

Sussex Gender Service

Annual report - year 1 (September
2023 to August 2024)

1. Overview

Sussex Partnership Foundation Trust (SPFT) are commissioned by NHS England to provide the Sussex Gender Service (SGS), a transgender healthcare pilot for patients from the Sussex region. The service commenced on 1st September 2023 for a two-year period, with the option for a further one-year extension. NHS England have recently confirmed that the one-year extension will be enacted.

This report provides an overview of the first year of operation. The report will be used to support the SGS as it begins the second year of operation, and to allow necessary development discussions beyond the first two years of service delivery.

2. Introduction

The SGS follows a nationally mandated service specification and is staffed by an experienced multi-disciplinary team. The mission of the SGS is to '*provide compassionate, safe, supportive and holistic care to Trans, non-binary and intersex (TNBI) people to enable them to live as their most authentic selves*'.

The SGS is a specialist service that provides support and assessment for people who are experiencing a mismatch between their biological sex and their gender identity. The SGS offers a service in line with other gender identity clinics across England. The SGS has a multidisciplinary team of healthcare professionals, who offer assessment, treatment, support and advice including psychological support, access to hormone medications and surgeries, speech and language therapy (voice therapy) and referrals for hair removal and fertility preservation. The service follows the NHS England Service Specification for Adults (Non-Surgical Interventions).

The SGS is working through an existing waiting list, of patients registered with a Sussex GP, and who were referred to an existing gender identity clinic prior to 31st March 2023. The service has a total number of 1302 service users transferred to the service from other gender services across England

3. Commissioning arrangements

Given the limited provision for specialist transgender services, NHS England have commissioned a programme of pilot services across England. The SGS was the fifth pilot site to launch. The aim of the pilot services is to both increase access for patients, and to increase the number of clinicians trained and experienced in transgender healthcare needs.

The SGS is the commissioned pilot for the Sussex region, and SPFT hold the contract with NHS England as the 'prime provider'. SPFT have sub-contracts with a number of other organisations for various aspects of support into the SGS. These are summarised below.

3.1 SGS service model

SGS had the following staffing in year 1 (N.B. not all staff were recruited and in post until later in the year during year 1):

- 1 WTE Clinical Lead (Consultant Clinical Psychologist)
- 1 WTE Clinical Service Manager
- 3 WTE Clinical Nurse Specialists
- 1.6 WTE Salaried GPs
- 0.6 WTE Band 8a Psychologist
- 1.0 WTE Band 7 Speech and Language Therapist
- 1.0 WTE Admin Lead
- 1.8 WTE Admin Support
- 1.0 WTE Care Navigator

3.2 Nottingham Centre for Transgender Healthcare

The NHS England service specification requires all pilot sites to have a 'linked' Gender Identity Clinic (GIC) supporting pilot sites. There are seven GICs in England, all with longstanding commissioning arrangements with NHS England for the provision of transgender healthcare. SPFT sub-contract the Nottingham Centre for Transgender Healthcare (NCTH) to provide required link clinic support for the pilot. NCTH are sub-contracted to provide a number of elements for the SGS:

- Membership for SGS to the NCTH clinical network
- SGS service governance support
- Intensive training to the staff team within the SGS
- Clinical supervision and leadership for SGS clinicians
- Complex care/additional support pathway for patients identified as requiring support beyond that which the SGS pilot can provide
- Paperwork package to support service set up

3.3 The Clare Project

As part of SGS the service sub-contracts The Clare Project, a voluntary, community or social enterprise organisation (VCSE) to host care navigator roles and an engagement and participation role. The Clare Project is a registered charity run by and for trans, non-binary, gender variant and gender-questioning people in Brighton & Hove, West Sussex and East Sussex.

3.2.1 Care Navigators

The specification for the care navigator roles has been co-produced with the TNBI community across Sussex. The high-level aim of the care navigator role is to provide the support that patients need whilst they are waiting for assessment and during their treatment journey. The level of support required may differ from person to person.

The team is made up of the following posts:

- 0.4 WTE service Coordinator/Leadership post
- 2 x 0.5 WTE care navigator post

3.2.2 Engagement and Participation

The Clare Project have also been sub-contracted to provide independent engagement and participation feedback, to support service development and delivery. A 0.6 WTE Engagement and Participation co-ordinator is in place to oversee the following:

- Management and coordination of monthly SGS service user feedback groups, offering both face to face and virtual offerings:
- Reporting of key findings and feedback to service leadership meetings
- 1:1 feedback meetings (limited number) for patients as and when required
- co-chair monthly SGS Working Together Group with SPFT Participation Lead
- Evaluation support through collection of key EDI data across service
- Support targeted outreach engagement work with wider TNBI community networks

4. Mobilisation

The mobilisation of the service took place between April 2023 and September 2023. NCTH have been pivotal in the mobilisation of SGS, providing support in the establishment of Sussex clinical pathways and processes, and offering guidance in the service set up.

The SGS Clinical Lead and the Clinical Service Manager were recruited in June 2023 and led the local development work in readiness for the September 2023 launch. A 'soft' launch took place in September 2023, but the full complement of staff was not in post until January 2024.

Partnership work with the TNBI community, and ensuring the service development was co-produced, has been the priority for SPFT.

5. Partnership working

One of the SGS aims focused on the TNBI community taking a shared leadership role in the mobilisation phase as well as the delivery phase of the pilot.

5.1 Service mobilisation

Three initial TNBI engagement planning sessions were held to support co-production of mobilisation plan outlining:

- Who will be engaged

- How they will be engaged
- What elements of service delivery the community can help shape and develop

A co-produced mobilisation engagement plan was drafted. Key areas of focus for TNBI community member engagement were:

- Learning from other pilots
- Recruitment to SGS posts
- Development of Care Navigator roles
- Supporting development of launch comms
- Development of SGS delivery engagement plan

A number of engagement activities were undertaken:

- Regular focus groups with community members exploring communication materials and the development of suitable documentation
- Two focus groups discussing delivery engagement plans and priorities
- Engagement with SPFT Learning Disabilities team and community member for input into service development from an LD perspective
- Focus group on speech and language provision
- Input into the standard operating procedures for the service
- Focus groups to help develop patient feedback questions and formats
- Involvement in recruitment including shortlisting and interviews

During the mobilisation period 37 different community members participation in engagement activity.

5.2 Ongoing engagement and outreach

As part of ongoing service delivery activity, the SGS team also actively outreach to different community groups and networks including the following:

- Allsorts (supports LGBT young people)
- Hastings and Rother Rainbow Alliance
- Traveller Pride
- Ethnic Minority network
- Disability network
- Equality and Diversity Team

Other partnership working has included involvement from local GPs and healthcare teams including:

- Endocrinology
- GPs (including Well-BN which has 1000+ trans and non-binary patients registered under their practice.

6. Waiting list

The SGS is not currently open to new referrals. As for all other pilot sites, the SGS was given a waiting list of existing patients from Sussex, who had already been referred to a existing GIC in England. The SGS is required to see the patients in the order in which they were referred, to ensure fairness and equity of service provision.

Potential patients are contacted and offered the opportunity to opt out of the Sussex service and remain on the waiting list of the original GIC if that is their preference. Some potential patients transferred to Sussex may be ineligible for the SGS e.g. if they have moved out of the Sussex area, and this has been identified when the patient details are received.

A total of 1303 service users have been transferred to SGS. Of these 1303, 196, approximately 15%, were found not to be eligible for the pilot.

7. Key activity in year 1

The key activity areas undertaken in year 1 of the contract are set out below.

7.1 Training

During the first year the service has been focusing on recruitment and training of clinicians working within the SGS. Most clinicians recruited did not have experience of working in the transgender healthcare setting, and therefore had a number of training needs. NCTH, as the link gender clinic for the SGS, were sub-contracted to provide intensive training for SGS during the first and second years of the pilot.

The first year has focused on training staff to undertake the various assessments that form transgender healthcare assessments e.g. first and second assessments, additional support assessments and surgical recommendation assessments. Before clinicians can undertake any assessments on their own, they are required to be signed off under a competency framework. This involves shadowing NCTH clinicians, and then being observed. This has been an intensive undertaking, with all clinicians signed off by the end of March 2024.

The stages of training have included:

- guided reading
- initial observed consultations (SGS clinicians observing the clinical practice of NCTH clinicians)
- direct observed consultations (NCTH providing direct observation of SGS clinicians undergoing clinical assessment)
- 1-2-1 supervision pre/post consultation
- Group MDT discussions
- 14 hours of workshops
- SLT shadowing/intensive supervision during the first 6 months

There have been a number of other training activities undertaken by the SGS team including:

- 2 member of the team attended Affirm CBT course (a CBT group designed for LGBT adults)
- Seven SGS clinicians have enrolled in the Royal College of Physicians Gender Identity Certification level 1 course. This is a qualification for clinicians

specifically working within a specialist gender service to support the development of their expertise

- Two of the Clinical Nurse Specialists completed the Non-Medical Prescribing course

7.2 Supervision and Leadership

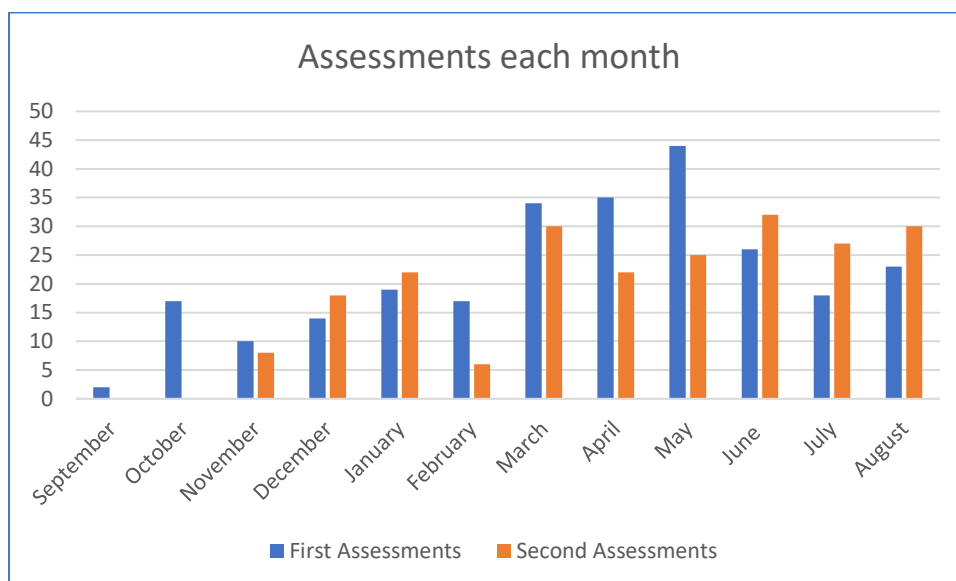
SPFT sub-contract NCTH to provide supervision and leadership. The table below sets out the support the SGS has received from NCTH on a monthly basis in year one of the contract

Type of supervision/leadership	Number of hours per month
Clinical Leadership Mentoring	4 hours per month
Psychologist	1 hour per month
Endocrinology	1 hour per month
GP supervision	4 hours per month
SALT	1 hour per month
Meetings: MDT/Clinical Governance	5 hours per month
Total hours	16 hours per month

7.3 Numbers of Assessments

Before a patient can be accepted on to the various treatment intervention pathways within the SGS, they are required to have two assessments (a 'first' assessment and a 'second' assessment) undertaken. The table below sets out the number of first and second appointments undertaken in year one of the pilot.

Month	First Assessments	Second assessments	Total
September	2	0	2
October	17	0	17
November	10	8	18
December	14	18	32
January	19	22	41
February	17	6	23
March	34	30	64
April	35	22	57
May	44	25	69
June	26	32	58
July	18	27	45
August	23	30	53
Total	259	220	479



As demonstrated by the graph, the number of first and second assessments has increased as more clinicians began to work in the service, and as more clinicians were signed off to undertake assessments on their own. When the service commenced, more first assessments were undertaken. Over time, the number of second assessments has increased, as patients flow through the treatment pathway.

To ensure that the wait between a first and second assessment is not long the SGS leadership team review patient flow pathways, and modify the number of first and second appointments available as necessary. The flow of patients through the service has also been impacted by the challenges detailed below with regard to the patient waiting list, and a delay in patient details being shared with the SGS. The current waiting time between first and second assessments is less than 6 weeks.

7.4 Additional Support/Complex Case work

NCTH are sub-contracted to provide the care for a patient with 'additional support needs' or who may be considered to have a complex presentation, if needed.

During the first year of the SGS had eight patients who were classified as having additional support needs. Broadly, these individuals were considered to have additional support needs based on the following reasons:

- uncertainty around gender identity
- learning disabilities,
 - o questions around capacity,
- complex mental health presentations
- additional time and communication adjustments needed
- service users with a forensic history

Of these eight patients, one person who had a forensic history was referred to NCTH for their assessment and ongoing treatment. One other patient received a joint additional support appointment, with a SGS clinician and an NCTH clinician.

The other six additional needs patients were seen within the SGS, by psychologists with previous training in mental health and learning disabilities. These patients were discussed in MDT meeting and in individual clinical supervision sessions with NCTH, and therefore could be supported by the clinicians within the SGS without needed to be transferred to NCTH.

7.5 Second Surgical Recommendation Assessments

Some surgical procedures require two assessments to be undertaken with a patient before a referral for surgery is made. The first assessment can be undertaken by SGS clinicians, but the second assessment must be undertaken by a clinician from NCTH.

NCTH are sub-contracted to undertake all second surgical assessments for SGS patients. In year one of the contract, NCTH undertook 36 second surgical recommendation assessments.

7.6 Care Navigators

The Care Navigator aspect of the SGS launched in January 2024. Patients of the SGS can access support from Care Navigators in the following ways:

- 1-1 appointments
- In person drop-in
- Online drop-in
- Presence at The Clare Project drop-in
- Monthly online Pizza and Paperwork space
- Email support
- Events and workshops run to respond to frequently raised topics
- Events and drop-ins

Since starting in January, the Care Navigators run regular in-person drop-in sessions, as well as online drop in sessions, to increase access opportunities for all patients.

Care Navigators have also run the following events:

- Self-Care workshop
- Pizza and Paperwork/ Doughnuts and Deed Polls - an online community space to work on personal gender affirming administration tasks.

A monthly East Sussex group was tried and transformed into online Pizza and Paperwork due to lack of interest in the former and the popularity of the in person Pizza and Paperwork.

In total, there were 57 referrals for 1:1 work with people between January 2024 and August 2024.

Drop-in and event attendance per month at online and in person SGS drop-ins and one off events

January	9
February	5
March	9
April	8
May	6
June	6
July	18
August	1

Short 1-1 drop-in sessions set in the community

January	-
February	-
March	4
April	9
May	10
June	7
July	9
August	7

8. Challenges

As a newly launched service, there have been a small number of challenges to overcome.

8.1 Waiting List and patient transfer

The SGS has received patients from other gender Identity clinic waiting lists that meet the eligibility criteria for the Sussex pilot. The largest number of patients have

come from the Tavistock gender clinic. There have been several issues encountered when receiving the transferred patient list from the Tavistock, which have impacted on operational delivery of the SGS, and some delays to ongoing service provision. The SGS leadership team have worked with the Tavistock leadership team to address and overcome these.

8.2 The Cass Review

In April April 2024 NHS England published the Cass Review. The Cass Review is an independent review of children and young people's gender services. There are a number of recommendations that will be implemented as a result of this. Although the review focused on services for young people below the age of 18 years, the terms of reference included the relationship between the paediatric service and adult services given that transfers of care can be made to adult services from 17 years of age. The review team were also interested in how services are delivered to young people between the age of 17 and 25 years of age. As a result, the final report makes a number of observations that are relevant to adult transgender services.

A key recommendation is that NHS England launch a review into the operation and delivery of adult GICs, alongside a planned review of the adult gender service specification. All GICs have received a letter from NHS England, asking for the following immediate actions:

- Board level discussions on the findings of the Cass Review report and their relevance to the adult service
- Prepare adult GICs to fully participate in future research requirements
- Defer offering first appointments to patients until their 18th birthday
- Ensure adult gender clinics are meeting the requirements of the current service specification, particularly with regard to the assessment process and for those individuals with complex presentations

As a pilot site, SGS has not been involved in the adult GIC review. To date, there has been no impact on the SGS service delivery. However, it is expected that any recommendations that come out of the reviews will influence the future of the pilot. Regular meetings are in place with NHS England to review implications, and SPFT also receive updates from NCTH.

9. Service feedback

9.1 Service user feedback

The service co-developed an evaluation questionnaire for service users to complete after appointments. This questionnaire was developed with community members to ensure that the questions felt relevant and useful. There were initial IT issues in sending questionnaires out to service users. However, 56 questionnaires were completed during the first year of the service. Feedback from patients using the

service has been incredibly positive. The results of the feedback received is set out in appendix 1.

9.2 SPFT Positive Practice awards

In late October 2024 the SGS was shortlisted for three categories in the SPFT Positive Practice awards. The SGS team as a whole was shortlisted in the *Partnership in Practice* category and in the *Equality and Inclusion* category. The SGS Clinical Lead was shortlisted in the *People First (clinical)* category. The award ceremony will take place at the end of November 2024.

10. Service developments

10.1 Year three of the SGS

NHS England have now confirmed that the one-year extension option will be enacted. The SGS leadership team are considering any amendments to the service model for this third year to support the increased flow of patients through the service.

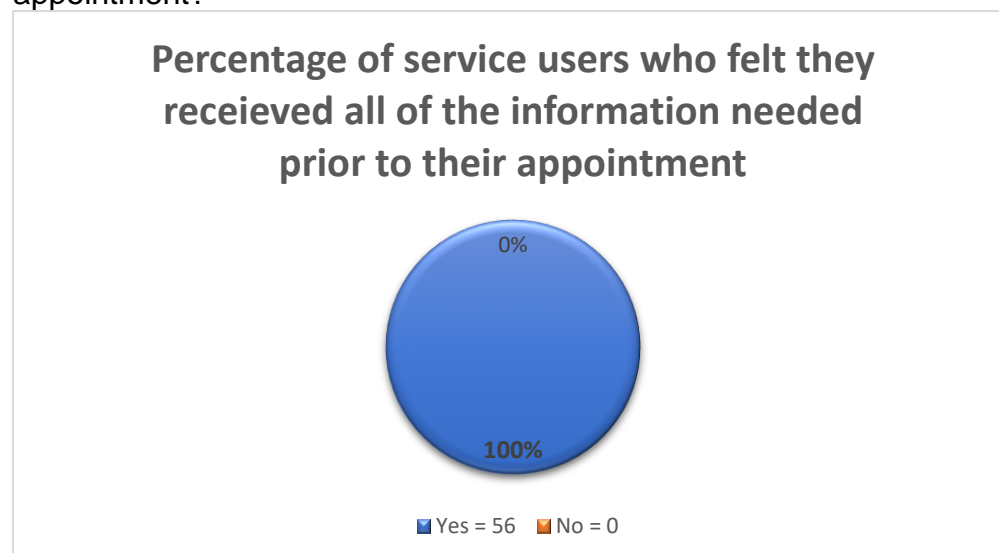
10.2 Pilot evaluation

As a pilot gender service, the SGS will be subject to an evaluation. Other pilot sites were independently evaluated by an organisation commissioned by NHS England. The process for the evaluation of the SGS pilot is still under discussion with NHS England.

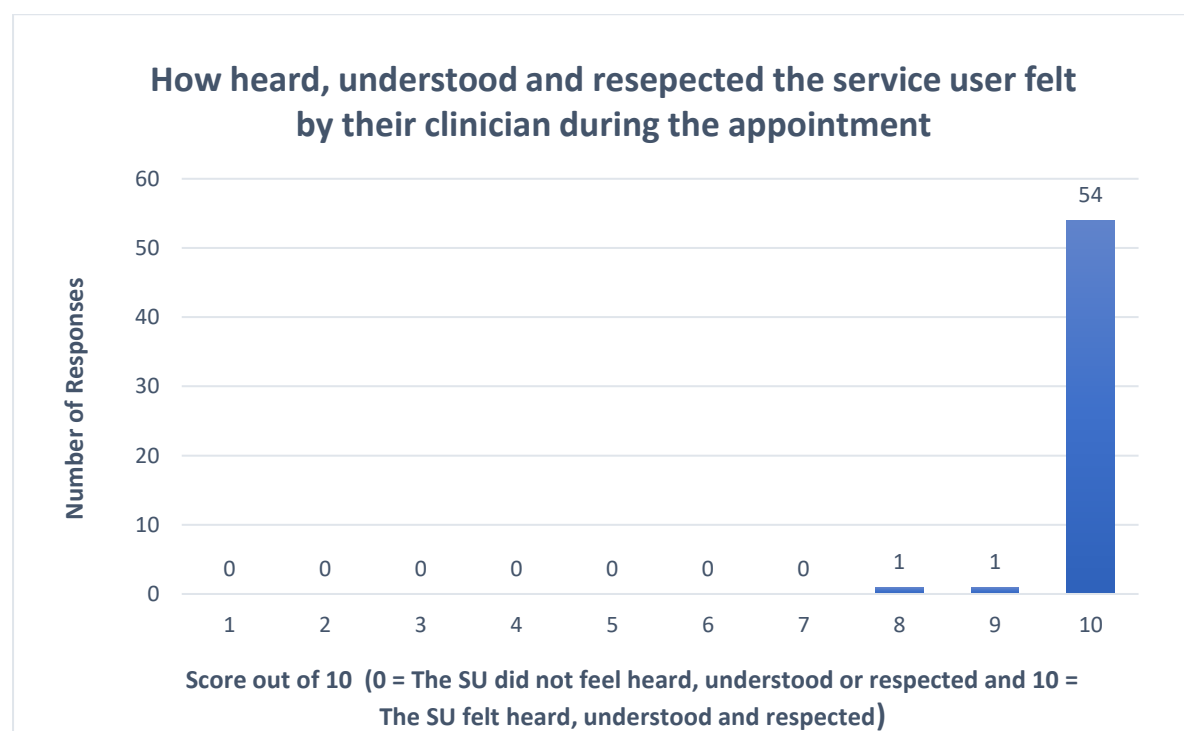
However, the responsibility for the evaluation for Sussex has been passed to the regional NHS England team and the Sussex ICB. Discussions are ongoing about how this will take place.

Appendix 1 - Service user feedback in year 1

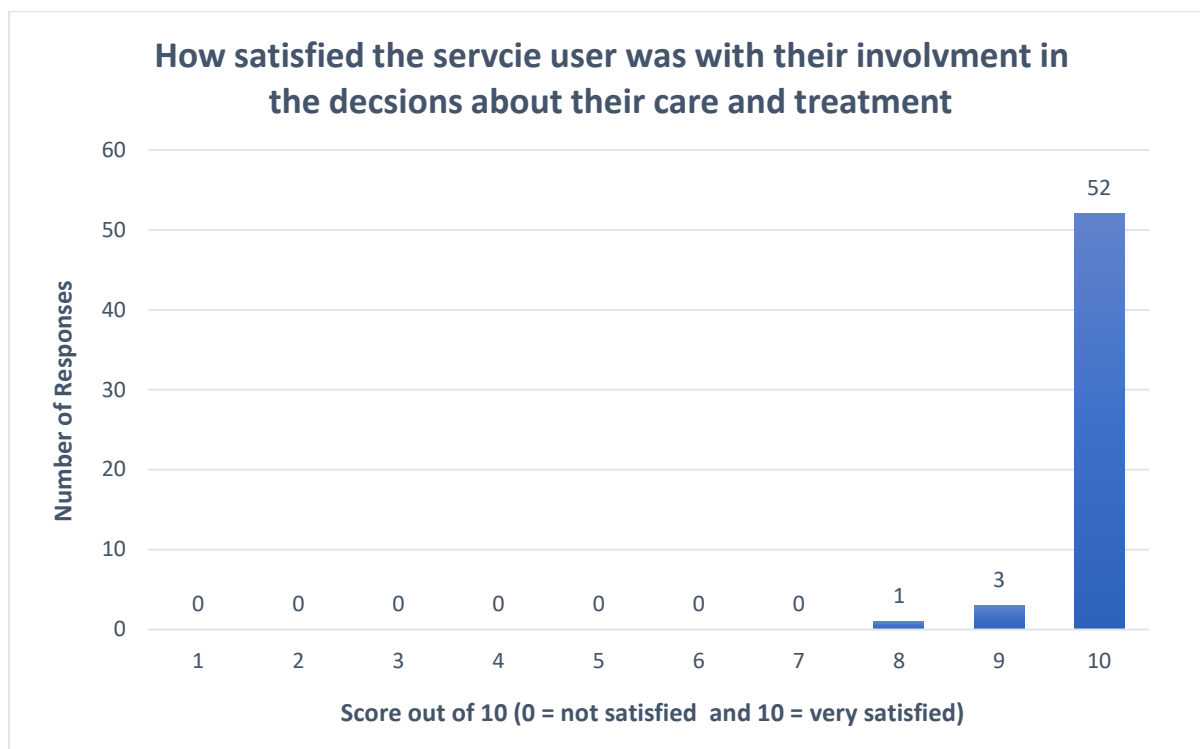
Question 1: Did you get all the information you needed ahead of your first appointment?



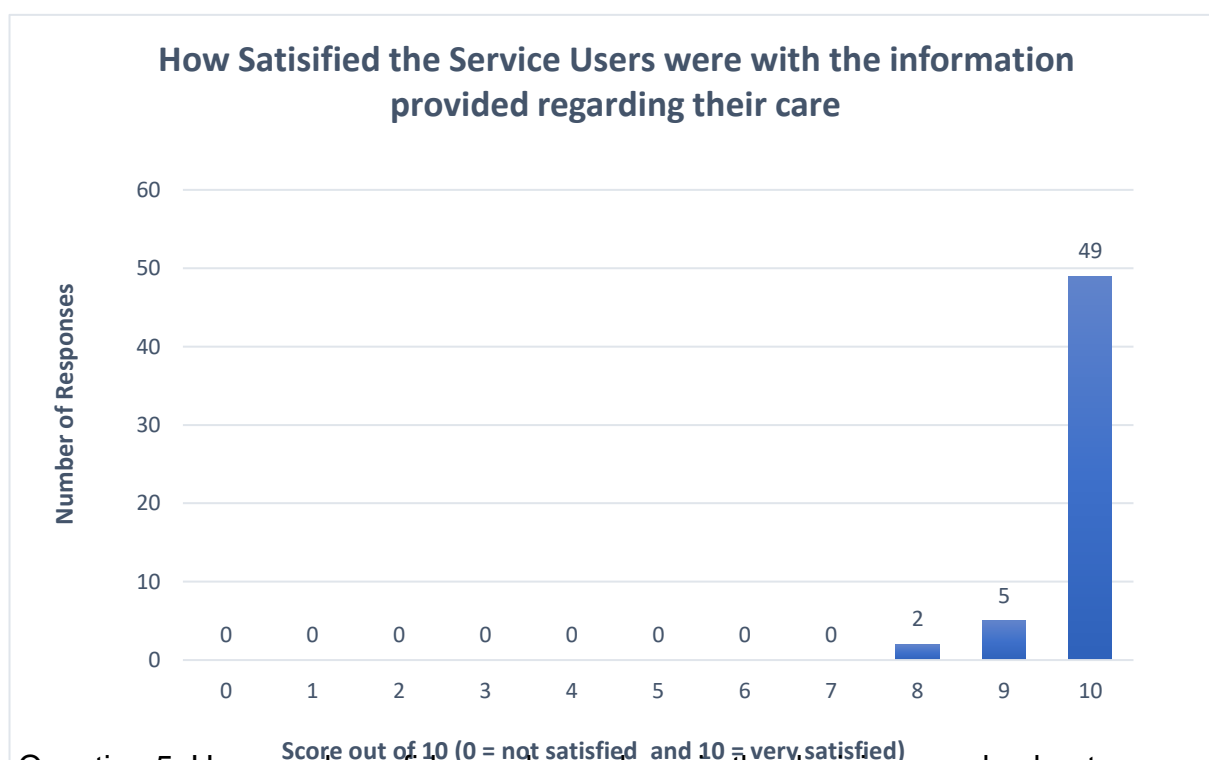
Question 2: How did you find your clinician in the appointment (0 = you did not feel heard, understood or respected and 10 = you felt heard, understood and respected)



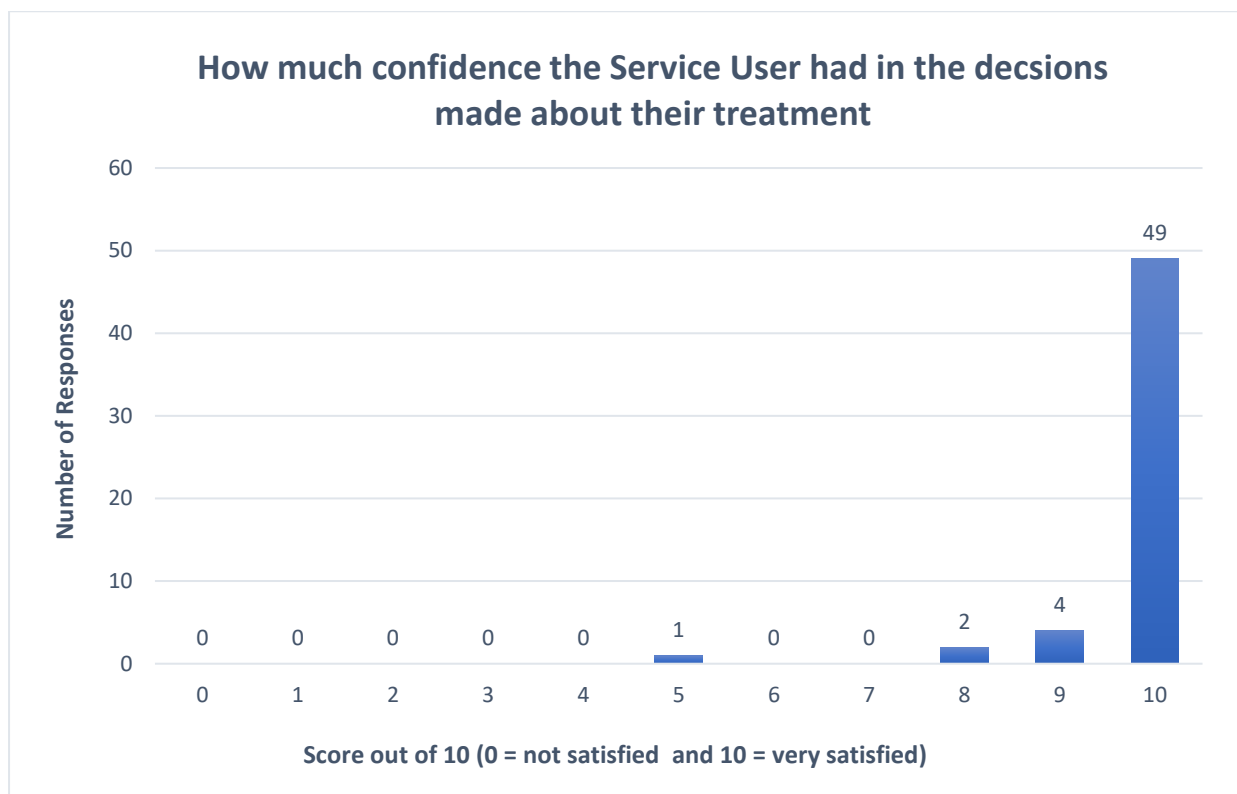
Question 3: How satisfied were you with your involvement in decisions about your care and treatment? (0=not satisfied, 10= very satisfied)



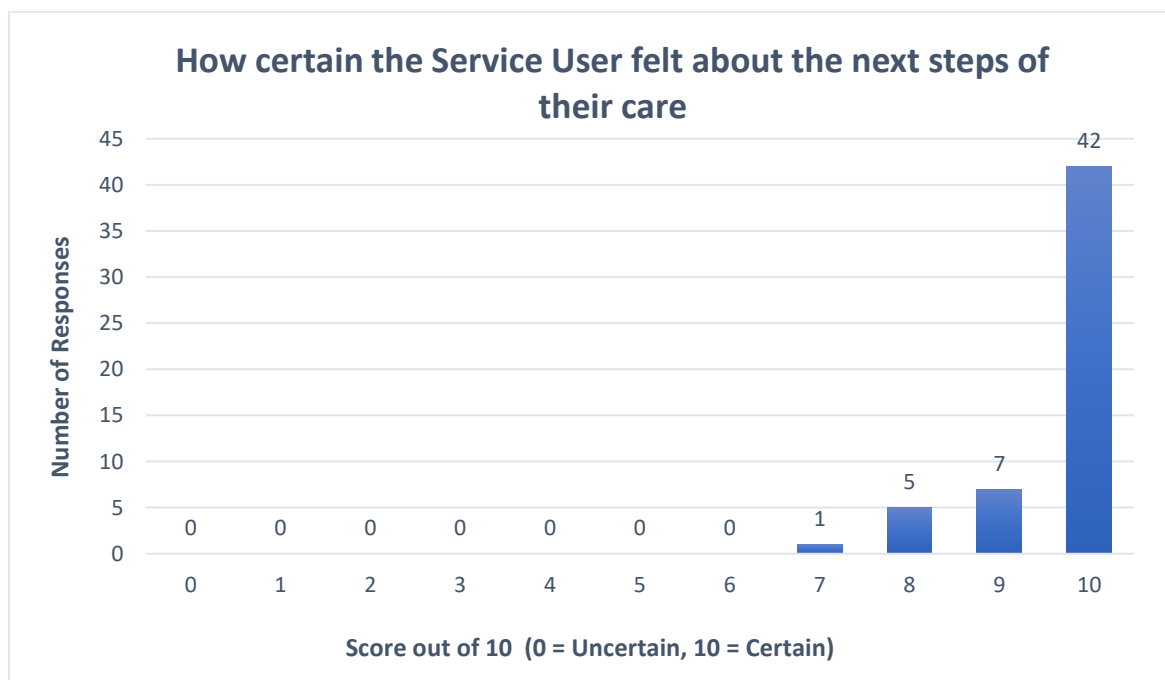
Question 4: How satisfied were you with the information provided regarding your care and treatment? (0=not satisfied and 10= very satisfied)



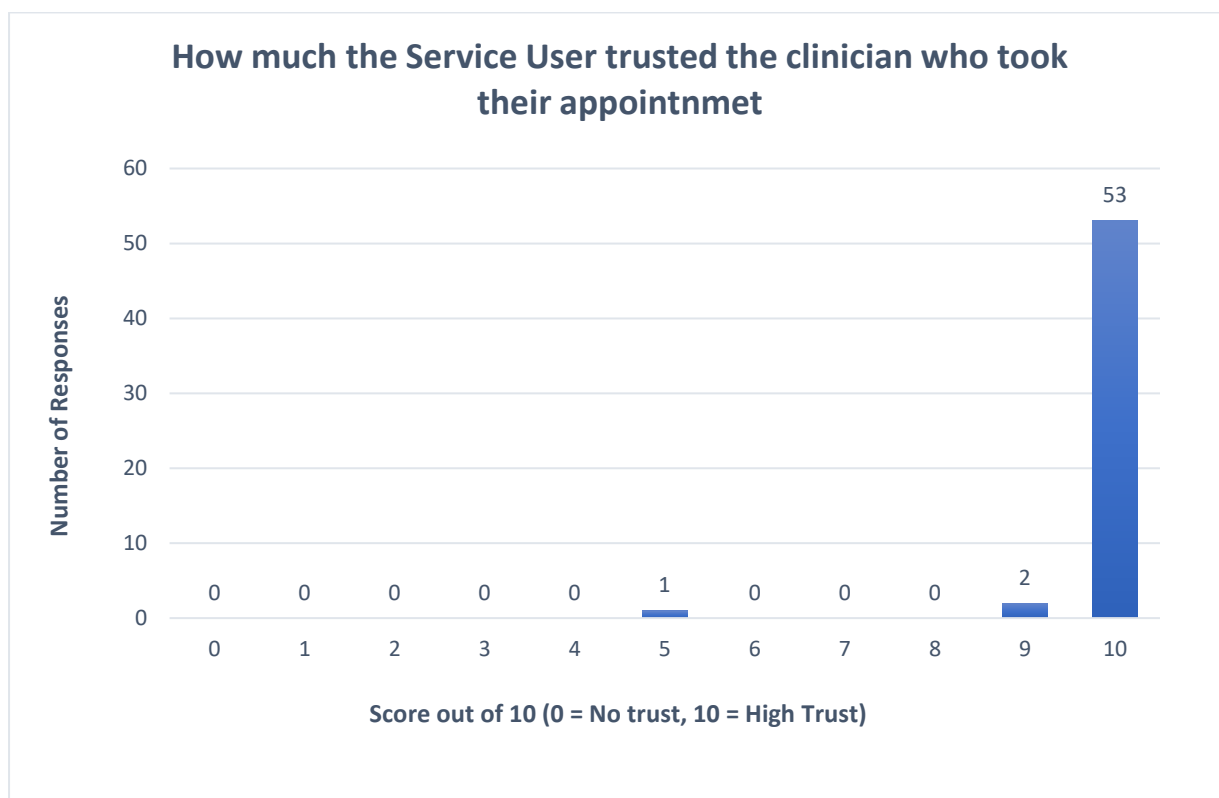
Question 5: How much confidence do you have in the decisions made about your treatment? (0=no confidence, 10= high confidence)



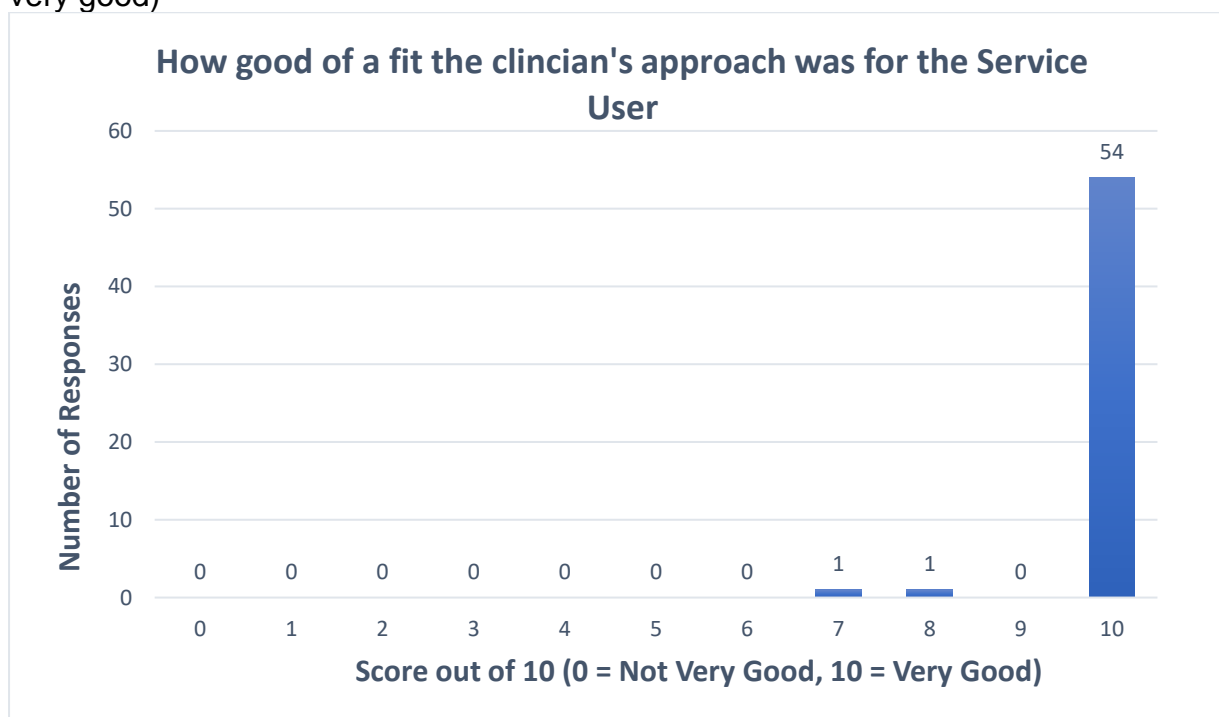
Question 6: Do you know what will happen next with your care? (Where 0= uncertain and 10= certain)



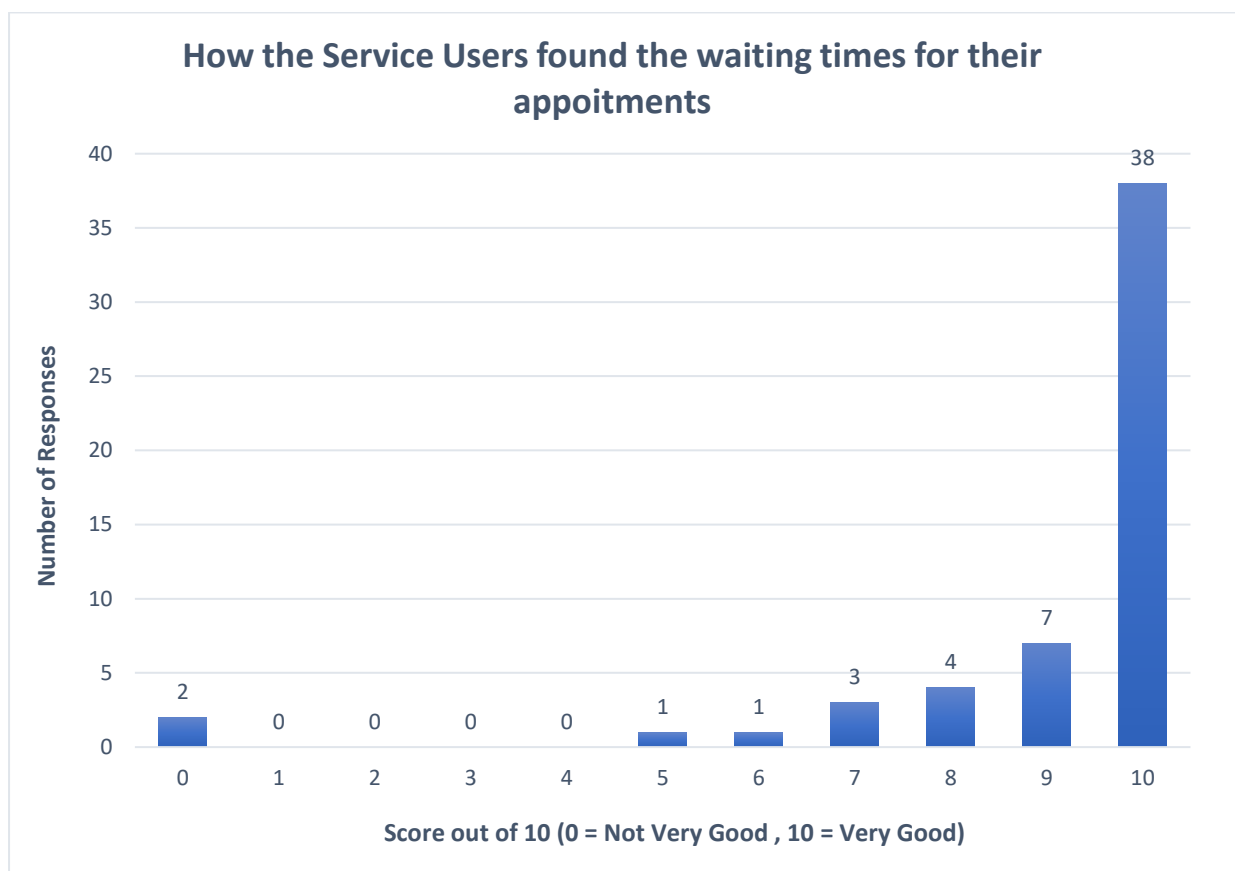
Question 7: Do you trust the clinician you saw at your appointment (0=no trust, 10= high trust)



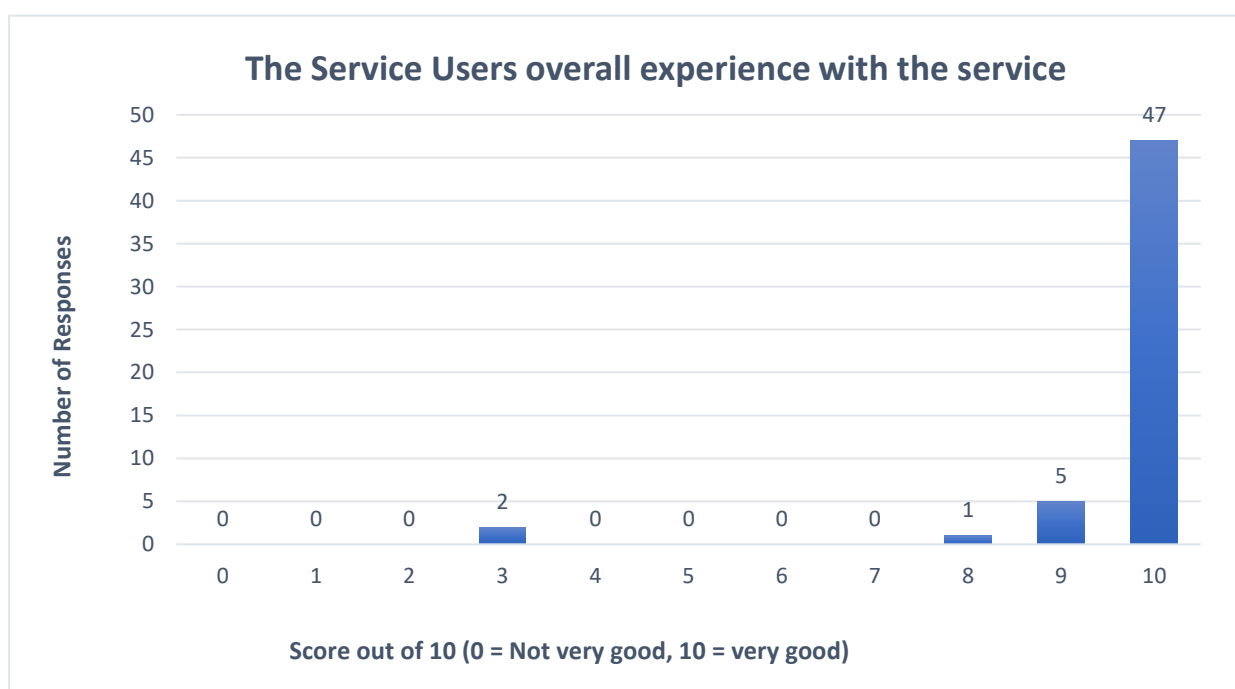
Question 8: The clinician's approach was a good fit for me (0=not very good, 10=very good)



Question 9: How have you found the waiting times for your appointments? (Where 0 is not very good and 10 is very good).



Question 10: Overall how was your experience with the service? (Where 0= not very good and 10 = very good).



Qualitative Feedback

Below are some of the qualitative comments that were received on the evaluation questionnaires

Themes

1. Environment created by clinicians at SGS

12/04/2024 - "*****was absolutely fantastic. I felt able to speak more openly than I ever have before."

26/04/2024 - "Having a nurse who was not cisgender really helped me feel open to discuss what it is like being trans because they knew some of what I was/am going through"

1/08/2024 - "...all the SGS staff, admin / clinical, have been superb and I have felt very comfortable and trusting."

22/08/2024 - "Overall a very safe, comforting and supportive experience."

2. The service user felt heard and understood

26/04/2024 - "...They made sure I felt heard and safe to discuss more difficult aspects of my life."

26/04/2024 - "...finally being heard after 5 years of waiting..."

06/08/2024 - "...made me feel very heard and safe...Previous appointments with other providers I've felt neglected or unheard, but *****and Sussex partnership have made me very comfortable and listened to and acknowledged..."

19/08/2024 - "I felt like I was listened to in the appointment and never felt pressured when answering questions."

3. Helpful and/or informative

10/04/2024 - "All the staff I have spoken to have been nothing but understanding, friendly and helpful. Despite transitioning privately for the past several years, they still had very insightful help..."

01/08/2024 - "...clear transparent communication at all time points. I have particularly benefited and found it very helpful that the service has been keeping me very informed about who they are, what they do, wait times and lots of transparent information at all time points."

19/08/2024 - "I found the clinicians willingness to clarify the questions she asked very helpful, sometimes in appointments like these the questions can be quite broad, making them difficult to answer."

4. Friendly and welcoming

10/04/2024 - "All the staff I have spoken to have been nothing but understanding, friendly and helpful".

20/04/2024 - "***** was a warm and empathetic interviewer."

1/08/2024 - "Very friendly, personable, professional staff..."

22/08/2024 - "*****was absolutely wonderful and was sensitive to the nature of the circumstances, listened, was honest and very personable."

5. High Quality Service

02/04/2024 - "Everything so far has been amazing, thank you! You lovelies are honestly doing great work. I've got the patient participation invite letter but am a little sceptical about what I can input as so far, everything has been so efficient and thought out. Thank you!"

10/04/2024 - "...Despite transitioning privately for the past several years, they still had very insightful help and I'm very happy with the help received so far :)"

12/04/2024 - "...Overall service very good and affirming!"

26/04/2024 - "The entire experiences was amazing...I am so excited to continue down this path."

6. Waiting times

14/05/2024 - "I have been absolutely dreading this appointment for the 6 years I have waited, as it's so high stakes for me that it makes me really nervous, but I felt so comfortable with *****my outlook on transitioning has completely changed".

22/08/2024 - " I was transferred to Sussex GIC on 19/08 and my first consultation was 22/08. From here i have been given time frames for my next appointment and been told the expected wait times to achieve surgery..."

7. Tech Issues

12/04/2024 - " Had some audio/video/ browser based tech issues with Attend Anywhere..."

8. Care Navigators

"Thanks so much for today, was great to meet you and you were so helpful"

"Thank you so much for your help so far. I don't think I'd have gotten here without your help."

19/08/2024 - " In terms of issues, those were only technical, the call quality was a bit poor at times."