



**Healthwatch England**  
Skipton House  
80 London Road  
London SE1 6LH  
Tel 03000 68 3000  
[www.healthwatch.co.uk](http://www.healthwatch.co.uk)

**healthwatch**

Richard Jeavons  
Director of Specialised Commissioning  
NHS England

30<sup>th</sup> July 2015

Dear Richard,

Many thanks for providing further details about the work NHS England is doing on Gender Identity (GI) services.

We acknowledge the efforts made by NHS England's Patient and Public Voice Team to facilitate a number of workshops in order to hear issues from trans people, including children, young people and their parents.

Nonetheless, we feel that resolution for patients' concerns is a long way off and we note that additional concerns with access to GI services are continuing to rise up through the local Healthwatch network. Therefore, we seek a response to the questions outlined below:

We are pleased to hear in the update from Jeremy Glyde, Head of Clinical Effectiveness Team for Specialised Commissioning, on 6 July that you have decided to invest an extra £4.4 million in providers of GI services to help get waiting lists down. Please can you outline:

- How and when these additional investments will be deployed?
- How and when this decision will be communicated to patients?

In our previous correspondence you committed to developing a communication plan that was due to be implemented in January 2015, however we note that this is more than six months overdue. Although we appreciated there was a discussion on the communication strategy during the Trans-Gender Network meeting in May 2015, this is still to be developed and implemented. We now seek clarification on:

- The reasons why the communication strategy has been delayed and when it will be delivered.
- How you plan to communicate to patients (1) who funds the GI Clinics and other services that patients may use on their pathway (2) what patients can expect from these services (3) the reasons for the delays in GI services and the steps you are taking to improve access to services (4) what is and is not within your remit as a commissioner of GI services - including the work that you have done to understand the responsibilities of CCGs and to engage with them on the issue (5) how they can access psychological support while waiting to progress on the pathway (6) how they can make a complaint on services commissioned by NHS England and/or by CCGs.

We would like to raise a specific point regarding the communication activity in support of the prioritisation work that took place in June. As we understand it, the decision around the prioritisation of facial hair removal services has been delayed due to a lack of evidence.

However, neither Healthwatch England nor local Healthwatch felt that it was made explicit that this was the only element that required a recommendation by the Clinical Priorities Advisory Group (CPAG) as part of the prioritisation process. Had this been made clear in the consultation communications then Local Healthwatch could have focused their conversations with patients accordingly and in a timely manner. Therefore, we seek clarification over:

- What is being done to gather relevant and specific evidence from patients on facial hair removal issues and experiences.
- How you intend to deal with the wider issues raised by all those who fed in to the consultation and will be expecting a response.

Those local Healthwatch who have been involved in this work to date have offered to pass on requests for information specifically relating to facial hair removal services to their local transgender service users. We understand that you are aiming for a revised policy to be presented to CPAG in September. If local Healthwatch receive clear details about what evidence you need collecting, by when and who they should send information to, this would allow gathering and sharing patients' experiences in a more constructive way.

Please note that we have committed to updating local Healthwatch on this issue so this email and your response will be published in the public domain. We would appreciate a response within 20 working days of receipt.

As agreed, we would also appreciate receiving quarterly updates on your commitments included in your letters received in October 2014, January and May 2015. We have outlined in the **appendix** attached the list of areas which we would like to be updated on in order to inform local Healthwatch and the public of progress on your work.

Kind regards,

Katherine