

FAQs about the Nottingham Centre for Gender Dysphoria

Do I have to dress or act in a certain way?

No. People have many different modes of dress which are suitable to wear in public and any of them are fine. Please dress in a way which feels most comfortable to you.

Does coming to Nottingham Centre for Gender Dysphoria cost anything?

No. As an NHS clinic the service is free at the point of delivery. (If you've paid tax you've already paid for it.)

Can you give me a Gender Recognition Certificate (GRC)?

No. Although, if appropriate, we can write a report which you can submit to the Gender Recognition Panel. For more information please visit www.gov.uk/apply-gender-recognition-certificate

Can I go private?

Yes. 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 decide after your initial assessment if you would like each part of your treatment to be undertaken within the NHS or privately.

How long will the process take?

This will vary from person to person. The assessment period is usually around six months. If you wish to have genital surgery you must live in your preferred gender role for more than a year with the expected period to surgery being in the region of two years. This must include at least one year in some form of occupation appropriate to your ability level. This is dated from the start of full-time gender role transition, with associated paperwork.

Will I get hormones on the first visit?

We will not endorse hormone treatment on the first visit. This is because we need to find out more about you than just one visit will allow and we have a three stage assessment (an individual appointment with two clinicians and then one with both together) which needs to be completed first.

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. National and international guidelines also advise against prescribing hormones without having considered the presenting difficulty thoroughly, which is something that can't be done in a short time.

The other advantage of the three appointment system is that you can be assured of having been assessed by two experienced clinicians who are familiar with you and are able to manage your ongoing care and any future referrals requiring more than one signature.

Because of the health risks hormones will not usually be prescribed to people who smoke.

When can I be considered for bilateral mastectomy ('Top Surgery')?

Bilateral Mastectomy is usually considered after you have been formally established in role and on your hormonal regimen for a minimum of six months.

Do I need to have a certain level of fitness or weight to have surgery?

Yes. In order for us to recommend you for surgery your body mass index (BMI) needs to be

less than or equal to 30. [You can work out your BMI here](#). The current guideline for waist measurements is less than or equal to 102 centimetres (40 inches). There may also be other physical conditions that would affect whether or not you would be eligible for surgery, for example many surgeons will not operate on people who smoke. These can be discussed with the relevant surgeon.

Do you undertake private surgery?

The surgeons we work with are in another NHS Trust for their NHS work. They also often undertake private work but this is managed separately from their NHS work. You would need to contact them directly about this.

Are private referrals accepted for NHS surgery?

No. Referrals for NHS surgery need to come via the NHS. If you are seeing someone privately and hope for surgery within the NHS we recommend that you discuss the matter with them.

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. We won't, however, be able to advise on the qualifications of the surgeon, only as to your suitability for surgery.

If you are considering private surgery it is wise to have considerably more money available than the cost of the surgery as the NHS will not fund any revision necessary to that surgery in the case of things going wrong. The view seems to be that it is the responsibility of the operating surgeon to correct any mistakes, and not the responsibility of the taxpayer to fund that.

I have a diagnosed mental health problem – will that stop me having surgery?

Not necessarily. We need your mental health problem to be stable and well managed for some time, but having a mental health problem such as (but not limited to) depression, schizophrenia or bipolar disorder will not exclude you from receiving treatment, including hormones or surgery.

My psychologist, psychiatrist, or GP won't refer me to the Nottingham Centre for Gender Dysphoria. What do I do?

We recommend that you ask for a second opinion as Transsexualism (Gender Incongruence) and Gender Dysphoria (previously called Gender Identity Disorder) are internationally recognised medical conditions which patients are entitled to seek treatment for.

I can't get funding. What do I do?

Much of trans healthcare is nationally commissioned, however some is not, so in the first instance it is important to ask your GP where the block in funding is coming from. Some things such as Facial Feminization Surgery (FFS) may not be funded, but if you believe that the treatment you are seeking should be funded you should speak to your GP.

If the funding is delayed by the GP Consortia it may be that they have limited budgets so some may defer funding until the next financial year. If the consortia refuse funding outright, or you feel they are delaying unnecessarily, you can make a complaint to them or failing that, [contact the Health Service Ombudsman](#).

How long is the waiting list?

The waiting list varies depending on funding and staffing levels. Unfortunately the clinic does not have direct control over this, being as we are within a Trust within the wider

NHS.

Currently, the waiting time for a first appointment is around sixteen months (in April 2016). It is worth noting that many patients do not attend on the day of the appointments without contacting us in advance so we can give the appointment to someone else. This drives our waiting times up unnecessarily.

Why do I have to do the Real life Experience (RLE)?

The RLE is the period of time when a person lives 100% of the time in their preferred gender. This means that they present in that gender to all of their friends and family, including parents, children, grandparents, etc., and at their place of occupation - whether a university, workplace, voluntary work or other occupation, which would include using the correct toilet, changing enrolments or pay slips, etc.

The literature and our own clinical experience, as well as the 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 preferred gender. In addition, there are some people who, having been very clear that they wanted surgery at the outset, decide even as late as 18 months that they do not want these 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 I have to be attracted to people of a gender that is the 'opposite' to my own preferred gender?

No. People coming to Nottingham Centre for Gender Dysphoria can be any of the diversity of sexualities other people can be. These could be Asexual, Bisexual, Gay, Kink/BDSM, Heterosexual, Lesbian, Queer, etc.

My treatment has stopped progressing. What do I do?

Treatment can fail to progress 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 meeting - they are there to try to help move things forward as far as the latitude of the guidelines allows and may be able to offer some helpful suggestions. It may be that seeing another clinician who has different thoughts about ways to move forward would also be helpful and your clinician can arrange this for you. Between these meetings it may be useful to take some time to consider what is really, personally, important for you in your life.

In some cases, where the decisions being considered are exceptional in nature, a "panel meeting" may be arranged in which you will meet with the whole Nottingham Centre for Gender Dysphoria team to think about your circumstances and to find a way forward.

Can I claim travel expenses?

If you are registered disabled we may be able to reimburse reasonable travel costs. You should download a Travel Claim Form. For more information about this, visit www.nhs.uk/pages/home.aspx