

## **FOR APPROVAL**

### **Progressing to consult on the provision of gender reassignment surgery**

#### **1. Introduction**

A consultation document has been developed (attached) as the basis for the consultation. The Board is asked to agree the draft consultation document and proposed approach to consultation outlined in this cover paper.

#### **2. Summary**

In the past, the volume of requests for gender reassignment surgery has been very low and the Board has not therefore developed a formal commissioning position on the provision of gender reassignment surgery. Funding applications for this surgery are currently submitted to the Board on an individual, named patient basis through the Board's Extra Contractual Referral (ECR) process.

The Belfast Health and Social Care Trust provides a Regional Gender Identity Service (RGIS) for all N.Ireland patients. This service offers a pathway for care, treatment and support through psychological, social and physical transition, co-ordinating interventions provided directly by the service with interventions offered by other providers for people who experience gender dysphoria. RGIS submits named patient funding requests through the ECR process for surgeries and treatments which are not available locally.

There has however been a significant increase in last 3-4 years in the volume of requests for specialist gender reassignment surgery. RGIS is predicting a continued increase in the volume of patients attending its services over the next 2-3 years, with the likelihood of a corresponding increase in requests for gender surgery.

In 2017/18, there were 172 patients actively being treated within the RGIS. Not all patients with gender dysphoria will wish to receive gender reassignment surgery and, as with all surgical referrals, the nature of the surgery offered will depend upon the patient's preferences; the professional judgement of the surgeon(s) and other clinicians involved; and the range of surgical options commissioned by the Board. In addition, the nature and timing of the treatment will depend on the patient's clinical circumstances and may result in multiple surgeries over a period of years. In

2017/18, there were 47 individual funding requests for surgical procedures of which 29 were for new patients. This compares with 10 funding requests in 2012/13, of which 9 related to new patients and 16 funding requests in 2013/14 with 11 new patients.

It is planned that the HSCB consult on adopting a commissioning position in line with other UK NHS Commissioner positions. This will mean that:

1. Procedures will be categorised as either “routinely commissioned” or “not routinely commissioned” in line with UK NHS policy position.
2. Specialist Surgical Gender Reassignment procedures commissioned by NHS will be eligible for routine funding.
3. Other surgical procedures will not be routinely funded but will be considered in line with the HSC Effective Use of Resources (EUR) policy.

### *Pre-consultation meeting*

The consultation team has met with representatives from three of the transgender advocacy and support groups, Gender Identity Panel, Focus Identity Trust and SAIL. The team found the meeting very useful in gauging views and testing assumptions and representatives were generally content with the approach proposed by the Board. The concept of routinely/not routinely commissioned was understood although there was a view expressed that patients should have access to all procedures required due to stigmatisation and suicidal ideation experienced by transgender people.

There was also a strong view from participants that HSC should seek to provide surgery on the island of Ireland, in partnership with RoI and that elements of the pathway should be delivered locally, e.g. endocrinology input provided by each HSC Trust. There were concerns regarding after care and isolation experienced when undergoing procedures in Britain.

The representatives agreed that the consultation offered an opportunity to discuss broader issues with regards to RGIS and highlighted the importance of the Adolescent Service for supporting young transgender people. Finally, they agreed to assist in publicising the consultation and facilitating discussion as necessary.

### *Next Steps*

Following Departmental advice, the Board would move to a 13-week consultation commencing in late June. Given the sensitivity of issues relating to the consultation, it is not intended to have public meetings but rather to offer to meet with interested parties on an individual basis and on request. Pre-consultation participants supported this approach. Otherwise the consultation will accept written submissions

using a series of consultation questions included in the consultation paper. Following completion, the Board would consider the views raised and decide on implementing the protocol or otherwise and next steps in pathway reform.

### **3. Equality, Good Relations and Human Rights**

The Commissioning Directorate has consulted with BSO Equality Unit on the requirements regarding equality screening and impact assessment.

In view of the protections afforded to transgender people under Section 75 and Schedule 9 of Sex Discrimination NI Act 1998, the Gender Reassignment Regulations (NI) 1999 and the Gender Equal Access to Goods, facilities and Services Directive 2004/113/EC, we are liaising with BSO Equality Unit on the need for full Equality Impact Assessment which could be undertaken as part of the wider consultation exercise. The consultation paper takes account of this.

### **4. Financial implications**

Costs for gender reassignment surgical treatments have risen four-fold in the last four years. It will be necessary to create a dedicated budget for commissioning this service going forward.

### **5. Recommendation**

**The Board is asked to note the consultation paper attached and confirm its support for a 13-week consultation which would include offer of individual meetings on request. Consultation will commence following Departmental agreement.**

**Dr Miriam McCarthy  
Director of Commissioning  
7 June 2018**