

Scottish Prison Service

Gender Identity and Gender Reassignment Policy for those in our Custody

2014



FORWARD

I am delighted to present this policy in support of our commitment to increase engagement with our employees and people in custody to improve the working and living environment by ensuring it is free of any transphobic and homophobic behaviour, bullying, harassment, victimisation and discrimination.

This policy has been developed to help aid your understanding of what Gender Identity and Gender Reassignment equality mean to the Scottish Prison Service (SPS) and provides guidance on how you as a staff member can help ensure that that no staff member (or prospective staff member), person in custody or key stakeholder receives less favourable treatment or is disadvantaged by any circumstances, conditions or requirements that cannot be justified.


The 2010 Equality Act defines gender reassignment as a protected characteristic and protects them from unlawful discrimination on this basis. People who are proposing to undergo, are undergoing or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex have the protected characteristic of gender reassignment.

This policy, one of the most comprehensive of its type and represents the culmination of years of dedicated partnership work by a diverse group of criminal justice sector and equality sector organisations.

Whilst many people contributed to this policy and I apologise for not being able to name them all individually, their dedication, drive, knowledge, commitment, expertise, and partnership working has been vital in progressing and improving this policy through to its successful completion.

Every staff member and person in custody is entitled to an environment which promotes dignity and respect. A working environment that is welcoming and accepting will enable all staff to be themselves at work. No form of intimidation, bullying or harassment nor any insulting, abusive or derogatory language or actions towards any person will be tolerated.

I would like to see all of us working together to create a culture where we all embrace and live the values of our organisation. Treating each other with dignity and respect is something to which we will always aspire and in which we can take pride.



Colin McConnell
Chief Executive

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1. INTRODUCTION

1.1 SPS commitment to Equality, Diversity and Human Rights

SPS is fully committed to equality, diversity, inclusion, and respect for human rights. The SPS actively values diversity and inclusion, tackles inequalities, promotes and respects equality and human rights by taking action through a dynamic, systematic and evidence based approach.

The Mission of SPS is:

Providing services that help to transform the lives of people in our care so they can fulfil their potential and become responsible citizens.

Helping to protect the public and reduce reoffending through the delivery of a safe and secure custodial services that empower offenders to take responsibility and fulfil their potential

We deliver this through:

Custody- Managing safe and secure custodial environments;

Order -providing stability and order that helps offenders to transform their lives;

Care- Supporting wellbeing and treating with respect and humanity all in our care; and

Opportunity – Providing opportunities which develop the potential of our staff, our partnerships and the people in our care

Our Values are

Belief – we believe that people can change

Respect- we have proper regard for individuals, their needs and their human rights.

Integrity- We apply high ethical, moral and professional standards.

Openness-we work with others to achieve the best outcomes

Courage-we have the courage to care regardless of circumstances

Humility- we cannot do this on our own, we recognise we can learn from others

The SPS Strategy Framework for Valuing Diversity, Promoting Equality and Human Rights enables equality, diversity, inclusion and human rights to be mainstreamed at the core of all our work and to be embedded at all levels within the organisation.

The Scottish Prison Service recognises that its people in custody must not unlawfully discriminate against or harass any person in custody in regard to any protected characteristic, including gender reassignment and gender identity. SPS will work hard to continue to develop as an organisation by implementing trans-inclusive policies and practices with a view to becoming a trans positive organisation.

1.2 Purpose of the policy

This policy aims to ensure that individuals who identify as transgender people or who intend to undergo, are undergoing or have undergone gender reassignment receive respect and fairness at all times from the Scottish Prison Service.

The purpose of this policy document is to:

- provide accurate and current information for all SPS employees in relation to gender reassignment and gender identity equality and human rights;
- outline the SPS procedures to be followed in the event of a transgender person being brought into custody;
- enable all people in custody within SPS custody to be treated fairly and without discrimination or harassment on grounds of gender identity and gender reassignment.

Ensuring that equality and human rights are upheld throughout all aspects of the person in custody's journey will require liaison between the Scottish Prison Service and other service providers within the criminal justice system, such as the Police Service, the Scottish Courts Service, the Crown Office Procurator Fiscal Service and Local Authority Social Work Departments.

The Scottish Prison Service requires all its sub-contractors to ensure that they are complying at all times with UK equalities and human rights law.

1.3 Policy key principles

In addition to assessing the gender identity and gender reassignment specific needs of a transgender person in custody, all the standard risk assessments and management procedures, including ACT 2 Care, should be carried out as for any other person in custody. The person in custody's behaviour should be managed as standard.

Professionalism and sensitivity, as always, should be maintained at all times. The person in custody's gender identity and corresponding name and pronouns must be respected.

The accommodation provided must be the one that best suits the person in custody's needs and should reflect the gender in which the person in custody is currently living. Any need for a single cell due to a person in custody's gender reassignment must be assessed, recorded and addressed as a priority. Restrictions to association with other people in custody should be avoided wherever possible. If any restrictions to association is required due to the behaviour, emotion condition or vulnerability of the person either one of the following would be appropriate;

- **Rule 95** to maintain good order or protect the interests or ensure the safety of any people in custody.
- **Rule 41(2)** if the behaviour is assessed to be linked to Gender Dysphoria. Where the Governor and healthcare professional for the purpose of this "specified conditions" include, but are not limited to
 - accommodation in a specified part of the prison,
 - accommodation separate from other people in custody
 - confining the person in custody to his own cell

Gender Dysphoria

Is distress, unhappiness and discomfort experienced by someone about their biological sex not fully matching their gender identity.

- **Act to Care** if any member of staff believe the people in custody is actively thinking about suicide or self-harm.

Rubdown and body searches should be conducted in accordance with the gender in which the person in custody is currently living, rather than their physical characteristics.

Confidentiality must be maintained. Information about a person in custody's gender reassignment should only be shared with other staff without the person in custody's permission where this is essential to manage the risk of crime. Staff must not reveal information about a person in custody's gender reassignment to other people in custody.

People in custody should be allowed access to items such as clothing, prosthetics, chest-binders, hair-pieces/wigs and other equipment needed to facilitate their gender reassignment and express their gender identity.

People in custody who are already undergoing gender reassignment must be allowed to continue receiving gender reassignment hormone treatment which began prior to imprisonment.

People in custody who are seeking to undergo gender reassignment must be allowed to access specialist assessment and treatment via the NHS Scotland Gender Reassignment Protocol. People in custody must be allowed access to gender reassignment hormone treatment, hair removal and/or surgeries they have been medically approved for via the NHS Scotland Gender Reassignment Protocol.

Where, for reasons of safety and risk management, a decision must be taken which differs from the person in custody's preferences in regard to their gender identity or gender reassignment status, the reasons for the decision must be clearly recorded on the PR2 system and then reviewed at the person in custody's next gender reassignment case conference.

Case conference decisions and any other notes, will be located in PR2 in ICM/ CIP/ Case conference.

1.4 Overview of terminology

The terminology we use to communicate is very important to enable equality of opportunity and create a respectful culture towards each other. The following definitions are those most commonly used in Scotland.

It is important to remember that people in custody who fall within the scope of this policy may describe their gender identities and experiences in very diverse ways. This may be due to them being either uncomfortable or unfamiliar with certain terms.

How a transgender person in custody attempts to explain their situation to other people in custody or staff can also be influenced by their beliefs about what explanation may get them the most acceptance within prison. For example, in order to try to ensure their gender identity is respected, a transgender person in custody may feel pressure to claim they are further along in their process of gender reassignment than they actually are. Alternatively, if they fear disclosing that they have undergone gender reassignment, a trans man may at first claim to have been born male and to have lost his penis in an accident or a trans woman may at first claim she is an intersex person who has always lived as a woman. The exact terms used at any point by an individual are much less important than upholding the principles of safety, dignity and respect as described in this policy.

The term **gender identity** refers to each person's deeply felt intrinsic sense of their own gender - of where they sit in relation to being a man or a woman.

Gender assigned at birth is the gender a person was originally registered as on their birth certificate, usually according to the appearance of their external genitals.

Social gender is the gender in which a person lives their day to day life. Where a person has transitioned to change their social gender role, then it may also be referred to as their **acquired gender** or **new gender**.

Gender dysphoria is distress, unhappiness and discomfort experienced by someone about their physical body and the gender they were assigned at birth not fully matching their gender identity. It is a recognised medical condition for which NHS gender reassignment treatment is available in Scotland.

The terms **transgender people** and **trans people** are both used to refer to a diverse range of people who find their gender identity does not fully correspond with the gender they were assigned at birth.

A person has the protected characteristic of **gender reassignment** if they propose to undergo, are undergoing or have undergone any part of a process of **transitioning** from the gender they were assigned at birth to live instead as the gender which matches their personal gender identity. In addition to changing name and social gender role, gender reassignment may also involve using hormones and/or surgery to alter the person's physical body.

The term **transsexual people** can be used to refer specifically to those trans people who clearly have the protected characteristic of gender reassignment.

When considering appropriate person in custody management decisions relating to gender identity and gender reassignment, it can be helpful to particularly consider three key groups of trans people who are likely to have different needs and issues:

- **trans men:** female-to-male (**FTM**) transsexual people who have started living permanently as men as part of a process of gender reassignment. They may or may not have undergone any genital surgery;
- **trans women:** male-to-female (**MTF**) transsexual people who have started living permanently as women as part of a process of gender reassignment. They may or may not have undergone any genital surgery;
- **non-reassigned trans people:** transgender people who have not permanently changed the gender in which they live. They may propose to undergo future gender reassignment but at present are still continuing to live predominantly as the gender they were assigned at birth. Additionally, this group can also include:
 - **transvestite / cross-dressing people** who occasionally wear items of clothing traditionally associated with the other gender without proposing to undergo gender reassignment;
 - **gender-variant / non-binary-gender people** who have highly complex gender identities and don't identifying clearly as either men or women;
 - **intersex people** who have been born with aspects of their chromosomes, internal reproductive systems or external genitals which are not clearly male or female. Historically, intersex people were referred to as **hermaphrodites** but this is now an out-dated term.

1.5 Most common gender reassignment journey



2. INFORMATION SHARING

2.1 Key principles regarding information sharing

Information about a person in custody's gender reassignment must be handled very carefully and in full compliance with data protection and medical confidentiality standards because **it is highly sensitive information with serious potential safety and security consequences**. It is particularly important that it is not disclosed by service providers either deliberately or accidentally to other people in custody.

Information about a person in custody's gender reassignment may only be shared between service providers where this is a fair and proportionate way to achieve the legitimate aims of ensuring the safety and dignity of the person in custody, the safe operation of the service more generally and/or to aid the prevention or investigation of crime.

If a person in custody has a gender recognition certificate it is a criminal offence to share information about their gender history without their permission. However, there is an exception which allows information to be shared without permission where necessary to aid the prevention or investigation of crime. Where the purpose of the information sharing is for risk assessment then the sharing of anonymised information can be carried out to enable risk assessment in situations where there is no prevention of crime rationale.

2.2 Liaison between service providers prior to reception

Where an external service provider, such as the Scottish Court Service, is aware that a transgender person may potentially require to be received into a SPS establishment, good practice is for the external service provider to notify the Reception First Line Manager of the relevant SPS establishment at the earliest possible opportunity so that coordinated work can be undertaken to ensure appropriate consistency of care.

Where an external service provider is seeking clarification about whether a particular establishment is the correct one to send the transgender person to, the enquiry should be handled by the Reception First Line Manager with support as required from a Unit Manager and/or Equality and Diversity Manager. The SPS Headquarters Equality and Diversity Team or the Contract Team for the Private Establishments should also be notified at the earliest possible opportunity without disclosing the person in custody identity.

Coordinated work between different service providers prior to reception of a transgender person into an establishment, should be undertaken with the aim of addressing:

- consistency in respecting the transgender person's gender identity, name, title and pronoun use;
- consistency in provision of any medical assistance required, such as access to hormone medications and additional property in use (for example: hair-pieces/wigs, make-up, gendered clothing and prosthetics);

- health and social care needs: especially relating to mental health issues, potential fears about safety, privacy and dignity within establishment custody and ongoing or anticipated gender reassignment medical needs;
- risk assessments for the safety of the person in custody and others.

2.3 Information sharing with escort provider

Only the information which is strictly necessary for ensuring safety and dignity during transportation between establishments and/or courts should be shared with transportation escort providers. The gender reassignment related information to be shared should usually be limited to:

- the current name, title and gender pronoun used by the person in custody.
- the current gender of staff that should search the person in custody.
- any medication or additional property in use which the person in custody needs access to during transportation (medication which is not needed during the transportation period does not need to be notified to the escort provider).
- the extent to which the person in custody needs protection from other people in custody during transportation.

The SPS requires the transportation escort provider to ensure that full compliance with data protection and medical confidentiality standards is maintained at all times and that information about a person in custody's gender reassignment is handled as highly sensitive information.

The SPS requires the transportation escort provider to follow its instructions and policy regarding gender identity and gender reassignment equality, including specific instructions about how to refer to the gender of particular individual people in custody, the gender of staff to search particular people in custody and how to manage any safety concerns for particular people in custody.

In the absence of information from the SPS about a transgender person in custody (for example, during the initial transportation of a new person in custody from court to an establishment) then the transportation escort provider should sensitively and discretely ask the person in custody which gender they live in, treat the person in custody as the gender they say they are living in and urgently notify the Reception First Line Manager of the establishment listed on the person in custody's warrant.

Transportation escort providers should be aware that a person in custody may, for various reasons, seek to influence which establishment they are transported to. Transportation to a different establishment from what is listed on the warrant should only occur if agreed with a SPS Reception First Line Manager.

3. RECEPTION PROCESS

3.1 Rubdown

All people in custody must be rubdown searched in accordance with SPS security standards. People in custody should be rubdown searched by staff, **in accordance with the social gender in which they are living**. Where the person in custody's social gender is unclear, the person in custody must be asked which gender they wish to be searched by and their answer recorded and the rubdown search conducted accordingly.

3.2 Confirming the person in custody's warrant and PR2 computer entry

At the time of initial reception of a person in custody, SPS reception staff must clarify that the details of the warrant are correct.

If any aspect of the person in custody's appearance, behaviour or statements gives cause for uncertainty about the correctness of the gender recorded on the warrant, or the person in custody is perceived as possibly having the protected characteristic of gender reassignment, then **the Reception First Line Manager must be immediately contacted**.

In order to determine the correct name and gender which should be entered on PR2 for the person in custody, the Reception First Line Manager should **sensitively ask the person in custody to clarify in private**:

- how they self-identify their gender;
- which gender they are currently living in and whether this is different from the gender they were originally assigned at birth;
- if they have transitioned to start living in a different gender from that assigned at birth, then what was the approximate start date of their gender transition;
- have they changed their name, title and/or gender on any personal documents (such as bank card, drivers licence, NHS card, etc);
- if they have a gender recognition certificate (they are not obliged to say).

If there is **no evidence** as yet that the person in custody has transitioned to start living in a different gender from that assigned at birth, then the Reception First Line Manager should enter the person in custody on the PR2 computer system as the gender they were assigned at birth.

Where there is any evidence that the person in custody is living in a different gender from that assigned at birth then the Reception First Line Manager must enter the person in custody on the PR2 computer system as the social gender they are living in. If the person in custody already has a PR2 entry in their previous gender, then create a new PR2 record with a new number.

To record that the person in custody has the protected characteristic of gender reassignment and to link any previous gender PR2 entry, the Reception First Line Manager must:

1. Click on **Person in custody** on the top line on PR2 which will produce a drop down list;
2. On the person in custody drop down list, click on **Gender Reassignment** which will produce a gender reassignment personal data table;
3. In the gender reassignment personal data table, enter the person in custody's previous PR2 number if one exists, the approximate start date of their transition, and the date of issue on any gender recognition certificate seen.

The name, title and pronouns used by the person in custody should be used in all verbal communication with and about the person in custody, **even where these do not correspond with the details recorded on the warrant**. If the details on the warrant appear incorrect, then the Reception First Line Manager should seek advice from the relevant Duty Clerk within the Scottish Court System.

The Reception First Line Manager should ensure that all the reception staff respect the person in custody's gender identity and avoid discussing the person in custody's situation in front of other people in custody.

3.3 Additional Gender Recognition Act 2004 rights

The social gender in which the person in custody is living should be fully respected regardless of whether or not the person in custody provides any evidence of having a gender recognition certificate under the Gender Recognition Act 2004. **Applying for a gender recognition certificate is optional and is not required in order to have protection from gender reassignment discrimination.**

Under the Gender Recognition Act 2004 the granting of a full gender recognition certificate enables a person's UK birth certificate to be reissued in their acquired gender. This therefore marks the final end of the person's documents and records being completely updated, so they all will show only the gender the person is living in rather than still having any in the gender originally assigned at birth.

An individual can apply for gender recognition once they have been living permanently in their new social gender for over two years. They need to provide evidence that their documents and records (except their birth certificate) were changed over two years previously to show their social gender instead of their birth gender. **No surgery is needed to receive a gender recognition certificate.**

If a person in custody provides evidence that they have received a gender recognition certificate, it becomes a **criminal offence**, rather than civil, for staff **to disclose information about the person in custody's gender history without the person in custody's consent**. There is an **exception allowing disclosure without consent for the prevention or investigation of crime**.

Where it is known that the person in custody has received a gender recognition certificate, the Reception First Line Manager should enter the date of its issue within the gender reassignment personal data table in the person in custody's PR2 record.

It becomes a **criminal offence**, rather than civil, for a member of staff to generally disclose information about the prisoner's gender history without the prisoner's definite consent. There is an exception which allows disclosure without consent for the prevention or investigation of crime.

For more information about the additional privacy protections for people who have received a gender recognition certificate, go to <http://www.grp.gov.uk>

3.4 Admitting the person in custody in the holding area

The person in custody should be placed in the holding area corresponding to the social gender which the person in custody identifies as being. If deemed necessary to ensure safety, the person in custody may be placed in an individual non-shared holding area.

3.5 ACT 2 Care interview

A transgender person in custody should be assessed under ACT 2 Care procedures in the same way as other people in custody. The risk of self-harm or suicide is higher among the transgender population than the general population; however the ACT 2 Care interview must establish the level of risk for the individual person in custody rather than rely on generalities. Where difficulties accessing gender reassignment or experiencing prejudice are contributing to the risk of self-harm or suicide of a transgender person in custody, these must be addressed as a priority.

Only in exceptional circumstances, such as when an acute suicide or self-harm risk has been identified through the ACT 2 Care interview, can any temporary restrictions be applied to unsupervised access to gender reassignment related additional property in use (such as prosthetics, hair-pieces/wigs, chest-binders and dilators). Even where suicide or self-harm risk temporarily prevents unsupervised access to certain gender reassignment equipment, access should still be provided for periods of association with other people in custody and while supervised by staff.

3.6 Healthcare interview

NHS staff should familiarise themselves with the NHS Scotland Gender Reassignment Protocol (http://www.sehd.scot.nhs.uk/mels/CEL2012_26.pdf) and sensitively ask the person in custody whether they have accessed any of these gender reassignment medical services either via the NHS Scotland Gender Reassignment Protocol or through private medical services.

Any gender reassignment hormone medication (such as hormone tablets, injections and topical gels) a person in custody is already receiving on prescription prior to imprisonment should be identified, recorded within the person in custody's healthcare records and access continued in the same manner as any other prescribed medication would be continued within prison.

Any gender reassignment equipment (additional property in use) which a person in custody has in their possession upon reception into an establishment (such as prosthetics, hair-pieces/wigs, chest-binders and dilators) should be identified, recorded within the people in custody's healthcare records and access continued in the same manner as for any other medical equipment required for other medical conditions.

Where a person in custody requests access to gender reassignment equipment which they do not already have within their possession upon reception into establishment and healthcare staff agree the equipment is needed, then reasonable steps should be taken to arrange prompt access to the required gender reassignment equipment.

3.7 Body search

All people in custody must be body searched in accordance with SPS security standards. **People in custody should be body searched in accordance with the social gender in which they are living.**

Where the people in custody's social gender is unclear, the person in custody must be asked which gender they wish to be searched by and their answer recorded and the body search conducted accordingly. Once the social gender in which they currently live is clarified, the person in custody should be searched according to that social gender.

Any physical variation encountered due to gender reassignment during searching should be responded to in a similar professional and respectful manner as per any physical variation encountered due to disability during searching.

During the body search process the person in custody should be sensitively asked to remove any items such as prosthetics, wigs or chest-binders to enable the skin underneath to be seen. The items removed must be searched to ensure they have not been tampered with. Care should be taken to avoid accidental damage. The items must be returned immediately once they have been searched. Sufficient time must be provided for the person in custody to replace the items and a mirror provided if required.

See **APPENDIX B** for a hand-out for Prison Officers on searching transgender people in custody.

3.8 Initial shower and change

The safety and possible enhanced privacy requirements of people in custody with the protected characteristic of gender reassignment should be taken into account when organising and supporting the person in custody to shower and change.

4. INITIAL ACCOMMODATION

4.1 Initial actions by Unit Manager

The initial period following reception of a new person in custody by an establishment represents a particularly high risk period as there may be limited information about the people in custody's individual needs and circumstances. There is a high likelihood that decisions about whether the person in custody needs to be transferred to a different gender of establishment may not be able to be made before the first night in custody.

Upon taking over responsibility for the people in custody's safety and welfare, the Unit Manager must carry out the following actions:

- review information available about the people in custody's gender reassignment;
- conduct risk assessment, especially regarding accommodation.

The Unit Manager must record on PR2 the reasons for their decisions of how to manage the transgender people in custody's initial first night in custody. The Unit Manager must continue to make interim decisions about the management of accommodation and searching for up to seven days until the initial case conference takes place.

Within 72 hours of people in custody's reception into the establishment, the Unit Manager must carry out the following actions:

- assess person in custody needs (such as access to additional items in use) and create an action plan to address these;
- request additional information (such as a fax from the person in custody's GP confirming gender reassignment details) as needed for the initial case conference;
- arrange the time and attendance for an **initial gender reassignment case conference taking place within seven days of reception** of the person in custody. For full details see **Section 6** of this policy.

4.2 Accommodation prior to initial case conference

The Unit Manager must make **risk-assessed interim decisions regarding accommodation for up to seven days until the initial case conference takes place**. The person in custody may remain in 'first night' facilities for longer than one night. The Unit Manager must follow **Section 6.4** of this policy which details key accommodation decision-making principles.

4.3 Searching prior to initial case conference

Prior to the initial case conference, searching of the transgender person in custody must be conducted as detailed in **Section 3.1** and **Section 3.7** of this policy.

If there are any difficulties experienced, or concerns expressed, by the person in custody or by staff in regard to searching the person in custody, then the Unit Manager

should decide how best to temporarily deal with the difficulties or concerns and record this on PR2. Support can be sought from the SPS HQ Equality and Diversity Team.

5. EXISTING PERSON IN CUSTODY

5.1 Gender reassignment assistance request

Where an existing person in custody makes a request for assistance from the SPS because they are **experiencing distress about their gender identity** not matching their gender assigned at birth (gender dysphoria) or that they are **considering gender reassignment** then this must be taken seriously. **Any member of staff receiving such a request from an existing person in custody must inform the Unit Manager.** The person in custody may be in acute need of emotional support and may be at risk of self-harm or suicide. ACT 2 Care procedures should be used as standard to manage any risk of self-harm or suicide. The safety of the person in custody may also be at risk due to reactions of other people in custody to their gender identity or gender reassignment request.

Either the member of staff to which the person in custody initially made the request, or the Unit Manager, **must urgently provide the person in custody with the opportunity to discuss in private away from other people in custody:**

- how they self-identify their gender;
- how they are feeling and any concerns about their current and future safety, dignity and privacy;
- whether they have told any other people in custody about how they feel and, if so, were the reactions supportive or hostile;
- any initial thoughts they have about their needs regarding gender-related additional property in use. (The person in custody should be advised that any decisions about possible provision of additional property in use will need to be taken at a case conference);
- any initial thoughts they have about the possibility of gender reassignment, such as whether they are considering changing their name or seeking access to NHS medical gender reassignment services.

The information provided by the person in custody during this initial discussion should be recorded on PR2 and used by the Unit Manager as part of conducting any urgent risk assessment for the person in custody. **The Unit Manager must arrange for a gender reassignment case management conference to take place within seven days of the person in custody making their request for assistance.**

An existing person in custody has the right to change their name, title and social gender role at any time regardless of whether or not they have undergone any gender reassignment medical specialist assessment.

Follow **Section 6** of this policy which details the case conference procedures.

5.2 Changing gender on PR2 for existing person in custody

When an existing person in custody undergoing gender reassignment reaches the point of moving from accommodation in their birth gender to accommodation in their new social gender, then their existing record on PR2 in their birth gender should be marked as liberated for reason 'gender reassignment', a new PR2 record number

created in their new social gender, and the old number entered in the PR2 gender reassignment personal data table.

6. MANAGEMENT

6.1 Case conference timing and purpose

The person in custody's gender reassignment case management should include holding an **initial case conference within seven days:**

- of a transgender person in custody's reception to establishment;
- of an existing person in custody requesting assistance due to experiencing gender dysphoria or considering gender reassignment.

After the initial case conference, **further gender reassignment case conferences should be held at least monthly for the first three months, then at least quarterly longer-term.** Once all case management issues relating to the person in custody's gender identity and gender reassignment appear to have been successfully resolved, the case conference frequency should switch to one review every six months. If the person in custody's circumstances change significantly at any time, then monthly gender reassignment case conferences should be resumed.

Gender reassignment case management conferences **can be integrated into other case management conferences** being held in regard to the person in custody but must still address the issues given below and include the people specified during the gender reassignment related discussions and decision-making.

The gender reassignment case conferences should examine all the circumstances of the particular case, including the person in custody's viewpoint and wishes, take into account the expert opinion of any NHS Gender Identity Clinic medical specialist treating the person in custody, and **conduct full risk assessments in order to make decisions about how to ensure:**

- the safety, dignity and privacy of the person in custody (and others where relevant), in terms of accommodation and searching, and especially as the person in custody progresses through changing the social gender in which they live;
- provision of access to additional "property in use" necessary for gender reassignment (such as gendered clothing, hair-pieces/wigs, make-up, prosthetics, dilators, chest-binders, etc.);
- provision of access to NHS gender reassignment services (such as specialist assessment, hormone treatment, hair removal and various surgeries) in accordance with the requirements of the NHS Scotland Gender Reassignment Protocol (http://www.sehd.scot.nhs.uk/mels/CEL2012_26.pdf);
- provision of access to social contact and support for mental health;
- provision of access to mainstream offender outcomes provision;
- appropriate management of any transfer to an alternative establishment;
- appropriate management of the liberation of person in custody and any liaison with social work services.

The person in custody has the right to a copy of any reports (other than highly confidential reports of a security intelligence nature) written in preparation for the case conference and a full copy of the case conference decisions and rationale. Where reports refer to other named people in custody, these names should be redacted.

Where reports refer to named staff, these names may be redacted where deemed necessary by the establishment Governor.

6.2 Case conference participation roles

The gender reassignment case conferences **should involve the following people** wherever possible:

- the Unit Manager who has organised the case conference;
- the person in custody concerned;
- the person in custody's Personal Officer or Key Worker;
- the person in custody's social worker (if they have one);
- a representative of the local healthcare team;
- the local equality and diversity manager;
- if the person in custody wishes, a representative of a transgender organisation;
- others as required (for example, a manager from another establishment if a transfer is being considered).

If the person in custody is receiving treatment via a NHS Gender Identity Clinic, then their medical specialist should be invited to attend any case conference where the issue of access to gender reassignment medical treatments are expected to be discussed. The NHS Gender Identity Clinic medical specialist may choose to make a written submission to the case conference rather than attend in person.

The **Unit Manager** should chair the case conferences. The Unit Manager is responsible for ensuring that the minutes of the gender reassignment case conferences clearly record all decisions made and the reasoning for those decisions. The Unit Manager must send copies of the minutes to the Governor of the establishment and to the SPS HQ Equality and Diversity Team.

The **person in custody** has the right to be present at all the gender reassignment case conferences relating to the person in custody. The person in custody has the right to raise within the case conferences any gender identity or gender reassignment equality concerns, comments or complaints they have regarding the SPS or any subcontractor. If the case conference is unable to resolve the concern or complaint to the person in custody's satisfaction, information should be provided to the person in custody about relevant further standard complaint procedures. The person in custody should be supported to share their views and preferences within the case conference and should not be made to feel as though they are being interrogated, patronised or ignored.

The person in custody's **Personal Officer or Key Worker** and their **social worker** (if they have one) should bring relevant knowledge, information and perspectives about the person in custody's social integration, behaviour and personal needs to all aspects of the case conference discussions.

The **representative of the healthcare team** should bring relevant healthcare knowledge, information and perspectives to case conference discussions about:

- provision of access to additional "property in use" necessary for gender reassignment (such as gendered clothing, hair-pieces/wigs, make-up, prosthetics, dilators, chest-binders, etc);
- provision of access to NHS gender reassignment services (such as specialist assessment, hormone treatment, hair removal and various surgeries) in

accordance with the requirements of the NHS Scotland Gender Reassignment Protocol (http://www.sehd.scot.nhs.uk/mels/CEL2012_26.pdf);

- provision of access to social contact and support for mental health.

The **local equality and diversity manager** should bring relevant human rights and equalities knowledge, information and perspectives to all aspects of the case conference discussion. They should also help assess the compliance of all case conference decisions with human rights and equalities legal requirements. They may seek support from the SPS HQ Equality and Diversity Team, and for particularly complex cases a representative of the SPS HQ Equality and Diversity Team can by mutual agreement be substituted in place of the local equality and diversity manager.

A **representative of a transgender organisation** may only be included in the case conference if the person in custody agrees. If agreed, then the transgender organisation representative should bring relevant expert transgender-specific equality knowledge, information and perspectives to all aspects of the case conference discussion. If the person in custody does not agree to a representative of a transgender equality organisation being included in the case conference, the Unit Manager can still provide anonymised information about the situation to a transgender organisation to gain their expert perspective prior to the case conference taking place.

6.3 Information needed for case conferences

The Unit Manager must take all reasonable steps to gather together the following information prior to **all** gender reassignment case conferences:

- any safety risks faced by the person in custody, or others, in regard to the person in custody's gender identity and gender reassignment status;
- the current suitability of the person in custody's accommodation in terms of establishment, unit and cell-sharing decisions and justifications;
- the person in custody's level of integration with other people in custody and any ideas for safely improving this;
- if the person in custody is currently removed from association, then what is the justification for the removal from association, what is the current and expected duration and what mental health support, social contact and other facilities does the person in custody currently have access to;
- how the person in custody is currently being rubbed down and body searched and any concerns which have been expressed by the person in custody or staff about searching;
- the person in custody's needs for access to NHS gender reassignment services (such as hormones, hair removal, speech therapy and surgeries) and how to facilitate access via the NHS Scotland Gender Reassignment Protocol;
- any changes to the person in custody's name and social gender which have either taken place or which are proposed.

The Unit Manager must also take all reasonable steps to gather together the following additional information prior to the **initial** gender reassignment case conference:

- any confirmation of what the person in custody says is their current name. For example, this could take the form of an identity document, a statutory declaration of change of name or a statement from a professional who knows the person in custody (such as a GP or social worker);
- any confirmation of what the person in custody says is the length of time, if any, they have been living in a social gender that differs from the gender they were

assigned at birth. For example, this could take the form of the date of issue of a piece of ID that shows either a title or a gender (such as a bank card, a passport or a driving licence) or a statement from a professional who knows the person in custody (such as a GP or social worker);

- any confirmation of the gender reassignment medical treatment, if any, the person in custody says they have received or are currently receiving. For example, this could take the form of a statement from their GP, from a medical specialist at a NHS gender identity clinic or from a private sector medical specialist.

6.4 Accommodation

The case conference should review the individual circumstances of the person in custody to determine the suitability of the person in custody's accommodation across the three aspects of establishment placement, unit placement and cell-sharing suitability. The general principles which should guide the case conference decisions are detailed below:

Where a transgender person in custody is **still living predominantly in the gender assigned at birth, then establishment allocation should usually be the gender assigned at birth.**

Where the person in custody is **permanently living in their new social gender** instead of the gender they were assigned at birth, **then establishment allocation should usually be the new gender in which they are living.**

A transgender person in custody may remain in 'first night' facilities for longer than one night to enable better assessment of how to manage their safety in mainstream accommodation.

A transgender person in custody **must be placed in single cell accommodation unless the Unit Manager has carefully assessed that a shared cell is sufficiently safe and provides sufficient privacy** for both the transgender person in custody and the other person in custody.

The case conference may recommend the person in custody to only share a cell with specific other people in custody, for example, with a particular named person in custody who has been established not to be a significant safety threat.

Restrictions to association with other people in custody should be avoided wherever possible. If any restrictions to association are required to maintain good order or protect the interests or ensure the safety of any person in custody then this should be managed via *Prison and Young Offender Institutions (Scotland) Rules 2011 - Rule 95*, or *Rule 41(2)* where the restrictions have been recommended by a healthcare professional treating the person in custody for the medical condition of gender dysphoria. Where a person in custody is held out of association, defensible decisions have to be recorded and authorised by a senior manager and Prison Directorate if more than 72 hours. The case management information must be updated weekly where a person in custody is held out of association.

A female-to-male person in custody living permanently as a man without genital surgery should be allocated to a male establishment. However, if he requests to be

allocated to a female establishment due to **high level of concern about sexual assault risk in a male establishment, then he should be kept out of association until an urgent case conference** responds in detail to his request.

A male-to-female person in custody living permanently as a woman without genital surgery should be allocated to a female establishment. She should not be automatically regarded as posing a high sexual offence risk to other people in custody and should not be subject to any automatic restrictions of her association with other people in custody. However, if there is clear evidence that she, as an individual, may pose a sexual offence risk, then this should be dealt with as for any other person in custody posing a risk. Only where a risk assessment determines it is justified, should she be subject to increased staff supervision or restrictions of her association with other people in custody.

6.5 Searching

The case conference should review the individual circumstances of the person in custody to determine how best to manage rubdown and body searches of the person in custody and how to meet any associated staff training needs. The general principles which should guide the case conference decisions are detailed below:

People in custody should be **rubdown and body searched in accordance with the social gender in which they are living**, rather than according to their physical body. Where the person in custody's social gender is unclear, the person in custody should be asked which gender they wish to be searched by and their answer recorded and their rubdown and body searches conducted accordingly.

The genital appearance of a transgender person in custody **must not** be used to determine which gender of Prison Officer should search them. There is no legal requirement for a transgender person to undergo any surgery as part of their gender reassignment. If a person in custody has recently undergone genital surgery or has on-going physical complications from such surgery, then specialist medical guidance should be sought on how to avoid harm to the person in custody during searching.

The decision rationale for any changes to how a person in custody is to be searched must be recorded fully at a gender reassignment case management conference.

Any provocative, disruptive or offensive language or behaviour by a person in custody towards SPS staff during searching can be addressed by placing the person in custody on report as per any other person in custody violation of establishment rules.

Any staff concerns about performing searches on transgender people in custody should be initially addressed through the provision of additional staff training and information about gender reassignment and equality requirements. In particular, the following points should be emphasised during staff training:

- that the current name and social gender of the person in custody must be respected;
- that any physical variation encountered due to gender reassignment during searching should be responded to in a similar professional and respectful manner as per any physical variation encountered due to disability during searching;
- that during the body search process the person in custody should be sensitively

asked to remove any items such as prosthetics, wigs or chest-binders to enable the skin underneath to be seen. The items removed must be searched to ensure they have not been tampered with. Care should be taken to avoid accidental damage. The items must be returned immediately once they have been searched. Sufficient time should be provided for the person in custody to replace the items and a mirror provided if required.

See **APPENDIX B** for a short hand-out for Prison Officers on searching transgender people in custody.

6.6 Access to additional property in use

People in custody with the protected characteristic of gender reassignment may require access to property in use which may not be traditionally associated with their social gender role or readily available in a particular gender establishment. Suitable access to additional property in use which is necessary to support their gender reassignment process should be provided to all remand and sentenced people in custody with the protected characteristic of gender reassignment, regardless of which establishment they have been allocated to.

Access to this additional property in use should not be viewed as 'special' treatment. It is more appropriately viewed as a form of accessibility requirement. Many of the items count as medical equipment.

Only in exceptional circumstances, such as when an acute suicide or self-harm risk has been identified through an ACT 2 Care interview, can any temporary restrictions be applied to unsupervised access to gender reassignment related additional property in use. Even where suicide or self-harm risk temporarily prevents unsupervised access to certain gender reassignment medical equipment, access should still be provided for periods of association with other people in custody and while supervised by staff.

Additional property in use items should be reviewed and agreed at the person in custody's gender reassignment case management conferences in consultation with any gender reassignment medical specialist, the representative of the healthcare team and the person in custody.

It is important to note that the items required may change over time as many are dependent upon the stage of gender reassignment reached by the person in custody.

Some examples of possible additional property which may be needed are set out below but this list should not be considered to be exhaustive:

- Clothing (including underwear) in accordance with the person in custody's gender identity
- Sanitary wear
- Shaving equipment and cream
- Hair removal cream
- Facial Cosmetics
- Binder for breasts
- Wigs and hair pieces
- Prosthetics (breast or genital forms)
- Dilation medical supplies

6.7 Access to NHS gender reassignment

People in custody have the right to access to NHS medical assessment and treatment. The criteria for access is contained within the NHS Scotland Gender Reassignment Protocol: http://www.sehd.scot.nhs.uk/mels/CEL2012_26.pdf

Any gender reassignment hormone medication (such as hormone tablets, injections and topical gels) a person in custody is already receiving on prescription prior to imprisonment should be identified, recorded within the person in custody's healthcare records and access continued in the same manner as any other prescribed medication would be continued within prison.

Decisions on the appropriateness of hormones, hair removal, speech therapy or surgery as part of a process of gender reassignment are clinical decisions, which should be taken by doctors (specialised in the fields of gender reassignment, endocrinology and/or surgery) applying the same principles of the NHS Scotland Gender Reassignment Protocol as would be applied in relation to people at liberty.

The fact of a person's imprisonment, and the situation in which that places them, especially if a long-term high security person in custody, may have a bearing on the exercise of that clinical judgement in that it may be more difficult for the person in custody to effectively live in their acquired gender during the early stages of their assessment and treatment.

A person in custody who initially refuses assessment by a gender reassignment medical specialist has the right to change their mind and request assessment at any later date. Whenever a person in custody requests such specialist assessment, the necessary arrangements to facilitate this should be undertaken promptly.

6.8 Access to social contact and support for mental health

People in custody have a right to adequate positive social contact to support mental health and wellbeing.

People in custody have the right to receive visits from friends or relatives without discrimination or harassment on grounds of gender reassignment from staff or other people in custody. Adaptations to standard visiting procedures should be considered where necessary to enable a more adequate level of privacy and positive social contact for people in custody with the protected characteristic of gender reassignment.

The risk of depression, anxiety, self-harm and suicide is higher among the transgender population than the general population; however the case conference must establish the level of risk and current needs for the individual person in custody rather than rely on generalities. Where difficulties accessing gender reassignment or experiencing prejudice are damaging the mental health of a transgender person in custody, these should be addressed as a priority.

Staff or person in custody concerns about social contact and mental health difficulties should be addressed urgently by the Unit Manager and then reviewed at the next case conference. The person in custody's current need for, and current level of access to, social contact and support for mental health must be reviewed as part of the gender reassignment case conferences and any decisions on increasing access should be

clearly recorded. This is particularly vital for people in custody who have restrictions on their association with other people in custody or who are unable to be accommodated within the general establishment population due to safety concerns and are on Rule 95 or Rule 41(2).

6.9 Access to mainstream offender outcomes provision

People in custody have the right to access mainstream offender outcomes provision without discrimination or harassment on grounds of gender reassignment. People in custody who have permanently changed the gender in which they live should be assisted to access mainstream offender outcomes provision in their new gender. If there is a need to consider how this can be done in a safe environment this should be discussed and decisions agreed at a gender reassignment case conference.

Where a person in custody has changed name, title and/or social gender, their new details must be used for any new certificates, reports and references relating to mainstream offender outcomes provision. In order to provide privacy about their gender reassignment history, people in custody should be assisted to get any existing certificates, reports and references reissued to reflect their new name, title and gender. Payment of any associated administration charge made by examination bodies is the responsibility of the person in custody and not SPS.

Only gender reassignment related information which is strictly necessary for ensuring safety during mainstream offender outcomes provision may be shared with subcontracted service providers. The gender reassignment related information to be shared should usually be limited to:

- The current name, title and gender pronoun used by the person in custody.
- The current gender of staff that should search the person in custody.
- Any medication or additional property in use which the person in custody needs access to during periods of mainstream offender outcomes provision (medication which does not need to be taken specifically during these periods does not need to be notified to the sub-contracted provider).
- The extent to which the person in custody needs protection from other people in custody during provision of mainstream offender outcomes provision.

The SPS expects all its subcontractors to ensure that full compliance with data protection standards is maintained at all times and that information about a person in custody's gender reassignment is handled very carefully as highly sensitive information.

The SPS expects all its subcontractors to follow its instructions and policy regarding gender identity and gender reassignment equality, including specific instructions about how to refer to the gender of particular individual people in custody, the gender of staff to search particular people in custody and how to manage any safety concerns for particular people in custody.

The person in custody has the right to know what information about their gender identity and gender reassignment is being shared between the SPS and its subcontractors. The information which is shared must be accurate and kept up-to-date.

6.10 Transfer to an alternative establishment

Where a transfer to an alternative establishment is being considered for a transgender person in custody, a gender reassignment case conference should be convened which additionally involves a manager from the potential alternative establishment.

The case conference should explore the specifics of how the person in custody will be accommodated if transferred to the alternative establishment and the decision rationale recorded fully. The case conference should consider whether the transfer is likely to improve or reduce the following:

- respect for the person in custody's gender identity;
- the dignity of the person in custody in regard to their gender identity;
- the person in custody's mental health and wellbeing;
- the person in custody's social integration and access to mainstream offender outcomes provision;
- the safety of the person in custody and other people in custody.

Where there are concerns about potential reduction in any of the above as a result of the proposed transfer, the gender reassignment case management conference should consider and record decisions about strategies for preventing such reduction and clarify the rationale behind the proposed transfer.

6.11 Liberation of person in custody and social work liaison

People in custody have the right to access liberation and subsequent social work provision without discrimination or harassment on grounds of gender reassignment.

People in custody who have permanently changed the gender in which they live should be assisted to access liberation and subsequent social work provision in their new gender.

Where a person in custody has changed name, title and/or social gender, their new details must be used for any new certificates, reports and references relating to liberation and subsequent social work provision. In order to provide privacy about their gender reassignment history, people in custody should be assisted to get any existing certificates, reports and references reissued to reflect their new name, title and gender. Payment of any associated administration charge made by examination bodies is the responsibility of the person in custody and not SPS.

Only the information which is strictly necessary for preventing crime during subsequent social work provision may be shared with social work service providers without the person in custody's consent. The final gender reassignment case management conference held by the SPS should seek to determine what gender reassignment information the person in custody consents to being passed to social work service providers and then conduct a full risk assessment to determine whether any additional gender reassignment information needs to be passed to social work services for the purpose of preventing crime. Any information passed on must be accurate and up-to-date.

The person in custody has the right to know what information about their gender identity and gender reassignment is being shared between the SPS and the social work service provider.

APPENDIX A: Relevant Legislation

The Equality Act 2010 - Gender Reassignment

Under the Equality Act 2010, a person has the protected characteristic of gender reassignment if the person is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.

Gender reassignment does not need to involve any medical supervision or surgical procedures; it could simply involve a permanent change of the social gender role in which the person lives their life, (for example through a permanent change of name and gender presentation).

The Equality Act 2010 provides the following types of gender reassignment protection in, amongst other areas, the provision of services and public functions:

- **Direct discrimination** is when someone is treated less favourably than others because of the protected characteristic of gender reassignment;
- **Indirect discrimination** is where a rule or policy or way of doing things has a worse impact on someone with the protected characteristic of gender reassignment than someone without that protected characteristic, where this cannot be objectively justified;
- **Harassment** is unwanted conduct related to the protected characteristic of gender reassignment which has the purpose or effect of violating someone's dignity or which creates a hostile, degrading, humiliating or offensive environment;
- **Victimisation** is treating someone less favourably because they have taken (or might be taking) action under the Equality Act or because they are supporting somebody who is doing so;
- **Discrimination by perception** is where someone is treated less favourably because they are perceived to have the protected characteristic of gender reassignment even though the person doesn't actually have that protected characteristic;
- **Discrimination by association** is when someone is treated less favourably than others because they are connected in some way (such as a friendship or a family relationship) with another person with the protected characteristic of gender reassignment.

The Equality Act 2010 – Disability

Due to the fact that **gender dysphoria** is a recognised medical condition which can cause a great deal of distress, anxiety and depression, some people with the protected characteristic of gender reassignment may also be protected by the provisions of the Equality Act 2010 relating to disability. The Equality Act 2010 creates a legal requirement to make reasonable adjustments to the way a service is provided to ensure disabled people receive the same standard of service as non-disabled people. This may, for example, include changing a policy as it applies to disabled people or providing additional staffing support to disabled people in custody.

The Human Rights Act 1998

The Human Rights Act 1998 incorporates the European Convention on Human Rights into UK law for everyone. It means that everyone has the right not to be discriminated

against on grounds of gender identity and gender reassignment in relation to any of the human rights contained in the European Convention on Human Rights.

The right to respect for private and family life, home and correspondence:

- This includes the right to privacy about undergoing gender reassignment so the Scottish Prison Service must not reveal without permission, except to protect safety or prevent crime, any information about a person in custody's gender reassignment.
- This includes the right to have any new name, title and gender used in all correspondence and in public sector records.

The right to freedom of expression:

- This includes the right to freedom of expression of gender identity whether or not this conforms with the sex assigned at birth. Free expression of gender identity can involve modification of bodily appearance or function by medical, surgical or other means and other expressions of gender, including dress, speech and mannerisms.

The Data Protection Act 1998

Under the Data Protection Act 1998, information relating to a person's gender reassignment would constitute 'sensitive data' for the purposes of the legislation. It can only be processed for certain specified reasons set out in the Act. For more information, see guidance from the Information Commissioner:

<http://www.informationcommissioner.gov.uk>

The Gender Recognition Act 2004

For information about the Gender Recognition Act 2004, please see **Section 3.3** of this policy and also <http://www.grp.gov.uk>

APPENDIX B: Guide to Searching Transgender People in custody

Conducting rubdown and body searches in accordance with SPS policies is a difficult but essential part of your core duties as a Prison Officer. All people in custody must be searched in a professional and respectful manner.

Inappropriate comments must not be made about the physical characteristics of any person in custody. Any physical variation encountered due to gender reassignment during searching must be responded to in a similar professional and respectful manner as for any physical variation encountered due to disability during searching.

If you are unsure how to search a transgender person in custody, then seek clarification from the Unit Manager or Reception First Line Manager currently responsible for the person in custody concerned.

Existing person in custody seeking gender reassignment:

You should not change how you search an existing person in custody until such time as a SPS gender reassignment case conference decides a change is appropriate and your line manager notifies you accordingly.

Where a SPS gender reassignment case conference decision exists:

You must comply with the existing case conference decision on how a particular transgender person in custody is to be searched. If you have any concerns about the case conference decision, please notify the Unit Manager so that consideration of the points you have raised can take place at the next case conference for that person in custody. Meanwhile, you must still comply with the existing case conference decision.

New transgender person in custody where case conference has not yet been held:

Carry out rubdown and body searches in accordance with the social gender the person in custody currently lives in, if this is known. Where the social gender in which the person in custody is living is unclear, discretely ask the person in custody which gender they wish to be searched by. Their answer must be recorded and the rubdown and body searches conducted accordingly. The genital appearance of a transgender person in custody must not be used to determine which gender of Prison Officer should search them. There is no legal requirement for a transgender person to undergo any surgery as part of their gender reassignment.

Searching gender reassignment equipment:

During the body search process the person in custody should be sensitively asked to remove any items such as prosthetics, wigs or chest-binders to enable the skin underneath to be seen. The items removed must be searched to ensure they have not been tampered with. Care should be taken to avoid accidental damage. The items must be returned immediately once they have been searched. Sufficient time should be provided for the person in custody to replace the items and a mirror provided if required.

Inappropriate behaviour by person in custody during search:

Any provocative, disruptive, offensive or abusive language or behaviour by a transgender person in custody towards you during searching should be addressed by placing the person in custody on report as per any other person in custody violation of establishment rules.

APPENDIX C: Additional Assistance

SPS Equality and Diversity Headquarters Staff

Priscilla Chipso Marongwe E&D Business Partner Scottish Prison Service Room 120, Calton House 5 Redheughs Rigg EDINBURGH EH12 9HW Direct: 0131 244 8620 General: 0131 244 8587 priscilla.marongwe@sps.pnn.gov.uk	Vince Fletcher Equality and Diversity Manager Scottish Prison Service Prisons Directorate Calton House 5 Redheughs Rigg EDINBURGH EH12 9HW Tel: 0131 2448606 vince.fletcher@sps.pnn.gov.uk
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Scottish Transgender Alliance (STA)

Assists public bodies with transgender equality, human rights and inclusion.

James Morton & Nathan Gale

Address: Equality Network, 30 Bernard Street, Edinburgh, EH6 6PR.

Office : 0131 467 6039

Email: sta@equality-network.org

Website: www.scottishtrans.org

NHS Scotland Gender Reassignment Protocol

http://www.sehd.scot.nhs.uk/mels/CEL2012_26.pdf

Patient information about gender reassignment hormones and surgeries

<http://www.gires.org.uk/transpeople.php>

Sandyford NHS Gender Identity Clinic

An initial appointment with one of the Sandyford gender reassignment medical specialists can be arranged by phoning the clinic administrator on 0141 211 8137.

This NHS service will see anyone of any age who lives in Scotland.

Address: 2-6 Sandyford Place, Glasgow, G3 7NB

Website: www.sandyford.org

Online booklet: [www.sandyford.org/media/88274/genderidentityservice_sf\[1\].pdf](http://www.sandyford.org/media/88274/genderidentityservice_sf[1].pdf)

Bent Bars Project

A letter-writing project for lesbian, gay, bisexual and transgender people in custody.

Address: P.O. Box 66754, London, WC1A 9BF

Email: bent.bars.project@gmail.com

Website: www.bentbarsproject.org

Out Side In

A person in custody support group for lesbian, gay, bisexual and transgender people in custody.

Address: OSI, PO Box 119, Orginton, Kent, BR6 9ZZ

Tel: 01689 835 566