FREQUENTLY ASKED QUESTIONS

This leaflet is intended to offer general information for people waiting for an appointment at the Sheffield Gender Identity Clinic (GIC). It addresses areas that people often contact the clinic asking about. Not everything in this leaflet will apply to your personal situation and nor can it go into anything in any great depth. There are things that will be very specific just to you, and we hope that we will be able to deal with the full range of your questions and queries when you come to the clinic.

REFERRALS INTO THE CLINIC

Do I need to live in Sheffield to get a referral?

NO.

We are a national service. This means that you can be referred to our clinic from anywhere in the country or you can request a referral to any GIC within the England.

But, you do need to bear in mind that travel to the clinic and timings of appointments can sometimes be an issue if you have a long way to come.

Sometimes you can get reimbursed for your travel costs. But, the rules for this are set by the Government; they are strict and seem to change on a regular basis. The clinic has absolutely nothing to do with setting the rules. The clinic will advise you of the latest regulations for claiming travel when you attend for your first appointment. For more information about the healthcare travel costs scheme, please visit www.nhs.uk/NHSEngland/Healthcosts/Pages/Travelcosts.aspx

Who can refer me to the clinic?

Only your NHS GP or other NHS professional can make a referral to this clinic.

Your General Practitioner must be in agreement to the referral being made. You must give your informed consent:

- to your GP to share information with the Porterbrook clinic
- to the Porterbrook clinic to contact your GP and seek and share information with them and other NHS services that may have worked with you in the past, or are working with you now.

If you are worried that your GP will not refer you, then ask for a second opinion from another GP. Transgenderism (gender incongruence) and Gender Dysphoria (previously called Gender Identity Disorder) are internationally recognised medical conditions which patients are entitled to seek treatment for. Please be aware that your GP may not have had experience of the Trans community and may not be aware of procedures, but they can find guidance from the Porterbrook clinic or from The Royal College of GP’s Guidance E learning package.

A leaflet is available that discusses your rights regarding the sharing of information, and this will be given to you on your first visit. The Porterbrook Clinic will not be able to see you if you refuse to give consent for information sharing. If you have concerns about things you say at the Clinic being shared with other health professionals, please discuss this with your clinicians.

The referral information we ask for tells us a bit about your ‘medical’ information and history and any health problems that could influence the type of treatments that might be offered further down the line.
We ask these questions for a couple of different reasons:

- It helps us decide whether we are the right place to offer you a service – what we offer may not be suitable to meet your needs
- It helps us see whether there are other things we need to ask about
- It helps us to decide which of our professionals might be best placed to see you to help you to meet your particular goals.

**How do I find out my position on the waiting list?**

The current waiting times can be found on our website, [http://shsc.nhs.uk/service/gender-identity-service/](http://shsc.nhs.uk/service/gender-identity-service/). We aim to update this information monthly.

We are making changes to the service following increased investment via NHS England to help Gender clinics meet increasing demands. We are hopeful that the wait that you experience for the service will be significantly less than that given above, although it is not possible for us to be exact about the timeframe at the moment. The clinic is still in the process of recruiting new staff with the right experience for this highly specialised field, so it will take a while for these changes to come into effect.

**What can I do while I wait for an appointment?**

Everybody’s situation is completely different and personal to them.

The best advice we can give you is for you to keep yourself fit and well, both physically and mentally. This means taking care of your body and your mind. There are links to support groups on our website. You should ensure that you access services that will support you in your local community. These can often be arranged through your Primary Care Provider.

You do not have to wait to be seen at the clinic before you begin your own journey. There are things that you can choose to experience about living in role. You can start to take some of the ‘legal’ steps if you want to. Some of the most common are described later in this leaflet. There are many great sources of support in the community when you know where to look. Some will suit you better than others, so it is important you look around and try things out until you find what works for you. Keeping yourself physically fit and looking after your mental well-being before you start the clinic will help you on your journey and will often speed the process up.

The Porterbrook Clinic will try and see you as quickly as it can, but we cannot offer advice over the phone when you are not officially part of the service. You will not be part of the service until you have completed the assessment phase and your clinicians have developed your ‘action plan’ with you.

We offer appointments between the hours of 09:00 and 17:00. We will try to offer appointments at a time convenient to you within the clinic opening hours. We have planned our clinics across the week to ensure some flexibility, however some appointments are only offered on specific days and times.

**SUPPORT AVAILABLE**

The best way to locate national and local support groups is through the GIRES website. [www.gires.org.uk](http://www.gires.org.uk). Click Resources, then ‘support groups’ under the heading of TransWiki.

This has a comprehensive list of current support groups for trans and gender variant people and their families/friends with contact details available.
What are the implications for me if I am self-medicating?

This is an extremely difficult area to provide advice on.

The clinic advice is that for your health and safety, you should never take medication that is sourced through the internet or on the ‘street’. Starting hormonal treatments that are not medically supervised can be extraordinarily dangerous to your long-term health.

The clinic does understand the enormous pressures that some people will feel about the need to begin a physical transformation. Despite this, the clinic will always advise that you wait until you have seen the specialist Consultant and nurses at the clinic and been part of the decision making process. The timing of drug treatments is very specific to the individual and is dependent on a whole series of considerations that need to be made by you and the doctors working with you.

Going to the GP and asking for hormonal treatment before seeing a specialist Consultant may not be advisable. GPs will often refuse to prescribe as they may not feel that they have the very specialist knowledge required to commence the treatment, and may not be willing to take the risk to your health.

The Porterbrook clinic cannot advise you or another health professional about the commencement of hormonal treatments until we have engaged with you and undertaken a thorough specialist assessment. Once the assessment has been completed and you have understood the implications of treatment to your health, the Consultant and specialist nurses will liaise with your GP to monitor and progress the treatment and ensure that you have the right prescriptions to help you reach your goals.

If you decide to take unlicensed and unprescribed medication, if your GP begins medication, or if you receive medication through an independent service provider while you are on the waiting list, please be clear that this will not have any impact on your position on the waiting list. Your progression to be assessed at the clinic will be exactly the same whether you are taking medication or not.

What happens if I have been seeing someone privately before attending an NHS clinic?

There are many private clinicians around the world of varying quality. As we are an NHS clinic we cannot work in parallel with private clinicians so you will need to make the decision after the initial assessment whether you would like your treatment to be through the NHS or privately.

We will always undertake a full and thorough assessment of everyone referred to the clinic, no matter what services you have received in the past. We will take into consideration your transitional journey to date and this will inform our clinicians and help them in their own decision-making but may not necessarily speed up your journey.
STARTING AT THE CLINIC

What can I expect when I come to the service?

We will not endorse hormone treatment on the first visit. The first thing that happens is that the clinic will offer you an assessment.

The aim of the assessment is to consider whether a diagnosis of ‘gender dysphoria’ is the right diagnosis to describe your experience. This is a really important decision as it will help us to decide with you whether what we do at Porterbrook GIC is the right way of helping you reach your goals. National and international guidelines also advise against prescribing hormones without thorough consideration of the presenting difficulty, which is something that can’t be done in a short time.

Depending on your circumstances, an assessment will take place over a period of anything up to approximately 6 months. The assessment is mainly a discussion about your full medical, psychological, social and occupational picture and takes into consideration any other medical conditions you may have. This happens through a number of assessment appointments with a doctor, a nurse and another specially trained clinician from the multidisciplinary team (MDT). The assessment will consider what you want to achieve and how we can help you to reach those goals.

Additionally some people have difficulties which will not be helped by hormones or surgery and it is very important that these people do not have irreversible interventions which they later come to regret.

Following the assessment, the information you provided will be discussed at a multidisciplinary team meeting. A care plan will be suggested and then discussed with you. We aim to make the care plan with you, so that you are completely clear about what will happen next. The care plan will be regularly reviewed with you during your time with the clinic. Changes are normal as your goals may develop and change over time, or your circumstances change.

We work to the clinical guidelines provided by WPATH Standards of care, & The UK Good practice guidelines for the assessment and treatment of adults with gender dysphoria. These are both available on the internet. The links are given on our website.

Do I have to dress in a certain way?

No, please dress in a way which you feel comfortable with. We have a changing facility in the clinic and you are welcome to use this to change your clothing or appearance. Please ask reception about this upon your arrival.

What treatments are available?

This is completely dependent on what you want to achieve. Porterbrook clinic has access to a wide range of specialist professionals including Drs, Nurses, Occupational Therapists, Speech and Language Therapists, Psychotherapists, and Clinical Psychologists. We can recommend for hormone therapy and surgery at the appropriate clinical stage. We also work closely with many organisations that work in the community, and we will help you to link with these as appropriate to your situation.

Some treatments are given at the Porterbrook clinic, and sometimes we will work with people directly in their communities, homes or workplace.
MOVING THROUGH THE CLINIC

How long will the process take?

- Progression to hormones would follow the completion of the assessment, confirmation of the gender dysphoria diagnosis and an individual's own readiness to transition.

- The time required for living in the gender congruent role is 12-24 months.

- A detailed discussion of bilateral mastectomy & reconstruction for transmen will take place once you have been established in role and taking hormone therapy for a minimum of 6 months.

- A detailed discussion of gender reassignment surgical options and subsequent second opinion referral to another gender clinic would not occur until a minimum of 12 months on hormone therapy. The expected period to surgery then being in the region of two years. This must also include at least one year in some form of meaningful activity/occupation appropriate to your ability level. This can be dated from the start of your full time gender role transition, with associated paperwork.

Your own transition is a very personal and individual journey. It is not a requirement of the clinic to have to undergo gender confirmation surgery. You are able to choose treatment options specifically for you. Indeed, surgery is often not deemed essential for everyone.

When am I considered to be living full time in the gender congruent role?

Living full time in the gender congruent role is an essential and invaluable part of the transition process.

When a person is considered to be living ‘full time in the gender congruent role’ social and occupational changes have to be made.

A person transitions to live in the acquired gender 100% of the time and in all aspects of daily life, i.e. at work, at college, at volunteering, at home, and socially with all friends and all family members.

If someone is choosing to progress to surgery, hormone therapy will be required.

The literature and our own clinical experience, as well as national and international guidelines, are very clear that people have fewer regrets after hormones and surgery if they have had experience living full time in their gender congruent role.

In addition, there are some people who have been very clear at the outset that they wanted surgery then decide 18 months later that they do not want these irreversible interventions. Sadly, there are some people who have de-transitioned and then regretted changes made in the course of their transition (often in the private sector) and we seek to avoid this whenever possible.

Do you make referrals for private surgery?
Yes, you are welcome to ask a private surgeon to perform surgery using a referral from us that you have obtained free at the point of provision as an NHS service. Nevertheless, we wont be able to advise on the expertise nor qualifications of the surgeon, only as to your suitability for surgery.

**Do I need to provide documentary evidence?**

The clinic will take a copy of your Deed Poll or Statutory Declaration and your name will then change on your clinic record. You will also need to inform your GP of change of name, Your GP should have your NHS records updated and you should be issued with a new NHS number, please let us know when this is completed.

As part of the transition process you will need to formally update your identity in various ways. An example of this is with

- services - banks, building societies,
- utility bills – gas, electricity, water,
- official documents – driving licence, passport

The clinic does not need to see proof and it is your responsibility to complete this. You will be required to provide full documentary evidence when applying for the gender recognition certificate.

**How do I change my name?**

There are a number of options available:

- Apply for change of name via Deed Poll through
  - Internet sources,
  - A solicitor, or
  - Statutory Declaration via the Magistrates Court.

Please note that you must be 18 years or over to change your name via the courts.

The cost may vary depending on which option you choose to pursue.

**What documents can I change?**

Once you have officially changed your name, virtually all documents can be changed with the exception of your birth certificate by presenting your Deed Poll or Statutory Declaration. You require a Gender Recognition Certificate (GRC) for your birth certificate be changed.

If you come up against any difficulties with changing your name using your deed poll at any establishments, follow the complaints procedure or seek support from the appropriate regulatory Ombudsman.

**Do I have to have a Gender Recognition Certificate (GRC)?**

No, although it will mean you are not legally recognised as your acquired gender.

The clinic does not have the capacity to provide medical reports for GRC. Currently there are proposals for a self declaration application process which would negate the need for medical reports.
My treatment has stopped progressing. What do I do?

Treatment can fail for many different reasons. Quite often these are to do with people feeling that they cannot change their role in the way the guidelines, both national and international, require. If this seems to be the case for you then please discuss it with your clinician at the next appointment. Or request an appointment by contacting the clinic. There may be some helpful suggestions which could try to move your situation forward. In addition, between appointments it may be necessary for you to take some time to consider what is really, personally, important for you in your life.

Where your situation may be exceptional in nature, a meeting may be arranged with the wider clinical team to think about your circumstances and find a way forward.

We hope that this leaflet has gone some way to answering your questions but you may have questions that are not covered in the above if this is the case then you are welcome to contact the clinic and we will endeavour to try and answer your questions in a timely manner but it may not always be possible and can only be answered when you have an appointment with one of our staff members.