

Gender Dysphoria Policy for Spring House Medical Centre

Introduction

NHS England published their document – Interim Gender Dysphoria Protocol and Service Guideline 2013/2014. This provides the basic guidelines that have been used to produce the policy for Spring House. In accordance with our existing equality and diversity policy (Jan 18) we aim to eliminate discrimination, harassment and victimisation to advance equality of opportunity and to foster good relations between people who share a relevant protected characteristic as cited under the Equality Act 2010 and those who do not share it.

Scope

This document applies to all employees of the practice; other individuals performing functions in relation to the practice, such as agency staff, bank staff, locums and contractors who should all be encouraged to use it.

This document has been produced to support all staff at Spring House Medical Centre to ensure that transgender patients' care is managed in the appropriate manner.

Definition of terms

Transgender – often abbreviated to “trans”, is an umbrella term used to describe a whole range of people whose gender identity and/or gender expression differ in some way from the gender assumptions made about them when they are born.

Gender dysphoria – The condition where a person experiences discomfort and/or distress because of a misalliance between their biological sex and gender identity.

Gender identity – A person's perception of having a particular gender, which may or may not align to their birth sex

Transsexual – A person with strong, persistent feelings of gender dysphoria who emotionally and psychologically feels that they may belong to the opposite sex.

Transition – A Trans woman is someone who was registered as a male child and later undertakes the transition to presenting as a woman because she wants to be regarded and treated as the woman she feels inside. Similarly, a Trans man is someone who was born with female anatomy and undertakes the transition to present to the world as a man.

Treatment pathway

All GP's in England can refer those patients who request treatment for gender dysphoria directly to a GIC. There is no requirement for a GP to first neither refer the patient for a mental health assessment, nor do any GP's need to request prior approval from their local ICB.

The NHS England guidelines mentioned above, contain a protocol flow chart which has been included as an appendix to this document.

The protocol

At Spring House Medical Centre, GP's must ensure they follow the protocol as detailed in the attached appendix (from NHS England guidelines). They must also ensure that the patient is fully involved in the decision-making process.

GP's should also be mindful that some patients may have psychiatric comorbidities and as a result they may require formal psychiatric intervention.

Administration

At Spring House Medical Centre, a patient's request to change the sex that is indicated on their medical records will be accepted. The patient does not need to have been issued with a Gender Recognition Certificate or have an updated birth certificate for their records to be amended.

PCSE have confirmed that **Patients may request to change gender on their patient record at any time and do not need to have undergone any form of gender reassignment in order to do so.**

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Furthermore, the patient may also wish to change their name and title on their electronic and paper medical records. It should be noted that Trans patients have a legal right to change their name and gender on their healthcare records.

All requests for changed to names/titles etc. should be addressed to Primary Care Support England at pcse.england.nhs.uk. Their phone number for queries is 0333 014 2884.

When a patient changes gender, they are given a new NHS number and must be registered as a new patient at our practice. All previous medical information relating to the patient needs to be transferred into a newly created medical record. When the patient informs the practice that they wish to change gender, the practice must inform the patient that this will involve a new NHS number being issued for them, which is not reversible. To revert back to their original gender, they would receive a third NHS number. The practice should confirm this has been discussed with the patient when notifying PCSE.

The process should be as follows;

- Spring House notifies PCSE that a pt wishes to change gender via the enquiries form on the PCSE web site. We should include the pts name and NHS number in the notification to PCSE, plus confirmation that we have discussed with the patient that this will involve the creation of a new NHS number.
- PCSE will then send us a deduction notification for the pt and will email the main contact the new details for the pt.
- Spring House will then accept the deduction and should then register the patient using the new details provided by PCSE. Important: We should NOT update the patient's original record with their new NHS number. If this happens they will not be registered and will miss out on continuity of care.



Ephedra Healthcare

your local health professionals

- PCSE will then send a new pt medical record envelope with the patient's updated details to the GP practice
- Spring House will then create new patient record, using new details and transfer all previous medical information from the original medical record. However, any information relating to the patient's previous identity should not be included in the new record.
- If the gender is being re-assigned from male to female, the screening team will contact the practice for no cervix confirmation
- If the gender is being re-assigned from female to male, screening will become the responsibility of the practice.

NB. When registering new patients, we should not use "select "I" (Indeterminate) as the sex category. Please only select either "M" or "F" which will ensure that the appropriate screening invitations go correctly to individuals.

NHS screening information for Trans people

Public Health England has issued a document – NHS Screening programmes – Information for Trans people.

The following table is taken from this document.

	Trans woman	Trans man
Breast screening (50yrs to 70yrs)	YES if registered with GP as a female	YES (If there is breast tissue) If the pt is registered with a GP as a male, they will NOT be invited for screening but a referral can be arranged at the patients request.
Cervical Screening (25yrs to 64yrs)	NO not necessary as no cervix present. If registered as a woman, the patient would be routinely invited so the GP will need to update the records accordingly.	Yes if still have cervix and registered at GP's as a female. If registered as a male, the patient will not be invited for cervical screening
Abdominal Aortic Aneurysm screening (aged 65 and over)	YES if still registered as a male but the patient will not be invited for screening if registered as a female	If registered as a male, you will be invited and can attend even though the risk is much lower
Bowel Screening (aged 55-74)	YES	YES

It is important that Spring House Medical Centre contacts the NHS screening programmes to ensure that the correct invites are sent to any Trans patients. It is important that all our patients are treated with dignity and respect at all times and it is possible for a Trans patient to be screened at the beginning or end of any clinic. They would need to request this.

Our Clinicians will also speak to their patients about the options for screening and explain how a patient can opt out if they prefer.

General Data Protection Regulation (GDPR) Compliance

It is the responsibility of the data controller at Spring House Medical Centre to ensure that data is accurate and where necessary, kept up to date; every reasonable step will be taken to ensure that personal data that is inaccurate, having regard to the purpose for which they are processed, are erased or rectified without delay.

Confidentiality

It is clearly outlined by the GMC that “it is unlawful to disclose a patient’s gender history without their consent. When communicating with other health professionals, gender history need not be revealed unless it is directly relevant to the condition or its likely treatment.

Additionally, the GMC states that there may be circumstances where it is necessary to disclose the patient’s gender history; this will enable the service that will be dealing with the patient to be prepared to do so; thereby ensuring the necessary level of support is available to the patient at the time of his/her appointment. Supporting information regarding disclosure can be found in Section 22 of the Gender Recognition Act 2004.

Further compliance with the GDPR is required in relation to confidentiality. The data controller must ensure the data is “collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes.

Furthermore, data processors must ensure “the data subject (patient) has given consent to the processing of his or her personal data for one or more specific purposes. I.e. referral for treatment etc.

At Spring House Medical Centre, the Data Protection Officer role is provided by the ICB, any questions regarding confidentiality and the sharing of data should be referred to her in the first instance.

Respect

It is imperative that patients who are transitioning or have transitioned are addressed in the correct manner. All staff at Spring House Medical Centre should use the patient’s preferred name and title at all times. Where doubt exists, the staff should ask the patient “how do you prefer to be addressed?” and if necessary, “what pronoun do you use?” i.e. he or she.

Summary

All staff are to be mindful that the patient population at Spring House Medical Centre is, by nature, diverse. Effective communication is one way in which the practice ensures that all patients are treated with respect and dignity, whilst also involving patients in their own care.



Pathway detailed below

