

10 STORIES FROM 10 BOROUGHES

A Celebration of Pride in Practice
Excellence in LGBT Healthcare
throughout Greater Manchester



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ABOUT THIS BOOK

***‘Ten Stories from Ten Boroughs - a celebration of Pride in Practice throughout Greater Manchester’*, aims to illustrate that by improving awareness, visibility, knowledge and information of lesbian, gay, bisexual and trans (LGBT) patients’ experiences we can strengthen and develop primary care services’ relationships with their LGBT patients within the local community. Throughout this book, we will celebrate each borough of Greater Manchester and highlight some of the actions that have been taken to increase patients’ trust and confidence when accessing healthcare.**

We hope that this book will inspire other services and enable providers to promote and refer to a wider range of support that is available to LGBT people beneficial to their ongoing health and wellbeing.

We would like to say a huge thank you to the ten people who have given their time and allowed us to share their thoughts in order to make this book possible.



LGBT Foundation’s Pride in Practice is a quality assurance and social prescribing service that strengthens and develops primary care services relationships with their lesbian, gay, bisexual and trans (LGBT) patients within the local community. Pride in Practice aims to ensure that all LGBT people have access to primary care services that are inclusive and understanding of the needs of our diverse communities. Through Pride in Practice, LGBT people highlight the health and care inequities they have experienced across primary care services as well as sharing many excellent examples of best practice around LGBT inclusion in primary care. These experiences help demonstrate the project’s impact on the design and delivery of LGBT inclusive services, highlighting the simple but important changes that can be made by health care providers to help reduce health inequalities and improve the health and wellbeing of our communities.

We would like to thank the hundreds of primary care services and thousands of health care professionals we have worked with who have been overwhelmingly supportive of this work and of course our funders, Greater Manchester Health & Social Care Partnership and NHS England.

Pride in Practice has been developed in partnership between LGBT Foundation, Greater Manchester Health and Social Care Partnership, and NHS England. The programme brings together clinicians, commissioners and LGBT communities to coproduce solutions and work collaboratively to reduce the health inequalities experienced by LGBT people.



100% of participating health professionals can evidence changes made within their practice to better support the needs of LGBT people.

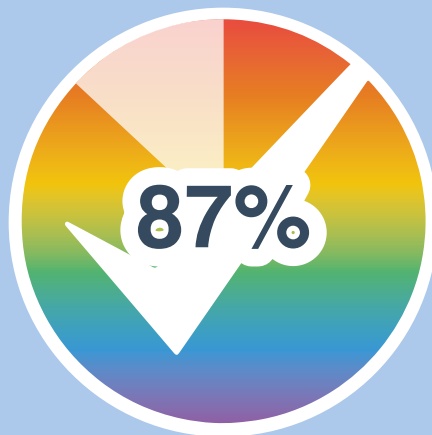
98.2% report feeling more informed when working with LGBT communities.

97% report feeling more confident when working with LGBT communities.

Of GPs in Greater Manchester that are **rated as 'Outstanding'** by the Care Quality Commission (CQC)



Of services that Pride in Practice have worked with



implemented sexual orientation monitoring



implemented trans status monitoring.

BORN IN GREATER MANCHESTER

Pride in Practice is rooted in Greater Manchester's rich history and is leading the way in healthcare as many of the stories in this book show.

The NHS was born in Greater Manchester just over 70 years ago. It marked the first time ever that people were able to access healthcare from cradle to grave, free at the point of use.

The NHS meant everyone could get access to treatment and those principles remain the same today.

Services and treatments may have changed, and the number and nature of people's health concerns may have altered over the years but the one thing we all want from our NHS is good healthcare for all.

This sadly hasn't always been the case for LGBT people and there are still many in our communities who are facing increased challenges in accessing the healthcare that they need.

As part of our work with Pride in Practice we are aware that there are multiple barriers which prevent people from being able to safely tell their story and be visible in telling their story, whether they are lesbian, gay, bisexual, trans, older, disabled, BAME, from a particular faith or cultural background or from a different part of the world that is not supportive of their unique identity.

In Greater Manchester we continue to address these issues and today we are also helping to share our learning and develop new initiatives which aim to improve LGBT people's lives in other parts of the country.

We would like to say a sincere thank you to the many people and organisations who have supported our work in being able to promote excellence in LGBT healthcare.

The following people have been there when we needed them so that we may be here for our LGBT communities when they need us.



THANK YOU

Thank you to the Royal College of GPs, Royal Pharmaceutical Society, GM Local Pharmaceutical Committee, Royal Northern Optometric Society, all the LGBT people and clinicians who have shared their experiences with us and helped us shape Pride in Practice including:

Shahnaz Ali OBE, *E&D Local NHS NW
Strategic Health Authority*

Samina Arfan, *HMR CCG*

Rob Bellingham, *Greater Manchester
Health & Care Commissioning*

Natasha Bent, *Poundswick Lane Dental Practice*

Hilda Bertie, *Manchester CCG*

Lindsey Bowes, *Greater Manchester Health
& Social Care Partnership*

Vicky Brand, *Oral Health Improvement Manager,
Greater Manchester*

Laura Browse, *Greater Manchester Health
& Social Care Partnership*

Nigel Burgess, *Lead Optometrist for LGBT,
Optometry Advisory Group*

Christine Burns MBE, *Editor of Trans Britain
& Managing Director of Plain Sense Ltd*

Liz Clarke, *Clinical Education & Mental
Health Lead, Trafford CCG*

Gareth Kitson, *Professional Development
& Engagement lead, RPS*

Wendy Craven, *Primary Eye Care Services*

Lesley Grimes, *Lead Pharmacist,
Learning Development, CPPE.*

Wendy Irwin, *Equalities Lead,
Royal Collage of Nursing*

Kate Jones, *CEO Healthwatch Rochdale*

Kathy McGuirk, *Quality Improvement Manager,
GMHSC Partnership*

Maria Murphy, *Education, Training &
Development Manager, Stockport CCG*

Dipesh Raghvani, *Clinical Lead,
GM Local Pharmaceutical Committee*

Dr Serena Rochford, *Avalon Care Dental Practice*

Rikki Smeeton, *Commissioned Services Lead,
GM Local Pharmaceutical Committee*

Jatinder Singh, *GP at City Health Centre,
Manchester*

Tracie Smith, *Head of Equality and Diversity,
Wigan CCG*

Ben Squires, *Primary Care Commissioning
Lead for Greater Manchester*

Pierrette Squires,
Chair of Bolton LGBT Partnership

Pamela A. Swain, *Chief Executive BADN*

Annette Turner, *Programme Manager
Population Health, Tameside MBC*

Luke Wookey, *Fairfax Group Practice Bury*

And the Pride in Practice team: Paul Martin OBE, Laurence Webb, Aimee Linfield, Clare Marshall, Andrew Gilliver, all staff and volunteers at LGBT Foundation and everyone who has supported and continues to promote excellence in LGBT healthcare... THANK YOU!

WHAT WE HAVE LEARNED SO FAR

Findings from LGBT Foundation's Pride in Practice Patient Survey (2018)

Since 2016/17, there has been an

11% increase

in LGBT people accessing primary care services in Greater Manchester, including a 35% increase in access to community pharmacy.

Of LGBT people in England **68%** feel their GP practice meets their needs compared to **81%** of LGBT people in Greater Manchester.



100%

of trans people at Pride in Practice awarded GP practices in Greater Manchester say their GP was supportive of their gender identity and trans status.

100%

of trans people at Pride in Practice awarded GP practices say their GP supported their medical transition.



Trans people who disclosed their trans status to their GP, dental practice and optical practice were **18% more likely to say these services met their needs.**



LGB people who disclosed their sexual orientation to primary care services were **18% more likely to say those services met their needs.**

When services displayed LGBT posters

LGB patients were

24%
more likely
to disclose
their sexual
orientation

Trans patients were

21%
more likely
to disclose
their trans
status

Patients using a
pharmacy were

10%
more likely
to have their
needs met as
an LGBT person

Trans people
in Greater
Manchester

were
**14% more
likely to
disclose
their trans
status**
to their GP
than in 2016/17

Disabled LGBT
people were

**19% less
likely**

to feel their GP
practice met their
needs compared
to non-disabled
respondents.

22%

22% of Black, Asian and Minority Ethnic
(BAME) LGBT people had

**experienced
homophobia,
biphobia or
transphobia
from their GP,**
compared to 13% of white LGBT
people.

13%

The survey data suggests an overall improvement in LGBT people's access to and experiences of primary care services in Greater Manchester since 2016.

Trans people's experiences of GPs in GM seems significantly better than the rest of England.

However, LGBT people within other minoritised groups are still more likely to experience homophobia, biphobia and transphobia.

EXCELLENCE IN LGBT HEALTHCARE FOR ALL

Many LGBT people have told us that it is important for them to be open about their sexual orientation, gender identity, and trans status in confidence with health professionals. They want to feel that primary care providers understand them and can respond to their individual healthcare needs.

There is still a lot of work to do. While we were putting together this book, we became more aware that many people, particularly Black, Asian, and Minority Ethnic (BAME) LGBT people did not feel able to have their photographs and stories shared publicly. These often untold stories of our diverse LGBT communities are just as important as the stories told in this book.

Pride in Practice continues to work with individual practices to provide access to training and information on how to provide appropriate services to LGBT people, including support around gender identity, trans status and sexual orientation monitoring.

Along the way, we are able to improve the confidence of our local primary care professionals around correct terminology and appropriate language and enable them to promote and refer to a wider range of support services that are available to LGBT people throughout Greater Manchester and beyond.

By increasing the knowledge and confidence of our healthcare professionals we can all strive to further support anyone who identifies as part of our diverse LGBT communities.

Through promoting Pride in Practice across Greater Manchester we are able to reduce any potential fears or concerns people may have of homophobia, biphobia and transphobia within healthcare services.

We look forward to celebrating excellence in LGBT healthcare with more service providers for the benefit of more people. If after reading some of the stories in this book you would like to get in touch with us, we would love to hear from you.

To find out more about Pride in Practice please email:
pip@lgbt.foundation

10 STORIES FROM 10 BOROUGHES



**PRIDE IN
PRACTICE**

BOLTON: Rosie

The importance of being ‘ourselves’ is critical when dealing with our health care. If medics don’t know about us, how can they treat us appropriately? If my Doctors know I have a wife, it saves important time when I need help in a medical crisis as I have life threatening conditions.


When we were first a couple it was a nightmare, there was a lot of prejudice and hostile treatment from staff at the surgery and hospital, there have been times of real difficulty for me as a vulnerable patient.

Today, there is real acceptance of us and professional behaviours, which show ALL people are equally valued, are life changing. We know that some LGBT people need a more sensitive approach as they may have more susceptibility to certain health challenges such as mental health or isolation, substance dependency etc. Improvements I’ve seen include LGBT Foundation posters and the Pride in Practice Gold award displayed clearly in my GP surgery. Patients are involved in the practice and LGBT issues are taken seriously. Staff may ask sensitive questions about marital status or next of kin etc. as heterosexuality is not assumed. My wife is included in all my health care decisions and is recognised as a Carer who has her own needs; this is so different than it was 7 years ago.

When Pride in Practice started I was one of the first volunteer health champions to tackle these inequalities in Primary Care by taking around leaflets and materials. This was important to help make our needs visible and the medics more aware of appropriate responses. It was hard work. I covered around 40 GP practices over the whole of Bolton. Many of them were not happy to take the leaflets or posters, and a large number of Practice Managers said they didn’t want the material, as “they had no gay people in their practice!” I asked how they knew if they didn’t ask? They said they just knew!

It was an uphill battle, but I am glad I stuck with it. Now all GP practices in Bolton are fully on board and trained up. This also had that ripple effect of bringing about support from the CCG and Council and after many years of being the seventh most homophobic place in the U.K. Bolton now has a ‘Pride’ weekend, an LGBT partnership and the museum and central library recently launched an exhibition about LGBT history about how the town is now more inclusive.

THANK YOU: Thanks to all GP practices, especially my own (Dr Page, McMillen, Tompkins and Wall) for being an early implementer of Pride in Practice. Thanks to Bolton CCG for supporting the work, Royal Bolton Hospital for being genuinely interested to make appropriate changes, and Bolton LGBT partnership for pushing forward the needs of all LGBT people in Bolton.

A woman with brown hair, wearing a dark brown coat, a red and green plaid scarf, and red gloves, is standing outdoors. She is smiling and looking slightly to the right. The background shows a stone building with windows and a stone balustrade. The text is overlaid on the right side of the image.

**“I do recall a GP
saying to me
about 15 years
ago, he had no
problem with
homosexuals as
long as they
didn't recruit
others to be
homosexual!”**

BURY: Nikki

When I go the doctor, it's important that my GP can address me in an appropriate manner without making assumptions about my sexual orientation. In addition, to recognise any personal issues that I may be struggling with so they may refer me to relevant agencies with confidence.

In the past, it has been difficult going for cervical smears and being asked if I'm using birth control or feeling I need to lie when I'm telling my dentist what I'm doing at the weekend. Being open with my health provider, I am able to discuss personal issues. Pride in Practice training has made my GP more open to dialogue with me as an openly gay woman and more willing to address her mistakes.

I'm sure the more open we are in the LGBT community, the more accustomed to our communities our GPs will become. Due to my disability, I have been going to the same podiatrist for 22 years who is aware of my sexuality. As a result, I can speak to her in a relaxed and humorous way whilst sitting through a half hour appointment every month. I am still surprised by some things though.

I did have to challenge my GP about an assumption she had made about my sexual orientation. It makes me think that they still don't think it is serious as she told me apologetically about using the wrong pronoun for a patient who was in the process of transitioning the week before. My friend's GP refused to change his name although they were aware he was awaiting an appointment at a Gender Identity Clinic. A member of our LGBT group reported that they have come across a situation where someone has gone to see their GP who didn't know how they went about supporting someone transitioning or referring that person to a Gender Identity Clinic.

We still need to see more visibility. There is a lack of support for people with learning disabilities too and I feel that something should be done within faith groups. I am speaking from my own perspective as I'm exploring becoming a priest and I am currently on placement at a church where I got talking to a young woman with learning disabilities. I introduced her to my partner and she whispered that she was gay too. We often deny people with learning disabilities a sexuality and I'm sure this is key in GP surgeries. By reconciling, one's faith with their sexuality can only be a bonus to well-being.

THANK YOU: Bury Council have a very pro-active LGBT network which helps to improve equality for all. An LGBT Forum has been set up in the community for people over the age of 50 under the umbrella of Ambition for Aging. Things are also developing now Carl Austin Behan is on board as LGBT advisor to the Mayor of Greater Manchester Andy Burnham.

“During a recent health check, I was able to tick the box that I was gay, that made me feel more valued and included”



MANCHESTER: Patrick

I've never had an issue with my own sexual orientation but being out to my GP means that I can be myself and help them understand more about my individual health needs.

I'm aware that as a person who is HIV+ that I may have some complex needs and I think GPs do need to know your HIV status and how it might affect your health and the way you feel about yourself. Unless you feel comfortable and confident in sharing your HIV status it can be really hard to talk about how it can affect your life.

It was difficult sometimes when I was feeling particularly vulnerable but it has been necessary for me to have an open and honest relationship with my GP because I had a nervous breakdown as a result of an abusive relationship and my GP really supported me through this.

I think the test with any GP and patient relationship is that when you are at your lowest, they are the one person you can go to for help. My GP actually came in to see me on his day off when he knew I had no-one else to support me which I thought was way above the call of duty.

Over the years, I've found that the practice I am registered with has become more aware of things like substance misuse, chem sex, and same-gender domestic violence just to name a few topics and being the outspoken person that I am, about my own needs and requirements around HIV awareness. Added to all this I struggled for five years with undiagnosed early onset dementia. When I finally received my diagnosis it meant that I could be more vocal about my experiences which has taken a long time for me to put into perspective and without the support of my GP it would have taken me even longer.

Being treated as an individual and never feeling that I was being judged has made me feel that I am being continuously cared for by my doctor and the practice and I would not hesitate to recommend them to any LGBT person struggling with any issue.

Today, I'm in a much better place to be able to look after my own health and I can now help other people and let my GP know how I have progressed, thanks to their support which was lovely when they told me how proud they were to see how much I'd developed from where I was.

THANK YOU: Ancoats Primary Care Centre, Alzheimer's Society, Dementia United, Three Nations Dementia Working Group, The Hive-HIV Steering Group, Manchester University Substance Use & Mental Health Department.



“

**I think that a lot of
GP surgeries still
need to understand
the needs of
minoritised
groups in
their local
areas**

”

OLDHAM: Terrence

I came out in the 1980's and I told my health providers that they needed to know that I was gay.

I haven't encountered many problems apart from one previous GP who said: 'You people deserve all you get' this was in response to the AIDS hysteria at the time.

Today I have gotten to know the Practice Manager at my local practice very well as I have been promoting our local over 50s LGBT group and I have given them a lot of LGBT information to distribute in the practice.

On seeing some of the resources, one woman told me that it was nice to see a group for older LGBT people in Oldham. She shared with me how proud she was of her two gay grandsons, one of whom was getting married.

Young people seem to want to thank us older LGBT folks for what we have done in the past - sort of paving the way for them I suppose, standing up to be counted and I think we still have to do that today.

Many people don't talk about it but I think LGBT people still need help and support. Some come out in later life and although I'm 78 now, I do think it's vital to know about what support you can get, when you are younger, as you never know when you might need it.

I do hear that LGBT patients in primary care expect better access to support now, but do they really get it? We may do in Greater Manchester but in a lot of places, there isn't any support at all. Many GPs wouldn't have a clue who was gay or straight and wouldn't think it was important that they know but I think we do need our GPs to know more about us so they can refer us on to specific support when we need it. There is a lot more learning to be done around supporting transgender people too.

I know from being part of an older LGBT group that a sense of community is important at some points in our life. When I first came to the group, I was in a deep depression but now with the support I've received I am a lot more positive.

THANK YOU: Crompton Health Centre, everyone at Oldham's Over 50s LGBT Out & About Group especially Maggie Hurley and Jean Friend and my two best friends, Andrew and Simon.

“We all want to be ourselves and I think it's very important that all health care staff are trained to understand and accept our identities”

**CHADDERTON
OVER 60's
CENTRE**

ROCHDALE, HEYWOOD & MIDDLETON: Mike

When we go to see our health care providers, we must feel that the environment they are in is the best place for us to be.

I think it's always best to be honest and up front as much as possible in life and especially with health care professionals like your Doctor or Nurse. This ensures a quality of care that is appropriate for you and tailored to your needs but most of all gives everyone the bigger picture about their own health care.

Sometimes it's hard to feel that you can trust someone, especially if that trust has previously been broken or abused, but it's important not to over think things and to try and place a bit of trust with your primary care team. There have been huge changes within primary care over the years and this is more obvious now than ever before where openness with discretion is key for today's health care.

With the visibility of LGBT Foundation's "Pride in Practice" programme, it's great to see that more Doctors Dentists Pharmacists and Optometrists are now making headway throughout Greater Manchester into shaking off old prejudices. I'm glad that my local surgery as well as many surgeries in Middleton have now taken to the "Pride in Practice" scheme and being chair of my local surgery's PPG (Patient Participation Group) helped me to push them to obtain their gold award with Pride in Practice.

Today, most surgeries in my area have a high level of LGBT awareness and treat all patients without prejudice anyway but there is always room for improvement. Education is key on both sides of the consultation the patient should have autonomy to make their own decisions about their health care but without the most appropriate choices being explained to them by their health care provider there could be poor decisions being made on either side of the table. I think it's more than just the patient - Doctor relationship, it's about the whole healthcare team and how joint decisions are to be made within this team.

I cannot thank my surgery's staff enough for taking in so many ideas and putting them into practice for the better of the LGBT community as well as the whole community in Middleton without hesitation. There's still a lot more to do, we are not anywhere near the end of the tunnel yet so we have to keep helping everyone out as we go along.

THANK YOU: Middleton Health Centre, Hope Citadel Healthcare, my partner Kerry, my family and friends and of course LGBT Foundation for giving me the opportunity to reach out to others and hopefully help them.



Heywood, Middleton & Rochdale

Middleton Health Centre

NHS & Hope Citadel Working Together In Partnership

“The object of the Patient Participation Group is about giving the community a better choice. Making sure that the GP practice has what you need and when you need it”



SALFORD: Owen

Men who have sex with men are criminals! This was the backdrop to my teens and later in my 20s, it was Section 28 and AIDS.

From the age of 23, I set up home in bedsit land in West Kensington, right next to Earls Court - the heart of the LGBT universe at the time. The local GP practice was progressive and later when I went to live with a partner, one of the GPs became a close friend and came to understand the specific needs of LGBT people, this was ideal.

Fast forward 30 years I moved to Salford in 2002 and Langworthy Medical Practice where I registered as a patient had a hard act to follow! At the time, Salford was very different to multicultural London with little LGBT visibility and it had a reputation for being a bit 'rough' which brought homophobia and 'queer-bashing' to mind. This is likely to have made LGBT+ people feel the need not to disclose their sexuality in order to keep safe.

With no visible LGBT support indicators I was initially reluctant to disclose I was gay to my GP as I also have Marfan syndrome & am D/deaf so I was worried about being deemed to be an 'expensive' patient and a waste of resources' - a bit harsh and in reality a totally unfounded fear.

It is now my experience that Salford's primary care providers are happy to meet the needs of LGBT people. When I asked my dentist Iain at Windsor Dental Practice for advice on sexual health in the context of oral health he did not bat an eye lid and neither of us were traumatised by my 'coming out' to him.

I was delighted when Langworthy signed up to Pride in Practice as it created a sense of trust, which encouraged me to be open about my Advance Decision Notice and to discuss things such as PrEP.

Much progress has been made in the development of good practice in diversity and equality, we have an openly gay Mayor, Salford Royal has an effective inclusion & equality team and the hospital flies the rainbow flag to mark LGBT History Month, a very visible gesture! Salford is becoming a great place for LGBT+ people to live.

THANK YOU: Salford City Councillors John Warmisham, Gina Field, Wilson Nkurunziza and John Ferguson publicly tested at an event I organised to celebrate National HIV Testing Week locally and Salford & Eccles MP Rebecca Long Bailey took the time to drop in to support us.

**“ It makes sense for
LGBT+ people to ‘come
out’ to enable them to
receive holistic care
but it is easier to do
this if the provider
is committed to
Pride in Practice ”**



STOCKPORT: Tina

Some people still make assumptions based on outdated stereotypes so I don't exactly come out to people; I let them figure it out by talking about my wife.

At a previous practice, a GP referred to my wife as my husband. That made me respect him less and definitely put me off going back. I don't want to be enlightening anyone when I am sick or need help.

My wife and I are looking into fertility treatment so we want our health care providers to be mindful that the biological father of our child is not in the room, and not to ask my wife inappropriate questions!

There is a lot more information at GP's fingertips now - when I ask about fertility treatment, I expect my GP to know what questions to ask me. By seeking conception advice from my GP, I hope that someone at some point will be able to see what the prevalent LGBT issues are and be able to address them.

Holistically, I think it's important to know your patient's psycho-social situation. A certain attitude or a look can put barriers up and make you feel less likely to engage. If I have any specific issues relating to my identity, how would anyone know how to address them with me if they think that I'm straight?

I've never had a problem telling health care professionals about my sexual orientation. I have some prior experience around cervical screening so I book in as soon as I get the reminder - and that eliminates any potential 'gay vagina' embarrassment I may have! I think in my own small way I can affect positive change, by ticking the 'lesbian' box on registration forms. If people are frightened of ticking that box then the practice will think that there are no LGBT patients and therefore cannot provide relevant care. It's a minor action but can go a long way towards accurate monitoring and provision. When a person talks about their life, then you get to know them and their priorities.

I think being open and honest aids compassion. I can laugh with my GP about our respective wives' snoring! It helps them to understand my life, which will ultimately help them to help me. Defining someone by whom they like to have sex with or what they may or may not have between their legs isn't always the most important thing. I'd much rather be known as 'Tina who makes cakes', than 'gay Tina'.

THANK YOU: Stockport MIND, Disability Stockport, Stockport Plus LGBT Group, Under The Rainbow (Stockport's LGBT community radio show on Your FM) Women in Business Stockport, Ebony & Ivory Community Organisation, Ladybridge HR Consultancy, Romiley Traders Association and Ian McKellen.

“

I look forward to the day when I am just a person rather than a gay person, or lesbian, or however I choose to identify”



TAMESIDE & GLOSSOP: Cyd

I think there needs to be more understanding of trans identities, particularly non binary people. There also needs to be less fat phobia and stigma around mental health and disabilities. These cause a lot of barriers to people accessing services they require.

I have had experience of medical professionals trying to attribute other conditions to me being trans when they are entirely unrelated. I have also been questioned about various elements of transition. Most of the time I answer questions because I would rather people were educated, but it's great when I don't have to feel responsible for that and can have a normal appointment.

In addition, when I started to transition and went to my GP to ask for referral they didn't understand what I was asking. Often when I have had any queries about hormones GPs aren't confident following the endocrinologists instructions and refer everything back to them. This has caused delays in my treatment at times.

I have had a much better experience while being in Tameside. I very rarely have to explain anything. My nurse understands my hormones and I feel confident going to my appointments. I am managing to get support with a lot of conditions that I wasn't able to before. When I access primary care now, I feel like I am taken seriously and believed.

Last year I had some gender reassignment surgery and had a post-surgical infection, which led to needing a lot of wound care. It was a very distressing experience. I had appointments for dressing changes daily for several weeks. The district nursing team at Ashton Primary Care centre were excellent. I did feel particularly vulnerable going there but they put me at ease straight away.

I felt very safe with them and never like I was judged or on show. They understood my needs without me needing to explain.

I feel safer when I can be open about my identity without judgement. It allows me to be more open about other aspects of my life and confident asking for help when I need it rather than waiting for an emergency to deal with something.

THANK YOU: Ashton Primary Care Centre, Market Street Medical Practice, Anthony Seddon Fund, Annette Turner at Tameside MBC, Megan Harrison at Tameside CCG and Tameside Pride.



“There needs to be more understanding of trans identities, particularly non binary people”

TRAFFORD: Rachel

I have had difficulties accessing support in the past where GP awareness wasn't up to date for LGBT people but at my current practice, they tell me they know of at least a dozen LGBT patients and it's only a small surgery.

This is the only practice I've registered with that know me as Rachel and as a trans woman I have needed a lot of support.

I was fortunate that a previous doctor found me a Gender Identity Clinic who had a waiting list of only six months for an appointment; this was a long time ago as the waiting times to see a GIC now are two years or more.

They found the support I needed very quickly and having access to hormone therapy has made a vast improvement to my quality of life.

It's important that my Chemist is aware of the details of my prescription too and if they cannot get hold of the oestrogen I need quickly, I can then work with my GP to get what I need as soon as possible. I always order my hormones early because I don't need to be faced with any possible delay in accessing the treatment that I need.

Having my GP prescribe Oestrogen has made everything easier for me as I was prepared to buy hormones online although I'm aware you cannot be sure what you are getting that way but I thought as I was entering my fifties I didn't have that long to wait to get on with it.

Things at one time got so bad that I did nearly commit suicide by jumping off the top (24th) floor of my flats but something made me stop myself from jumping. Afterwards I found out about a women's support group at LGBT Foundation which helped me as to be without support now would just be unthinkable.

There needs to be a greater awareness of support services and I would like to see more trans advocates at GP surgeries.

I feel safe where I live because people have gotten to know me and I have my GP to thank for writing a letter in support of me getting the accommodation I'm in now.

THANK YOU: Partington Family Practice whose customer service I find to be exceptional and Davey's Chemist for their excellence in providing the prescription service that I need.



“Whether you are coming out as trans, lesbian, bisexual or gay, the support you get from your practice is crucial”

WIGAN: Natalie

If you're not out as LGBT, how is your GP going to know how to support you?

When I went to my GP to explain that I wanted to transition I felt I had to educate them to do what was in my best interest before I began to play the waiting game of getting support from a Gender Identity Clinic.

I was self-medicating for three years before I told anyone I wanted to transition and I had to explain that I would need blood tests as I think I was the first trans person the GP had ever met.

I needed to feel like I was making progress in my life with my hormone treatment and yes there may be side effects but the most important thing for me is that I am progressing and my GP needs to know that.

I would say to any GP, who isn't sure how to support trans people, ask the patients themselves, they know what they want and what they need and they have most probably done the research too!

I know some trans people change GPs a lot, especially if they don't feel like they are getting anywhere, but it's important for me to stick with my GP. However slow the progress, hopefully they will feel a little more informed for the next trans patient they meet.

My GP wanted to refer me to a clinic at Charing Cross, which had a four-year waiting list. I wanted to go somewhere closer so I asked the Practice Manager and she helped me to get a referral.

This was a useful tip because it's great to know the wider practice team by their first names. Now I can go into the practice and get the support I need much faster than waiting for a GP appointment.

I also wanted to be referred to a Voice Coach but my GP said; 'You'll be fine, a lot of women have deep voices.' It's so important that our GPs listen to what we want rather than just tell us what they think is best for us.

I'm constantly surprised that services don't know about trans people's lives. Many services have access to good LGBT support but they don't always tell their patients how they can access that support.

Some trans people aren't comfortable about being out but for me it simply isn't a choice. Transitioning isn't something I want, it's something I need, just to be myself. If I didn't transition, I would be dead.

THANK YOU: Elaine, Practice Manager and Steph the receptionist, she chases things up and lets me know she has chased things! My friends Jane and Emz who have supported me with my trips to the Gender Identity Clinic.

**“I would say
to any GP, who
isn't sure how
to support trans
people, ask
the patients
themselves!”**



Pride in Practice is funded by:





PRIDE IN PRACTICE

Pride in Practice operates as a social prescribing model for LGBT communities, linking health professionals with community assets such as specialist LGBT drug and alcohol support services, peer support for LGBT people seeking asylum and refuge, and social support for LGBT people living with long-term conditions such as cancer, dementia and HIV.

Pride in Practice is led by a programme board co-chaired by LGBT Foundation and Greater Manchester Health and Social Care Partnership, which brings together clinicians working in general practice, dentistry, pharmacy and optometry with project delivery staff based at LGBT Foundation.

To find out more about Pride in Practice,
please e-mail: pip@lgbt.foundation

We believe in a fair
and equal society
where all lesbian, gay,
bisexual and trans
people can achieve
their full potential.

This book is available in large print by calling **0345 3 30 30 30**
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