed? How involved do they want to be in sharing this information with other colleagues and/or answering any questions they may have?	
Is there any guidance material which the employee wishes to share with managers and colleagues?	
Should the employee encounter unacceptable behaviour towards them (colleagues or service users) who should this be reported to?	

Island/remote/rural specific: has this information been shared with anyone else? Discuss the degree of confidentiality the employee wishes for their transition at this time.	
Ensure non-binary colleagues are sensitively made aware that, due to limitations around legal recognition of non-binary gender identities, employee payroll and IT systems cannot input any gender identity (or lack of) other than M or F	
Are there any other actions not covered by above?	

Actions agreed

Date of next meeting

Appendix D - Sources of help & additional information

Turas Learn Modules:

[Transgender awareness | Turas | Learn \(nhs.scot\)](#)

[Introduction to equality, diversity and human rights | Turas | Learn \(nhs.scot\)](#)

[Courageous conversations | Turas | Learn \(nhs.scot\)](#)

RCN Guidance: 'Fair care for trans and non-binary people'

[Fair Care for Trans and Non-binary People| Royal College of Nursing \(rcn.org.uk\)](#)

BMA Guidance: Inclusive care of trans and non-binary patients

[Inclusive care of trans and non-binary patients \(bma.org.uk\)](#)

[I am your trans patient | The BMJ](#)

GMC Guidance: Trans Healthcare

[Trans healthcare - ethical topic - GMC \(gmc-uk.org\)](#)

NHS Confederation: Leading for all: supporting trans and non-binary healthcare staff

[Leading for all: supporting trans and non-binary healthcare staff | NHS Confederation](#)

NHS Education for Scotland: Transgender Care Knowledge and Skills Framework

<https://frameworks.nes.digital/transgender-care-knowledge-and-skills-framework/>

Unison Resources:

- Trans equality model policy: [2023-Trans-model-policy.docx \(live.com\)](#)
- 'Transgender Workers Rights Factsheet 2024'

Gendered Intelligence genderedintelligence.co.uk guidance and training on gender diversity and workshops to improve the quality of trans peoples' lives

Gender Identity Research and Education Society gires.org.uk information for trans people, their families and the professionals who support them

Highland Pride

This is a registered charity and run by volunteers. They organise social events and were the organisers of ProudNess 2018.

Contact: [Highland Pride | Facebook](#)

Scottish Trans

Working to improve gender identity and gender reassignment equality, rights and inclusion in Scotland.

Contact: <https://www.scottishtrans.org>

LGBT Helpline Scotland

Providing information and emotional support to lesbian, gay, bisexual and transgender people and their families, friends, colleagues and supporters across Scotland. Also offer support to those questioning or wanting to discuss their sexuality or gender identity.

Contact: [LGBT Health and Wellbeing](#) <https://www.lgbthealth.org.uk/>

Age Scotland

A safe space where LGBTQ+ people over 50 can come together to discuss issues of inequality, increase the understanding of the needs of older LGBTQ+ people across society, and empower to be a collective voice to influence change.

Four meetings a year, twice in person and twice online to make them as accessible and inclusive as possible.

[LGBTQ+ Scottish Older People's Network \(agescotland.org.uk\)](http://agescotland.org.uk)

National Gender Identity Clinical Network for Scotland

There are four main centres in Scotland:-

Greater Glasgow and Clyde – for people up to 17.5yrs and adults over 17.5 years (accepts self-referral or GP referral)

Grampian – adult service for people over 17.5 years (GP referral)

Lothian – adult service for people over 17.5 years (GP referral)

Highland– adult service for people over 17.5 years (GP referral)

Contact: <https://www.ngicns.scot.nhs.uk/services/gender-identity-clinics/>

[Gender identity and your rights \(nhsinform.scot\)](https://www.nhs.uk/healthcare/gender-identity-and-your-rights/nhsinform.scot)

NHS Scotland Gender Reassignment Protocol –

<https://www.publications.scot.nhs.uk/files/dl-2024-21.pdf>

Contact: Email: nss.ngicns@nhs.scot

Stonewall Scotland

Campaign for the equality of LGBT people across Britain.

Contact: <https://www.stonewallscotland.org.uk/>

Trans Unite

A website which allows members of the transgender & non-binary communities to find a support group local to them (or even an online-only group):

Contact: <https://www.transunite.co.uk/>

Publications in Alternative Formats –
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NHS Highland is happy to consider requests for publications in other language or formats such as large print. Contact Communication team on nhsh.nhshcommunications@nhs.scot for further advice
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