

 <p><b>GIG</b> CYMRU <b>NHS</b> WALES</p> <p>Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p><b>Name of Meeting</b> People and Organisational Development Committee</p> <p><b>Date of Meeting</b> 08 November 2023</p> <p><b>Agenda item:</b> 4.2b</p>
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## Policy / Procedure Review and Approval Report

### Section 1 - Policy / Procedure Information

<b>Policy / Procedure Title</b>	Trans Inclusion Policy
<b>Policy Owner</b>	Ffion Grundy
<b>Lead Executive</b>	Neil Lewis
<b>PHW / All Wales?</b>	PHW
<b>Date of last Review</b>	2017
<b>Is the current policy / procedure within date?</b>	No, review date March 2021
<b>Approving Body /Group</b>	People & OD Committee
<b>Version Number</b>	1

### Section 2 – Recommendation

#### FOR APPROVING BODY:

That the People and Organisational Development Committee:

- **Considers** the information contained within the Policy and Equalities Impact Assessment
- **Note** that the Leadership Team have endorsed the Policy to the People and Organisational Development Committee for approval
- **Approve** the Policy

### 3 – Details of the Review:

#### Background:

<b>Reason for review</b>	Previous guidance was called Transitioning at Work which detailed information about how a trans person could transition at PHW. The new policy is called Trans Inclusion Policy which includes all relevant information relating to trans and non-binary people experiences of working in PHW, including but not limited to transitioning.
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#### Consultation:

Has this Policy / Procedure been through the appropriate consultation process?	Yes
Date range of consultation:	25/08/2023 -27/09/2023
Please provide details of any feedback received and outline what changes if any were made to the document as a result:	
<ul style="list-style-type: none"> <li>• Attach links to all relevant policies</li> <li>• Link to WHIWB</li> <li>• Link to Being Our Best</li> <li>• Update with correct EAP information - Vivup</li> </ul>	
Had this policy / procedure been considered by any other groups?	Yes Local Partnership Forum
If so, please provide detail of any comments / feedback or amendments made to the documents as a result of this	
<ul style="list-style-type: none"> <li>• Add in link to Stonewall glossary of terms in Welsh and English.</li> </ul> <p>The Leadership Team also considered and commented as necessary on the Policy during October 2023.</p>	

#### 4 – Impact Assessments

<b>Equality and Health Impact Assessment</b>	Has been completed and included as an appendix
<b>Risk and Assurance</b>	Supports Strategic Risk 4 - an inclusive and welcoming workplace where all staff are able to meet their full potential and are respected as individuals
<b>Health and Care Standards</b>	<p>This Policy / Procedure supports and/or takes into account the <a href="#">Health and Care Standards for NHS Wales</a> Quality Themes</p> <p>Governance, Leadership and Accountability Theme 6 - Individual Care Theme 7 - Staff and Resources</p>
<b>Financial implications</b>	N/A
<b>People implications</b>	N/A

#### 5 - Implementation

Implementation plan (with timescales)		
Next steps	Timescale	Responsible officer(s)
Consultation	25 August to 27 September	
Once approved, the procedure will be translated and launched via the staff and manager bulletins and updated intranet pages.	Within 4 weeks of approval	Ffion Grundy



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Public Health  
Wales

**Reference Number:** XXXX

**Version Number:** XXX

**Date of Next review:** XXX

## TRANS INCLUSION POLICY

### Introduction and Aim

Public Health Wales (PHW) is committed to ensuring that trans\* people are treated with dignity and respect, are not disadvantaged in the workplace and feel safe to express their gender identity freely.

\*We use the term trans as an umbrella term to capture people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Trans people may describe themselves using a wide variety of terms, these include but are not limited to, non-gendered, non-binary and transgender. Non-binary is an umbrella term for people whose gender identity doesn't sit comfortably with 'man' or 'woman'. Non-binary identities are varied and can include people who identify with some aspects of binary identities, while others reject them entirely.

This Trans Inclusion Guidance aims to -

- Provide guidance and support for trans employees to ensure they can access clear and concise information about being trans at Public Health Wales (PHW) and all elements of transitioning.
- Clearly outline what trans staff can expect from colleagues, management, and the wider organisation in terms of best practice and the law.
- Set out the obligations and expectations for line managers of trans staff (trans and cis managers), People and OD and senior management.
- Outline the wider context for trans people working at PHW and the impact of being trans or transitioning in the workplace.

There are underpinning strategies that support the update of this policy detailed below -

Our **People Strategy** says -

Focus on our culture and employee experience striving to create an inclusive, healthy and empowering environment that actively recognises what matters most to our diverse and multi-generational workforce and reflects the communities we serve.

Our **2020-2024 Strategic Equality Plan** states -

**Objective 1:** Understand and advocate for diversity and inclusion We will ensure a safe, inclusive environment where staff understand diversity and

inclusion enabling them to develop, thrive and reach their full potential, and where all staff will be able to advocate for diversity and inclusion in the course of their work.

#### **Linked Policies, Procedures and Written Control Documents**

Identify interdependencies with other policy/control documents.

[Managing Attendance at Work.](#)

[Occupational Health](#)

[Mental Wellbeing Policy](#)

[Special Leave Policy](#)

[Respect and Resolution Policy \(All Wales\)](#)

[Flexible Working Policy](#)

[Work How It Works Best](#)

[Being Our Best](#)

#### **Policy Commitment**

- The aim of this policy is to ensure all information relating to trans and non-binary people's experience of working in PHW is all in one document.
- The policy will outline all relevant information for trans and non-binary people and the staff they work with.
- We are committing to create a clear and relevant policy which supports trans and non-binary people, line managers and colleagues in creating an inclusive organisation.
- This policy provides details of the Equality Act 2010, Gender Recognition Act 2004 and Data Protection Act 1998

Our documents will be written in plain language so that all staff, stakeholders and where appropriate people using our services, are clear about what is expected. It will be easily accessible on our policy intranet page, our EDI pages and Enfys page.

The EDI Manager will provide central management of the document database and monitor compliance with this policy.

There will be clear and appropriate approval mechanisms that reflect the scope and content of the document.

#### **Scope**

This policy is applicable for all members of staff, including those who are trans and non-binary, line managers and all other staff members who can support trans and non-binary people. This policy applies to all of our staff in all locations including those with Honorary Contracts.

<b>Equality and Health Impact Assessment</b>	To add new EHIA
<b>Approved by</b>	Business Executive Team
<b>Approval Date</b>	TBC
<b>Review Date</b>	TBC
<b>Date of Publication:</b>	TBC
<b>Accountable Executive Director/Director</b>	Neil Lewis, Director of People & Organisational Development
<b>Author</b>	Ffion Grundy, Equality Diversity & Inclusion Manager

**Disclaimer**

**If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Corporate Governance](#).**

Summary of reviews/amendments				
Version number	Date of Review	Date of Approval	Date published	Summary of Amendments

**Commented [AR1]:** Complete with details of any previous reviews of any previous documents (including this document).

## **1 Introduction**

### **1.1 Purpose**

Public Health Wales (PHW) is an inclusive and welcoming workplace where all staff are able to meet their full potential and are respected as individuals.

The main purpose of this guidance is to help all PHW employees to feel supported, included and comfortable. Staff should feel that they're working in an environment that is respectful, tolerant and nurturing, regardless of their trans status or history, or their gender identity or expression. Some trans employees will feel no desire or need to be recognised as a trans person at work, and it should be left entirely at their discretion whether they wish to ever inform others about this aspect of their identity.

### **1.2 Scope**

This policy has a wide scope and applies to every person whose gender identity is something other than cis and/or dyadic.

Cis/cisgender is when your gender is self-identified as the same as the sex you were assigned at birth.

Dyadic is when your sex characteristics align with the sex you were assigned at birth.

### **1.3 Intersectionality**

Public Health Wales (PHW) recognises that gender identity can intersect with other identities and people covered by this guidance may have other elements of identity including race, ability, class and faith. It's important to recognise that these facets may interact with each other.

### **1.4 Language, names and pronouns**

PHW will take all necessary steps to ensure that an individual's change of name and pronoun is respected. A change of name by deed poll is not required for a person's name to be changed on our ESR system.

Staff in PHW can choose to be addressed by any name, and the pronoun(s) that corresponds to their gender identity (e.g., *she/her*, *he/him*, or a gender-neutral pronoun such as *they/them*). Some people may choose to use multiple pronouns (for example,



*she/they*) and may want people to use them interchangeably, prefer different pronouns on different days, may have a preference for one, or they may not mind which pronoun people use to refer to them.

The intentional or persistent refusal to respect a person's gender identity (for example, intentionally referring to the employee by a previous name or a pronoun that does not correspond to the employee's gender identity) can constitute harassment. If you are unsure what pronoun a colleague uses, you can politely ask your colleague what pronoun they use.

For ID security cards, trans and non-binary staff can request multiple ID cards should they want to use different names and pronouns on different days. Please contact the Head of Estates and Health and Safety to request these.

PHW has two guides on how to add pronouns to [email signatures](#) and [Teams/M365 profile](#)

For more definitions, visit [Stonewall's glossary](#) / [geirfa](#) which is updated every 6 months.

### **1.5 Confidentiality and data privacy**

PHW supports trans employees in making decisions about who, when and how they share information about their trans status, history or gender identity and recognises employees' rights to discuss their gender identity and transition openly if they choose to do so or to keep that information private.

Trans status and history is private, sensitive data and confidentiality should be maintained at all times, unless expressed, written or verbal permission is obtained from the individual. You may only share details of an individual's trans status/history with their explicit permission. To do so without explicit permission is a breach of data protection legislation.

Any breaches of confidentiality regarding an employee's trans status or history will be treated in a serious manner and, where appropriate, will be dealt with under our disciplinary procedure.

### **1.6 Discrimination, intimidation, and harassment**

Public Health Wales will not tolerate discrimination, intimidation or harassment on the grounds of gender identity (as well as sex, gender expression, pregnancy, sexual orientation, race, colour, nationality, ethnic or national origin, religion or belief, marital

status, civil partnership status, disability, age or any other grounds) and will treat a complaint of discrimination on these grounds as seriously as any other complaint. Discrimination, intimidation or harassment on the grounds of gender identity will be treated as an act of gross misconduct and may lead to the dismissal of any employee who is found to have acted in this way.

Discrimination by association or perception, where someone is treated less favourably as a result of being associated with or because someone is perceived to be trans is also unlawful under the Equality Act 2010.

## **2. Roles and responsibilities**

**2.1** Relevant responsibilities are detailed accordingly in each relevant part of the policy.

## **3. Transitioning at work**

### **3.1 Guidance for transitioning individuals**

All staff at PHW have a responsibility to treat their colleagues with dignity and respect, regardless of their gender identity. We are committed to supporting any individual who express an intention to transition, and we will work with you to ensure that transition at work is as smooth as possible.

We understand that, for a transitioning individual, that first conversation at work may require a great deal of courage and trust. We want to make that as easy as possible for you and would encourage you to have an initial conversation with your line manager, who will have sufficient knowledge and awareness of trans issues, to be able to answer some of your questions in relation to PHW's policy.

It is important to recognise that transitioning will mean different things to different people (surgery or otherwise) and these changes are very personal. Some people may only change their name and pronouns and not seek medical intervention and others may choose to undergo some medical procedures. PHW will support all staff no matter what transitioning looks like for them.

Potential areas of discussion between trans people and the line managers

- Communication with the wider team and confidentiality
- The [legal framework](#) and how to support during this time

- Your support and point of contact during transition (named person)
- Support you'd like from line manager and wider team (if any)
- Time off for medical or surgical procedures
- Uniform (page 13)
- Use of facilities (page 13)
- Name change.
  - Point of change or expected point.
  - HR records, national insurance, pension
  - Updating a person's name with their new identity (email address, staff lists, a new ID security card or multiple ID cards, intranet/Yammer entries, informing immediate team)

### **3.2 Key internal contacts and links**

Employees who are transitioning, and their managers can also discuss issues around the application of this guidance in confidence with the below contacts and may signpost to additional support if necessary.

- Your line manager
- People and OD Team
- Equality, Diversity and Inclusion Manager
- [Enfys, LGBTQ+ network group](#)
- Trade Unions
- [Wellbeing SharePoint page](#)
- [LGBTQ+ SharePoint page](#)

### **3.3 External support**

- Gendered Intelligence (<http://genderedintelligence.co.uk/>)
- Gires (<https://www.gires.org.uk>)

- Transgender Europe (<https://tgeu.org/>)
- ILGA (<https://ilga.org/>)
- UK Intersex Association (<http://www.ukia.co.uk/>)

### **3.4 Guidance for line managers**

Transitioning is the process of moving away from the sex a person is assigned at birth, and towards reflecting their gender identity through gender expression. Some, and not all, trans people decide to transition. There is not one right way for an individual to transition, and every trans person will have a different journey.

Social transition can take the form of presenting with a different gender expression, for example, by making use of cultural and social cues due as changed name, pronoun, hair, clothes and speech.

Medical transition can involve interventions such as hormone therapy and/or surgery. Under NHS care, social transition is needed to access any medical interventions. Many trans people choose not to, or are unable to, undertake any aspect of medical transition.

A manager must follow the guidance in section 1.5 on maintaining confidentiality of an individual's social and/or medical transition.

### **3.5 Supporting a trans employee as a manager**

- Firstly, if a member of staff tells you they are trans or non-binary – thank them for sharing this information with you and let them know that you and PHW will support them.
- Discuss with the person, what they would like the next steps to be, please use information in section 3.1 for guidance on key topics to cover in this conversation.
- If the trans/non-binary individual would like support announcing this information to others in PHW, you can help them to create an internal communications plan informing colleagues about their gender identity/name change/pronouns.
- Names, photos and HR records can be changed in our systems (details above) and these can be changed at an agreed date with the person you are managing.
- If the trans or non-binary staff member experiences any bullying or harassment, you must act accordingly and

support the staff member by asking them what action they would like to be taken.

### 3.6 Key internal contacts

The People and Organisational Development (OD) Team is responsible for:

- advising on all aspects of this guidance.
- being guided by appropriate medical advice given by the employee's doctor or the [Trust's Occupational Health service](#).
- handling requests for special leave where requested by an employee – [guidance here](#)
- keeping a record of the amount of special leave in respect of absences resulting from the process of transitioning and the dates to which it applies
- considering applications to cover unexpected absences in exceptional cases such as where a doctor unexpectedly orders immediate treatment
- ensuring that any medical certificates covering absences relating to the individual's transition are forwarded promptly to the People & OD Team to be kept with the employee's personnel record.
- Enfys, the organisation's LGBTQ+ staff diversity network, can support trans and non-binary employees and managers on the application of this guidance in confidence
- The Equality, Diversity and Inclusion Manager, can support and signpost to additional support, if necessary.

### 3.7 Supporting a trans colleague – guidance for all staff

- **Sensitivity and Respect:** Treat trans colleagues with respect and an open-minded attitude. Listen to understand their needs and concerns. Your support is essential and expected.
- **Name and Pronoun:** If your colleague has chosen a new name and said that they wish to use a certain pronoun you should use these when the individual is ready. If in doubt, ask. Please note that colleagues now have the option to include their pronouns on their staff ID badges. For ID security cards, trans and non-binary staff can request

multiple ID cards should they want to use different names and pronouns on different days. Please contact the Head of Estates and Health and Safety to request these.

- **Involvement in a Transition Plan:** If you are asked to be part of a colleague's transition plan, it is expected that you will be supportive. You may have your own personal beliefs, but these should not prevent you from treating your colleague with dignity and respect.
- **Questions:** It is best that trans people lead any conversations about issues specific to their transition or current situation. If a trans colleague has indicated to you that they are happy to answer some questions, then you may be able to ask certain questions in a polite and respectful way. You should not ask a trans person intrusive questions about surgery or other treatment.
- **Right to Privacy:** People with a trans history may decide not to disclose their trans status in the workplace, or they may decide to disclose this to certain colleagues only. You must not disclose a colleague's trans status to someone else without your trans colleague's consent.
- **Reporting Breaches of Policy:** All employees should report any breaches of policy that they witness (such as any bullying or harassment), whether by colleagues or other third parties, to their line manager immediately.

#### **4. Procedure / Process / Protocol**

##### **4.1 Absences resulting directly from the process of transitioning**

Some people who transition may undergo medical interventions as part of that process. Absences resulting directly from the process of transitioning will be dealt with as paid special leave.

This will remove any disadvantage associated with such absences as, where granted, the absence will not count towards reduced pay or absence management.

[Special leave](#) is not available to cover any other sickness absence, even if indirectly due to transitioning, for example, a manager will not grant special leave for absence for shingles even if the doctor suspects it results from having had major surgery. For further examples of what is covered and what is not, refer to the table at Annex A. Where the position remains unclear employees and managers can seek further advice from the occupational health advisor via the People and OD Team, or the Diversity & Inclusion Manager.

Special leave for absences arising directly from transitioning does not affect an employee's entitlement to special leave for other reasons. Applications for special leave for other reasons should be considered under the Special Leave policy disregarding any special leave for gender identity.

Employees may apply for [special leave](#) where;

- they advise of their intention to undergo, are undergoing or have undergone transition, and
- the period of absence is directly due to the process of transitioning as included in the table below

Employees who wish to apply for special leave in respect of absences resulting from the process of transitioning, must first have advised their manager of their intention to do so (except where the People & OD Team have been involved). Employees can apply to their manager for special leave to cover such absences. These can be granted in principle even if the period of absence is not known in advance of the start of the absence period and needs to be established on return to work.

Employees should provide a Fit Note for any absences over 7 calendar days and keep their manager informed about the period of absence while they are off work. To protect confidentiality, medical certificates should not specify detail of the transition, e.g., the cause of absence may show "operation" rather than "gender reassignment surgery".

Although the majority of these absences should be approved in advance, managers (or the People & OD Team) may grant special leave in respect of absences resulting from the process of transitioning after an absence has been taken;

- to cover unexpected absences in exceptional circumstances, for example, surgery is arranged at short notice due to a cancellation, or

- where the manager (or the People & OD Team) was not able to make a decision in advance.

In such cases employees should write to their manager (or the People & OD Team), as soon as possible, stating the reasons why they believe the absence should be granted as special leave. The exact amount of paid special leave will vary as managers (or the People & OD Team) will consider each case on an individual basis.

Managers should consider requests to work flexibly around appointments due to the lack of Gender Identity Clinics in Wales, resulting in lengthy travel to England for treatment. Please see this link for [Managing Attendance at Work](#).

#### **4.2 The impact of this type of absence on managing poor performance and attendance**

All periods of absence resulting directly from the process of transition and dealt with as special leave will not count as poor performance or attendance. However, managers and the People & OD Team will take any absence or underperformance not resulting from the process of transition into account when deciding whether or not to apply attendance management or performance management procedures.

The table at Annex A shows examples of eligibility for paid special leave, but employees should try to arrange appointments outside normal working hours if possible.

#### **4.3 Changes in the workplace**

##### **Change of duties**

A member of staff transitioning at work may request to have a change in their duties. For example, they may wish to avoid heavy lifting or may request to be moved from a public-facing role. Such a request will be considered sympathetically in line with the business needs of the organisation.

##### **Pensions**

Changes to an employee's gender may affect their pension. The individual will need to contact the Pensions Team at NWSSP to ensure pensions information is up to date.

##### **Uniforms**

Trans, non-binary and all employees can arrange a new uniform with their manager (or the People & OD Team).



## **Disclosure**

The employee is encouraged to work with the People & OD Team and their manager to develop a gender transition template to plan for the disclosure of their transition.

## **Use of facilities**

Trans and non-binary employees are entitled to use the facilities that align with their gender identity from the first day that they present in that gender. Employees cannot be asked to use alternative facilities, such as the disabled toilet, but they may decide themselves that they wish to do so.

## **Handling of media interest**

Should the media take an interest in the gender identity of an employee, Public Health Wales will do all that it can to protect the individual's privacy. Where it is appropriate to do so, the individual concerned may wish to work with their manager (or the People & OD Team) and the media team to handle any enquiries sensitively.

## **Change of name**

Trans and non-binary employees should be addressed by the name and pronouns that correspond to their gender identity, upon request on all systems.

An employee can update their own records using ESR Self Service but will need to provide evidence of a legal name change, for example deed poll certificate. The [accompanying ESR guidance](#) provides further information on how to change and update your name and gender markers.

An employee will need to contact the Pensions Department on [Pensions.Department@wales.nhs.uk](mailto:Pensions.Department@wales.nhs.uk), to update them on any changes.

An employee can liaise directly with IT or work with their line manager to update their name on their email address and intranet entries by contacting [PHW.servicedesk@wales.nhs.uk](mailto:PHW.servicedesk@wales.nhs.uk).

For ID security cards, trans and non-binary staff can request multiple ID cards should they want to use different names and pronouns on different days. Please contact [Christopher.Orr@wales.nhs.uk](mailto:Christopher.Orr@wales.nhs.uk), Head of Estates and Health and Safety to request these.

## **Transitioning and the law**

In the context of employment policies and procedures, public authorities and other bodies exercising functions of a public nature are required to ensure that they adequately cover trans employees – giving particular attention to confidentiality, harassment, allocation of resources, recruitment, training, secondment, internal job vacancies, career development including promotion, pensions and other benefits such as insurance.

## **5. Legislation**

### **Equality Act 2010**

The Equality Act aims to prevent discrimination in relation to employment offers, terms and opportunities against people who have announced their intention to undergo, are undergoing or have undergone gender reassignment.

The Equality Act defines gender reassignment as a protected characteristic as where a person is proposing to undergo, is undergoing, or has undergone a process to change their sex. The Act also enshrines in law the fact that a trans person has the protected characteristic of gender reassignment.

The Equality Act contains specific provisions dealing with absences from work because of gender reassignment. This includes the need not to treat a trans person any less favourably in relation to such absences than they would be treated in relation to sickness absence.

The Act provides that it is discrimination to treat a trans person less favourably.

The Act also places a general statutory duty on all public authorities and other bodies exercising functions of a public nature, when carrying out their functions, to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between different groups; and
- foster good relations between different groups.

## **The Gender Recognition Act 2004**

The Act provides legal recognition of trans people in their acquired gender. Under this Act, a trans person who is transitioning from male to female, or female to male is able to apply to the Gender Recognition Panel<sup>1</sup> for legal recognition of their acquired gender, following which they will, for example:

- be given a Gender Recognition Certificate that recognises the acquired gender and allows the individual to apply for a new birth certificate in that gender. (The original birth certificate is retained by the Registrar but is no longer publicly accessible).
- obtain the right to marry or enter a Civil Partnership in their acquired gender.
- be able to obtain social security benefits and pension according to their acquired gender.
- have a right to privacy of 'protected information' which prevents the disclosure of their gender history, or the disclosure of information acquired by a person in an official capacity about a person's application. The Act makes such unauthorised disclosure of 'protected information' a criminal offence.

Notwithstanding the Gender Recognition Act, all trans people are entitled to the protection of the normal rules of confidentiality, irrespective of whether or not they hold a Gender Recognition Certificate.

A trans person does not require a Gender Recognition Certificate to live in their acquired gender – the Gender Recognition Act only confers legal recognition of that gender. Some trans people will not be able to gain this legal recognition, for example, if they have lived less than two years in their acquired gender or if they continue in a marriage that existed at the time of their gender transition. In such cases, the gender at birth will continue to apply for legal purposes, even though they are otherwise entitled to live their lives in their acquired gender. It is very important to ensure that there is no discrimination against trans people even though they do not hold a Gender Recognition Certificate.

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<sup>1</sup> The [Gender Recognition Panel](#) assesses applications from transsexual people for legal recognition of the gender in which they now live. The Panel was set up under the Gender Recognition Act 2004 and ensures that transsexual people can enjoy the rights and responsibilities appropriate to their acquired gender.

## **Data Protection Act 1998**

Under this Act, trans people's identity and gender reassignment would constitute 'sensitive personal data' for the purposes of the legislation and must be processed as such.

## **Non-Binary people in law**

Currently in the UK, non-binary people don't have legal recognition. This means having to choose 'male' or 'female' on official documents such as marriage certificates, passports, driving licences, even, for those who medically transition, on Gender Recognition Certificates.

Up until 2020, it was unclear whether non-binary people would be protected by anti-discrimination legislation under the Equality Act 2010. However, in September 2020, a ruling found that the definition of gender reassignment under section 7 of the Equality Act 2010 covers employees who identify as non-binary and gender fluid.

All policies in Public Health Wales policies are designed to go beyond the legal requirements and to be inclusive of all trans and non-binary people.

## **Further support available**

Support for staff who have undergone, are undergoing or propose to undergo gender reassignment is available from:

- [ENFYs](#) - our LGBTQ+ Staff Diversity Network
- [Employee Assistance Programme](#) – Vivup – call 0800 023 9324 or visit <https://publichealthwales.yourcarewellbeing.net/#/>
- Diversity and Inclusion Manager
- People & OD Team
- [Occupational Health](#)
- The [Enfys SharePoint](#) page is regularly updated with awareness raising sessions which are a great source of information.
- Trade Unions

## **6. Available training**

Managers supporting staff through this process are advised to complete the free online training which is available through the

Gender Identity Research & Education Society (GIRES) which can be accessed via this link:

<http://www.gires.org.uk/elearning/new/player.html>

Gendered Intelligence (<http://genderedintelligence.co.uk/>) also offer training sessions.

Skill Boosters offer a range of online courses, films and lived experience videos covering the below topics. Create an account [here](#) to access a variety of topics.

- Allyship
- Understanding unconscious bias
- Trans and non-binary awareness
- Supporting trans and non-binary people at work: A guide for managers
- Sexual orientation

## Appendices

### Appendix A

Reason for absence	Eligible for special leave?
<p>1. Appointments with psychiatrists, psychologists or counsellors to</p> <ul style="list-style-type: none"><li>• assess gender dysphoria, in relation to the condition generally, not just in relation to work.</li><li>• support through the process of transition</li><li>• provide referrals for medical interventions that will help to live and work effectively in the new gender</li></ul>	Yes
<p>2. Appointments with healthcare professionals for blood tests, blood pressure monitoring, hormone therapy consultations and injections</p>	Yes
<p>3. Appointments with healthcare professionals for a:</p> <ul style="list-style-type: none"><li>• general check up</li><li>• reason unconnected with the gender transition</li><li>• reason not directly related the process of transition</li></ul>	No

Reason for absence	Eligible for special leave?
<p>4. Surgical interventions that will help the individual to live and work effectively in the acquired gender :</p> <ul style="list-style-type: none"> <li>• genital surgery</li> <li>• breast surgery, including mastectomy, augmentation and correction of asymmetry</li> <li>• throat surgery (Adam's apple removal/reduction and/or vocal chord surgery)</li> <li>• facial feminisation surgery, for example rhinoplasty (nose re-shaping)</li> <li>• hair transplantation</li> </ul> <p>To include the surgery itself, any hospital stays and the immediate recovery period (the period for which a specialist explicitly instructs a patient to restrict their activities and not return to work in order to not jeopardise the benefit of the procedure) and any complications directly arising from the operation.</p>	Yes
<p>5. Appointments required for pre-surgical assessment and post-surgical follow-up, including pre-surgical hair removal from the area to be subjected to surgery. This will include the genital area and also other areas of the body from which any donor skin/flesh is taken.</p>	Yes
<p>6. Treatment for any illness or condition not directly related the process of transition.</p>	No
<p>7. Facial hair removal for transition purposes</p>	Yes
<p>8. Speech therapy</p>	Yes

## **GLOSSARY OF TERMS**

### **Ally**

A (typically) straight and/or cis person who supports members of the LGBT community.

### **Cisgender or Cis**

Someone whose gender identity is the same as the sex they were assigned at birth. Non-trans is also used by some people.

### **Coming out**

When a person first tells someone/others about their orientation and/or gender identity.

### **Deadnaming**

Calling someone by their birth name after they have changed their name. This term is often associated with trans people who have changed their name as part of their transition.

### **Dyadic**

When your sex characteristics align with the sex you were assigned at birth.

### **Equality Act 2010**

Legislation which outlaws' discrimination on the basis of gender reassignment

### **Gender**

Often expressed in terms of masculinity and femininity, gender is largely culturally determined and is assumed from the sex assigned at birth.



**Gender dysphoria**

Used to describe when a person experiences discomfort or distress because there is a mismatch between their sex assigned at birth and their gender identity.

This is also the clinical diagnosis for someone who doesn't feel comfortable with the sex they were assigned at birth.

**Gender expression**

How a person chooses to outwardly express their gender, within the context of societal expectations of gender. A person who does not conform to societal expectations of gender may not, however, identify as trans.

**Gender identity**

A person's innate sense of their own gender, whether male, female or something else (see non-binary below), which may or may not correspond to the sex assigned at birth.

**Gender reassignment**

Another way of describing a person's transition. To undergo gender reassignment usually means to undergo some sort of medical intervention, but it can also mean changing names, pronouns, dressing differently and living in their self-identified gender.

Gender reassignment is a characteristic that is protected by the Equality Act 2010, and it is further interpreted in the Equality Act 2010 approved code of practice.

**Gender Recognition Act 2004**

Legislation which enables a trans person to legally alter their gender so that they can enjoy the rights and responsibilities appropriate to their acquired gender.

### **Gender Recognition Certificate (GRC)**

This enables trans people to be legally recognised in their affirmed gender and to be issued with a new birth certificate. Not all trans people will apply for a GRC and you currently have to be over 18 to apply.

You do not need a GRC to change your gender markers at work or to legally change your gender on other documents such as your passport.

### **Non-binary**

The term non-binary refers to a person identifying as either having a gender which is in-between or beyond the two categories of 'man' and 'woman', as fluctuating between 'man' and 'woman', or as having no gender, either permanently or some of the time. It's a catch-all category for gender identities that are not exclusively masculine or feminine. It includes people who identify in a myriad of ways including genderqueer, gender non-conforming, intersex, androgynous, agender.

### **Outed**

When a lesbian, gay, bi or trans person's sexual orientation or gender identity is disclosed to someone else without their consent.

### **Person with a trans history**

Someone who identifies as male or female or a man or woman, but was assigned the opposite sex at birth. This is increasingly used by people to acknowledge a trans past.

### **Passing**

If someone is regarded, at a glance, to be a cisgender man or cisgender woman.

Cisgender refers to someone whose gender identity matches the sex they were 'assigned' at birth. This might include physical gender cues (hair or clothing) and/or behaviour which is historically or culturally associated with a particular gender.

## **Pronoun**

Words we use to refer to people's gender in conversation - for example, 'he' or 'she'. Some people may prefer others to refer to them in gender neutral language and use pronouns such as they/their and ze/zir.

## **Queer**

Queer is a term used by those wanting to reject specific labels of romantic orientation, sexual orientation and/or gender identity. It can also be a way of rejecting the perceived norms of the LGBT community (racism, sizeism, ableism etc). Although some LGBT people view the word as a slur, it was reclaimed in the late 80s by the queer community who have embraced it.

## **Questioning**

The process of exploring your own sexual orientation and/or gender identity.

## **Sex**

Assigned to a person on the basis of primary sex characteristics (genitalia) and reproductive functions. Sometimes the terms 'sex' and 'gender' are interchanged to mean 'male' or 'female'.

## **Trans**

An umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth.

Trans people may describe themselves using one or more of a wide variety of terms, including (but not limited to) transgender, transsexual, gender-queer (GQ), gender-fluid, non-binary, gender-variant, crossdresser, genderless, agender, nongender, third gender, bi-gender, trans man, trans woman, trans masculine, trans feminine and neutrois.

### **Transgender man**

A term used to describe someone who is assigned female at birth but identifies and lives as a man. This may be shortened to trans man, or FTM, an abbreviation for female-to-male.

### **Transgender woman**

A term used to describe someone who is assigned male at birth but identifies and lives as a woman. This may be shortened to trans woman, or MTF, an abbreviation for male-to-female.

### **Transitioning**

The steps a trans person may take to live in the gender with which they identify. Each person's transition will involve different things. For some this involves medical intervention, such as hormone therapy and surgeries, but not all trans people want or are able to have this.

Transitioning also might involve things such as telling friends and family, dressing differently and changing official documents.

### **Transphobia**

The fear or dislike of someone based on the fact they are trans, including denying their gender identity or refusing to accept it. Transphobia may be targeted at people who are, or who are perceived to be, trans.

### **Transsexual**

This was used in the past as a more medical term (similarly to homosexual) to refer to someone whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth.

This term is still used by some although many people prefer the term trans or transgender.

For more definitions, visit [Stonewall's glossary](#) / [geirfa](#) which is updated every 6 months.

# Template Equality & Health Impact Assessment for PHW Trans Inclusion Policy

## Part 1

Please answer all questions:-

	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	
	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	People and Organisational Development Ffion Grundy – Equality, Diversity and Inclusion Manager <a href="mailto:ffion.grundy@wales.nhs.uk">ffion.grundy@wales.nhs.uk</a> Public Health Wales Floor 6, Capital Quarter 2, Cardiff 02920 104 243
	Objectives of strategy/ policy/ plan/ procedure/ service	This policy sets out to provide support and guidance to trans and non-binary people, line managers and colleagues on all aspect of trans inclusion in Public Health Wales and to provide a safe and supportive working environment free from discrimination, harassment, and intimidation.
	Evidence and background information considered. For example 1. population data 2. staff and service users data, as applicable 3. needs assessment 4. engagement and involvement findings	<b>Policy Workshop</b> Policy development workshop held with staff within the organisation on 3 <sup>rd</sup> August 2023.  Comments from the workshop were incorporated into the policy with further revisions following circulation of draft to the Enfys network and all staff within PHW. The TU rep was invited to attend

<ol style="list-style-type: none"> <li>5. research</li> <li>6. good practice guidelines</li> <li>7. participant knowledge</li> <li>8. list of stakeholders and how stakeholders have engaged in the development stages</li> <li>9. comments from those involved in the designing and development stages</li> </ol> <p>Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.</p>	<p>the workshop but didn't attend, the policy consultation document was also sent directly to the TU rep but no feedback was given.</p> <p>In the census 2021, more than 10,000 (0.4%) answered the voluntary gender identity question in Wales, "Is the gender you identify with the same as your sex registered at birth?".</p> <p>Trans people exist within PHW, and they should feel protected from discrimination and harassment at all times, not solely when they are transitioning, and this policy aims to provide guidance around a trans person's experiences working in PHW. Unfortunately, we are unable to ask someone's gender identity on ESR, therefore don't know the figures within PHW.</p> <p>Welsh Government LGBTQ+ Action Plan was published in February 2023 states that although organisations are increasingly taking pride in their commitment to LGBTQ+ staff, customers and service users, discrimination in the workplace remains widespread.</p> <p>The National LGBT survey reported that 22.4% of Welsh respondents experienced adverse reactions at work because of their gender or sexual orientation or being perceived as LGBT (GEO 2017). 11.1% also reported receiving 'inappropriate' comments or conduct, and 9.3% reported verbal harassment.</p> <p>In a survey commissioned to support development of the LGBTQ+ Action Plan in summer 2020 (Welsh Government 2021c), it was found that, among those who took part in the survey, 78% of respondents have avoided being open about their sexual orientation or gender for fear of a negative reaction from others. Furthermore, 46% of LGBTQ+ people in Wales had experienced verbal harassment in the year prior to the survey. Such findings show the distressing experiences LGBTQ+ people continue to go</p>
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	<p>through in Wales today and demonstrate how far we still have to go to achieve equality, and for people to feel happy and safe by just simply being who they are.</p> <p>A survey and focus groups undertaken in the development of the LGBTQ+ Action Plan (Welsh Government 2021c), found that whilst 45% of people reported that those in the workplace reacted only positively when aware they were LGBTQ+, 24% reported un-permissible exposure of their LGBTQ+ identity in the workplace (or 'outing') and 10% recounted experiencing verbal harassment.</p> <p>The Work report (Stonewall 2018c) showed that more than a third of LGBT staff (35%) hid the fact they were LGBT at work for fear of discrimination; one in ten Black, Asian and Minority Ethnic LGBT employees (10%) had been physically attacked by customers or colleagues in the year prior; and nearly two in five bi people (38%) weren't out to anyone at work.</p> <p>Welsh Government's LGBTQ+ Action Plan states that workplaces should.....</p> <ul style="list-style-type: none"> <li>• Work in social partnership to encourage employers to promote, share and adopt best practice in relation to inclusive workplaces, including the dissemination of case studies.</li> <li>• Improve access to information, advice, guidance and support for employers on employing LGBTQ+ workers including information on legal responsibilities.</li> <li>• Work in social partnership with trade unions and employers to encourage to employers to adopt equalities policies and procedures that safeguard against LGBTQ+ discrimination.</li> </ul>
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		<ul style="list-style-type: none"> <li>• Work in social partnership with trade unions and employers to provide guidance to employers on the importance of collecting diversity data and its use in promoting inclusion.</li> </ul> <p>Stakeholders involved with the development of this policy include:</p> <ul style="list-style-type: none"> <li>• Stonewall Cymru and their Top 2 best practice organisations</li> <li>• Public Health Wales Enfys (LGBTQ+) Network &amp; Allies</li> </ul>
•	<p>Who will be affected by the strategy/ policy/ plan/ procedure/ service</p> <p>Consider staff as well as the population that the project/change may affect to different degrees.</p>	All staff

## Part 2- Equality and Welsh language

### 11. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'.

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.1 Age</b> For most purposes, the main categories are: 1. under 18; 2. between 18 and 65; and 3. over 65	This policy will be applied consistently regardless of age		
<b>6.2 Persons with a disability as defined in the Equality Act 2010</b> Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term	This policy will be applied consistently regardless of whether or not an employee has a disability as defined in the Equality Act 2010. It is recognised that individuals who identify as		There is guidance contained within the policy & guidance documents to support managers and signpost to the relevant policies

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
medical conditions such as diabetes	<p>non-binary or trans often have mental health challenges which would be covered by disability. The policy is there to support individuals and provide clear guidance and signposting for additional support</p> <p>This policy will have a positive impact on trans and non-binary people who have a disability.</p>		
<b>6.3 People of different genders:</b> Consider men, women, people undergoing gender reassignment ***gender identity needs to be added	This policy will have a positive impact on trans and non-binary people as all information relating to trans and non-binary people will be in one		We do not currently hold data on staff who are trans. It is recommended that this is reviewed. Whilst we know that 23.12% of the

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<p>here on the EqHIA blank form so it's inclusive of non-binary people. Not all trans people go through reassignment surgery***</p> <p><b>NB</b> Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender</p>	<p>policy. It will also have a positive impact on all members of staff regardless of gender as it offers support and guidance to all.</p> <p>The policy contains guidance on various rights and protection for trans and non-binary people ensuring fair treatment and consideration, therefore there is no adverse affect.</p>		<p>workforce is male and 76.88% is female, we do not hold data concerning the ratio of how many men work flexibly compared to women. Therefore, it is recommended that this data is being captured in order to monitor.</p> <p>The policy will be monitored and updated in line with good practice and other changes as required.</p>
<b>6.4 People who are married or who have a civil partner.</b>	<p>This policy will be applied consistently regardless of whether or not an employee is married or has a civil partner or is unmarried or without a civil partner.</p>		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.</b>	This policy will have a positive impact on trans and non-binary people who are pregnant and take Maternity Leave. Their rights would remain the same.		
<b>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</b>	This policy will have a positive impact on trans and non-binary people who are people of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers.		
<b>6.7 People with a religion or belief or with no religion or belief.</b>	This policy will have a positive impact on trans and non-binary people who have a religion or belief or		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
The term 'religion' includes a religious or philosophical belief	with no religion or belief. Religious barriers within the individual's community may result in the requirement for additional support in work		
<b>6.8 People who are attracted to other people of:</b> 1. the opposite sex (heterosexual); 2. the same sex (lesbian or gay); 3. both sexes (bisexual)	This policy will have a positive impact on trans and non-binary people regardless of their sexual orientation.		
<b>6.9 People according to their income related group:</b> Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	This policy will be applied consistently regardless of an employee's income related group.		

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.10 People according to where they live:</b> Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	Flexible working could have positive impact as it allows employees to reduce their travel time, as they request to work to a pattern that means they don't need to travel at peak times. Furthermore, there is the option to work from home.		
<b>6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</b>	N/A		
<b>6.12 Welsh Language</b>			
<b>There are 2 key considerations to be made during the development of a policy, project, programme, service to ensure there are no adverse effects and/or a positive or increased positive effect on:</b>			

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
(please note these will continue to be reviewed to ensure Public Health Wales fulfils their duties to comply with one or more standards outlined within the Welsh Language Standards (No 7) Regulations 2018)			
<b>Opportunities for persons to use the Welsh language</b>	<p>This policy will be applied consistently regardless of whether or not an employee communicates using the Welsh language.</p> <p>There is no specific evidence to suggest the policy impacts on people due to communicating using the Welsh Language.</p>		
<b>Treating the Welsh language no less favourably than the English language</b>	<p>This policy will be applied consistently regardless of whether or not an employee communicates using the Welsh language.</p> <p>There is no specific evidence to suggest the</p>		



How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	Recommendations for improvement/ mitigation/ identified gaps or opportunities
	policy impacts on people due to communicating using the Welsh Language.		

### Part 3 – Health

Questions in this section relate to the impact on the health and wellbeing outcomes of the population **and** specific population groups who could be more impacted than others by a policy/project/proposal.

The part of the assessment identifies;

1. which specific groups in the population could be impacted more (inequalities)
2. what those potential impacts could be across the wider determinants of health framework?
3. Potential gaps, opportunities to maximise positive H&WB outcomes
4. Recommendations/mitigation to be considered by the decision makers

#### 5. Identification of specific population groups

Use the WHIASU Population Groups checklist as a reference to identify the population groups who could be more impacted than others by a policy/project/proposal. The check list can be found on the PHW Integrated EqHIA guidance pages (requires link to PHW Intranet pages for additional information and resources)

The groups listed have been identified as more susceptible to poorer health and wellbeing outcomes (health inequalities) and therefore it is important to consider them in a HIA assessment. In a HIA, the groups identified, as

more sensitive to potential impacts will depend on the characteristics of the local population, the context, and the nature of the proposal itself.

7.1 Groups identified	Rational/explanation

### Assessment

Complete the wider determinants framework table below providing rational/evidence where appropriate:

1. Consider how the proposal could impact on the population and specific population groups identified above (positive/negative) for each of the wider determinants (the bullets under each determinant are there as a guide)
2. Record any unintended consequences (negative impacts) and/or gaps identified
3. Record any positive impacts or missed opportunities to maximise positive health and wellbeing outcomes
4. identify and record mitigation/recommendations where appropriate

**Please note** you may find that not all determinants are relevant to the project/plan however recording N/A is not acceptable a rational or evidence should be explained/referenced

Wider determinant for consideration	Positive impacts or additional opportunities	Unintended consequences or gaps	Population groups affected	Mitigation/recommendations
<b>7.2 Lifestyles</b> Diet/nutrition/breastfeeding Physical activity Use of alcohol, cigarettes, e-cigarettes Use of substances, non-prescribed drugs, abuse of prescription medication Social media use Sexual activity Risk-taking activity i.e. gambling, addictive behaviour	The Policy lays out a range of benefits to staff to enable them to maintain good health throughout their time working in PHW and			

	emphasises the importance for managers to support trans and non-binary people.			
<b>7.3 Social and community influences on health</b> Adverse childhood experiences Citizen power and influence Community cohesion, identity, local pride Community resilience Domestic violence Family relationships Language, cultural and spirituality Neighbourliness Social exclusion i.e. homelessness Parenting and infant attachment Peer pressure Racism Sense of belonging Social isolation/loneliness Social capital/support/networks Third sector & volunteering	This policy will help support trans and non-binary people which will in-turn create a sense of belonging in PHW and help reduce social isolation/loneliness by creating an inclusive environment in PHW through support from staff and developing networks internally.			
<b>7.4 Mental Wellbeing</b> 1. Does this proposal support sense of control? 2. Does it enable participation in community and economic life? 3. Does it impact on emotional wellbeing and resilience?	This is an inclusive policy for all trans and non-binary working within PHW which includes relevant legislation, language and procedures within the organization. This			

	policy will support trans and non-binary people as well as managers and other staff that can support them. This will have a positive impact on the mental health of trans and non-binary people as they have a policy that is relevant and that will support them whilst working in PHW.			
<b>7.5 Living/ environmental conditions affecting health</b> 1. Air quality 2. Attractiveness/access/availability/quality of area, green and blue space, natural space. 3. Health & safety, community, individual, public/private space 4. Housing, quality/tenure/indoor environment 5. Light/noise/odours, pollution 6. Quality & safety of play areas (formal/informal) 7. Road safety 8. Urban/rural built & natural environment 9. Waste and recycling 10. Water quality				
<b>7.6 Economic conditions affecting health</b> Unemployment Income, poverty (incl. food and fuel) Economic inactivity Personal and household debt				

Type of employment i.e. permanent/temp, full/part time Workplace conditions i.e. environment culture, H&S				
<b>7.7 Access and quality of services</b> Careers advice Education and training Information technology, internet access, digital services Leisure services Medical and health services Other caring services i.e. social care; Third Sector, youth services, child care Public amenities i.e. village halls, libraries, community hub Shops and commercial services Transport including parking, public transport, active travel				
<b>7.8 Macro-economic, environmental and sustainability factors</b> Biodiversity Climate change/carbon reduction/flooding/heatwave Cost of living i.e. food, rent, transport and house prices Economic development including trade Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention) Gross Domestic Product Regeneration				

### Stage 3

**Summary of key findings and actions Please answer question 8.1 following the completion of the EHIA and complete the action plan**

Key findings: Impacts/gaps/opportunities	Actions (what is needed and who needs to do) to address the identified mitigation and recommendations	Lead		

**Alternatively, if appropriate, please explain the steps taken to consult with and consider the differential impact of the changes on the various protected characteristic groups (part 2) or any specific identified population groups (part 3).**