**GENDER IDENTITY POLICY**

**1 Introduction**

* 1. **Policy statement**

In 2019, NHS England published the [service specification for adult gender identity](https://www.england.nhs.uk/publication/service-specification-gender-identity-services-for-adults-non-surgical-interventions/)

[services (non-surgical interventions)](https://www.england.nhs.uk/publication/service-specification-gender-identity-services-for-adults-non-surgical-interventions/) with the aim of providing consistency and

equality across England for transgender patients.

Following this, in 2020 NHS England published the [gender identity development](https://www.england.nhs.uk/publication/gender-identity-development-service-for-children-and-adolescent-service-specification/)

[service for children and adolescent service specification](https://www.england.nhs.uk/publication/gender-identity-development-service-for-children-and-adolescent-service-specification/).

* 1. **Status**

The organisation aims to design and implement policies and procedures that meet

the diverse needs of our service and workforce, ensuring that none are placed at a

disadvantage over others, in accordance with the [Equality Act 2010.](https://www.legislation.gov.uk/ukpga/2010/15/contents) Consideration

has been given to the impact this policy might have with regard to the individual

protected characteristics of those to whom it applies.

This document and any procedures contained within it are non-contractual and may

be modified or withdrawn at any time. For the avoidance of doubt, it does not form

part of your contract of employment.

* 1. **Training and support**

The organisation will provide guidance and support to help those to whom it applies

to understand their rights and responsibilities under this policy. Additional support will

be provided to managers and supervisors to enable them to deal more effectively

with matters arising from this policy.

**2.1 Who it applies to**

This document applies to all employees of the organisation and other individuals

performing functions in relation to the organisation such as agency workers, locums

and contractors.

Furthermore, it applies to clinicians who may or may not be employed by the

organisation but who are working under the Additional Roles Reimbursement

Scheme (ARRS).

[1 Network DES Contract specification 2021/22](https://www.england.nhs.uk/publication/network-contract-des-specification-2021-22/)

**2.2 Why and how it applies to them**

This document has been produced to support all staff at The Island Surgery to

ensure that the care of transgender and non-binary patients is managed in the

appropriate manner and in accordance with the guidance. All staff should be aware

of the need to ensure that patients are fully involved about decisions relating to their

health and wellbeing and that they are offered the necessary support at all times

1. **Definition of terms**
	1. **Trans or transgender**

An umbrella term to refer to anyone whose gender identity does not completely

match the gender they were given at birth. This includes, but is not limited to, trans

women, trans men and non-binary people.

* 1. **Non-binary**

Someone who does not identify as a man or a woman or who identifies as both or as

something else completely. A non-binary person may or may not identify as trans.

* 1. **Gender incongruence**

Describes the situation where a person’s gender is different to the gender they were

assigned at birth

* 1. **Gender dysphoria**

Feelings of discomfort and/or distress related to gender incongruence

* 1. **Gender identity**

A way of describing the gender with which a person identifies such as man, woman

or non-binary

* 1. **Transition**

Often used to describe the process a trans person goes through from being known

as one gender to being known as another. This transition may be social involving a

change of name and presentation and it may involve medical intervention in the form

of hormone replacement therapy and/or surgery. This term, however, can mean

different things to different people. Some people prefer the term gender

reassignment.

* 1. **Trans woman**

A woman who is trans, somebody whose gender identity is woman and who was assigned male at birth.

* 1. **Trans man**

A man who is trans, somebody whose gender identity is man and who was assigned

female at birth.

* 1. **Pronouns**

Preferred gender pronouns or personal gender pronouns refer to the set of pronouns

that an individual wants others to use in order to reflect that person's gender identity.

This may be he/him, she/her, they/them, a mix of these or something different.

A further glossary of terms and FAQs can be found at [www.stonewall.org.uk](http://www.stonewall.org.uk).

1. Treatment pathway
	1. Referral to a Gender Identity Clinic (GIC)

Primary care clinicians in England can refer those patients who request support with

their gender identity directly to a GIC. There are currently seven national GICs in

England and patients can choose which clinic they would prefer to be referred to.

There is no requirement for a GP to first refer the patient for a mental health

assessment, nor do GPs need to request prior funding approval.

The following links provide advice on accessing the UK nations’ gender identity

clinics. Multiple regional pilot services have been established across England since

2020 to provide local support and reduce waiting times. These include services in

Greater Manchester, London, Cheshire and Merseyside

**Country Gender Identity Clinic Information**

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England [NHS England – How to find an NHS gender identity clinic](https://www.nhs.uk/nhs-services/how-to-find-an-nhs-gender-identity-clinic/)

Scotland [NHS Scotland – Gender identity clinics](https://www.ngicns.scot.nhs.uk/gender-identity-clinics/)

Wales [Welsh gender service](https://cavuhb.nhs.wales/our-services/welsh-gender-service/)

Northern Ireland [NI Regional gender identity service](https://belfasttrust.hscni.net/service/regional-gender-identity-service/)

* 1. **Geographical differences**

There are differences affecting countries within the United Kingdom and as a result

separate guidance has been published:

England [RCGP Guidelines for the care of trans patients in primary care](https://www.rcgp.org.uk/policy/rcgp-policy-areas/transgender-care.aspx)

Scotland [NHS Scotland – Gender Reassignment Protocol](https://www.sehd.scot.nhs.uk/mels/CEL2012_26.pdf)

Wales [Gender Wales](https://gender.wales/)

Northern Ireland [RCGPNI – Guidance for the Care of Trans People in Primary](https://gendergp.com/wp-content/uploads/2016/03/RCGPNI-Guidance-for-the-care-of-Trans-people-in-primary-care-2015-web4.ashx_.pdf)

[Care](https://gendergp.com/wp-content/uploads/2016/03/RCGPNI-Guidance-for-the-care-of-Trans-people-in-primary-care-2015-web4.ashx_.pdf)

* 1. **GMC Ethical Hub**

The General Medical Council (GMC) has a collection of resources titled the ‘Ethical

Hub’ that explores how to apply the GMC’s guidance in practice and focuses on

areas that clinicians have often requested support for from the GMC.

This [link](https://www.gmc-uk.org/ethical-guidance/ethical-hub/trans-healthcare) to the Ethical Hub will help clinicians to address important ethical issues and

incorporate good practice into their work

* 1. **The protocol**

At the Island Surgery staff must ensure they follow the detailed guidance in

each nation of the UK (use the links at paragraph 4.2), ensuring the patient is fully

involved in the decision-making process.

* 1. **Supporting documentation**

In addition to the referenced material throughout this policy, primary care in particular

should also refer to the UK intercollegiate [Good Practice Guidelines for the](https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/cr181-good-practice-guidelines-for-the-assessment-and-treatment-of-adults-with-gender-dysphoria.pdf?sfvrsn=84743f94_4)

[Assessment and Treatment of Adults with Gender Dysphoria](https://www.rcpsych.ac.uk/docs/default-source/improving-care/better-mh-policy/college-reports/cr181-good-practice-guidelines-for-the-assessment-and-treatment-of-adults-with-gender-dysphoria.pdf?sfvrsn=84743f94_4) for further supporting

information.

1. Administration

5.1 Medical records

At the Island Surgery a patient’s request to change their name, title or

gender marker that is indicated on their medical records will be accepted. The patient

does not need to have been issued with a Gender Recognition Certificate or have an

updated birth certificate for their records to be amended.

It should be noted that trans patients have a legal right to change their name, title

and gender marker on their healthcare records.

Do not change a title to Mx unless this is what the patient requests. Non-binary

people may prefer Mx but a trans person may prefer Mr or Mrs. Changing a title will

not affect screening recalls.

Recommendation: Accept a request from a patient to change their name, title and/or

gender marker without requesting supporting information.

**5.2 Processing the request**

When a patient changes their gender marker, i.e., male or female, they are given a

new NHS number and must be registered as a new patient at the organisation. All

previous medical information relating to the patient needs to be transferred into a

newly created medical record.

When the patient informs The Island Surgery that they wish to change their

gender marker, the Island Surgery must inform the patient that this will

involve a new NHS number being issued for them and the potential implications of

this. Patients should be offered a consultation with a clinician to discuss what

information from their previous records they are happy to have transferred over and

the potential risks of incomplete medical records. This discussion should be clearly

documented.

This process is not reversible. Should the patient wish to revert back to their original

gender marker, they would then need to receive a third NHS number.

The process to be followed is that The Island Surgery notifies PCSE that a

patient wishes to change gender via the [enquiries form](https://pcse.england.nhs.uk/contact-us/). The organisation should

include the patient’s name and NHS number in the notification to PCSE.

PCSE sends The Island Surgery a deduction notification for the patient and

emails the main contact for the organisation (if available) the new details for the

patient. The main contact for The Island Surgery is Jackie Brown: Practice Manager.

a. The Island Surgery accepts the deduction and registers the patient

using the new details provided by PCSE. It is important that the patient’s

original record is NOT updated with their new NHS number. If this happens,

they will not be registered and will miss out on continuity of care.

b. PCSE sends a new patient medical record envelope with the patient’s

updated details to The Island Surgery.

c. The GP practice The Island Surgery creates a new patient record

using the new details and transfers medical information from the original

medical record. Any information relating to the patient’s previous name, title,

gender identity or NHS number should not be included in the new record.

It is important to complete the new registration for the patient within five working days

to ensure no interruption to patient care.

When registering new patients, do not select ‘I’ (indeterminate) as the gender

category. Only select either ‘M’ for male or ‘F’ for female.

PCSE has a [process for registering the change of gender marker](https://pcse.england.nhs.uk/media/2892/process-for-registering-a-patient-gender-re-assignmentv10.pdf) on primary care

records.

**5.3 Recalling patients for screening**

Transgender and non-binary patients should be offered organ specific cancer

screening. If a patient is issued with a new NHS number, they will not automatically

be recalled for certain sex-specific screening programmes, for example, a trans man

with a cervix will not automatically be recalled for a smear test if he changes his

gender marker from female to male.

Screenings that will be affected by a change of gender marker are breast, cervix and

AAA. Bowel screening is unaffected. Public Health England has developed

[information for trans and non-binary patients regarding population screening.](https://www.gov.uk/government/publications/nhs-population-screening-information-for-transgender-people/nhs-population-screening-information-for-trans-people)

The Island Surgery will ensure that appropriate screening is offered to

patients and individual arrangements for such patients will be conducted using the

following process:

a. It will be explained to the patient that they will not be recalled for some

types of screening when changing their gender marker.

b. The patient will be informed as to what screening would be appropriate for

them and which types may be affected. They will be asked to work with

The Island Surgery to ensure that this happens.

c. Screening conducted will be according to the organs/tissues present.

d. Where relevant, confidentially and with the patient’s permission, the patient

will be identified as trans gender on paperwork/forms accompanying the

samples. It is critical that the reason for this is explained and consent

given.

e. A copy of the results will be provided to the patient for future reference.

f. Where possible, a reminder will be issued for future screening via the

primary care clinical system or a confidential database. This can be done

by placing a relevant alert or reminder on the medical record. However,

the patient will also be advised to keep a note of when screening is due

and to request this if they do not receive an automated reminder

Ensuring that patients maintain regular screening is vitally important. It is

imperative that the patient is invited to The Island Surgery to discuss these

with the GP and the above steps advised.

5.4 UK General Data Protection Regulation (GDPR) compliance

It is the responsibility of the data controller at The Island Surgery to ensure

that data is *“accurate and, where necessary, kept up to date; every reasonable step*

*must be taken to ensure that personal data that is inaccurate, having regard to the*

*purposes for which they are processed, are erased or rectified without delay”.*

For more information, refer to the organisation’s UK GDPR Policy.

**5.5 Confidentiality**

It is clearly outlined by the GMC that *“it is unlawful to disclose a patient’s gender*

*history without their consent. When communicating with other health professionals,*

*gender history need not be revealed unless it is directly relevant to the condition or*

*its likely treatment*”.

Additionally, the GMC states that “*there may be circumstances where it is necessary*

*to disclose the patient’s gender history. This will enable the service that will be*

*dealing with the patient to be prepared to do so, thereby ensuring the necessary level*

*of support is available to the patient at the time of his/her appointment*”.

Supporting information regarding disclosure, confidentiality and ethics can be found

in [Section 22 of the Gender Recognition Act 2004 and](https://www.legislation.gov.uk/ukpga/2004/7/section/22/data.pdf) at [www.gmc-uk.org](http://www.gmc-uk.org).

Further compliance with the UK GDPR is required in relation to confidentiality. The

data controller must ensure the data is collected for specified, explicit and legitimate

purposes and not further processed in a manner that is incompatible with those

purposes.

Furthermore, data processors (staff) must ensure the data subject (patient) has given

consent to the processing of his or her personal data for one or more specific

purposes, i.e., referral for treatment, etc.

At The Island Surgery the data controller is Dr Ana Linacero-Gracia (Partner). Any

questions regarding confidentiality and the sharing of data should be referred to the

aforementioned person in the first instance.

**5.6 Respect**

It is imperative that patients who are trans or non-binary are addressed in the correct

manner. All staff at The Island Surgery are to use the patient’s preferred name

and title at all times.

Where doubt exists, staff should ask the patient “How do you prefer to be

addressed?” and, if necessary, “What pronouns do you use?” (i.e., he/him, she/her,

they/them).

1. **Summary**

All staff are to be mindful that the patient population at The Island Surgery is,

by nature, diverse. Effective communication is one way in which the organisation

ensures that all patients are treated with respect and dignity whilst also involving

patients in decisions about their healthcare, always ensuring they are offered the

appropriate level of care and support.

Useful additional resources:

[TransActual – Supporting trans patients: A brief guide for GP surgery staff](https://www.transactual.org.uk/gp-surgery-trans)

[Applying for a gender recognition act certificate (GRC)](https://www.gov.uk/apply-gender-recognition-certificate)

[Information for trans and non-binary people seeking fertility treatment](https://www.hfea.gov.uk/treatments/fertility-preservation/information-for-trans-and-non-binary-people-seeking-fertility-treatment/)

[Applying for a passport Additional information for transgender customers](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/251703/Applying_for_a_passport_additional_information.PDF)

ADMINISTRATION

Patient requests a change to one or more of the following:

• name

• title

• gender marker on medical records

**Name or title only**

Update record on clinical system.

Note: do not assume a title of Mx –

patient should be asked what title

they would prefer.

**Gender Marker (see Sec 5.2)**

Offer patient a consultation (documented) with a clinician to:

1. Discuss what information from previous records they

want to be transferred.

2. Explain the risks associated with incomplete records.

3. Advise that the process is irreversible.

4. Communicate how long the process is likely to take.

**Practice** notifies PCSE that patient wishes to change gender using the [PCSE enquiries form.](https://pcse.england.nhs.uk/contact-us/)

**PCSE** sends practice a deduction notification and emails practice main contact for new details for patient.

**Practice** then

1. Accept deduction and

2. Register patient using new details provided by PCSE. (Note: record **must not** be updated with new NHS number)

**PCSE** send new patient medical record(s) envelope with updated details.

**Within 5 working days the practice** should

1. Create new patient record using new details and

2. Transfer medical information from the original record.

NOTES:

• Information relating to patient’s previous name/title/gender identity linked to their NHS number should NOT be included

in the new record.

• Do **NOT** select I (‘indeterminate’) as the gender category. Only use M or F. (PCSE does not recognise use of

‘indeterminate’ as a marker, and are obliged to recall patients for appropriate screening)

**Practice** to follow own policy on ensuring that patients are recalled for screening services (breast, cervix, AAA) – See Sec 5.3