

Freedom of Information Act 2000 disclosure log entry

Reference

18-19119

Date sent

02/08/2018

Subject

GIDS (Gender Identity Development Service) Processes

Details of enquiry

Please provide copies of all documents held or produced by the Gender Identity Development Service of your organisation related to their activities.

The following document types are of interest to me: practice guidelines, policies, procedures and protocols, pathway documents, care algorithms, strategy documents. The relevant timeframe is 01.01.12 to 12.07.18.

Response Sent

As a full review of all our documents for the period January 2012 to July 2018 would involve a review of over 11,000 files, we have estimated that it would cost more than the statutory limit to manually search all of these. I hope you will understand that the Trust does not have unlimited resources. However in the interest of facilitating this request with best endeavours, we have attached documents and listed below detailed links, where appropriate, which meet the subject matter and time frame of the materials you have requested.

Copies of all documents held or produced by the Gender Identity Development Service related to their activities from 01st January 2012 to 12th July 2018.

1. Practice guidelines

- We use current relevant clinical practice guidelines, which are listed below. Previous versions of these guidelines (i.e. dating back to 2012) can be found on each website archive.
- WPATH guidelines, found at https://www.wpath.org/media/cms/Documents/SOC%20v7/SOC%20V7_English.pdf
- Endocrinology Society clinical practice guidelines, found at <https://www.endocrine.org/guidelines-and-clinical-practice/clinical-practice-guidelines/gender-dysphoria-gender-incongruence>
- BPS Guidelines and Literature Review for Psychologists Working Therapeutically with Sexual and Gender Minority Clients (2012)
- http://www.bps.org.uk/sites/default/files/images/rep_92.pdf

- British Society for Paediatric Endocrinology and Diabetes (2010)
<http://www.bsped.org.uk/clinical/docs/BSPEDStatementOnTheManagementOfGID.pdf>
- Royal College of Psychiatrists Good Practice Guidelines for the Assessment and Treatment of Adults with Gender Dysphoria, College Report CR181, (2013)
<http://www.rcpsych.ac.uk/files/pdfversion/CR181.pdf>
- Our service is delivered with reference to current Equalities legislation (The Equalities Act 2010 Equality Act 2010 – provides the legal framework. GD is legally a protected characteristic. States that GD person needs to be treated equally as another person of the preferred gender. Have the right be free from harassment; employers are obliged to allow trans-people to take time off work for treatment)
- NICE guidelines where appropriate and applicable.

2. Policies

- We follow our Trust standard policies regarding a range of issues such as information governance, clinical audit, etc. These are available on our Trust website, which is indicated below:
- <https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/>
- <http://www.tavistockandportman.nhs.uk/sites/default/files/files/About%20us/Policies/Raising%20concerns%20procedure%20Aug%2014.pdf>

3. Procedures and protocols

- Our procedures and protocols are currently being updated. However, recent versions can be found in our NHS England specification, found at <https://www.england.nhs.uk/wp-content/uploads/2017/04/gender-development-service-children-adolescents.pdf>

4. Pathway documents

- Our pathway documents are being updated. Current pathway documents can be found within our NHS England specification, which can be found following the link below:
<https://www.england.nhs.uk/wp-content/uploads/2017/04/gender-development-service-children-adolescents.pdf>
- We have also included:
 - 2014: GIDS information for parents leaflet
 - 2013: GIDS service leaflet
 - 2012: GIDS service leaflet

5. Care algorithms

- We did not have any relevant care algorithms to disclose.

6. Strategy documents

- We believe that our strategy documents are commercially sensitive, and therefore exempt from the Freedom of Information Act under section 43 (1) as we believe that our strategy documents, past and present, are commercially valuable and under our ownership. The GIDS service

considers that this is information that is actively being used in business against which there are competitors; the disclosure of strategy documents will jeopardise this business, If section 43 (1) is deemed not to be applicable, the GIDS service feels that section 43 (2) should be applied, as information about service strategy will prejudice GIDS commercial interests as a provider contracted and commissioned by NHS England and elsewhere. Providing strategic plans will jeopardise GIDS commercial activity as a procured service within the competitive health market.

Gender Identity Development Service Leaflet (GIDS) Information for Parents

Patient Information



The Tavistock and Portman NHS Foundation Trust is completely committed to equality for all regardless of age, disability, race, sexual orientation, gender, religion, marital or civil partnership status.

The Gender Identity Development Service (GIDS), established in 1989, is a highly specialised clinic for young people presenting with difficulties with their gender identity. Some feel uncomfortable with the gender they were assigned at birth; others are unhappy with the gender role that society requires. Some of these young people may go on to identify as transgender or gender variant, while others may come to identify themselves as boys, girls or people who are simply different.

Many adults with gender identity problems describe difficulties in childhood. Often they complain of having been very unhappy children and teenagers and that their feelings had not been understood early enough by parents and professionals. As adult gender identity has its roots in infancy, childhood and adolescence, it can be beneficial to provide specialist help to young people and their families at an early stage.

The Gender Identity Development Service (GIDS) is a highly specialist nationally designated service.

We offer a national highly specialist service which is staffed by a multi-disciplinary staff group, all of whom have established expertise and specialised training in the mental health of children and adolescents. The staff team works closely together in order to make the best use of different team members' expertise and skills.

A highly specialised and integrated multi-disciplinary team is the internationally-recognised model for working with young people with issues about their gender.

We have clinics in London and in Leeds and run a regular outreach service in Exeter.

Who we try to help

We see children and adolescents (up to the age of 18) who are experiencing difficulties in the development of gender identity, and their families or carers. This includes children who are unhappy about their assigned sex and wish to belong to the other one. Some may be boys who feel or believe they are girls and vice versa; others may show a strong preference for playing with toys mostly used by the other sex, for instance, a boy who mostly plays with dolls. Some children feel comfortable only when playing with peers of the other sex, or may cross dress from time to time. Some adolescents and their families or carers can experience crisis over problems of gender identity which can result in lasting distress for both the young person and their family or carers.

Children who have been diagnosed with clinical disorders of sex development (DSD) and other endocrine conditions can be referred to this service if there are concerns about their gender identity development.

The Service also offers counselling to children of transsexual parents or parents who present with other gender identity issues.

We also offer an 'on request' expert court reporting service.

Although young people may be experiencing difficulties in this area, they or their families may not feel ready to accept help from the service directly, or their attendance at one of our clinics may be impracticable. In such cases, we are available to consult with professionals already involved, such as the General Practitioner, Mental Health Professionals, Health Visitors, Teachers and Social Workers, etc.

How we look at problems

We consider issues of gender identity in the context of normal developmental processes as a child moves from infancy to childhood and into early and later adolescence. The aims of the Service are to support the different strands of development by exploring the nature and characteristics of the child's or young person's gender identity and how concerns about gender may be affecting other areas of development. We think that relationships are as important as other factors in contributing to any difficulties the child or young person may experience. Therefore we pay attention to what is happening within the child's/adolescent's relationships with the family, school and other social agencies.

Who are we in the GIDS?

The staff at the GIDS have a range of professional backgrounds, but work together as a multi-disciplinary team to deliver the same service. Our team includes:

- Child and adolescent psychiatrists.
- Clinical psychologists.
- Social workers.
- Child and adolescent psychotherapists.
- Paediatric endocrinologists: medical doctors for children and young people who are experts in the physical changes associated with growing up (hormonal changes).
- Clinical Nurse Specialists: nurses with further training in endocrinology or a related area.
- Senior Trainees: people usually at the end of their professional training, or completing additional training.

What happens when young people and their families come to the service?

Initially, we offer an assessment, usually 3 to 6 appointments, with one or two mental health professionals from the team. (This number is flexible depending on the uncertainty and complexity of the child's gender identity development.) Our specialist assessment is a multi-factorial one, aiming to explore and understand the child or young person's past and current gender identification, as well as their development across a number of domains .

The specialist assessment will take into account:

- The child's direct experience of gender and the body the child's knowledge and understanding of pubertal and gender identity development.
- The parents' or carers' stance towards the child's gender identification.
- The relationship between the young person and parents or carers relevant parental or family spiritual, religious and cultural beliefs current national and international professional guidance on the treatment of gender dysphoria.

The aim of the GIDS assessment may be to arrive at a diagnosis, but it is also important to keep in mind the many complexities and uncertainties in the development of a young person's gender identity.

In the assessment period we also ask children and parents or carers to fill in a range of questionnaires. To complete the assessment, we sometimes meet with school staff and people from other services involved with the child to see how they can best offer support.

After the assessment is completed, there are many options. What happens next will depend on the young person's age, gender experiences and the support they and the family are already receiving. We explore with the family the options available at the conclusion of the assessment period.

What options are available?

After the assessment, you and your family or carers may be offered support and guidance from our team for as long as is needed (up to the age of 18).

The support and guidance we provide is tailored to each young person and their family or carers. We see a range of different gender identities and expression and the gender outcomes for the young people we see are various and individual. We also aim to ease emotional, behavioural and relationship troubles associated with gender identity difficulties.

We often work alongside local services such as Child and Adolescent Mental Health Service (CAMHS) CAMHS who can provide additional support for you and your family.

We can offer, as agreed between the clinicians and young people and their families:

- Exploratory family discussions.
- Therapeutic exploration with the child/young person .
- Family therapy.
- Individual child psychotherapy.
- Professional consultations.
- Parents' groups .
- Young peoples' groups.
- Occasional review of the young person's gender identity development.
- Hormone treatment.

Endocrinological assessment

After the initial assessment, depending on the child's age and the issues they want to explore, a further assessment meeting can be arranged with one of the five paediatric endocrinologists in the GIDS team. These doctors can discuss the child's feelings around the physical changes of puberty, and order a range of physical tests to look at the young person's pubertal status, and their hormonal and chromosomal characteristics.

One of the options may be to prescribe hormone blockers, which can stop the physical changes and developments associated with puberty for a limited period of time. This is considered to be a fully reversible treatment. Taking hormone blockers can allow time to think about and explore feelings about gender identity, without having to worry about the body changing in a way that is difficult to cope with.

If the young person decides to meet with the paediatric endocrinologist, they will be referred by their Tavistock clinician to the endocrinologists who work with our team. It is important that they also stay in touch and meet regularly with the Tavistock professionals in London or Leeds who first saw them, who when possible will also attend the endocrine clinics. The paediatric endocrinologists are part of the GIDS team and referrals are made to the endocrine clinics by the Tavistock clinicians.

Confidentiality

Great care is taken in ensuring the confidentiality of children and their families who seek help via our service. In order to support the child, we may liaise with other professionals, with parental consent. On the rare occasion when we consider that a child might be at risk, we may liaise with other professionals without consent, but we will always seek to inform parent(s) and children of our actions.

How to be seen at GIDS

The Service accepts referrals from across the UK. The preferred route of referral is through a local Child and Adolescent Mental Health Service. However other professionals in Health, Social Services and Education departments, as well as young people and their families, can contact the Service directly to discuss a possible referral.

Are there facilities for patients with special needs?

The Tavistock Centre has lifts to all floors, and there is a accessible toilet on the ground floor next to the library. If you are in a wheelchair and would like some help with the lift, do not hesitate to ask at reception. There are induction loops on the telephones for patients with hearing difficulties in the Tavistock Centre. Sign language interpreters are also available.

If you have any concerns regarding access, and to discuss facilities for people with special needs at the Leeds service, please contact the GIDS service administrator.

How to contact us

Please contact our service administrator on +44 (0)20 938 2030/1 for any general enquiries about our service.

Address for referral

Dr Polly Carmichael
Consultant Clinical Psychologist & Clinical Director
Gender Identity Development Service
Tavistock Centre
120 Belsize Lane
London NW3 5BA

If you wish to use a referral form, this can be found on our website:
www.tavistockandportman.nhs.uk/genderidentityissues

Who can be contacted if questions about your treatment

If you would like to discuss any concerns with someone independent of your therapy please contact the Patient Advice and Liaison Service (PALS) office on 020 8938 2523 or via email at pals@tavi-port.nhs.uk and someone will get back to you. You can also leave positive feedback about the treatment you have received from us with the PALS office.

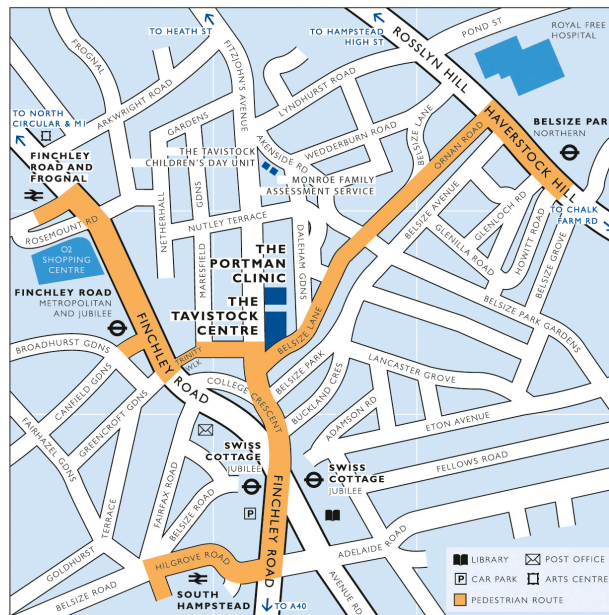
Alternatively, if you have a complaint you can contact the Complaints Manager via e-mail at Complaints@tavi-port.nhs.uk. You can also leave positive feedback about the treatment you have received from us with the PALS office.

On request we can provide this publication in your first language or another format (e.g. electronic version or large print).

Travel expenses

You may be eligible to have your travel expenses paid. Information will be sent with your first appointment letter.

How to reach us?



Tube/ London Underground

We are located near the following tube stations:

- Swiss Cottage - 5 minute walk (Jubilee Line).
- Finchley Road - 10 minute walk (Jubilee & Metropolitan Line).
- Belsize Park - 15 minute walk (Northern Line).

Overground/ National rail

- Finchley road and Frognal (London Overground).
- South Hampstead (Euston Link).

Bus routes

There are a number of bus routes.

13, 31, 46, 82, 113, 268, C11 (all go through Swiss Cottage)

13, 82, 113 (all go through Finchley Road)

46 (through Fitzjohn's Avenue)

268 (through Belsize Avenue)

Arriving by car

There are no onsite car parking facilities for patients (unless bringing very young children to appointments) but there are several pay and display bays on the roads surrounding the clinic. If you plan to travel by car and wish to park in our child and family bays, please contact us in advance to avoid being told that you cannot park on the day of the appointment.

Leeds Base

If you live in the North of the UK, it is likely you will be offered an appointment at our Leeds base. Further information and a map will be sent with your first appointment letter.

Painting by Annabel Obholzer

Written referrals should be addressed to:

Dr Polly Carmichael,
Consultant Clinical Psychologist,
Gender Identity Development Service
The Tavistock and Portman NHS Foundation Trust
Tavistock Centre, 120 Belsize Lane, London NW3 5BA
Tel: 020 8938 2030

The Gender Identity Development Service is associated with the Department of Paediatric Endocrinology at University College London Hospitals.

Are there facilities for patients with disabilities?

The Tavistock Clinic and the Monroe Family Assessment Service are wheelchair accessible. The Tavistock Clinic has lifts to all floors. Unfortunately, Gloucester House, The Tavistock Children's Day Unit and the Portman Clinic are not wheelchair accessible. If you are a patient at the Portman Clinic your clinician can arrange to see you in the Tavistock Clinic if necessary.

There are induction loops on the telephones for patients with hearing difficulties in the Tavistock Clinic but this is not available in the other buildings. Sign-language interpreters are also available.

There is a disabled toilet in the Tavistock Clinic on the ground floor next to the library. If you're in a wheelchair and would like some help with the lifts, do not hesitate to ask at reception. If you have any concerns regarding access, please first discuss it with the reception in your department. If you have further questions, please contact the PALS officer.

Who can I contact if I have any questions or worries about my treatment?

The Patient Advice & Liaison Service (PALS) is here to help with any questions or concerns that you may have about your treatment. Please contact our PALS officer on 020 8938 2523 or email on pals@tavi-port.nhs.uk

The PALS officer can also be contacted if you require this leaflet in another format (e.g. electronic version or large print).

Address

Gender Identity Development Service
The Tavistock and Portman NHS Foundation Trust
Tavistock Centre, 120 Belsize Lane, London NW3 5BA
Tel: 020 8938 2030
Fax: 020 7794 1879
Web: www.tavi-port.org

For practical information about the Trust and maps on how to get there, please see the 'Information for Patients' leaflet.

A NATIONALLY DESIGNATED SERVICE BY THE NATIONAL
SPECIALISED COMMISSIONING GROUP (NSCG)

Gender Identity Development Service

PATIENT INFORMATION



An increasing number of young people are presenting with difficulties with their gender identity. Some feel uncomfortable with the gender they are born with; others are unhappy with the gender role that society requires.

Many adults with gender identity problems describe difficulties in childhood. Often they complain of having been very unhappy children and teenagers and that their suffering had not been understood early enough by parents and professionals. As adult gender identity has its roots in infancy, childhood and adolescence, it is advisable that help is provided at an early stage, and that awareness of these problems is promoted.

Gender Identity Development Service

This specialist service is staffed by a multi-disciplinary group with contributions from child and adolescent psychiatry, clinical psychology, social work, psychotherapy and paediatrics. The staff work closely together in order to make the most of different team member's expertise and skills.

Who we try to help

We see children and adolescents (up to the age of 18) and their families, who are experiencing difficulties in the development of gender identity. This includes children who are unhappy about their own biological sex and wish to belong to the other one.

Some may be boys who feel or believe they are girls and vice versa; others may have a strong preference to play with toys mostly used by the other sex, for instance, a boy who mostly plays with dolls.

Some children feel comfortable only when playing with peers of the other sex, or cross dress from time to time. Some adolescents and their families experience crisis over problems of gender identity leading to considerable concern and distress.

Children with disorders of sex development (DSD) and other endocrine conditions can be referred if there are concerns about their gender identity development.

The Service also offers counselling to children of transsexual parents or parents who present with other gender identity issues. Assessment and advice are provided to the Courts at their request.

Although young people may be experiencing difficulties in this area, they or their families may not feel ready to accept help from the Service directly or their attendance is impracticable. In these cases, we would be available to consult with any professionals already involved, such as the General Practitioner, Mental Health Professionals, Health Visitor, Teachers and Social Workers etc.

How we look at problems

We consider issues of gender identity in the context of developmental processes. The aims of the Service are to support development particularly that of gender identity, by exploring the nature and characteristics of the child's or young person's gender identity. We think that relationships are as important as other factors in contributing to the child's difficulties. Therefore we pay attention to what is happening within the child's/adolescent's relationships with the family, school and other social agencies.

Confidentiality

Great care is taken in ensuring the confidentiality of the client's contact with the Service. We think that it is important, usually with the family's consent, to liaise with other professionals when appropriate.

How we can be reached

The Service accepts referrals from across the UK. The preferred route of referral is through a local Child and Adolescent Mental Health Service. However other professionals in Health, Social Services and Education departments as well as young people and their families can contact the Service directly to discuss a possible referral.

Written referrals should be addressed to:

Dr Polly Carmichael,
Consultant Clinical Psychologist,
Gender Identity Development Service
The Tavistock and Portman NHS Foundation Trust
Tavistock Centre, 120 Belsize Lane, London NW3 5BA
Tel: 020 8938 2030

The Gender Identity Development Service is associated with the Department of Paediatric Endocrinology at University College London Hospitals.

Are there facilities for patients with disabilities?

The Tavistock Clinic and the Monroe Family Assessment Service are wheelchair accessible. The Tavistock Clinic has lifts to all floors. Unfortunately, Gloucester House, The Tavistock Children's Day Unit and the Portman Clinic are not wheelchair accessible. If you are a patient at the Portman Clinic your clinician can arrange to see you in the Tavistock Clinic if necessary.

There are induction loops on the telephones for patients with hearing difficulties in the Tavistock Clinic but this is not available in the other buildings. Sign-language interpreters are also available.

There is a disabled toilet in the Tavistock Clinic on the ground floor next to the library. If you're in a wheelchair and would like some help with the lifts, do not hesitate to ask at reception. If you have any concerns regarding access, please first discuss it with the reception in your department. If you have further questions, please contact the PALS officer.

Who can I contact if I have any questions or worries about my treatment?

The Patient Advice & Liaison Service (PALS) is here to help with any questions or concerns that you may have about your treatment. Please contact our PALS officer on 020 8938 2523 or email on pals@tavi-port.nhs.uk

The PALS officer can also be contacted if you require this leaflet in another format (e.g. electronic version or large print).

Address

Gender Identity Development Service
The Tavistock and Portman NHS Foundation Trust
Tavistock Centre, 120 Belsize Lane, London NW3 5BA
Tel: 020 8938 2030
Fax: 020 7431 8320
Web: www.tavi-port.org

For practical information about the Trust and maps on how to get there, please see the 'Information for Patients' leaflet.

**A NATIONALLY DESIGNATED SERVICE BY THE NATIONAL
SPECIALISED COMMISSIONING GROUP (NSCG)**

Gender Identity Development Service

PATIENT INFORMATION



An increasing number of young people are presenting with difficulties with their gender identity. Some feel uncomfortable with the gender they are born with; others are unhappy with the gender role that society requires.

Many adults with gender identity problems describe difficulties in childhood. Often they complain of having been very unhappy children and teenagers and that their suffering had not been understood early enough by parents and professionals. As adult gender identity has its roots in infancy, childhood and adolescence, it is advisable that help is provided at an early stage, and that awareness of these problems is promoted.

Gender Identity Development Service

This specialist service is staffed by a multi-disciplinary group with contributions from child and adolescent psychiatry, clinical psychology, social work, psychotherapy and paediatrics. The staff work closely together in order to make the most of different team member's expertise and skills.

Who we try to help

We see children and adolescents (up to the age of 18) and their families, who are experiencing difficulties in the development of gender identity. This includes children who are unhappy about their own biological sex and wish to belong to the other one.

Some may be boys who feel or believe they are girls and vice versa; others may have a strong preference to play with toys mostly used by the other sex, for instance, a boy who mostly plays with dolls.

Some children feel comfortable only when playing with peers of the other sex, or cross dress from time to time. Some adolescents and their families experience crisis over problems of gender identity leading to considerable concern and distress.

Children with disorders of sex development (DSD) and other endocrine conditions can be referred if there are concerns about their gender identity development.

The Service also offers counselling to children of transsexual parents or parents who present with other gender identity issues. Assessment and advice are provided to the Courts at their request.

Although young people may be experiencing difficulties in this area, they or their families may not feel ready to accept help from the Service directly or their attendance is impracticable. In these cases, we would be available to consult with any professionals already involved, such as the General Practitioner, Mental Health Professionals, Health Visitor, Teachers and Social Workers etc.

How we look at problems

We consider issues of gender identity in the context of developmental processes. The aims of the Service are to support development particularly that of gender identity, by exploring the nature and characteristics of the child's or young person's gender identity. We think that relationships are as important as other factors in contributing to the child's difficulties. Therefore we pay attention to what is happening within the child's/adolescent's relationships with the family, school and other social agencies.

Confidentiality

Great care is taken in ensuring the confidentiality of the client's contact with the Service. We think that it is important, usually with the family's consent, to liaise with other professionals when appropriate.

How we can be reached

The Service accepts referrals from across the UK. The preferred route of referral is through a local Child and Adolescent Mental Health Service. However other professionals in Health, Social Services and Education departments as well as young people and their families can contact the Service directly to discuss a possible referral.