NHS Rainbow Badge Assessment Report

University Hospitals Bristol and Weston NHS Trust

Initial Stage

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Contents

- Summary scoring
- Feedback report- Policies
- Feedback report- Surveys
- Feedback report- Services
- Feedback report- Workforce Assessment
- Action plan
- Resources

Summary

Area	Score	Available	Outcome
Policy Review	3	19	Initial Stage
Staff Survey	6	16	Bronze
Patient Survey	0	18	Initial Stage
Services survey	18	76	Initial Stage
Workforce assessment	17	35	Bronze
Total	**44**	**164**	**Initial Stage**

Feedback report- Policies

The Trust received 3 points across the scoring for policies.
See feedback within individual policies for more details.

Does the Trust have a public-facing policy that bans biphobic, homophobic and transphobic discrimination in its services?

1 point available and 0 received.

The Trust does not have a public-facing policy or statement.

Action: Ensure the Trust has a public-facing policy or statement that bans biphobic, homophobic and transphobic discrimination.

Does the Trust have an employee policy (or policies) that includes an:
- **Explicit ban on discrimination, bullying and harassment based on sexual orientation?**
- **Explicit ban on discrimination, bullying and harassment based on gender reassignment/trans status?**

2 points available and 2 received.

The Trust provided their Dignity at Work Policy, which bans discrimination based on both sexual orientation and "gender identity" in the introductory paragraph and later expands on this by also including "gender reassignment" within this list.

We highly recommend replacing the term "gender reassignment" with "trans status", as this is a more inclusive of non-binary people as well as being more commonly used and less medicalised. "trans status" can also be used instead of "gender identity" for more clarification as to who is protected by this term.

This policy would also benefit from adding examples of what constitutes bullying and harassment based on trans status, with appropriate content warnings.

Action: Review the language used within the Dignity at Work Policy to include the term "trans status" instead of "gender reassignment", as well as including examples of transphobic behaviours.

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Does the Trust have an employee policy (or policies) that includes the following?
        • Clear information about how to report an incident and how complaints are handled

1 point available and 1 received.

Dignity at Work Policy was provided, which included a detailed process for how to handle incidents informally and formally.

Does the Trust have family and leave policies which use gender-neutral language and explicitly state that they are applicable regardless of gender?

The Trust received 0 of 5 available points.

0 points were awarded for the Maternity Leave Policy. Although this policy is inclusive of all employees regardless of their sexual orientation, which is great to see, it does however not include a statement on being applicable regardless of gender. The policy also refers to "mothers" without expanding to include gender neutral/inclusive terms.

0 points were awarded for the Paternity Leave Policy. Although this policy is inclusive of all employees regardless of their sexual orientation, which is great to see, it does however not include a statement on being applicable regardless of gender. The policy also refers to "mothers" without expanding to include gender neutral/inclusive terms.

0 points were awarded for the Adoption Leave Policy. The policy does not have an inclusion statement to make clear that it applies to all irrespective of gender/gender of partner etc. The policy also refers to "women" without expanding to include gender neutral/inclusive terms and only uses he/she pronouns throughout.

0 points were awarded for the Shared Parental Leave Policy. The policy does not have an inclusion statement to make clear that it applies to all irrespective of gender/gender of partner etc. The policy also refers to "women" without expanding to include gender neutral/inclusive terms and only uses he/she pronouns throughout.

0 points were awarded for the Special Leave Policy, as it does not have an inclusion statement to make clear that it applies to all irrespective of gender/gender of partner etc. We also recommend ensuring that Bereavement Leave is taking into consideration chosen family.

Suggestions have been made on all policies for reference.

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Action: All policies could benefit from an inclusive statement under eligibility to make clear that it applies to all irrespective of gender/gender of partner etc.

Action: Amend all policies so that, unless relevant to preserve access to legal rights and pay, the language used is gender neutral.

Does the Trust have a trans inclusion policy that covers the following? Select all that apply
   A. A clear commitment to supporting all trans people, including those with non-binary identities
   B. Information on language, terminology and trans identities, including non-binary identities
   C. Guidance on facilities for trans employees, including non-binary employees
   D. Guidance on dress code for trans employees, including non-binary employees
   E. A clear commitment to confidentiality and data protection for trans staff

The Trust received 0 of 5 available points.

The Trust does not currently have a Trans Inclusion Policy for staff.

Action: Implement a Trans Inclusion Policy that covers all of the above points.

Does the Trust have a policy (or policies) to support employees who are transitioning that covers the following? Select all that apply
   A. Work related guidance for an employee who is transitioning
   B. Work related guidance on the process for an employee to change their name and gender marker on workplace systems
   C. Work related guidance around data protection and confidentiality
   D. Work related guidance for managers on how to support an employee who is transitioning
   E. Work-related guidance for employees on how to support a colleague who is transitioning

The Trust received 0 of 5 available points.

The Trust does not currently have a Transitioning at Work Policy.

Action: Implement a Transitioning at Work Policy that includes all of the above points.

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Feedback report- Surveys
Staff responses

The Trust received 6 points across the scoring for this survey.

This is an unscored question, asked for information gathering purposes only.

32% of staff completing the staff survey identify within the LGBT+ communities in some way.

Q1

Do you identify as a member of the LGBT+ communities? Please continue to complete the survey however you answer. You may select more than one option.
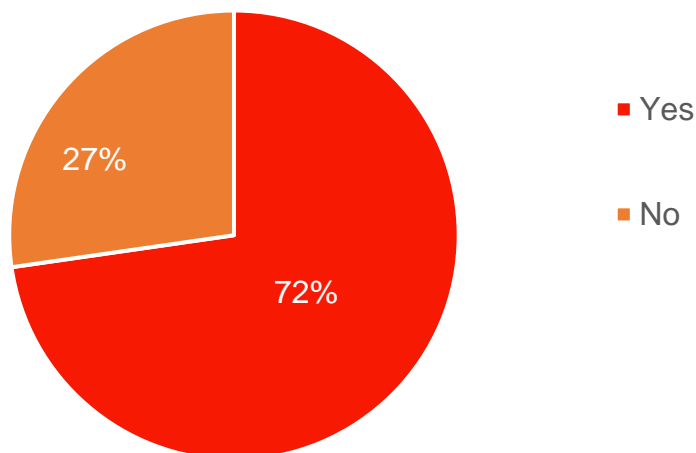
Answer Choices	Responses	
Yes- Lesbian	6.18%	21
Yes- Gay	8.53%	29
Yes- Bi	14.12%	48
Yes- Trans	0.59%	2
Yes- Non-binary	2.06%	7
Yes- I identify in a different way	2.65%	9
No	68.24%	232
Answered: 340 Skipped: 0	Response Total:	340

Does your role involve patient facing activity?
340 Responses

- Yes
- No

27%

72%

The following two questions were asked to respondents who indicated they were in a patient facing role.

The Trust did not receive a score for this question. 2 points were available, the Trust needed to score over 50% of respondents answering Yes to score 1 point and over 75% of respondents answering yes to score 2 points.

In your department are patients routinely asked their sexual orientation? This can be on forms or verbally.
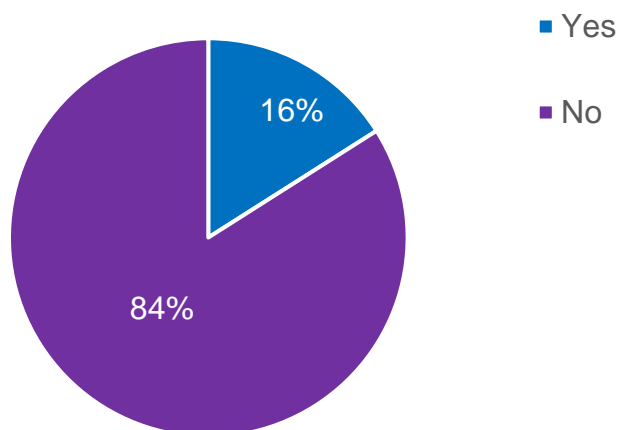243 Responses
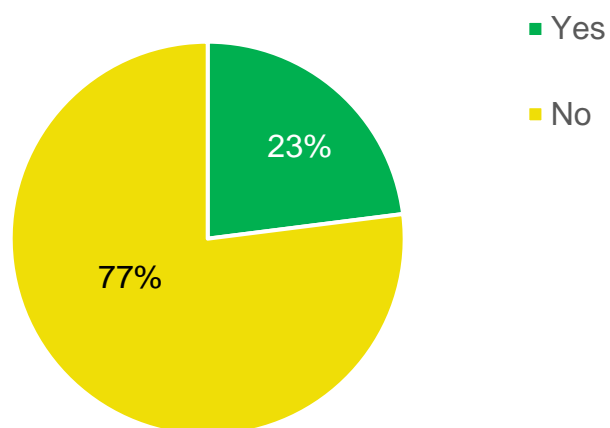
- Yes
- No

23%

77%

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The Trust did not receive a score for this question. 2 points were available, the Trust needed to score over 50% of respondents answering Yes to score 1 point and over 75% of respondents answering yes to score 2 points.

In your department are patients routinely asked their trans status?
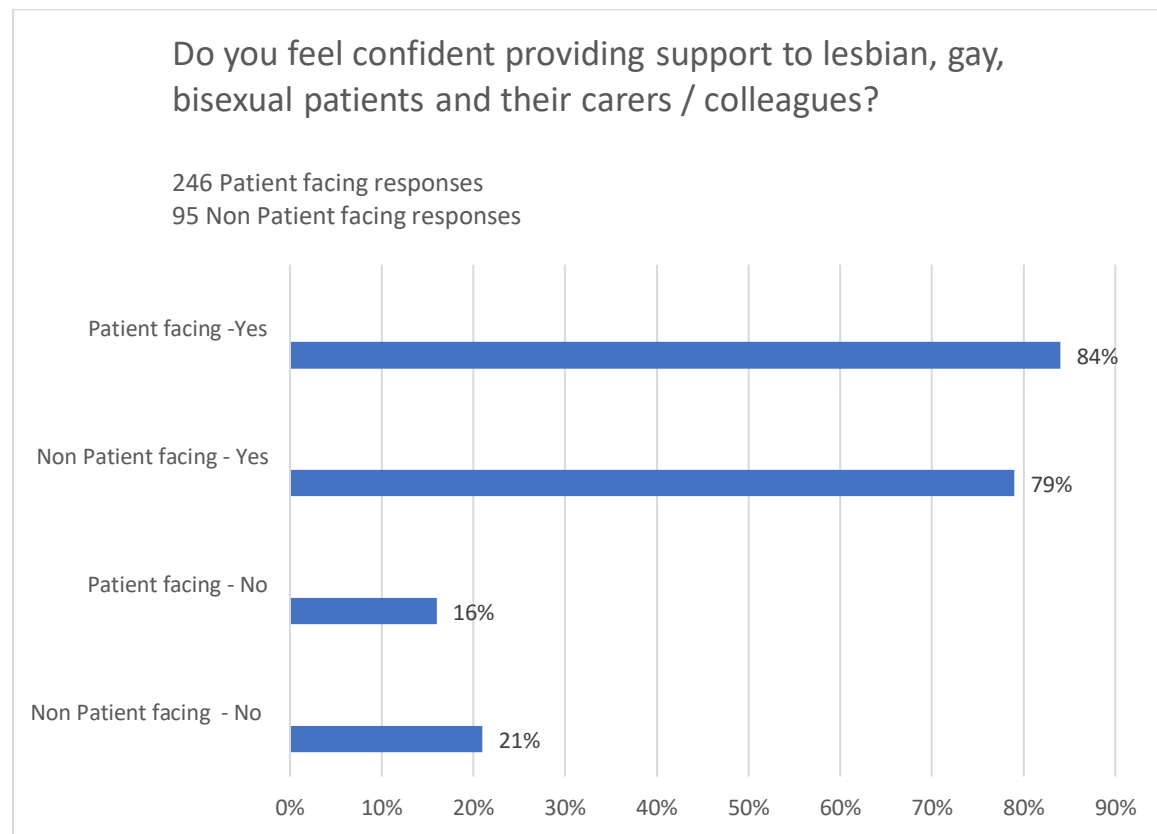This can be on forms or verbally.
244 Responses

23% of patient facing employees indicated that they routinely ask patients their sexual orientation and this is reflected within the responses of the patient survey, with 26% of patients completing the survey confirming they had been asked about their sexual orientation.

16% of patient facing employees indicated that they routinely ask patients about their trans status, with 13% of patients completing the survey confirming they had been asked if they have a trans history.
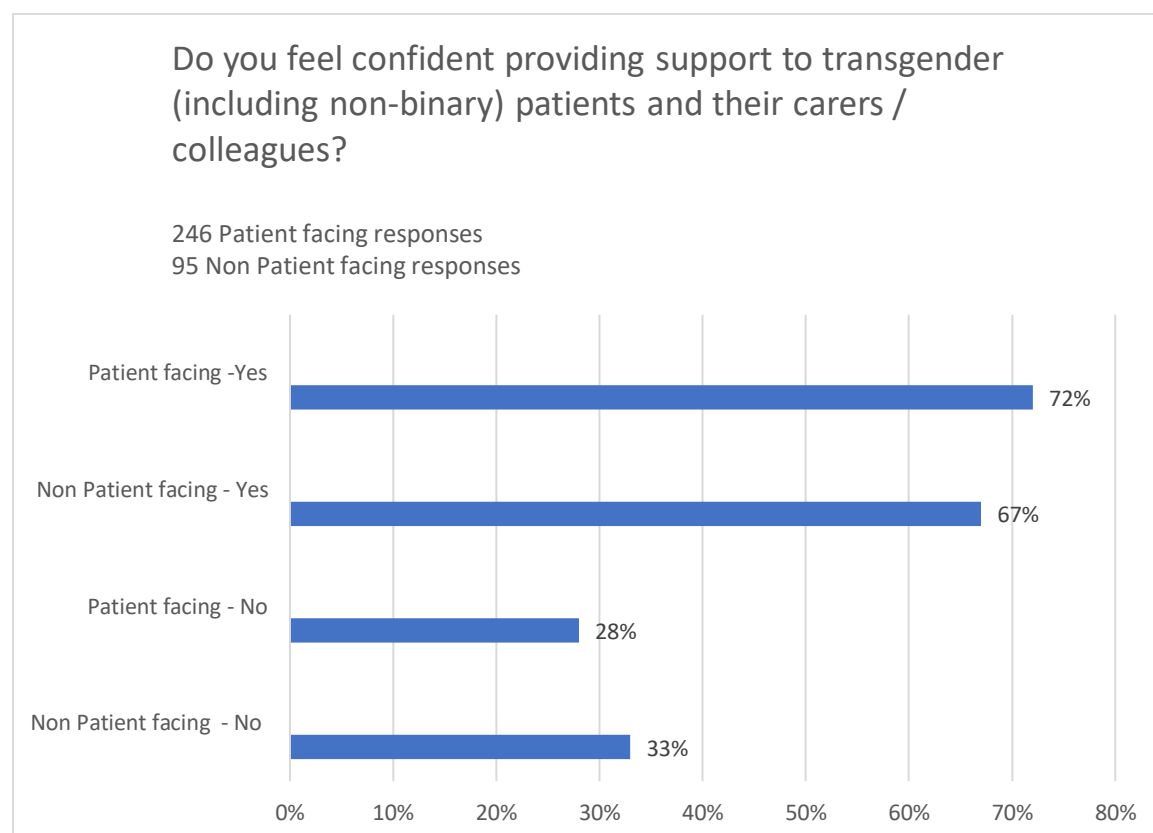
The following question differentiated between patient and non-patient facing employees, with support for patients described as clinical, emotional, signposting etc. and for colleagues as emotional, signposting etc.

The Trust received both available points.

Do you feel confident providing support to lesbian, gay, bisexual patients and their carers / colleagues?

246 Patient facing responses
95 Non Patient facing responses

Patient facing -Yes — 84%
Non Patient facing - Yes — 79%
Patient facing - No — 16%
Non Patient facing - No — 21%

The following question differentiated between patient and non-patient facing employees, with support for patients described as clinical, emotional, signposting etc. and for colleagues as emotional, signposting etc.

The Trust received 1 of 2 available points.

Do you feel confident providing support to transgender (including non-binary) patients and their carers / colleagues?

246 Patient facing responses
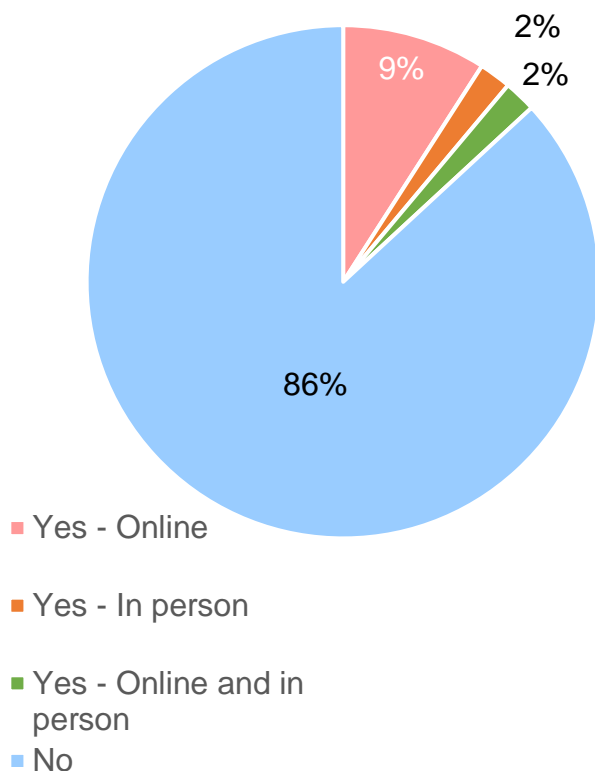95 Non Patient facing responses

The responses to these questions show that confidence in supporting LGB patients and colleagues is high, however staff are less confident when supporting trans and non-binary patients and colleagues. This may be due to lack of understanding surrounding trans and non–binary identities, employees being unsure of commonly used language and terminology or acknowledgement that additional training and information in the needs and health inequalities faced by trans and non-binary people would be beneficial. This is highlighted in the responses to the following questions around training.

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The Trust did not score for this question. 2 points were available and the Trust needed to score over 50% of combined (patient facing and non-patient facing) employees having received training in any capacity to score 1 point and over 75% of combined employees having received training to score 2 points.
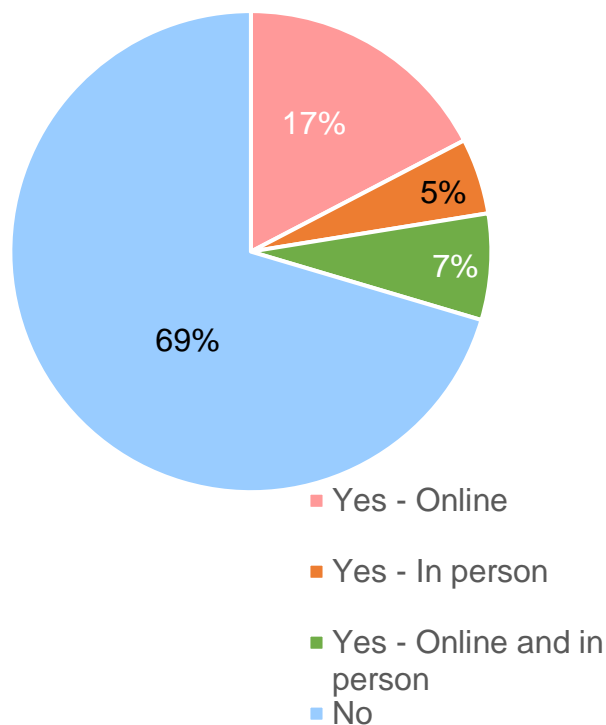
Have you received any training you can use when supporting LGBT+ colleagues?
95 Responses from non patient facing staff

- Yes - Online
- Yes - In person
- Yes - Online and in person
- No

Have you received any training you can use when supporting LGBT+ patients and/or their carers?
244 Responses from patient facing staff

- Yes - Online
- Yes - In person
- Yes - Online and in person
- No

31% of total patient-facing respondents have received some form of training in the needs of LGBT+ people that they felt useful when supporting either patients and/or their careers. This also matches results from the services survey, with 33% of services leads indicating that their service offers training on the needs of LGBT+ people.

This is an unscored question, asked for information gathering purposes only.

Do you feel you would benefit from additional training , support or information in regards to supporting LGBT+ colleagues?
95 Responses from non patient facing staff
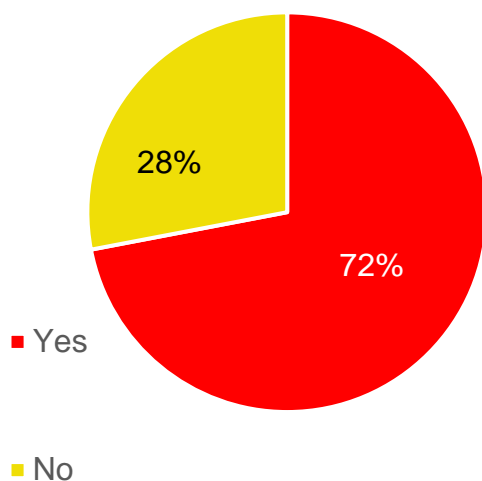
Do you feel you would benefit from additional training, support or information in regards to working with LGBT+ patients?
244 Responses from patient facing staff

28%

72%

- Yes

- No

23%

77%

- Yes

- No
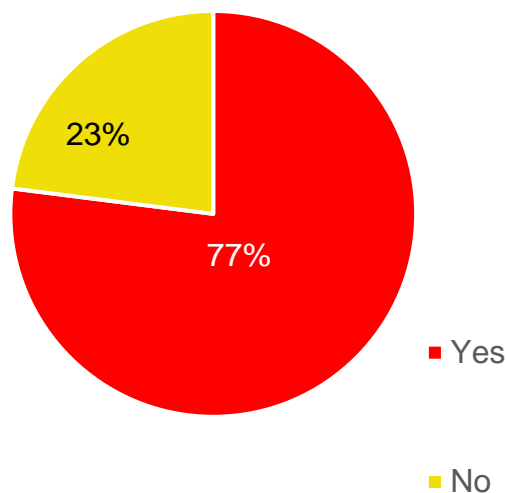
The high percentage of responses indicating the need for training, especially by patient facing staff further indicates that current training may not be offered often enough and/or may not be effective.
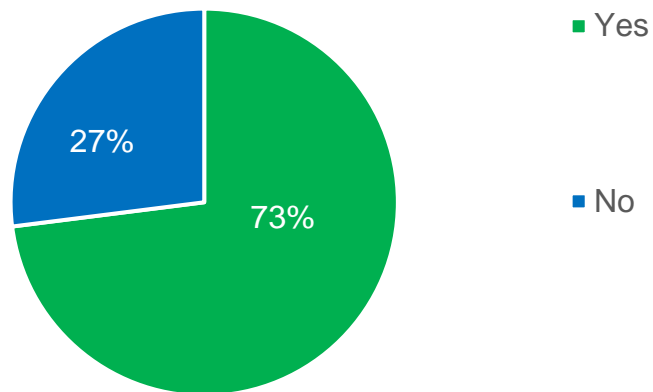
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Patient facing employees were also asked the following additional questions.

The Trust 1 out of 2 available points. It should be noted that the Trust was close to achieving both points.

Do you consider having an understanding of someone's sexual orientation to be important in enabling you to provide the best possible care?
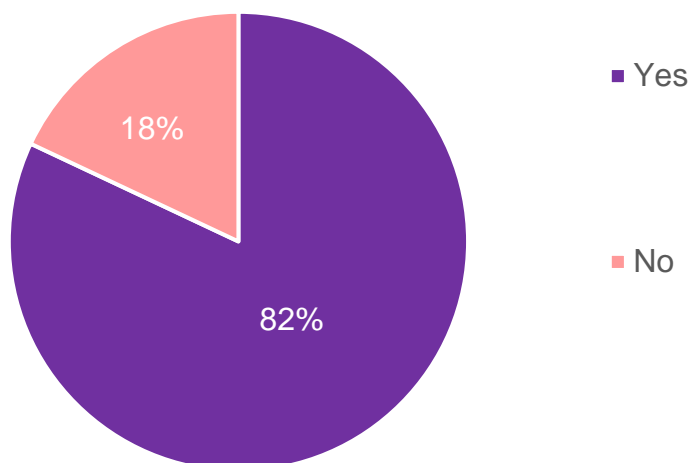245 Responses

Yes

No

27%

73%

Do you consider having an understanding of someone's trans status to be important in enabling you to provide the best possible care?
245 Responses

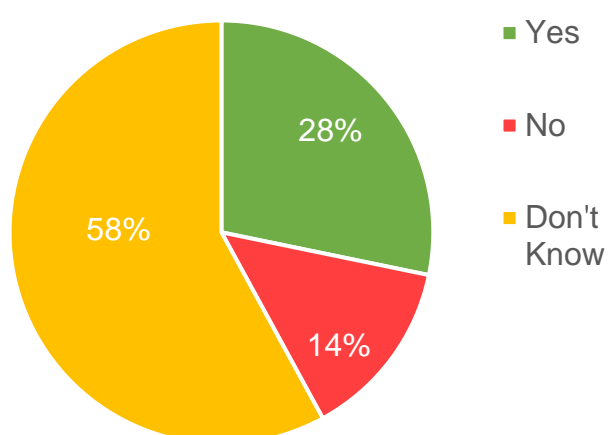

- Yes
- No

82%
18%

Do you think there is adequate support for LGBT+ staff members at your Trust?
340 Responses

- Yes
- No
- Don't Know

58%
28%
14%

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75% of total respondents feel they would benefit from additional training, support or information in regards to supporting and working with LGBT+ patients and or their carers and LGBT+ colleagues, with the majority of patient facing employees who responded considering having an understanding of someone's LGBT+ identity an important factor in being able to provide the best possible care. The majority of respondents did not know if there was adequate support for LGBT+ staff members, this may be due to them not being aware of the support available or if they do not identify as part of the LGBT+ communities they may not feel the question is appropriate for them to answer. Out of the 108 respondents who did identify themselves within the LGBT+ communities, only 4 felt there was adequate support.

There were several comments within the free text question "what additional support would you like to see in place for LGBT+ staff members?, that highlighted that employees would like more training and information regarding how to effectively support LGBT+ people and patients, with some people highlighting specific training around the needs of trans and non-binary people.

Quotes focusing on training needs from staff:

"All staff members (not just the LGBT+ staff members) should be required to have annual sensitivity training focusing on why having an understanding of someone's sexual orientation is important in enabling the best possible care."

"More awareness and training so that non-binary and [transgender] colleagues are supported but also so cis gender colleagues are more aware of the importance of issues for these members of society."

"Maybe staff could benefit from transgender training as it can be difficult caring for a patient who has not yet transitioned, (eg; male to female but being nursed in a female bay where other patients may comment)."

"Education for colleagues to avoid misgendering trans colleagues. Appropriate training if relevant to job, e.g. some scanning depends on accuracy of gender for correct analyses but may require a different approach with trans individuals."

"I think it would be good to have a better short e-learning module specifically showing what support, both literal and digital that can be accessed for our patients and staff."

"In person training for new staff."

"Training package on Kallidus."

"Online training accessible to all bands of staff about LGBT and the support that is available. Keeping in mind about the international nurses who have joined us , it would be a great opportunity to include them in the Trust's message and support to LGBT staff and patients.

"More information on how to support people from the LGBT+ patients and staff. Workshops on confronting mis truths, myths and inclusion."

"An education for staff looking to support LGBT+ staff members."

"I think more training to staff as I don't always think some staff understand the importance of correct gendering etc."

"Ways to support staff about awareness of LGBTQIA health."

"Widespread training is needed, in a multicultural work place many staff have different up bringing's with different views on LGBT+ and non-biased training is needed."

"Training to increase awareness and understanding for all staff whether patient facing or not."

Links to resources and organisations that can provide training and information for staff on the needs of LGB+ people and trans and non – binary people have been included in the resource pack.

This was unscored and for information purposes only.

Have you noted any of the following within your working environment? Select all that apply.

Patient Facing
244 Responses

Non Patient Facing
95 Responses

Category	Patient Facing	Non Patient Facing
Lack of LGBT+ specific resources	42%	29%
Assumptions being made that someone is cisgender (not trans) or heterosexual (straight)	45%	34%
Experiences of homo/bi/trans-phobia from colleauges	19%	15%
Same sex partners or spouses not being recognised as next of kin	10%	4%
Trans people being misgendered by colleagues	34%	15%
LGBT+ people sharing they had been scared to disclose their identity as worried about homo/bi/trans-phobia	15%	15%
None of the above	34%	50%

The most significant areas highlighted which the Trust may wish address in the first instance are the lack of specific LGBT+ resources, (examples of which are included in the resource

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pack of this document) as well as providing staff with education and training to help move past the assumption that all colleagues and patients are cisgender and heterosexual.

This was unscored and for information purposes only.

What additional support would you like to see in place for LGBT+ staff members?

A large portion of the responses were requests for training. There was a wish for clearer guidance to be provided to staff around various LGBT+ topics, most notably around how to engage with trans and gender diverse patients.

There was also a want for more resources around signposting for patients as well as colleagues, as well as more support for LGBT+ staff when reporting discrimination. Staff also noted that there is a lack of information around how to treat transgender patients, especially with regards to which wards patients should be placed on. The Trust would benefit from implementing a transgender and non-binary service user policy that clarifies how to engage with patients and guidance around single-sex wards. There was also a call for more LGBT+ specific resources and education within Maternity.

Staff also reported being happy with the support available at the Trust.

Quotes from staff:

"Training, bathroom facilities & changing rooms for [non-binary] staff, non-gender uniforms."

"I think all patients should have their gender and sex documented in their notes/Medway. This should be a routine question for all."

"Updating workers profiles easier to avoid misgendering, also transmit those policies to nursing agencies and other services."

"Improved visible comms."

"Not necessarily more support, but more awareness of the available support and groups etc."

"Badges to show on lanyards for pronouns."

"Better resources on connect. Peer support programme Mentoring / coaching."

"LGBTQ+ diversity is not always visible. I would like to see initiatives to support LGBTQ+ staff and patients. With the extensive international nursing recruitment some newer staff are unaware of the diversity in the UK. It should not be up to other staff to explain their identity to them - there should be training for this."

"More posters of same sex couples in maternity."

"Working in maternity it is easy to assume all birth givers identify as female yet in my employment here we have had several nonbinary birth givers. It can be confusing for staff that are unfamiliar with LGBTQIA+ people, so maternity resources would be extremely beneficial (St Michael's Hospital). In such a fragile and vulnerable state it is really important for people to be correctly gendered so they can trust us and feel safe."

"Currently the LGBTQ+ meetings are during working hours and not suitable for clinical staff to attend. Without attending I am not aware of any support or resources the staff group have to offer ."

"Safe forums for conversations."

"I am not part of the LGBT+ community so don't feel I can comment on the support available, however I feel that support for this community is very important, especially for the trans community who receive a lot of negativity through the media etc."

"I feel like there should be mandatory training on how best to support people and more resources. I have no idea who I would signpost to if needed."

"Not assuming that colleagues are heterosexual based on outward appearances. I have regularly awkward conversation with colleagues when I mention my wife and they are clearly surprised."

"I think we need to have a link team in supporting our LGBTQ patients, provided by LGBTQ, for example sign posting to LGBT specific charities, information on the needs of trans and LGBT patients led by previous LGBTQ patients."

"Better sign posting, and training, specifically for management and freedom to speak up staff."

"Maybe more posters- so patients know it is an inclusive safe space. We have many overseas patients where the LGBT+ community are persecuted. It would be good to communicate that to the general public."

"Social groups - sports etc."

"I'm not really sure. But I do wonder as we tend to divide our ward according to gender, is this appropriate for trans people? Are they able to choose the appropriate area for their needs."

"I think looking at transgender issues should be separate to sexual orientation issues. Both are important, but there are practical issues around transgender healthcare, such as placement on single sex wards that is not clear for staff- I have no idea what information transgender patient are given about this. Non-binary is another separate issue- again, how does this impact on mixed-sex wards etc? I have experience of a patient changing genders on a daily basis- it would be completely impractical to move this person between a male and female ward on a ongoing basis. Ultimately, clinical staff are expected to be non-judgemental and provide the best possible healthcare to everyone, so this should be the trust expectation regardless of how someone identifies. What would the proposed training entail? Is it healthcare specific to address the healthcare specific issues that would be

raised? What is the expectation on staff that goes beyond showing compassion, respect and non-judgemental behaviour that all patients, colleagues and visitors are entitled to?"

"I would like more support for trans identified pts and staff, and for those who are line managers of trans identified staff."

"Trans support and understanding is a little thin within the BHI as a whole."

"Changes to the understanding of NOK status to a more open question of who do we contact in an emergency."

"Confidential LGBT counselling service."

"Better training for staff, careflow systems set up to include gender, pronouns."

"More training for staff Guidelines on trans patients and adjustments Gender neutral information leaflets."

"Lack of psychological support across the board for paediatric patients, both in and outpatients, is the most glaring issue facing us on a daily basis. This applies to all children and many have not even started to address their identity so often the highest need is in those who haven't self-identified yet."

"Managers need educating on these issues to best support staff, I feel most are ill equipped."

"Leaders displaying better behaviour and support for minority staff member groups. Due to time limits within the working day in a busy role as well as childcare commitments outside of work. Some sort of online support or way of feeding back issues would be helpful."

"Using incorrect terms such as gender for babies instead of sex assigned at birth - gender is something a person identifies. This is across the system."

"Information about how important it is to respect people and their sexual orientations. The damage that simple words can make."

"Greater profile for LGBT feedback."

"In my area I feel supported and confident, but I don't think this is the case for all LGBT+ staff. I think that there are inroads being made for trans/non-binary people but at the moment there's not an easy way to notify other people or make it a safe space for people to announce their pronouns and also there's no way of recording this for our patients - because system C aren't able to offer us a solution. The military for example offer a year out of work to have gender reassignment surgery and then serving personnel can return to the same rank they were at before (though not necessarily the same job if it's unavailable) and I'm not aware of anything similar that we offer our staff. Being left behind by an organisation that's considered behind the times when I swear half the NHS is part of the LGBT+ community is a little bit embarrassing!"

"Gender neutral toilets, so that I do not have to compromise myself. Visually, I may appear to be a certain gender that is binary and I do not identify as belonging to a binary gender. People expect me to go to a loo strictly assigned to a binary gender and I am not comfortable with this. There are not enough options for me to go to a gender-neutral facility."

"There is a lack of sufficient recognition of colleagues' experiences and contribution to the organisation."

Word cloud for patient facing staff responses:

additional area assigned awareness badges based binary birth care colleagues community diversity education equality explain feel female gender good groups healthcare identify identity inclusive issue issues lgbt lgbt+ lgbtq lgbtq+ members misgendering needed nil online orientation patient patients people person posters pronouns required resources risk sex sexual staff support training trans transgender treat treated trust understanding unsure visible work working

Word cloud for non-patient facing staff responses:

attention aware awareness binary colleagues community drawing ensure equal gender identify issues lack lgbt+ members neutral object offer organisation patients people protected safe society space staff support supported term training treat voice work working

"Lots of misgendering trans patients by staff."

"Mandatory education to staff, and in particular clinicians about LGBTQ+ people and a clear system to report phobic behaviours in a way that leads to focused education. Currently if a staff member, or especially a clinician such a surgeon says something transphobic in particular it is very difficult, even as a confident queer to speak up or report without it being perceived as 'political' or reactionary. Transgender patients, especially those under 18 are openly undermined and questioned when discussed, be this in surgical briefs or handovers. This is due to a total lack of education and the current polarising press and policies nationally and globally surrounding trans identities and bodies."

"I treat all patients as individuals regardless of their sexuality/gender or however they identify. UHBW widely advertises LGBTQ support groups etc. badges are widely worn by staff(rainbow). I believe if we treat everybody with equality, there should not be a need to put do much focus on how a person chooses to identify….we should treat EVERYONE with the same respect and equality."

"I feel as a team we accept everyone and are inclusive but the experience from patients can be less than ideal and I have witnessed some homophobic comments from both patients and their visitors over the years."

"In most areas of health care, sex matters, gender is personal. All patients should be asked their preferred form of address, and to identify things important to them. Sexuality and gender identity is personal, and rarely needs extra support, (any more than political, and rather less than religious beliefs) Adherence to the Equality Act (2010) protected characteristics needs to be at the fore front of care in this area."

"I feel we should provide patient centred care and this does not change due to sexuality, trans status etc. Question 6 and 7 [around whether understanding patients' sexual orientation and trans status to enable best possible care] I have said yes but only from a holistic point of view - physically to know anatomy changes may be in place etc."

"I am not sure. But some training about trans identity is definitely needed. Some of my colleagues really struggle with understanding it, and I think it leads to some transphobic comments."

"I'm not sure. I'm bisexual but I feel that within certain work situations with colleagues I might feel uncomfortable sharing this because I feel there is a lack of understanding about bisexuality among the general public."

"I would like to see an acknowledgement that not everyone has a gender identity, that it's not relevant to 99% of our patients, and that asking people to self-identify (when their actual sex is

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entirely obvious to everyone)undermines confidence in our service (ie if you can't tell I'm a man then how can you possibly help me), also that asking peoples gender identity and working back from there to find out their sex (as in - gender identity and then is this how you were assigned at birth) does not help know some peoples actual sex (which is essential for their care) when they say non binary and that they weren't assigned this at birth, we then need to ask what the birth sex is. Birth sex is an essential to provide healthcare to assess risk of pregnancy and other sex based conditions. Pretending sex doesn't exist doesn't help anyone, including trans people. For example, the risk that a trans man is not assessed for pregnancy out of politeness."

"None, cut out your leftist ideological nonsense."

"As part of the induction when starting working, it is very clearly stated that non-binary people are not legally protected from discrimination. This does not make it seem safe to come out at work so I have not. Therefore I am misgendered everyday by my colleges which whilst not their fault is uncomfortable. Some kind of reassurance for non-binary people during this part that they won't be fired for being non-binary would be a lot more welcoming."

"None. It is of no consequence and none of your business where people want to put their private parts out of working hours. Stop focusing on woke nonsense and affirming mental illness and spend our tax money on sorting out your waiting lists."

"I think equal support should be given across the board and no additional support given to a certain group of people."

"I object to the term LGBT+ community. I am part of LGB. I object to the term cisgender."

"I think that Management needs to ensure that uniform policies including slogans are respected by ALL members of staff. Work is about looking after the patients, not drawing attention to yourself and your beliefs and causes. LGBT+ staff should be able to slot in comfortably just like anyone else and drawing attention to the differences or perceived lack of progression in society perhaps doesn't help?"

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Feedback report- Surveys

Patient responses

The Trust scored 0 points for this survey.

Please note that as there were only 23 responses to this survey, responses cannot give insight into what is happening at the Trust overall.

Action: See main action plan for a detailed list of proposed actions in relation to the surveys.

This is an unscored question, asked for information gathering purposes only.

57% of patients completing this survey identified within the LGBT+ communities in some way.

Q1

Do you identify as a member of the LGBT+ communities? Please continue to complete the survey however you answer. You may select more than one option.
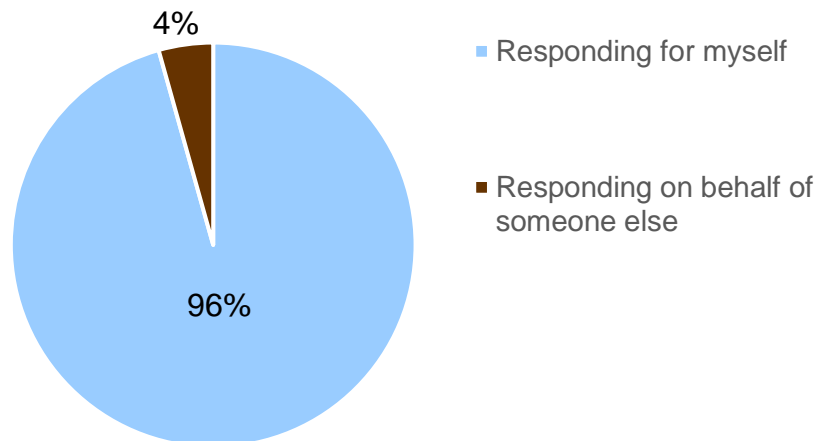
Answer Choices	Responses		
Yes- Lesbian		8.70%	2
Yes- Gay		13.04%	3
Yes- Bi		21.74%	5
Yes- Trans		8.70%	2
Yes- Non-binary		8.70%	2
Yes- I identify in a different way		0.00%	0
No		43.48%	10
Answered: 23 Skipped: 0	**Response Total:**		23

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Are you responding as a current or previous patient of this Trust, or behalf of someone else?

23 Responses

4%

■ Responding for myself

96%

■ Responding on behalf of someone else

Have you had an appointment with this Trust within the past 12 Months?
23 Responses

■ Yes

■ No

100%

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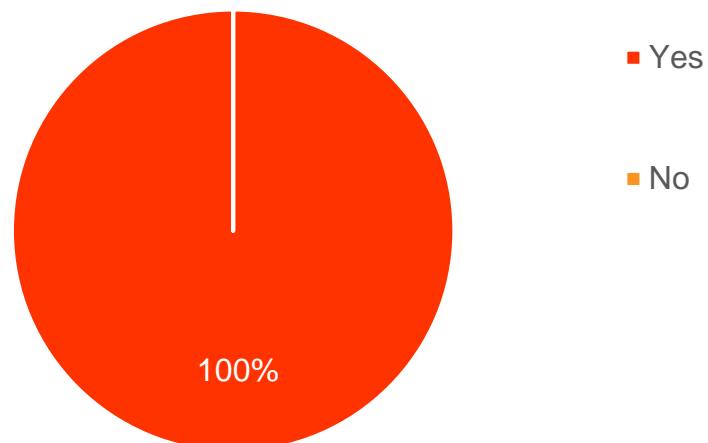
The Trust achieved 0 out of 2 available points for this question. To achieve 1 point more than 50% of combined respondents need to indicate a "Yes" response, and over 75% of respondents for 2 points.

Q4			
Have you noticed any LGBT+ inclusive posters or information in the hospital during your visit? Select all that apply.			
Answer Choices	Responses		
Yes posters		30.43%	7
Yes other information		8.70%	2
Not attended in person		0.00%	0
No		65.22%	15
Answered: 23 Skipped: 0	Response Total:		23

To achieve a score for this question, The Trust must have 50% of responses indicating a Yes answer.
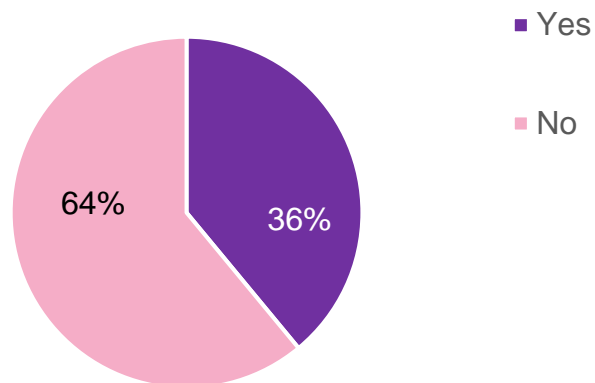
Has any member of staff asked for your pronouns (he/she/theyxe etc)?
23 Responses
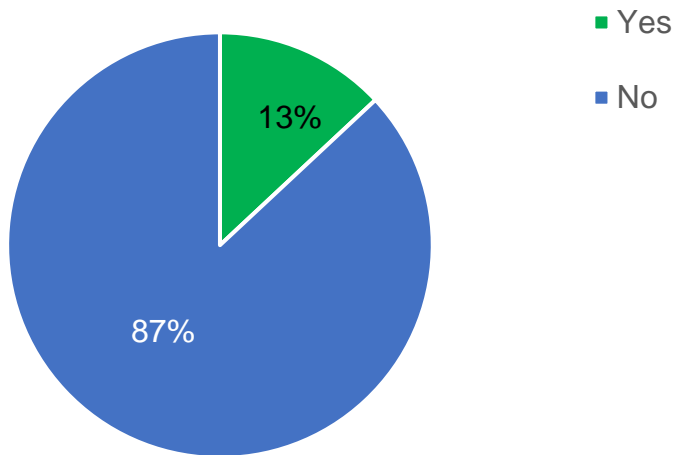
- Yes
- No

13%

87%

NHS RAINBOW BADGE

To achieve a score for this question, the Trust must have 50% of responses indicating a Yes answer.

Did you notice that the clinical staff avoided using gendered language (using partner instead of husband/wife, or parent instead of mother/father)?
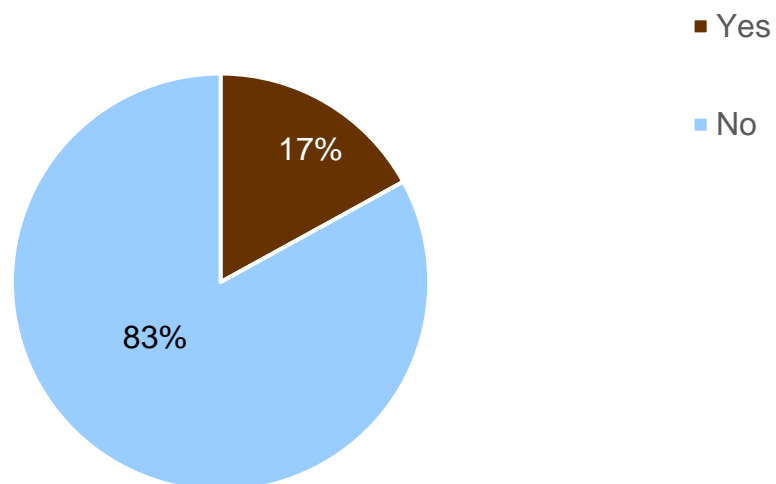23 Responses

- Yes
- No

64%   36%

To achieve a score for this question, the Trust must have 50% of responses indicating a Yes answer.

Have you seen any unisex/gender neutral toilet facilities, or signage indicating where they are?
23 Responses

- Yes
- No

17%

83%

Have you been asked to confirm your gender by any member of staff, or seen this question on any forms?
23 Responses
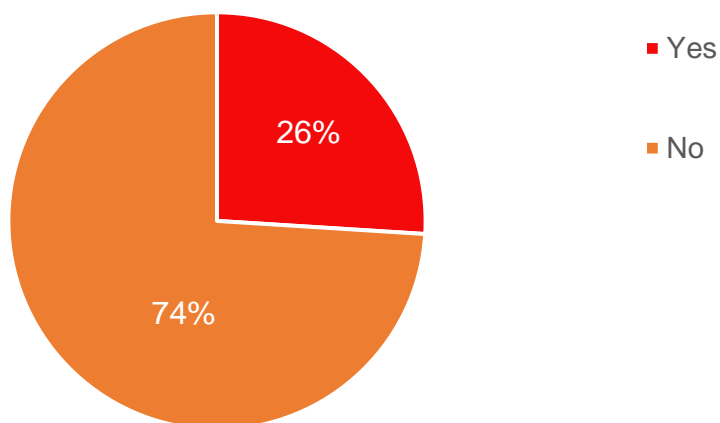
- Yes
- No

26%

74%

Have you been asked if you have a trans history, or if your gender differs from that assigned at birth, by any member of staff, or seen this question on any forms?
23 Responses
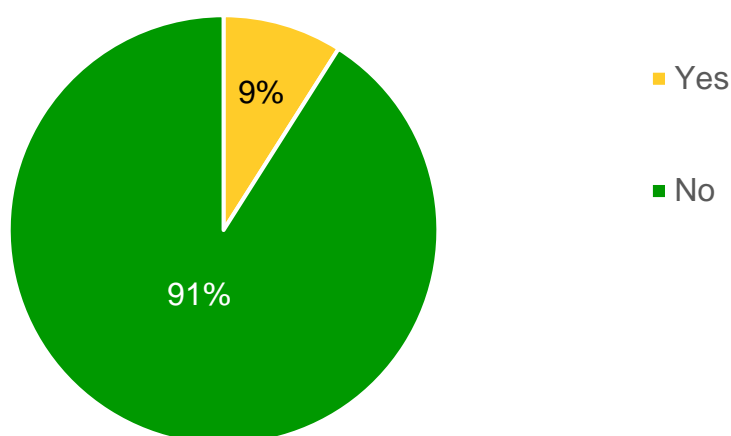
- Yes
- No

9%

91%

#NHSRainbowBadge

NHS RAINBOW BADGE

Have you been asked to confirm your sexual orientation by any member of staff, or seen this question on any forms?
23 Responses

- Yes
- No

26%

74%
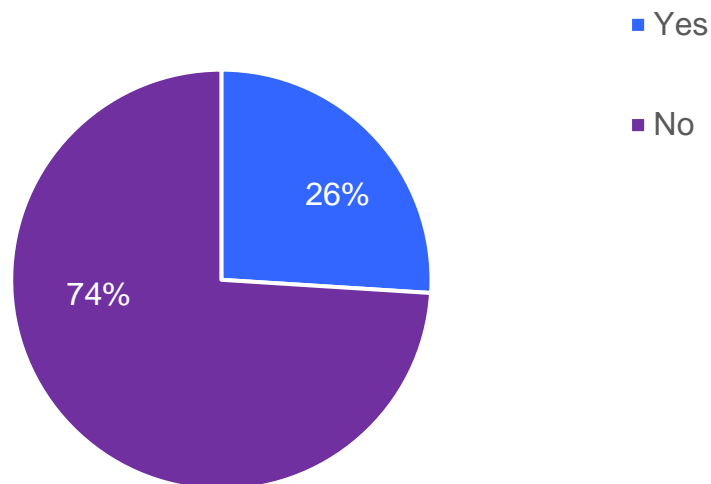
The following are unscored question, asked for information gathering purposes only.

Have you witnessed any anti-LGBT language or behaviour within your healthcare experiences at any point? This could be anything you considered to be homophobic, biphobic, or transphobic.
23 Responses

- Yes
- No

13%

87%

#NHSRainbowBadge

NHS RAINBOW BADGE

What anti-LGBT experiences in healthcare have you had? You can select more than 1 option

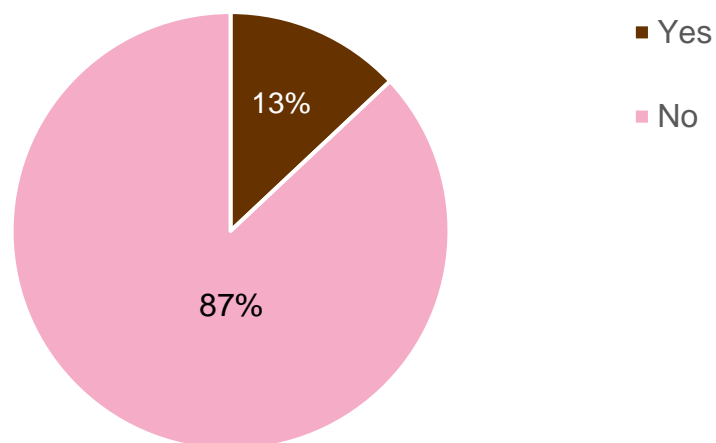| Answer Choices	Responses		
Homophobic behaviour		0.00%	0
Homophobic language		33.33%	1
Biphobic behaviour		0.00%	0
Biphobic language		0.00%	0
Transphobic behaviour		33.33%	1
Transphobic language		66.67%	2
Inappropriate questions about sexual orientation		0.00%	0
Inappropriate questions about gender reassignment		0.00%	0
Other		66.67%	2
Answered: 3 Skipped: 20	**Response Total:**		3

A total of 3 people indicated that they had witnessed or experienced anti-LGBT language or behaviours within their healthcare experience. The questions which delve into the experience, received 3 separate responses. Of these, all respondents stated they had witnessed instances of these on more than one occasion. On three instances respondents felt unable not raise their concerns as they did not feel safe to do so and on one other occasion the respondent did not raise the concerns for other reasons.

As part of the workforce assessment the Trust stated they do not routinely keep or take information about complaints being LGBT+ related from patients who make a complaint. Responses to this survey showcase that implementing a way to systematically monitor LGBT+ related complaints is important for the Trust to enable them to appropriately identify and act on such complaints.

Feedback report- Services

The Trust received 18 points across the scoring for this survey.

A total of 9 services responded to this survey, including Maternity/Perinatal and Sexual Health.

Gynaecology

1. **Does the service take any additional action to support trans and non-binary patients' privacy and dignity when attending physically e.g. timings of clinical slots to avoid busy periods within waiting areas?**

2. **Do clinics have gendered names (e.g. 'Women's Health') or are they named for the purpose (e.g. colposcopy)?**

As this service did not respond to this survey, the Trust received 0 out of 2 available points.

Action: We recommend the Gynaecology service provide guidance or the opportunity for trans and non-binary people who are attending the service to request additional support. Support can be in the form of scheduling their appointment at the beginning/end of the day to avoid waiting in a busy gendered waiting room or providing the opportunity to wait in an adjoining waiting room that matches their affirmed gender. This could be communicated in the form of a statement on the service website or a sentence on outgoing appointment letters outlining what additional support could be available and how a patient can request it.

Action: We recommend ensuring that clinics have names that are names for their purpose rather than in a gendered way.

Maternity/Perinatal

1. **Do all the systems and paperwork within this service allow for recording accurate information regarding different family structures, e.g. expressly include options for same gendered parents? -YES**

2. **Does the service have sensitive guidance in place to support trans and non-binary people to breast/chest feed, should they wish to do so? -YES**

3. **Does the service have sensitive guidance in place to support a non-carrying parent to breast/chest feed? -NO**

The Trust scored 0 out of 3 available points for this.

Although the service indicated "YES" for Q1 and Q2, we were unable to award any points as the requested evidence was not provided.

Action: Review all the systems and paperwork within maternity/perinatal to allow for recording accurate information regarding different family structures.

Action: Develop guidance to support trans and non-binary people to chest feed. Resources and links to organisations that have information and guidance aimed at supporting trans and non-binary people to breast/chest feed have been provided in the resource pack to support the Trust with developing such guidance.

Action: Develop guidance to support supporting a non-carrying parent to breast/chest feed. Resources and links to organisations that have information and guidance aimed at supporting a non-carrying parent to breast/chest feed have been provided in the resource pack to support the Trust with developing such guidance.

Laboratory/Pathology

1. **Is there a process in place to support the recording of a patient's trans status if this information is supplied with or about a sample?**

2. **Does the Trust has a policy/pathway for laboratory staff to follow where there is incongruence between the sample for testing and the patient information?**

3. **Does this policy also detail the reference ranges/intervals to be utilised in different circumstance for transgender patients?**

As this service did not respond to this survey, the Trust received 0 out of 3 available points.

Although the service indicated "YES" for Q2, we were unable to award any points as the requested evidence was not provided.

Action: Ensure there is a process in place to support the recording of a patient's trans status if this information is supplied with or about a sample.

Action: Ensure there is a policy/pathway for laboratory staff to follow where there is incongruence between the sample for testing and the patient information.

Oncology

1. **Does the service take any additional action to support trans and non-binary patient privacy/dignity when attending physically (e.g. timings of clinical slots if a trans male patient known to the service is attending 'breast' clinic?)**

As this service did not respond to this survey, the Trust received 0 out of 1 available points.

Action: We recommend the Oncology service provide guidance or the opportunity for trans and non-binary people who are attending the service to request additional support. Support can be in the form of scheduling their appointment at the beginning/end of the day to avoid waiting in a busy gendered waiting room or provide the opportunity to wait in an adjoining waiting room that matches their affirmed gender. This could be communicated in the form of a statement on the service website or a sentence on outgoing appointment letters outlining what additional support could be available and how a patient can request it.

Sexual Health

1. **Are practitioners able to discuss PEP and PrEP with patients who may be at risk of HIV infection? -YES**

2. **Do practitioners have training on how to support people who are engaging in chemsex, including harm reduction strategies and signposting to appropriate support? -YES**

3. **Does the service offer targeted patient information for both men who have sex with men and women who have sex with women? -YES**

The Trust scored 0 out of 3 available points.

Although the service indicated "YES" for all three options, no points could be awarded as the requested evidence of this could not be provided.
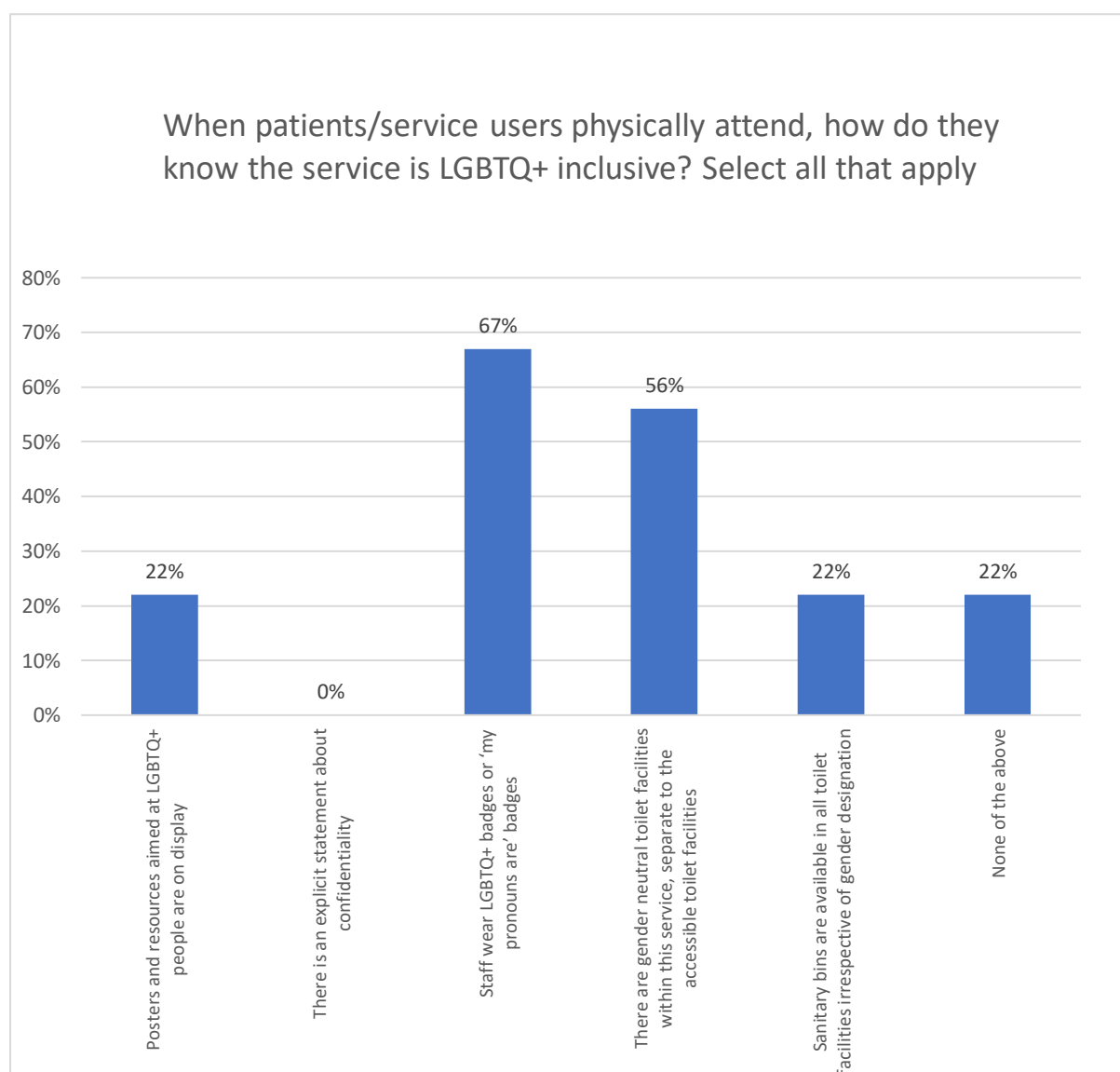
Action: Ensure practitioners able to discuss PEP and PrEP with patients who may be at risk of HIV infection.

Action: Ensure practitioners have training on how to support people who are engaging in chemsex, including harm reduction strategies and signposting to appropriate support.

Action: Ensure the links to support and information for men who have sex with men and women who have sex with women and current and working if this is the main form of signposting within the service.

The following questions were answered by all services that responded to this survey. We have selected an evidence rate of 25% for this project, therefore in some instances evidence was requested from multiple respondents.

When patients/service users physically attend, how do they know the service is LGBTQ+ inclusive? Select all that apply

Category	Percentage
Posters and resources aimed at LGBTQ+ people are on display	22%
There is an explicit statement about confidentiality	0%
Staff wear LGBTQ+ badges or 'my pronouns are' badges	67%
There are gender neutral toilet facilities within this service, separate to the accessible toilet facilities	56%
Sanitary bins are available in all toilet facilities irrespective of gender designation	22%
None of the above	22%

NHS RAINBOW BADGE

The Trust received 2 out of 15 points available for this question.

A maximum of 15 points were available for this question, with 3 points available per option. 1 point is awarded for a yes response per option, more than 50% of respondents must select the option to score 2 points and more than 75% to score 3 points.

0 points could be awarded for posters and resources aimed at LGBTQ+ people on display, as the Trust failed to provide requested evidence.

2 points were awarded for staff wearing LGBT+ or "my pronoun" badges. Evidence was provided of staff badges.

0 point was awarded for gender neutral toilet facilities, as the Trust failed to provide requested evidence.

0 point was awarded for sanitary bins in all toilets irrespective of gender designation, as the Trust failed to provide requested evidence.

Action: Increase the posters and resources available to services that support LGBT+ people. Links to LGBT+ posters and resources have been included in the resource pack.

Action: Include sanitary bins in all toilets. Information about the '#in with the bins campaign' which supports this is provided in the resource pack. Where possible designate singe stall toilets as gender neutral, this should be in addition to the accessible facilities.

Action: We recommend producing an explicit statement per service about confidentiality (e.g. only sharing sexuality or trans status information where relevant and in discussion), and making sure this is visible to patients and visitors.

NHS RAINBOW BADGE

The Trust received the 2 out of 3 points available for this question.

A combined total of more than 75% of respondents selecting an example would score 3 points. Please note that these responses are from 6 services only, as 4 indicated that they do not hold virtual appointments.

Many services are now using virtual consultations (phone or video), if your service makes use of these please indicate how a patient or service user would know that the service was LGBTQ+ inclusive during the appointment. Select all that apply.

Category	Percentage
Healthcare professional wears LGBTQ+ or "my pronouns are" badge during consult	50%
Use of corporate background which includes an LGBTQ+ flag in design	0%
Consultation starts with a pronoun introduction	0%
None of the above	50%

The Trust has evidenced staff wearing LGBT+ badges.

Action: Ensure that the corporate background which can be used in virtual consultations is stored centrally and made available to all.

#NHSRainbowBadge

Action: Ensure staff have access to LGBT+ or "my pronouns are" badges. Ensure that the corporate background which can be used in virtual consultations is stored centrally and made available to all.

Action: Encourage staff to start consultations with a pronoun introduction, as this signals an inclusive and safe space for the patient as well as helping establish the use of the correct pronouns for staff.

The Trust received 0 out of 3 points available for this question.
Scoring for this question is similar to scoring for the above question.

Has patient information (leaflets, standard letters) been reviewed to ensure language is gender-neutral or gender-inclusive?

- Yes
- No

37%

63%
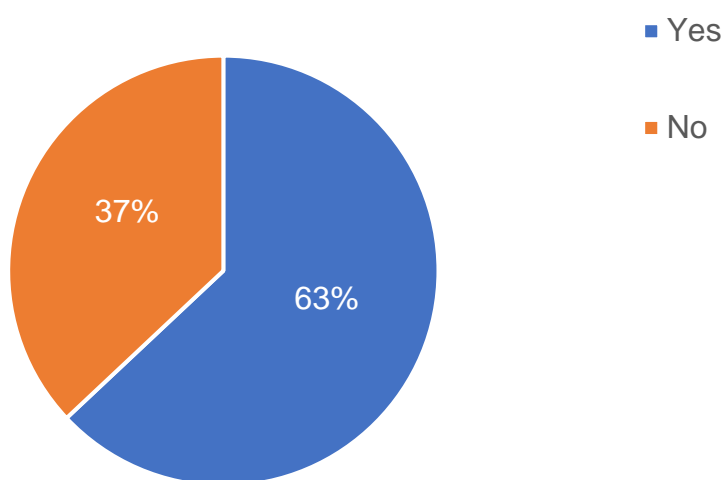
As no evidence in the form of leaflets could be provided for this answer, the Trust unfortunately missed out on 2 potential points.

Action: Review standard patient letters to ensure language is gender neutral or gender inclusive.

The Trust received 3 out of 3 points available for this question.
Scoring for this question is similar to scoring for the above question.

Q29			
Are patient information leaflets available in different formats (e.g. large print or easy read) and languages? Select all that apply			
Answer Choices	Responses		
Yes- Large print		33.33%	3
Yes- Different languages		77.78%	7
Yes- Easy read		44.44%	4
No		11.11%	1
Answered: 9 Skipped: 1	**Response Total:**		9

Evidence was provided of an Easy Read leaflet covering ultrasounds.

Action: Ensure that patient facing staff know how to request leaflets in additional formats and these are available as a standard where possible.

The Trust received 1 out of 3 points available for this question.
Scoring for this question is similar to scoring for the above question.

Are LGBTQ+ patients specifically mentioned in your patient information?

- Yes
- No

13%

87%
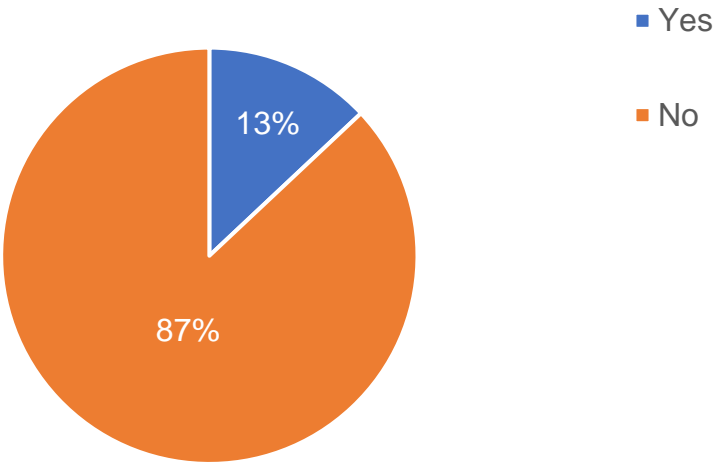
Evidence was provided of patient information from the Sexual Health service that covered mental health resources and signposting for LGBT+ patients.

Action: When reviewing patient information, consider what tailored and equitable support may be needed to ensure that LGBT+ patients within the service are fully supported and receiving relevant information. Where relevant make reference to LGBT+ patients and include any specific information.

The Trust received 1 out of 3 points available for this question.
Scoring for this question is similar to scoring for the above question.

Looking at the patient information visuals, are LGBTQ+ people and relationships clearly included (eg. badges, same-sex partners, and diverse family units)?

- Yes
- No

25%

75%
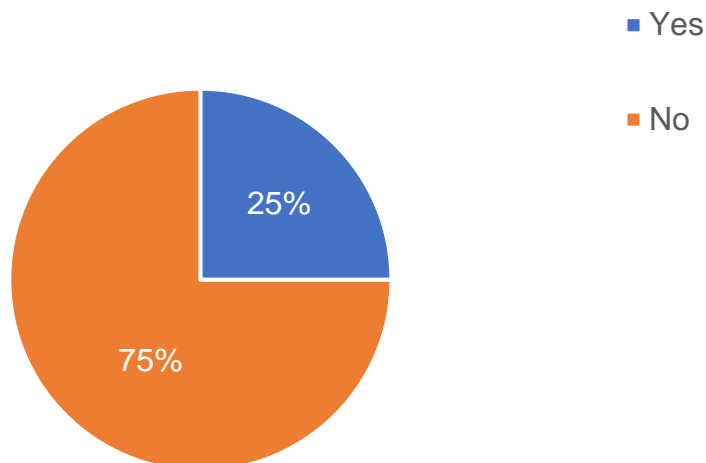
Evidence was provided of a poster within the obstetric scanning department depicting a same sex couple who are expecting a baby.

Action: When reviewing patient information, consider including LGBT+ imagery. This could be LGBT+ people and relationships, (same-gendered partners, and diverse family units) or clear signifiers of LGBT+ inclusion such as the progress flag.

NHS RAINBOW BADGE

The Trust received 1 out of 3 points available for this question.
Scoring for this question is similar to scoring for the above question.

Does the service have its own website/webpage? Please comment on how an LGBTQ+ patient looking at the website/page would know that the service is LGBTQ+ inclusive?

- Yes
- No

38%

62%
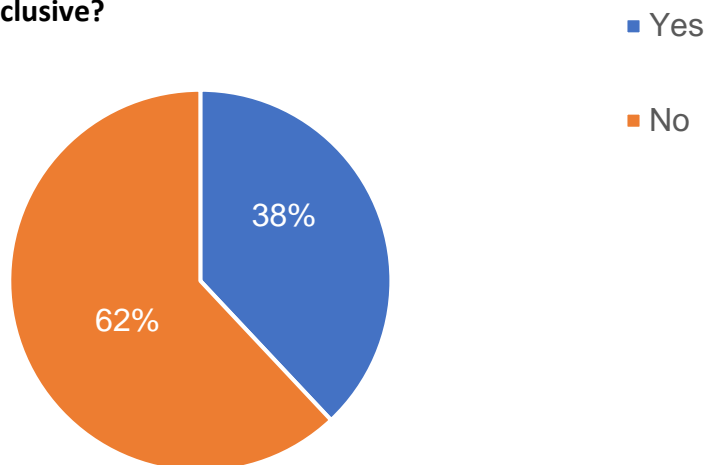
Although 38% of services indicated that they had their own website, only the Sexual Health service indicated that a patient looking at the website would know that the service is LGBT+ inclusive, evidencing a progress flag as well as specific mentioning of and resources for LGBT+ people.

Action: We recommend services review their webpages and where applicable make specific references to LGBT+ people, or signify that their service is LGBT+ inclusive by including clear imagery such as a progress flag.

NHS RAINBOW BADGE

The Trust received the 2 out of 3 points available for this question.
Scoring for this question is similar to scoring for the above question.

If an LGBTQ+ patient needed signposting or referring on to specific LGBTQ+ resources, would staff have this information available?
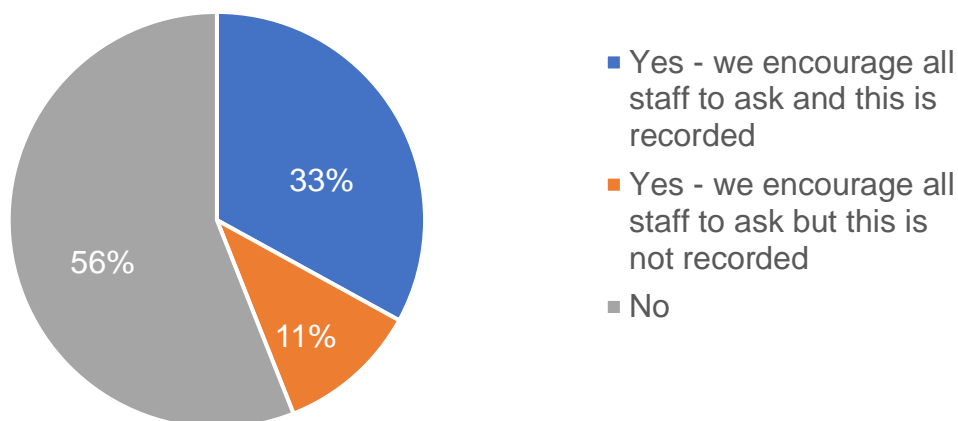

- Yes
- No

37%

63%
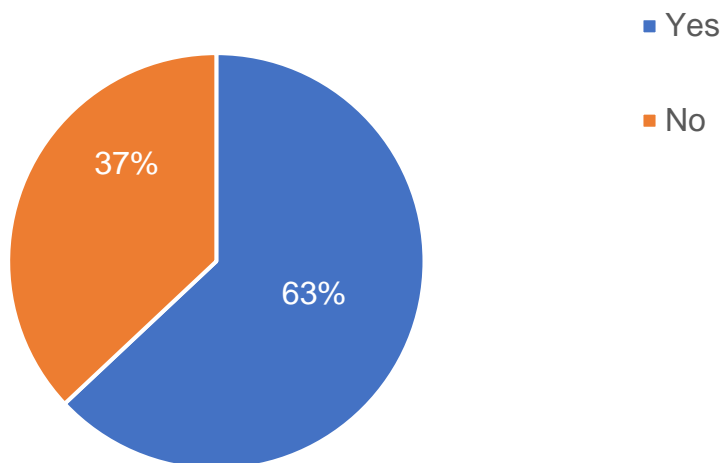
The Sexual Health service evidenced available signposting resources for LGBT+ patients. It was also indicated by a service leads that there are two EDI advocates within the ultrasound department that can guide staff on appropriate signposting where needed. Another service mentioned that there are LGBT+ resources available on Connect.

Action: Create a centralised list of general LGBT+ resources, local and national organisations where LGBT+ patients can be signposted to. This list would ideally be made available to all staff and accessed through the intranet. Services could also create a list of LGBT+ resources and organisations specifically relevant to the service and ensure this information is accessible to staff for when needed. Resources, links to organisations are detailed in the resource pack

#NHSRainbowBadge

The Trust received 2 out of 6 points available for this question.
Up to 3 points were available for asking for pronouns overall, and another maximum of 3 points were available for recording this information on patient notes.

Are patients routinely asked what their pronouns are e.g. he/she/they/xe?

- Yes - we encourage all staff to ask and this is recorded
- Yes - we encourage all staff to ask but this is not recorded
- No

33%
11%
56%

1 point was awarded for staff being encouraged to ask patient pronouns.

1 point was awarded for staff recording pronouns on patient notes, as evidence of recording of pronouns on patient notes was evidenced.

Action: If the Trust is able to amend patient notes to include a space for patient pronouns across services, we would encourage them to do so. Ensure that patients are routinely asked and this is then recorded, by communicating this process and the importance of pronouns to patient-facing staff.

NHS RAINBOW BADGE

The Trust received 0 out of 3 points available for this question.
Scoring is similar to the other above 3 point questions.

On patient forms (e.g. referrals, intake paperwork), is there an option within the gender section to select non-binary?
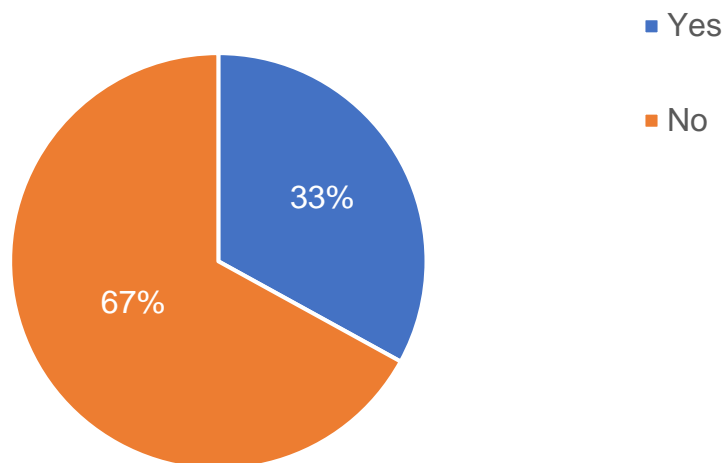
As no evidence could be provided for this answer, the Trust unfortunately missed out on 1 potential point.

If a service records this information digitally, we advise that the options that can be selected is as follows:
1. Woman (including trans woman)
2. Man (including trans man)
3. Non-binary
4. In another way
5. Not stated (patient asked but declined to provide a response)
6. Not known (not recorded)

Action: Amend the options for "gender" to choose from within the online system.

The Trust received 2 out of 3 points available for this question.
Scoring is similar to the other above 3 point questions. Please note that only 8 service responses were scored for this question as this was not applicable to one service.

Where appropriate do clinicians ask the gender(s) of patient partners – rather than assume heterosexual or binary-gender relationships?

- Yes
- No
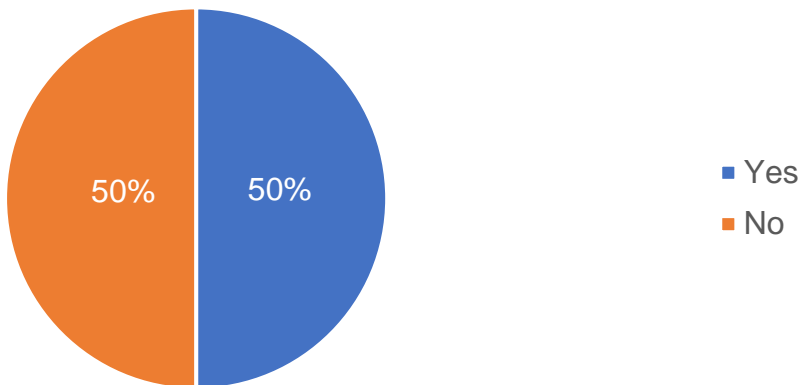
Action: Encourage clinicians to ask for the gender of a patient's partner rather than assuming heterosexual or binary-gender relationships and ensure that staff are aware why this is important.

The Trust received 0 out of 3 points available for this question.
Scoring is similar to the other above 3 point questions.

| Q40			
Does your service run patient surveys, feedback, focus groups? Select all that apply			
Answer Choices	**Responses**		
Yes- and we ask about sexual orientation		28.57%	2
Yes- and we ask about gender identity		28.57%	2
Yes- and we ask about trans status		14.29%	1
No		71.43%	5
Answered: 7 Skipped: 3	**Response Total:**		7

As the requested evidence was not provided the Trust unfortunately missed out on 3 potential points.

Action: On patient feedback forms, we would advise that one question be asked to confirm someone's gender identity (man, woman, non-binary, other), with a further question around trans status, in addition to sexual orientation. This can be done through asking "do you identify with the gender you were assigned at birth?" It is also worth noting that a person does not need to disclose this information and may choose not to.

The Trust received 0 out of 3 points available for this question.
Scoring is similar to the other above 3 point questions.

Has your service examined patient journeys or consulted with LGBTQ+ patients to ensure there are no barriers to accessing your service?
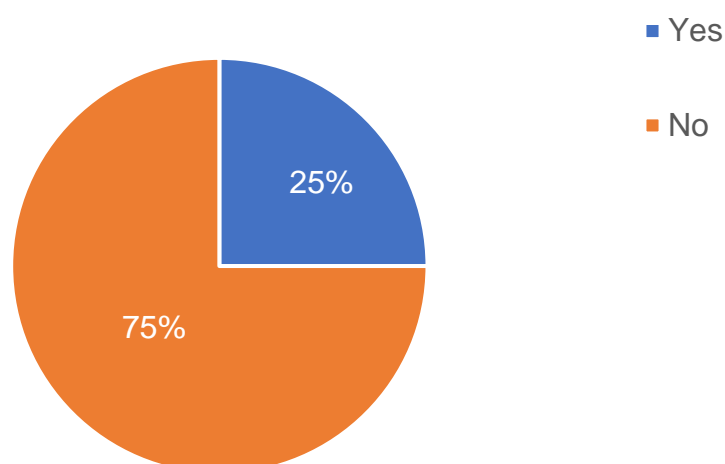
Legend: ■ Yes ■ No

25%

75%

As the requested evidence was not provided the Trust unfortunately missed out on 1 potential point.

Action: When examining patient journeys, consult with LGBT+ patients to ensure there are no barriers to accessing services.

The Trust received 0 out of 3 points available for this question. Scoring is similar to the other above 3 point questions.

Have patient-facing staff had any training in the needs of LGBTQ+ people?
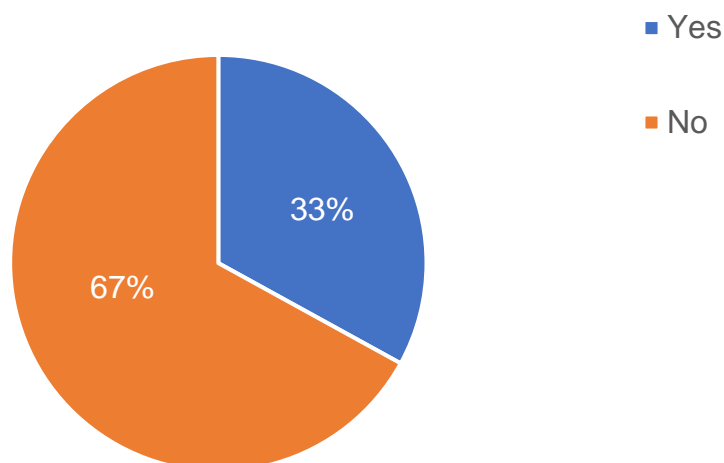
- Yes
- No

33%

67%

As no evidence could be provided for this answer, the Trust unfortunately missed out on 1 potential point.

Action: Review the centrally delivered EDI training for its suitability and LGBT+ information. Link to organisations that can provide additional training in the needs of LGBT+ staff and patients have been included in the resource pack.

#NHSRainbowBadge

The Trust received 1 out of 3 points available for this question.
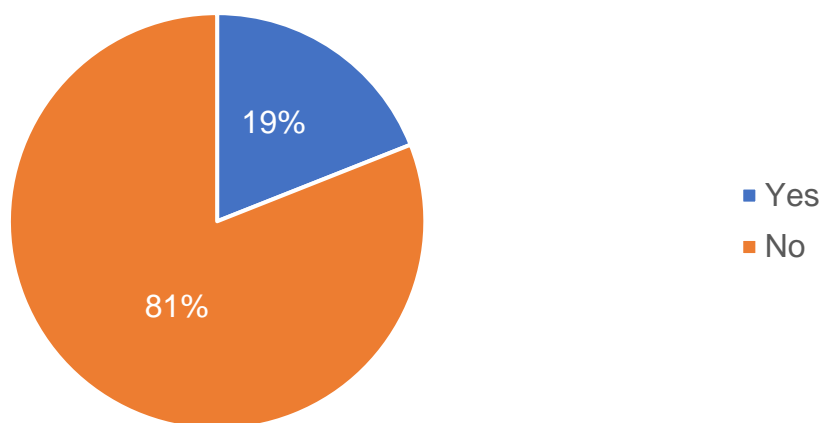Scoring is similar to the other above 3 point questions.

Are clinicians confident in giving advice (where appropriate) on hormonal contraindications for trans and non-binary patients?

- Yes
- No

19%

81%

Please note: 3 responses were classed as N/A as this question does not apply for other reasons. We do want to note however that the Maternity/Perinatal service indicated that this question was not applicable to them when we class this question as applicable for that service.

Action: Where appropriate, ensure that clinicians are informed and confident in either giving advice to trans and non-binary patients on hormonal contraindications, or know where to refer for further information.

The Trust received 0 out of 3 points available for this question.
Scoring is similar to the other above 3 point questions.

Does the service have an 'LGBT+ Champion' (for staff or patients)?

- Yes -for staff
- Yes - for patients
- No
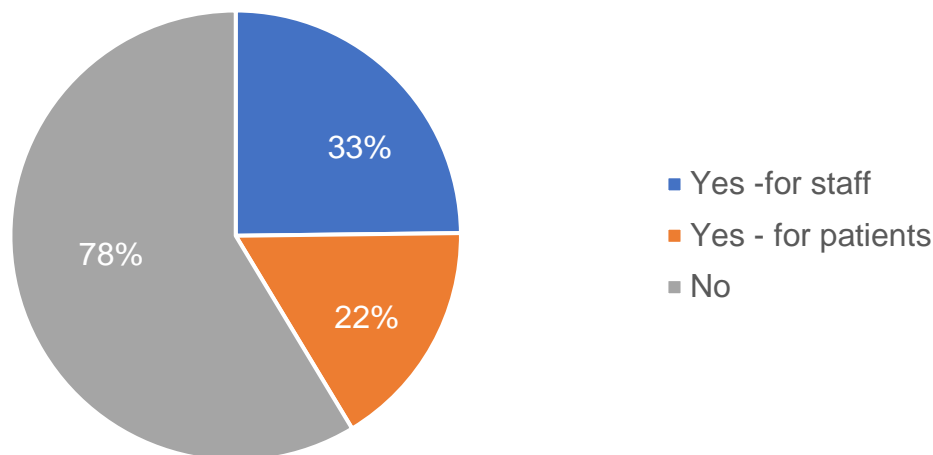
As the Trust was unable to provide evidence for this question, we could unfortunately not award the potential 1 point.

Action: Introduce an LGBT+ champion for staff and patients per service and ensure this information is available to bot staff and patients.

Are there any other service improvements you have put in place to be more LGBT+ inclusive?

This was unscored and for information purposes only.

"- EDI advocates within the department
-Giving patients the option of where they are scanned (eg some may not wish to attend St Michael's hospital and be sat with patients waiting for obs/ gynae scans)
-Giving patients the option of how they are scanned; eg a transvaginal scan may not be acceptable to a transmale patient, we would therefore give them the option of having a transabdominal scan.
-Allowing patients the option of being scanned by a female/ male member of staff or even choosing a specific member of staff if they know they feel more comfortable being seen by a particular person.
-Encouraging staff to wear rainbow badge/ LGBT+ ally badges as a visual sign that we are an inclusive department.
-Training to ensure staff feel comfortable discussing gender/ pronouns etc.

#NHSRainbowBadge

-Sending interesting articles/ documents round the staff group to share information." – Ultrasound department

"Two EDI leads for ultrasound. Looking into terminology and patient letters to make them more inclusive. Staff shortages and time limitations mean progress is slow." – Ultrasound department

"We no longer have 'male' and 'female' based services, i.e. we have gotten rid of the male and female waiting areas, lists and proformas. Due to room size, not all rooms can be used for vaginal examinations." – Sexual Health Service

Feedback report- Workforce Assessment

The Trust received 17 points across the scoring for this survey.

Options selected by the Trust that were accepted by us have been highlighted in yellow. Options selected by the Trust that were not accepted and did not receive scores have been highlighted in red.

1- When advertising for external appointments, how does the Trust attract LGBT+ talent? Tick all that apply.

A. Advertising on or recruiting from LGBT+ or diversity websites, fairs and events
B. Include a statement around valuing diversity, explicitly inclusive of LGBT+ people, in all job packs and pages
C. Include information about your LGBT+ employee network group or LGBT+ inclusion activities in all job packs and pages
D. None of the above
E. Other (Please detail)

3 points available and 0 received.

Although the Trust evidenced that they have a general statement around Equality and Inclusion as part of their job adverts, this is does not explicitly mention LGBT+ people. We could also not find any mention of the LGBT+ employee network within job adverts and were therefore unable to award any points.

Action: Ensure that recruitment activity includes LGBT+ specific websites/fairs or events are in all job packs and pages.

Action: Include a statement around valuing diversity, which is explicitly inclusive of LGBT+ people, as well as information about the LGBT+ employee network group in all job packs and pages.

2- What information does the Trust supply to all new employees (external appointments) when being inducted into the organisation? Tick all that apply.

A. Explicit message on the organisation's commitment to LGBT+ inclusion
B. Information on the LGBT+ employee network or allies programme/initiative
C. Information on relevant policies and the organisation's commitment to ensuring they are LGBT+ inclusive
D. None of the above
E. Other (Please detail)

3 points available and 1 received.

Evidence was provided of information around the LGBT+ staff network within the induction pack.

Action: Include an explicit message on the organisation's commitment to LGBT+ inclusion within induction.

Action: Include information on relevant policies and the organisation's commitment to ensuring they are LGBT+ inclusive at induction.

3- How does the Trust enable non-binary employees to have their identities recognised within the work environment?

A. Employees are able to update pronouns on email signatures
B. Employees are encouraged to use pronoun introductions within internal meetings and it is expected that these are respected if given
C. Non-Binary is available as a gender option on staff registration forms
D. None of the above
E. Other (Please detail)

3 points available and 2 received.

The Trust provided evidence against option A, and this has been demonstrated throughout the process though communication with the key contacts. Evidence was also provided of communication and training around the importance of correct pronoun use.

Action: Ensure that any internal forms include non-binary as a gender option and that non-binary titles are an option on staff passes and HR forms.

4- In the past year, which of the following messages have appeared in internal communications to all employees? Tick all that apply.

A. Information about LGBT+ identities and experiences
B. Information about the LGBT+ Employee Network Group and/or allies activity
C. Information about LGBT+-inclusive policies
D. Information about the importance of pronouns and pronoun introductions
E. None of the above
F. Other (Please detail)

4 points available and 3 received.

The Trust provided examples for A, B and D in the form of internal communication that highlighted LGBT+ Employee Network Group activities, like a candle-lit vigil for World AIDS Day, and information about LGBT+ identities within their series on pronouns.

Action: Share information that highlights and signposts to relevant LGBT+ inclusive policies.

5- Does the Trust identify and act on any LGBT+ inclusion issues raised at exit interviews or on exit surveys?

Yes
No

1 point available and 1 received.

The Trust asks for information around inclusion and feeling safe at work during exit interviews and surveys. The Trust advised that information from the leaver's conversation is shared with the division for any actions and a quarterly report detailing exit data and key findings will be shared with Divisional Boards and People Committee. Any themes identified with regards to LGBTQIA+ issues would be highlighted to the people EDI manager and staff network.

There is however no specific section within this process that was described which would enable systematic monitoring of LGBT+ complaints, or for these to be identified categorically. We therefore recommend revising and expanding on any leavers surveys to specifically include issues relating to both sexual orientation and trans status.

Action: A formal process that supports the Trust to identify and act specifically on LGBT+ inclusion issues raised, rather than just wider "discrimination" issues at the

exit interviews would be beneficial. This would allow for regular systematic monitoring and flagging of any reoccurring issues.

Employees - Leadership

6- **In the past year, which of the following activities have members of the Trust's senior management engaged in? Tick all that apply.**

A. Communicated a strong message on LGBT+ equality
B. Communicated a strong message on bi equality
C. Communicated a strong message on trans equality, explicitly including non-binary equality
D. Reviewed and/or approved an LGBT+ inclusion strategy
E. Reviewed top line LGBT+ monitoring reports and actions
F. Met periodically with the LGBT+ employee network group
G. Spoken at an internal LGBT+ event
H. None of the above

7 points available and 2 received.

Evidence for E was provided as the LGBT+ staff network's executive sponsor overviews the staff network action plan and the EDI biannual report is received at the People Committee which feeds into the Trust Board.

Evidence for F was also provided as the medical director has met with the LGBT+ staff network as the network's board level champion. We highly encourage ensuring that they periodically keep attending network meetings.

Although the Trust evidenced communication from the staff network and other staff around LGBT+ equality, and senior management highlighting staff network activity, there was no evidence of a strong message on LGBT+ equality from senior management. We were unable to award a point for A.

The Trust also advised that there is a 5 year EDI strategy that is ratified by the Trust Board and that each year a strategic plan, including key milestones for the year is produced which includes activity by the EDI team and staff network. As we do not have access to the EDI strategy or the yearly strategic plans, we are unable to assess whether these cover the needs of LGBT+ staff and patients and were therefore unable to award a point for D.

The Trust advised that the medical director, as executive sponsor for the LGBT+ staff network, has started to be involved in network activities such as celebrating Pride Week and attending meetings. As we do not know the extend of this involvement and whether it included speeches made by the sponsor at events, we were unable to award a point for G.

Action: Ensure that senior management communicates a strong message on LGBT+ equality, which also expressly includes bi equality and trans and non-binary equality, as these are often subject to erasure. Resources and information about bi identities and trans and non-binary identities have been included in the resource pack.

Action: Ensure that senior management engages with LGBT+ inclusion strategies as well as LGBT+ monitoring reports, as this increases awareness on an upper level around which areas of inclusivity need to be improved.

Action: Ensure that senior management meets periodically with the LGBT+ employee network and speaks at internal LGBT+ events.

7- **Does the Trust require all senior leaders and line managers to meet an inclusion-based competency on recruitment?**

Yes
No

1 point available and 0 received.

The Trust indicated that it is Trust policy that at least one interview panel member has attended inclusive recruitment training. This however only ensures that the interviewer has competencies around inclusive recruitment, and does not explicitly require that all senior leaders and line managers meet inclusion-based competencies on recruitment. We were therefore unable to award a point.

Action: Implement guidelines that require all senior leaders and line managers to meet an inclusion-based competency on recruitment.

8- **Does the organisation require all senior leaders and line managers to have an inclusion-based objective?**

Yes
No

1 point available and 0 received.

The Trust advised that the appraisal process has recently been updated and will be looking to include an inclusion based objective, which we welcome.

Action: Implement guidelines that require all senior leaders and line managers to have an inclusion-based objective.

Monitoring

These are unscored questions, asked for information gathering purposes only. These questions solely relate to the answers collect within the 2022 NHS Staff Survey.

9- Please upload a copy of your staff survey results broken down by Sexual orientation

Experiences of physical violence at work were greater for bisexual staff with 21.6%, gay and lesbian staff with 16.2% and those who described their sexual orientation as "other" with 25.7% reporting they had experiences of harassment, bullying or abuse at work from patients, service users, their relatives, or other members of the public. 3% of those who identify their sexual orientation as "other" also reported having experienced physical violence from managers, as well as from other colleagues at 6.3%.

Experiences of harassment, bullying or abuse at work, were also greater for bisexual staff with 30.7%, gay and lesbian staff with 27.5%, and those who describe their sexual orientation as "other" with 34.3% reporting they had experiences of harassment, bullying or abuse at work from patients, service users, their relatives, or other members of the public. Experiences of harassment, bullying or abuse at work from other colleagues were also higher for bisexual staff at 22.4% and those who identify their sexual orientation as "other" at 24.2%. Those who identify their sexual orientation as "other" were least likely to report such instances with only 38.5% having reported, compared to 51% of heterosexual staff. This number was also lower for gay and lesbian staff at 44.9%.

With regards to career progression/promotion, only 42.9% of those who identify their sexual orientation as "other" said that the organisation act fairly with regard to career progression/promotion regardless of protected characteristic. This is compared to 55.2% of heterosexual staff.

Reported rates of discrimination at work from patients/service users, their relatives or other members of the public were also higher for both those who identify their sexual orientation as "other" (18.8%%) and lesbian and gay staff (9.9%%) compared to heterosexual staff (5.9%). Reported rates of discrimination at work from colleagues and managers were also higher for both those who identify their sexual orientation as "other" (17.6%%) and bisexual staff (9.9%%) compared to heterosexual staff (6.7%). 50% of lesbian and gay staff also reported the discrimination they faced was on the grounds of their sexual orientation, as well as 16.1% of bisexual staff.

10-Please upload a copy of your staff survey results broken down by Gender

Experiences of harassment, bullying or abuse at work from patients, service users, their relatives, or other members of the public was slightly higher for those who prefer to self-describe their gender (27.3%). This was also true for harassment, bullying or abuse at work from colleagues (27.3%).

Those who prefer to self-describe their gender also report the highest rates of discrimination at work from managers and colleagues at 18.2%.

There are also discrepancies when it comes to career progression and promotion, with only 36.4% of those who prefer to self-describe their gender saying that the organisation acts fairly with regard to career progression/promotion, regardless of ethnic background, gender religion, sexual orientation, disability or age. This is compared to 55.6% of women and 53.2% of men.

11-Please upload a copy of your staff survey results broken down by Trans status

Experiences of harassment, bullying or abuse at work from colleagues was slightly higher for trans staff (20%) compared to cisgender staff (16.3%). There are also higher levels of discrimination at work from patients/service users, their relatives and other members of the public for trans staff (12.5% compared to cisgender staff (6.3%).

There are also discrepancies when it comes to career progression and promotion, with only 47.1% of trans staff saying that the organisation acts fairly with regard to career progression/promotion, regardless of ethnic background, gender religion, sexual orientation, disability or age. This was even lower for staff who preferred not to state their trans status at 29.5%. This is compared to 55.3% of cisgender staff.

12-Please upload a copy of any associated action plan based on the staff survey results.

The Trust advised that they do not currently have a specific action plan but that results from the staff survey feed into an annual EDI strategic action plan. As we do not have access to the EDI strategic action plan we are unable to comment on how effectively this takes LGBT+ staff feedback into account.

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Engagement

13-Does the Trust systematically monitor LGBT+ related complaints made by patients?

Yes
No

1 point available and 0 received.

Action: Ensure that there is a robust and systematic process in place to identify and monitor LGBT+ complaints made by patients.

14-Does the Trust have an LGBT+ employee network group for LGBT+ employees?

A. Yes, with a defined role and terms of reference
B. No, but we have a Diversity & Inclusion group with formal LGBT+ representation
C. No, but we have a formal agreement with an external network
D. None of the above

3 points available and 3 received.

Terms of reference and group purpose was clearly evidenced.

15-Does the Trust provide protected time for LGBT+ employee network committee members to undertake network group activity?

Yes
No

1 point available and 1 received.

The Trust advised that there was an informal agreement regarding time out for Network activities for the network chair through a supportive line manager and a supportive Chief information Officer for Digital Services that have allowed them time to carry out Network activity. As this is an informal agreement depending on tolerance of line management rather than official protected time, we were unable to award a point. We highly recommend that the Trust offer official protected time for LGBT+ employee network committee members to undertake network activity.

Action: Provide protected time for LGBT+ employee network committee members to undertake network group activity.

16-In the past year how has the organisation supported the work of the LGBT+ employee network group (or Diversity and inclusion group)?

A. Provided a network group budget
B. Provided a formal senior champion
C. Facilitated network members' participation in skills training
D. Facilitated network members' participation in leadership or professional development programmes
E. Facilitated network members' participation in LGBT+-specific seminars and conferences
F. Other (please detail)

5 points available and 5 received.

The Trust provided evidence of a formal budget and a senior champion for the LGBT+ employee network group.

It was great to see evidence around Living with HIV training being offered to network members, along with the Bristol Stepping Up Diversity in Management Programme. There was also communication around a different LGBT+ seminars and conferences to staff that they could attend.

17-In the past year, what action has the LGBT+ employee network group undertaken to improve its inclusivity? Tick all that apply.

A. Promoted itself as being open to all and inclusive of any underrepresented LGBT+ groups
B. Signposted to specific spaces for marginalised and underrepresented LGBT+ groups
C. None of the above
D. Other, please specify

2 points available and 0 received.

We could not see evidence of the LGBT+ staff network promoting itself as being inclusive of underrepresented LGBT+ groups (e.g. LGBT+ people of colour, LGBT+ people of faith, asexual/aromantic people)

Action: Ensure the LGBT+ network is openly inclusive of underrepresented LGBT+ groups and offers signposting to specific spaces for marginalised and underrepresented LGBT+ groups.

Action Plan

Policies:

1. Ensure the Trust has a public-facing policy or statement that bans biphobic, homophobic and transphobic discrimination.
2. Review the language used within the Dignity at Work Policy to include the term "trans status" instead of "gender reassignment", as well as including examples of transphobic behaviours.
3. All family leave policies could benefit from an inclusive statement under eligibility to make clear that it applies to all irrespective of gender/gender of partner etc.
4. Amend all family leave policies so that, unless relevant to preserve access to legal rights and pay, the language used is gender neutral.
5. Implement a staff trans inclusion policy.
6. Implement a transitioning at work policy.

Patient and Staff Surveys:

1. Provide staff with additional training to build confidence in supporting LGBT+ people, consider making this training mandatory.
2. Provide all staff with access to informative educational LGBT+ resources.

Services Survey:

Maternity:

1. Review all the systems and paperwork within maternity/perinatal to allow for recording accurate information regarding different family structures.
2. Develop guidance to support trans and non-binary people to chest feed. Resources and links to organisations that have information and guidance aimed at supporting trans and non-binary people to breast/chest feed have been provided in the resource pack to support the trust with developing such guidance.
3. Develop guidance to support supporting a non-carrying parent to breast/chest feed. Resources and links to organisations that have information and guidance aimed at supporting a non-carrying parent to breast/chest feed have been provided in the resource pack to support the trust with developing such guidance.

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Gynaecology:

1. We recommend the Gynaecology service provide guidance or the opportunity for trans and non-binary people who are attending the service to request additional support. Support can be in the form of scheduling their appointment at the beginning/end of the day to avoid waiting in a busy gendered waiting room or providing the opportunity to wait in an adjoining waiting room that matches their affirmed gender. This could be communicated in the form of a statement on the service website or a sentence on outgoing appointment letters outlining what additional support could be available and how a patient can request it.
2. We recommend ensuring that clinics have names that are names for their purpose rather than in a gendered way.

Laboratory/Pathology:

1. Ensure there is a process in place to support the recording of a patient's trans status if this information is supplied with or about a sample.
2. Ensure there is a policy/pathway for laboratory staff to follow where there is incongruence between the sample for testing and the patient information.

Oncology

1. We recommend the Oncology service provide guidance or the opportunity for trans and non-binary people who are attending the service to request additional support. Support can be in the form of scheduling their appointment at the beginning/end of the day to avoid waiting in a busy gendered waiting room or provide the opportunity to wait in an adjoining waiting room that matches their affirmed gender. This could be communicated in the form of a statement on the service website or a sentence on outgoing appointment letters outlining what additional support could be available and how a patient can request it.

Sexual Health

1. Ensure practitioners able to discuss PEP and PrEP with patients who may be at risk of HIV infection.
2. Ensure practitioners have training on how to support people who are engaging in chemsex, including harm reduction strategies and signposting to appropriate support.
3. Ensure the links to support and information for men who have sex with men and women who have sex with women and current and working if this is the main form of signposting within the service.

1. Increase the posters and resources available to services that support LGBT+ people. Links to LGBT+ posters and resources have been included in the resource pack.
2. Ensure that there is an explicit statement about confidentiality for each service.
3. Include sanitary bins in all toilets. Information about the '#in with the bins campaign' which supports this is provided in the resource pack. Where possible designate singe stall toilets as gender neutral, this should be in addition to the accessible facilities.
4. We recommend producing an explicit statement per service about confidentiality (e.g. only sharing sexuality or trans status information where relevant and in discussion), and making sure this is visible to patients and visitors.
5. Ensure healthcare professionals wear LGBT+ or "my pronouns are" badges during consult.
6. Ensure that the corporate background which can be used in virtual consultations is stored centrally and made available to all.
7. Encourage staff to start consultations with a pronoun introduction, as this signals an inclusive and safe space for the patient as well as helping establish the use of the correct pronouns for staff.
8. Review standard patient letters to ensure language is gender neutral or gender inclusive.
9. Ensure that patient information leaflets are available in different formats (e.g. large print or easy read) and languages and ensure that staff are aware of how to request this information.
10. When reviewing patient information, consider what tailored and equitable support may be needed to ensure that LGBT+ patients within the service are fully supported and receiving relevant information. Where relevant make reference to LGBT+ patients and include any specific information.
11. When reviewing patient information, consider including LGBT+ imagery. This could be LGBT+ people and relationships, (same-gendered partners, and diverse family units) or clear signifiers of LGBT+ inclusion such as the progress flag.
12. We recommend services review their webpages and where applicable make specific references to LGBT+ people, or signify that their service is LGBT+ inclusive by including clear imagery such as a progress flag.
13. If the trust is able to amend patient notes to include a space for patient pronouns across services, we would encourage them to do so. Ensure that patients are routinely asked and this is then recorded, by communicating this process and the importance of pronouns to patient-facing staff.
14. If the Trust is able to amend their patient record system, ensure that "non-binary" is available to select within the "gender" section.
15. Create a centralised list of general LGBT+ resources, local and national organisations where LGBT+ patients can be signposted to. This list would

ideally be made available to all staff and accessed through the intranet. Services could also create a list of LGBT+ resources and organisations specifically relevant to the service and ensure this information is accessible to staff for when needed. Resources, links to organisations are detailed in <u>the resource pack.</u>

16. Encourage clinicians to ask for the gender of a patient's partner rather than assuming heterosexual or binary-gender relationships and ensure that staff are aware why this is important.

17. On patient feedback forms, we would advise that one question be asked to confirm someone's gender identity (man, woman, non-binary, other), with a further question around trans status, in addition to sexual orientation. This can be done through asking "do you identify with the gender you were assigned at birth?" It is also worth noting that a person does not need to disclose this information and may choose not to.

18. When examining patient journeys, consult with LGBT+ patients to ensure there are no barriers to accessing services.

19. Review the centrally delivered EDI training for its suitability and LGBT+ information. Link to organisations that can provide additional training in the needs of LGBT+ staff and patients have been included in <u>the resource pack.</u>

20. Where appropriate, ensure that clinicians are informed and confident in either giving advice to trans and non-binary patients on hormonal contraindications, or know where to refer for further information.

21. Introduce an LGBT+ champion for staff and patients per service and ensure this information is available to bot staff and patients.

<u>Workforce Survey:</u>

1. Ensure that recruitment activity includes LGBT+ specific websites/fairs or events are in all job packs and pages.

2. Include a statement around valuing diversity, which is explicitly inclusive of LGBT+ people, as well as information about the LGBT+ employee network group in all job packs and pages.

3. Include an explicit message on the organisation's commitment to LGBT+ inclusion within induction.

4. Include information on relevant policies and the organisation's commitment to ensuring they are LGBT+ inclusive at induction.

5. Ensure that any internal forms include non-binary as a gender option and that non-binary titles are an option on staff passes and HR forms.

6. Share information around LGBT+ inclusive policies in internal communications to all employees.

7. Ensure that the Trust is able to identify and act on LGBT+ inclusion issues raised at exit interviews or on exit surveys.

8. Ensure that senior management communicates a strong message on LGBT+ equality, which also expressly includes bi equality and trans and non-binary

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equality, as these are often subject to erasure. Resources and information about bi identities and trans and non-binary identities have been included in the resource pack.

9. Ensure that senior management engages with LGBT+ inclusion strategies as well as LGBT+ monitoring reports, as this increases awareness on an upper level around which areas of inclusivity need to be improved.
10. Ensure that senior management meets periodically with the LGBT+ employee network and speaks at internal LGBT+ events.
11. Implement guidelines that require all senior leaders and line managers to meet an inclusion-based competency on recruitment.
12. Implement guidelines that require all senior leaders and line managers to have an inclusion-based objective.
13. Ensure that there is a robust and systematic process in place to identify and monitor LGBT+ complaints made by patients.
14. Provide protected time for LGBT+ employee network committee members to undertake network group activity.
15. Ensure that the LGBT+ staff network promotes itself as being open to all and inclusive of any underrepresented LGBT+ groups. Also provide signposting to specific spaces for marginalised and underrepresented LGBT+ groups.

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