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To: Chief Executive of NHS Boards

Copy to: Medical Directors of NHS Boards
Directors of Planning

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Dear Colleague

GENDER REASSIGNMENT PROTOCOL: INTERIM GUIDANCE

The Gender Reassignment Protocol (GRP) was issued as a CEL in July 2012. The GRP described the routes by which patients across Scotland would access gender identity services. The GRP differentiated procedures exclusive to gender reassignment, to be accessed via the GRP, and other procedures, not exclusive to gender reassignment, to be accessed via the Adult Exceptional Aesthetic Referral Protocol (AEARP).

A Review of the AERP is being planned, meantime this guidance removes the application of the AERP to gender identity patients, replacing that arrangement with the multi disciplinary team (MDT) approach outlined below. This guidance has been developed from two processes.

Health Scotland Audit

There was a commitment in the launch of the GRP to review the operation of the protocol. An audit was carried out by Health Scotland. The audit highlighted concern from patients and gender identity clinicians about the different processes and pathways in place for feminising surgery (breast augmentation and facial feminisation) and masculinisation surgery (including mastectomy and chest reconstruction) with feminisation surgeries accessed via the AEARP while masculinising surgeries could be accessed directly. The audit reported that the consequence of these differential arrangements is perceived to be that the AERP is restricting access for patients to surgery which their gender specialist is of the view is required. Other concerns raised included the necessity for additional psychological assessments for surgeries covered by the AEARP.

National Gender Identity Clinical Network Review

In the light of the outcome of the audit the Scottish Government invited the National Gender Identity Clinical Network for Scotland (NGICNS) to make recommendations on changes to the protocol. The Network reached recommendations through:

- Views of the members of the NGICNS, including patient representatives; specialist psychology; gender reassignment specialists; service managers and planners:
- Discussion with the Government's plastic surgery advisor and with the NHS Lothian plastic surgery service:
- Meetings with transgender patients from across Scotland;
- Advice from NHS equality specialists.

The Network made a series of recommendations which this interim guidance now endorses for application across NHS Scotland with immediate effect:

- The gender reassignment protocol should be revised to delete the application of the AEARP to gender reassignment patients.
- There should be a clear statement that access to gender reassignment surgical procedures should be through a shared multi disciplinary assessment (MDT) process between the surgical service and the specialist gender identity service to meet the needs of individual patients;
- The MDT assessment should be conducted in the same way as referrals for surgeries in non transgender patients who are under the care of another speciality.
- The assessment would be conducted between the GID specialists and the specialist receiving the GID referral, focussed on the needs of the individual patient. This would give parity to gender identity patients with patients accessing surgery not covered by the AERP.
- Clinically appropriate criteria, for example BMI or smoking status would be considered in that MDT process in the same way as they apply to other patients.
- Clinical concerns about psychological issues with any patient would be discussed in the MDT to agree appropriate psychological assessment and intervention.

Surgery related to a gender reassignment will not be covered by the AERP. Access to surgery will be on the basis of dialogue between gender identity specialists, patients and surgical teams reflecting the recommendations outlined above.

The Network also recommended that there should be clear referral routes and care pathways for patient requiring surgery as part of gender reassignment and the Network will work with the Board's who provide gender identity services to develop the required routes and pathways via the MDT.



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