

Improving access to services for Trans, Non-binary and Intersex (TNBI) community.

Case study

Background

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

The term Cisgender or Cis describes an individual whose gender identity matches their birth assignment.

Some people do not identify themselves as male or female and prefer to use the term non-binary.

The term intersex is when a person is born having both male and female sex organs or other sexual characteristics.

Gender dysphoria refers to discomfort or distress that is caused by a discrepancy between a person's gender identity and that person's sex assigned at birth. Not all trans people experience gender dysphoria.

Gender incongruence is defined as being characterised by a marked and persistent incongruence between an individual's experienced gender and the assigned sex.

Transition is a period when individuals change from the gender role associated with their sex assigned at birth to a different gender role. For many people, this involves learning how to live socially in another gender role; for others this means finding a gender role and expression that are most comfortable for them. Transition may or may not include feminisation or masculinisation of the body through hormones or other medical procedures. The nature and duration of transition are variable and individualised.¹

For the purposes of this case study, the service user group will be referred to Trans, Non-Binary and Intersex (TNBI).

Patient pathway and role of the General Practitioner (GP)

The usual pathway for assessment and diagnosis for TNBI people is via a referral to a Specialist Gender Identity Clinic (GIC) by their GP. There are 7 GIC's in England. As there isn't any provision in the Northwest patients tend to choose to be referred to Leeds or Northampton.

The role of the General practitioner (GP) is for pre and post diagnosis care and treatment for TNBI patients.

Problem

In 2017 the chairperson of a local network called In Trust approached the Chief Officer of NHS South Sefton Clinical Commissioning Group (CCG) and NHS Southport and Formby CCG to highlight poor patient experience and outcomes.

¹ World Professional association for transgender health (WPATH) – Standards of care 7th Version

The Chief Officer assigned a member of staff to work with In Trust to explore what the issues were and how they could be addressed.

It was identified that across the country, TNBI people generally experience poorer healthcare than the wider population, this can mean significant risks to their health and wellbeing. Many health professionals did not feel they have the relevant skills or understanding to achieve the best access and outcomes for TNBI patients. This group also have disproportionality higher rates of suicide in comparison to any other cohort or population group.

As of 2020 the waiting time for a specialist diagnostic service (GIC) was an average of 3 years, which results in patients relying more on their GP for support whilst on the waiting list.

Due to the excessive wait for first appointment at a GIC patients often seek hormone treatments from the internet which puts them at serious risk.

In Trust shared a clear vision of what services are required locally. The model developed by the TNBI community focusses on identity, psychological, medical, and psychosocial areas relating to the patient's journey.

Solution

A GP was identified to lead the development and a steering group was set up that included representatives from neighbouring CCGs and provider organisations, a local Endocrinologist (hormone specialist), GPs and patient representatives.

The Steering Group worked together to develop this innovative primary care-based service. The service provides timely and holistic support for TNBI patients and their families to improve their experience and health outcomes. This service ensures care coordination for referred individuals from a GP with special interest in TNBI care.

The service is called Trans Health Sefton – a unified approach to gender care. The aim of the service is to achieve an integrated approach to care with primary care providers and ensure close links with local TNBI support services and expert centres at a national level. The service also aims to ensure timely and appropriate communications with services who are expected to provide other parts of the individual's pathway.

The service offers a single access point that provides:

- Care co-ordination from a GP with special interest in TNBI care.
- Providing a robust referral to National Gender Identity Clinics (GICs)
- Initial and longer-term drug administration, prescribing and monitoring service.
- Referral to and liaison with various 3rd sector support service/agencies
- Closer working with GICs to enable a smooth patient process between services.
- Referral for bridging hormones
- Referral to and development of processes for fertility services and screening programmes
- Training for individuals and organisations
- Access to the Navajo Merseyside & Cheshire LGBTIQ Chartermark
- Support to fellow Sefton GPs who wish to continue prescribing and supporting their own patients.

The service is a true example of a grass roots initiative, working closely with service users, 3rd sector organisations, GP's, various clinicians, and commissioners.

Outcome

Since the Sefton service opened its doors in April 2017, more than 300 patients have used the service. Many patients have expressed their satisfaction and praised the staff's awareness of TNBI service user issues. In 2019 Trans Health Sefton won a National NHS Award for partnership working.

During the development of the Sefton Service the working group called the 'Cheshire and Merseyside Gender Identity Collaborative (CMAGIC). CMAGIC is a collaboration between TNBI community groups, commissioners, patient representatives, clinicians including GPs, counsellors, and a specialist endocrinologist. CMAGIC have been working together for many years to improve access to and experience of TNBI services across Cheshire and Merseyside.

In 2017 NHS England began a 12-week public consultation on proposals for new surgical and non-surgical service specifications that, if adopted, describe how specialised gender identity services for adults will be commissioned and delivered in the future for the people of England.

CMAGIC was involved in public consultation and shared the Tran Health Sefton model. The model was identified as an area of good practice.

In 2019 CMAGIC the collaborative submitted a bid to NHS England for a pilot site to provide the specialised elements of the pathway including diagnosis, treatment, and referral to surgical providers.

The CMAGIC bid to NHSE was successful with Mersey Care NHS Foundation Trust as the accountable partner. CMAGIC is one of the new NHS gender incongruence pilots for adults and brings together clinicians, community groups, and NHS services to provide a community-based approach to improving access to gender identity healthcare. The pilot will reduce waiting time for patients currently on the regional Gender Identity Clinics waiting list who have not had their first appointment and live in the Cheshire and Merseyside area. The service provides assessment for and diagnosis of gender incongruence, hormone therapy (including prescriptions and monitoring), referrals to voice therapy, hair removal, psychological therapy to help improve your mental, emotional and sexual wellbeing and referral to surgical providers.

The CMAGIC Collaborative have formed a Community Interest Company (CIC) and is providing a TNBI counselling service across Wirral and Cheshire.

The TNBI Lead for Sefton Place (formally NHS South Sefton CCG and NHS Southport and Formby CCG) submitted a bid for transformation funding from NHS Cheshire and Merseyside roll out Trans Health Sefton Service across Cheshire and Merseyside, align psychological support and develop a support service for the TNBI community. The outcome of the bid will be known in September 2023.