Freedom of Information Act 2000 disclosure log entry

Reference

23-24208

Date response sent

14/09/23

Subject

GIC Referrals, Appts, Budgets, Staffing 2017/18 to Date,

Details of enquiry

The questions are as follows for years 2017/18 to date.:

1. How many referrals received
2. How many people were discharged from the service
3. Number of people on the waiting list at the end of each year.
4. How many appointments offered in total
5. How many appointments were not attended
6. Most common reason for non attendance
7. How many 1st appointments offered
8. How many 2nd appointments offered.
9. Average number of appointments offered per patient.
10. Average number of appointments attended per patient.
11. Average wait time between 1st and 2nd appointments in days
12. Average time between 1st appointment and discharge, where discharge is noted as treated completed, in days.
13. How many clinical/diagnostic staff (FTE) are employed at the GIC each year.
14. How may administrative/support staff employed at the GIC each year?
15. Budget /Spend (total in £) for each year for the GIC.
16. Breakdown of Budget/Spend foreach year by:
    a. Clinical/diagnostic staff
    b. Administrative/support staff
    c. Administrative Costs
    d. Other Costs

Response sent

1. How many referrals received.

Total number of referrals received during financial year	
Financial Year	**Appointments**
2017/18	3,041.00
2018/19	3,636.00
2019/20	3,418.00
2020/21	3,018.00
2021/22	4,090.00
2022/23	3,438.00
2023/24 to July	1,448.00

2. How many people were discharged from the service

Total number of patients discharged during financial year	
Financial Year	**Appointments**
2017/18	442
2018/19	917
2019/20	1,186
2020/21	1,058
2021/22	1,923
2022/23	2,037
2023/24 to July	376

Explanatory Notes A:
1 During years 2022/23 and 2023/24 some discharges related to transfers to the waiting list of new Adult Gender Clinics, where it is anticipated that the patients will receive treatment.

3. Number of people on the waiting list at the end of each year.

Number of patients on waiting list for their 1st appointment	
At Year End Per Financial Year	**Appointments**
2017/18	3,450
2018/19	5,405
2019/20	7,025
2020/21	8,841
2021/22	11,326
2022/23	12,740
2023/24 to July	13,770

4. How many appointments offered in total

Total number of appointments offered	
Financial Year	**Appointments**
2017/18	10,472
2018/19	11,171
2019/20	10,484
2020/21	8,171
2021/22	10,568
2022/23	11,045
2023/24 to July	4,478

5. How many appointments were not attended.

Appointments not attended			
	DNA'd (Patient Did Not Attend)	Cancelled by patient	Cancelled by provider
2017/18	1,149	771	1,611
2018/19	999	1,220	1,907
2019/20	939	1,359	1,348
2020/21	1,024	437	480
2021/22	1,005	1,068	915
2022/23	1,246	1,068	958
2023/24 to July	349	480	566

6. Most common reason for non attendance
   We do not hold this data.
   See Explanatory Note B point 3 (to the right →.)

Explanatory Notes B:
1 The term 'cancelled' applies to both:
   - Booked appointments cancelled without being rescheduled.
   - Booked appointments moved to a different date/time.

2 The EPR system (electronic patient record) only reports cancelled appointments and booked appointments. There is no automated field to complete to indicate change of booking/s to alternative date/s.

3 The ERP system captures instances of DNA by patient but has no dedicated data fields to capture their reasons and cannot automate reports on DNA reasons. These reasons are only occasionally narrated within the patient's file notes.

7. How many 1st appointments offered.

Total number of 1st appointments booked	
Financial Year	Appointments
2017/18	2,039
2018/19	1,596
2019/20	1,564
2020/21	602
2021/22	715
2022/23	1,004
2023/24 to July	292

8. How many 2nd appointments offered

Total number of 2nd appointments booked	
Financial Year	Appointments
2017/18	1,736
2018/19	1,213
2019/20	919
2020/21	668
2021/22	668
2022/23	932
2023/24 to July	351

Explanatory Notes C:
1 At NHSE's requests, the GIC has been prioritising surgical update assessments, which are beyond the scope of their initial appointments.
   These are booked when a patient reaches the top of the waiting list for their surgical pathway, and only if their last formal assessment of consent and suitability for gender reassignment surgery was more than 2 years ago.

9. Average number of appts offered per patient,

Average number of booked appointments **per patient/per year,**	
Financial Year	Average Booked Appointments
2017/18	2.24
2018/19	2.21
2019/20	2.06
2020/21	2.17
2021/22	2.25
2022/23	2.47
2023/24 to July	1.97

Explanatory Notes D:
1 Averages for numbers of appointments booked for patients per annum can only be calculated from appointments occurring within the same financial year (April to March) (Q 9)

2 We do not hold the data on any differentials between appointments offered and appointments booked. (Q9)

10. Average number of appts attended per patient

Average number of appointments attended per financial year	
Financial Year	Appointments
2017/18	1.74
2018/19	1.64
2019/20	1.61
2020/21	1.85
2021/22	1.82
2022/23	2.02
2023/24 to July	1.63

Explanatory Notes E:
1 Averages for numbers of appointments attended for patients per annum can only be calculated for the year in which the 2nd appointment occurred. (April to March) (Q 10)

11. Average wait time between 1st and 2nd appts in days

Average days wait between 1st and 2nd appointment, per financial year	
Financial Year	Appointments
2017/18	225.57
2018/19	255.23
2019/20	335.25
2020/21	380.19
2021/22	584.08
2022/23	442.72
2023/24 to July	311.59

Explanatory Notes E:
1   It is not possible to produce an annual average from data of patients whose 1st and 2nd appointments straddled two or more years, because the resulting average would not be annual, so these have been excluded from data provided at Q11. calculations.

12. Average time between 1st appt and discharge, where discharge is noted as treated completed, in days.
We confirm that we do not hold this data.

Average time between 1st appt and discharge can vary enormously and does depend on the pathway and patients' chosen outcomes.

Any calculation of average LoS (Length of Stay), cannot be calculated without an operating model of fixed parameters, which we cannot define, as the GIC patient's pathway is not linear and patients' needs are heterogeneous.

Examples of variable data which prevents us from performing simple calculations for average LoS are listed below. The list is not intended to be exhaustive, but to provide you, as the requester, with an increased awareness of the range of options and variances which occur.

- a patient assigned female at birth seeking the full pathway will stay in the service and pathway for longer than a patient that does not wish to pursue the genital surgical pathway.

- Types of procedures and interventions sought vary in number of appointments required,

- the presence of unique co-occuring needs vary in nature and number of appointments required,

- the impact of slotting in GIDS patients to continue their treatment at GIC affects availability of appointments,

- the impact of slotting in current patients requiring urgent surgical reassessments, as mandated by NHSE, when the date of their surgery is close, and it is than 2 years since last assessed.

- whether patients require further appointments post-surgery. NHSE requires us to keep patients open on our systems whilst they complete their surgical pathway, (which we are not responsible nor commissioned to deliver), we cannot know how long these patients will be with us, nor how many appointments they would require.

As you can see from the above, extrapolation of the average GIC LoS would require creation of a multitude of modelling scenario's, which would be out of scope of the Freedom of Information Act 2000 (FOIA) which applies only to recorded information (data) held at the time of the request and does not require us to answer questions where this would involve the creation of new information.

Furthermore, and as explained above, this question can only be answered by creating a multitude of new modelling scenarios which as well as being out of scope for FOIA would take, by our estimations, far longer to produce that the 18 hours/£450 resources limit set by the ICO under s12 of FOIA for responding to a whole request. We are therefore unable to answer this question as we do not hold the requested data.

13. How many clinical/diagnostic staff (FTE) employed at the GIC each year.
    Staff Working at the GIC, by Fiscal Year
    (1st April to 31st March)

	Admin WTE	Clinical WTE	Total WTE
2017/18	40	26	66
2018/19	50	25.3	75.3
2019/20	36.9	22.6	59.5
2020/21	37.5	26.3	63.8
2021/22	48.5	28.1	76.6
2022/23	45.15	31.6	76.75

Abbreviation: WTE: Whole Time Equivalent

14. How may administrative/support staff employed at the GIC each year
    See above response (Q13)

15. Budget /Spend (total in £) for each year for the GIC
    GIC Total Budget/Spend, Reported by Fiscal Year
    (1st April to 31st March

Year	Budget per Fiscal Year
2017/18	£3,841,387
2018/19	£4,504,257
2019/20	£4,810,363
2020/21	£5,922,839
2021/22	£5,952,453
2022/23	£6,749,000

16. Breakdown of Budget/Spend for each year by:
    a. Clinical/diagnostic staff
    b. Administrative/support staff
    c. Administrative Costs
    d. Other Costs

We do not hold our data in this way, and can only report against pay and non pay categories, as shown below.

Year	Pay Administrative/ Support staff	Pay Clinical/ Diagnostic Staff	Total Pay	Total Non pay	Total cost
2017/18	£1,086,623	£1,370,059	£2,456,682	£1,384,705	£3,841,387
2018/19	£1,198,270	£1,602,358	£2,800,628	£1,703,629	£4,504,257
2019/20	£1,399,945	£1,699,298	£3,099,243	£1,711,120	£4,810,363
2020/21	£1,781,025	£1,782,689	£3,563,713	£2,359,126	£5,922,839
2021/22	£2,010,940	£1,885,415	£3,896,355	£2,056,098	£5,952,453
2022/23	£1,692,075	£2,509,553	£4,201,628	£2,547,372	£6,749,000