

Standard Operating Procedure (SOP)

Children and Young Person – Gender National Referral Support Service (CYP-GNRSS)

Document Change History

Version	Date	Editor	Details of significant changes
1.0	25/10/2022	REDACTED Section 40(2) Personal Data	First issue of document

Governance/Sign off procedure

All Standard Operating Procedures (SOPs) should be completed and submitted to the relevant Arden & GEM Commissioning Support Unit senior manager for initial approval.

The internally approved SOP will then be submitted to Clinical Governance, Quality & Risk Committee for authorisation. The date of the committee will be the approved date of implementation.

Review Process

A review of this current SOP will be every 12 months.

Authorisation History

Review Date:	14/06/2023
Approved by:	SMT
Expiry Date:	14/06/2024
Date approved at Clinical Governance, Quality & Risk Committee:	14/06/2023

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Introduction

This SOP sets out the principles that NHS Arden & Greater East Midlands Commissioning Support Unit (Arden & GEM CSU) Children and Young Person - Gender National Referral Support Service (CYP-GNRSS) will follow. The CYP-GNRSS will provide an administrative function, to enable the efficient processing and holding of referrals for children and young people who require consideration of a referral to the Children and Young Persons (CYP) provider commissioned by NHSE England (NHSE).

Service Background

Gender Dysphoria describes the distress that is caused by a discrepancy between a person's gender identity and that person's sex classified at birth (and the associated gender role and/or primary and secondary sex characteristics). Assigned sex is classified at birth based on the appearance of the genitals. The term transgender is used where a person's gender identity is different to their sex assigned at birth.

All Gender services will be managed according to NHSE contractual requirements.

Purpose and Scope

The purpose of the CYP-GNRSS is to provide a single point of access referral management service which will facilitate the efficient and timely collations and subsequent holding of referrals for CYP providers.

Referrals can be made by General Practitioners (GPs), community NHS providers (such as health visitors), Child and Young Person Mental Health Services, secondary care paediatric clinicians and non-NHS professionals, including social services, schools and colleges of further education who may have concerns about a young person's gender identity development and associated difficulties.

The CYP--GNRSS are also able to support referrers, service users, parents, legal guardians and carers with information about:

- The status of a referral
- Anticipated waiting time to assessment, as outlined by NHSE
- How to access services (how to make a referral)

Referrals are submitted via email to the CYP-GNRSS the NHSE approved referrals form found at [How to refer to GIDS - Gender Identity Development Service](#) These referrals are managed by the CYP-GNRSS using the CYP-GNRSS Blueteq database, a bespoke referral management internet-based software programme.

Acknowledging that patients on the CYP-GNRSS holding list will be waiting to see a CYP Gender Dysphoria (GD) specialist for quite some time, it was recognised that these patients would need to be assessed for risk, management of risk, and appropriateness of referral in to CYP-GD services.

To support this, Nottingham Healthcare Foundation Trust (NHFT) have been commissioned to provide this clinical service working collaboratively with Arden & GEM CSU to review all patients held on the list through a clinical Multi-Disciplinary Team (MDT), collectively known as Referral Review Guidance Service (RRGS)

In scope

- Referrals received for service users - who are registered with a GP in England.
- Secondary care paediatric referrals from clinicians based in England and Wales.
- Referrals for service users aged 17 years and under.
- Where a service user displays behavioural features consistent with gender dysphoria characteristics.
- Due to long waits to access the service, CYP-GNRSS will identify and contact patients who have reached 17 years and 6 months to facilitate a smooth transfer to an adult service where appropriate.
- A dedicated phonenumber for non-clinical queries to support referrers, patients, and carers.
- To prepare referrals for review by NHFT (RRGS).
- Provide administrative support to RRGS by actioning the outcomes of the review.

Service limitations

- The CYP-GNRSS is unable to accept self-referrals
- The CYP-GNRSS cannot offer clinical advice or support

Roles and Responsibilities

All staff are required to work within their professional limitations and ensure onward support is sought where required and according to agreed escalation process.

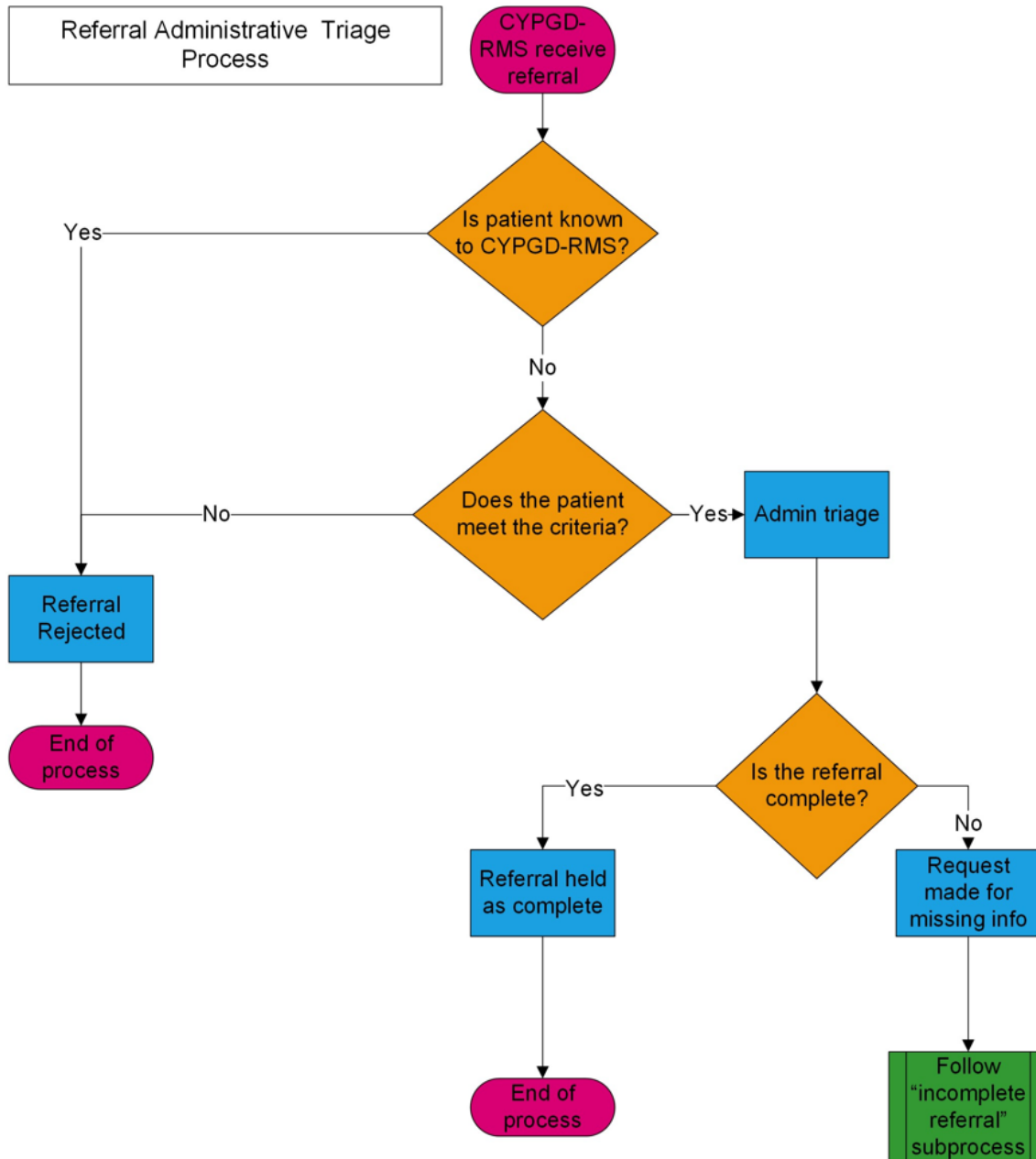
All staff will be required to work according to Arden & GEM CSU policies and procedures, and according to their relevant regulatory bodies.

All staff will receive CYP-GNRSS Blueteq Referral Management System (RMS) training before log in details and access to Blueteq is granted.

At all times staff must work within the following service line's key performance indicators (KPIs).

- 95% of completed referrals will be confirmed (accepted or rejected) with the referrer within 5 working days of receipt
- 95% of incomplete referrals will be returned to the referrer within 5 working days

Process



Note – All template letters can be found at
https://nhs.sharepoint.com/:f:/r/sites/msteams_5f58bf/Shared%20Documents/GIDS/Templates?csf=1&web=1&e=eGdcYY

Incoming Referrals

1. The generic email inbox agem.cyp-gd@nhs.net should be checked periodically between the hours of 09.00 – 17.00 by members of the admin team for newly received emails including referrals.

Referral Triage

2. Upon receipt of a new referral, admin staff check if the patient is known to the service.
 - Where the patient is already known to the service with a referral within the Blueteq system, which is “held complete” or “held incomplete” the admin team check the contents of the referral to ensure the new referral does not contain additional information which is not already held by the CYP-GNRSS.
 - If the referral is deemed a duplicate move to point 7.
 - If the referral contains additional information move to point 3. A patient may not have more than one referral active at any one time.
 - If the patient is not known to the CYP-GNRSS move to point 4.
3. Additional information to be uploaded to Blueteq, original referral date will be kept, and the referral will be sent to RRGs as normal. If there is missing information, post RRGs review, move to point 31.
4. Admin staff to complete an administrative triage of the referral against the set of defined criteria and minimum data set (MDS) (Appendix 1). Where further support is required to complete a comprehensive triage, support to be sought from a Senior Patient Referral Administrator.
5. In order to facilitate a complete and comprehensive referral, parents/guardians will be sent via email a link to the Blueteq system using multi-factor authentication (MFA) to complete the Gender Experience Summary (GES). Where the patient is aged 16 years or above, this link will be sent via email to the patient. The CYP-GNRSS admin team will check the GES to ensure this information is completed on the referral.

Please note: In order for the CYP-GNRSS to send the link to parents / guardians an email address and mobile number must be present. CYP-GNRSS

6. The outcome from the administrative triage can either be:
 - Rejected does not meet criteria (move to point 7)
 - Additional information received (move to point 3)
 - Complete referral, the referral meets the criteria, and all the fields are completed correctly
 - Suitable to be held by the CYP-GNRSS (move to point 10)
 - Incomplete referral – the referral meets the criteria, but some of the fields are missing (move to point 11)

Rejected Referrals

7. Where a referral does not meet the defined criteria, or the referral received is a duplicate (complete or incomplete), the referral is logged on Blueteq and the documentation/email is uploaded to the patient’s record.
8. The status is updated on the patient’s referral record to “referral rejected” ensuring that one of the below sub-categories is selected:
 - Outside of NHSE scope

- Inappropriate age
- Inappropriate referral

9. A “Rejection acknowledgement” (Appendix 2) email is sent to the referrer using Blueteq clearly stating the rationale for the rejection.

Complete Referrals

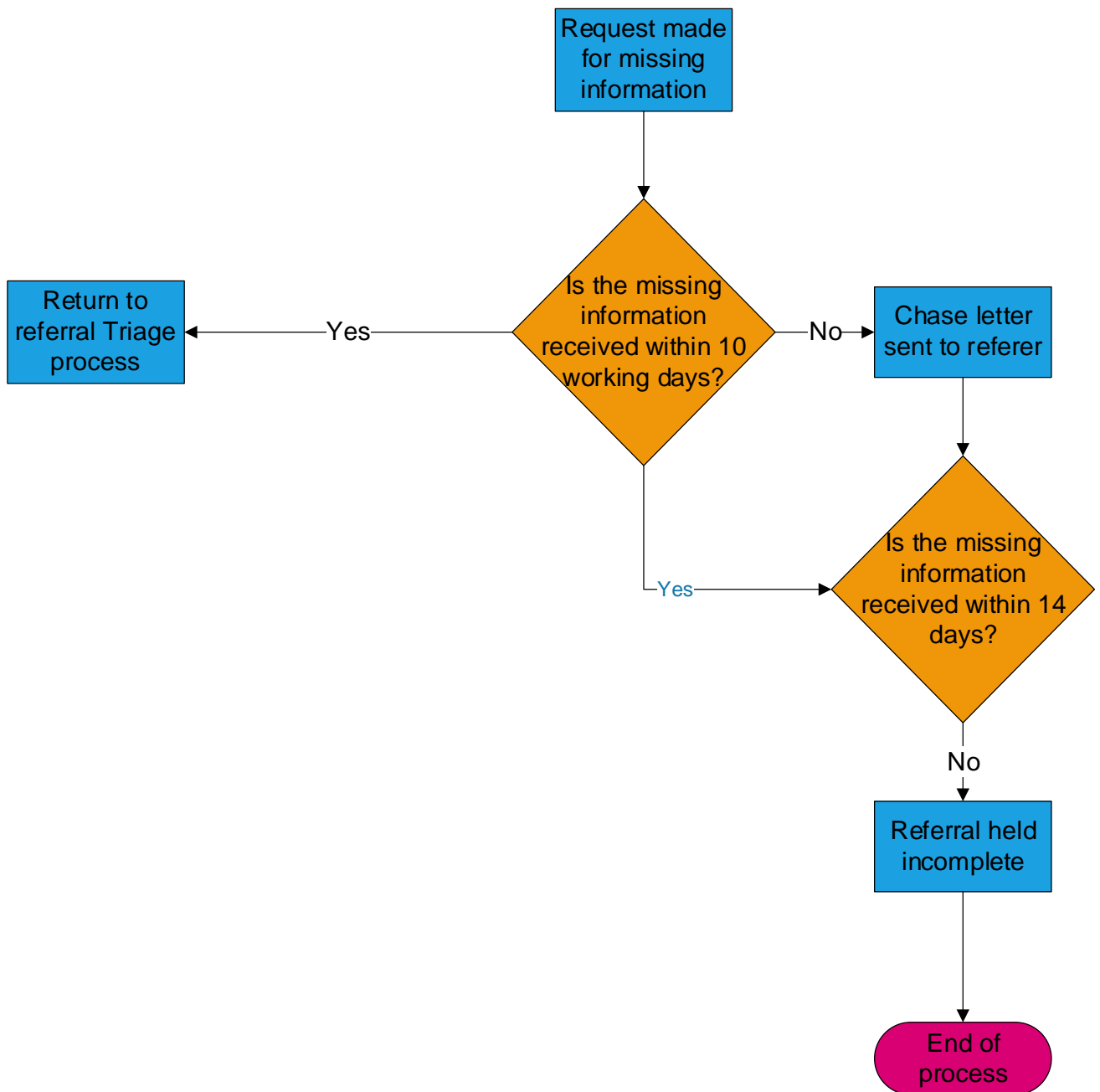
10. Complete referrals are logged on Blueteq and the documentation/email is uploaded to the patient’s record.

11. The referral status is updated to “held complete”

12. Referral form consent section is checked to ascertain who the CYP-GNRSS has consent to share information with. The corresponding acknowledgement letter is sent to the referrer and any other consented person using Blueteq.

Incomplete referrals

Incomplete Referrals Process



13. The referral is logged on Blueteq and the documentation/email is uploaded to the patient record.
14. The referral status is updated to “missing information requested”
15. A “Missing information request” letter is sent to the referrer using Blueteq, selecting one of the below templates:
 - Risk identified no action taken (Appendix 3)
 - Request missing information (Appendix 4)
 - Risk identified no action taken and missing information (Appendix 5)
 - MFA – missing information (will need a letter)
16. A record of the request to be added to the documents section on the patient’s record.

Information received within 10 working days

17. The referral status is updated to “information received”
18. The information is logged on Blueteq and the documentation/email is uploaded to the patient’s record.

Information not received within 10 working days

19. The referral status is updated to “reminder letter sent”
20. The template emails “Chase of missing information request” (Appendix 6) is sent to the referrer using Blueteq. A record of the request to be added to the documents section of the patient’s record.

Information not received within 10 working days of “chase” sent

21. The referral status is updated to “referral held as incomplete”

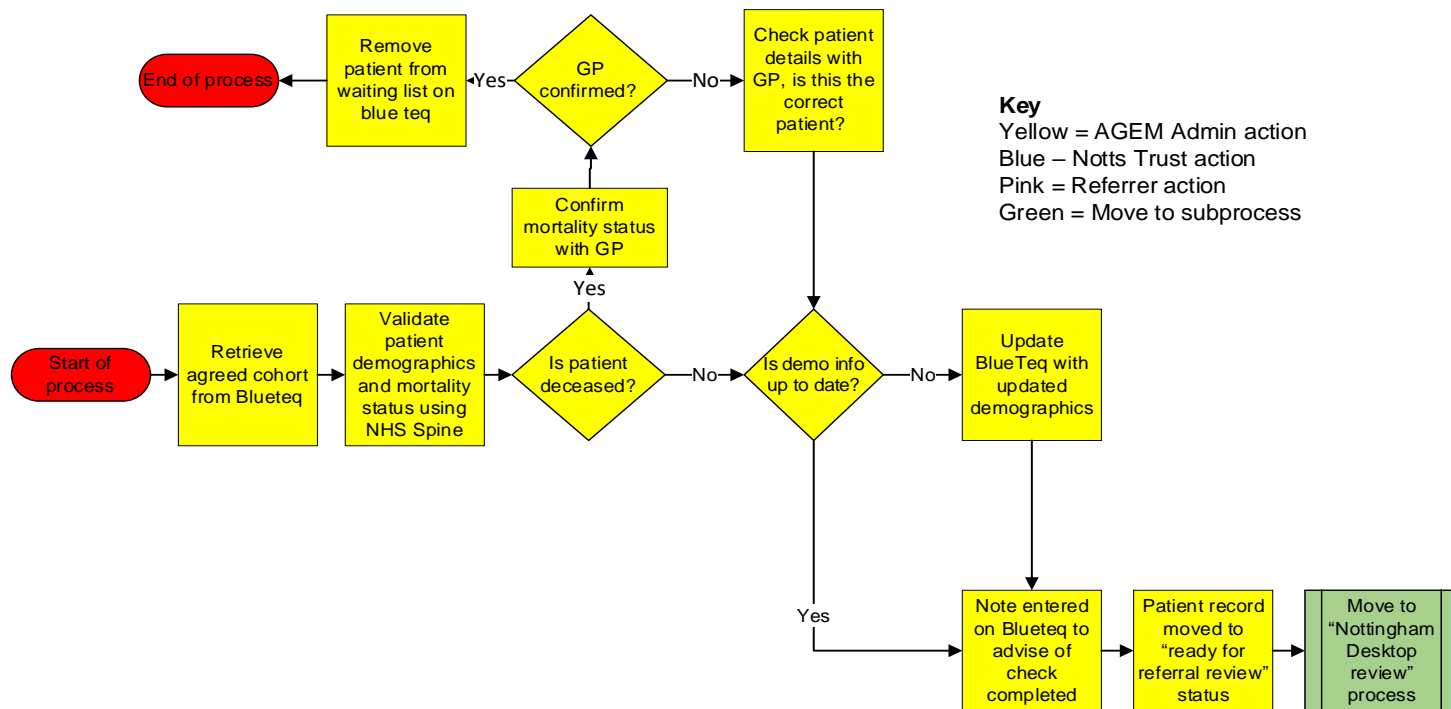
Cancelled referrals

In some instances, it will be appropriate to cancel a referral within the CYP-GNRSS. This action should only be done on explicit request from referrers, patients, or CYP-GNRSS treatment providers.

22. The referral status is updated to “referral cancelled”
23. An email to be sent to the referrers, patients or CYP provider requesting the cancellation using Appendix 7

Preparation for Nottingham Healthcare Foundation Trust (NHFT) Referral Review Guidance Service (RRGS)

CYPGD- RMS transfer of records for Clinical Review



24. The CYP-GNRSS will produce a report from Blueteq, identifying the cohort of patients for transfer to the RRGs, starting with the oldest referrals.
25. The CYP-GNRSS will validate the patient's demographic information and mortality status by conducting a check on the NHS Spine. If the patient is identified as deceased following this check the referral will be removed from the waiting list on Blueteq and closed and the referrer informed via email.
26. For all patients remaining on the waiting list following an NHS Spine check, the CYP-GNRSS will ensure that the demographic information matches the referral information provided. The record will be updated if any changes have occurred. A note will be added to the patient record to confirm the NHS Spine check has been completed.
27. The patient's record will then be moved to 'ready for referral review' status in the Blueteq system. These patients will appear on RRGs' worklist for NHFT to commence an MDT review.

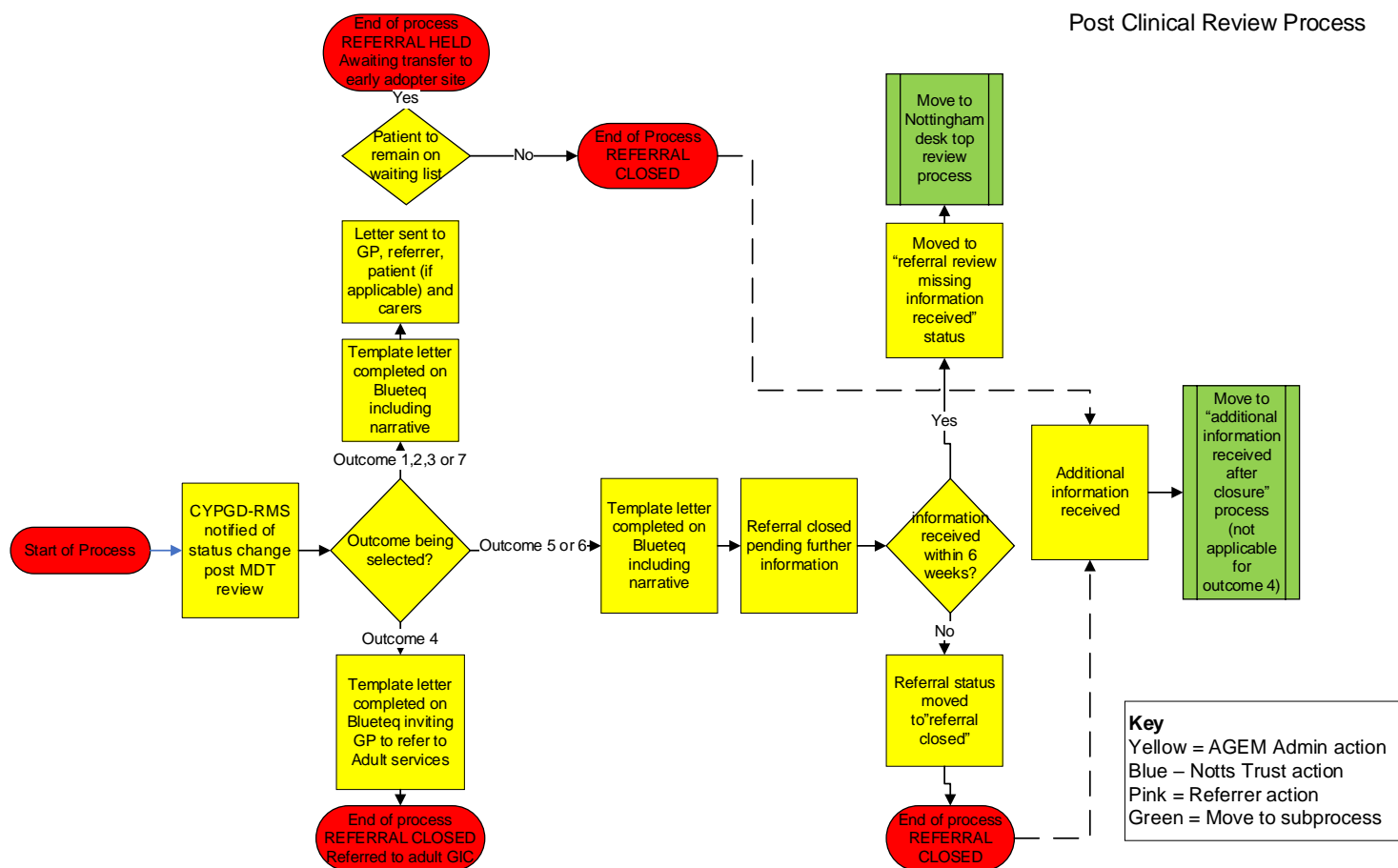
Longest waiter Referrals

During the period January 2023 – February 2023 NHFT and AGEM teams piloted the RRGs with the 50 longest waiters as identified from the Blueteq referral management system.

Please see [Appendix 9](#) for details on the Pilot process

Post Waiting List Harm Review

The outcomes identified in the flowchart below are fully described in Appendix 8.



28. The CYP-GNRSS are notified of status change within the Blueteq system following review.

NHFT RRGs Waiting List Review Outcomes

NHFT RRGs will provide Arden & GEM CSU with one of seven possible outcomes. To determine the outcome number, please see [Appendix 8](#).

29. For outcomes 1,2,3 or 7 (above), the CYP-GNRSS will complete a template letter on Blueteq with the outcome narrative provided by NHFT RRGs. A copy of the letter will be sent to the GP/ referrer (if not the GP), patient and carers (where appropriate and consent is given). Those patients that have been identified as appropriate for the Early Adopter sites will continue to be held in date order.

The patients identified as not staying on the waiting list for CYPGD-RMS will be closed on the Blueteq system.

30. For outcomes 5 or 6 (above), the CYP-GNRSS will complete the template letter on Blueteq with the outcome narrative provided by NHFT RRGs, this will outline the information missing. If the missing information is not received by the CYP-GNRSS within 6 weeks, the referral will be closed.

If the missing information is received within 6 weeks, it will be uploaded to the Blueteq system, and the referral will be returned to NHFT RRGs for further review.

31. For outcome 4, the CYP-GNRSS will complete the template letter on Blueteq with the outcome narrative from NHFT RRGs advising the referrer / GP to make a referral to an adult service. The referral will then be closed.

Missing information received following a Closed Referral

32. If the CYP-GNRSS receive missing information relating to a referral which has been closed (point 28 above, outcomes 5 or 6), this will be uploaded to Blueteq. The system status will be changed to 'Secondary Review Requested'; and the referral will be moved to NHFT RRGs' worklist within Blueteq. Following the secondary review by the RRGs, if appropriate, the referral will be reopened and go back on the waiting list to the original referral date.

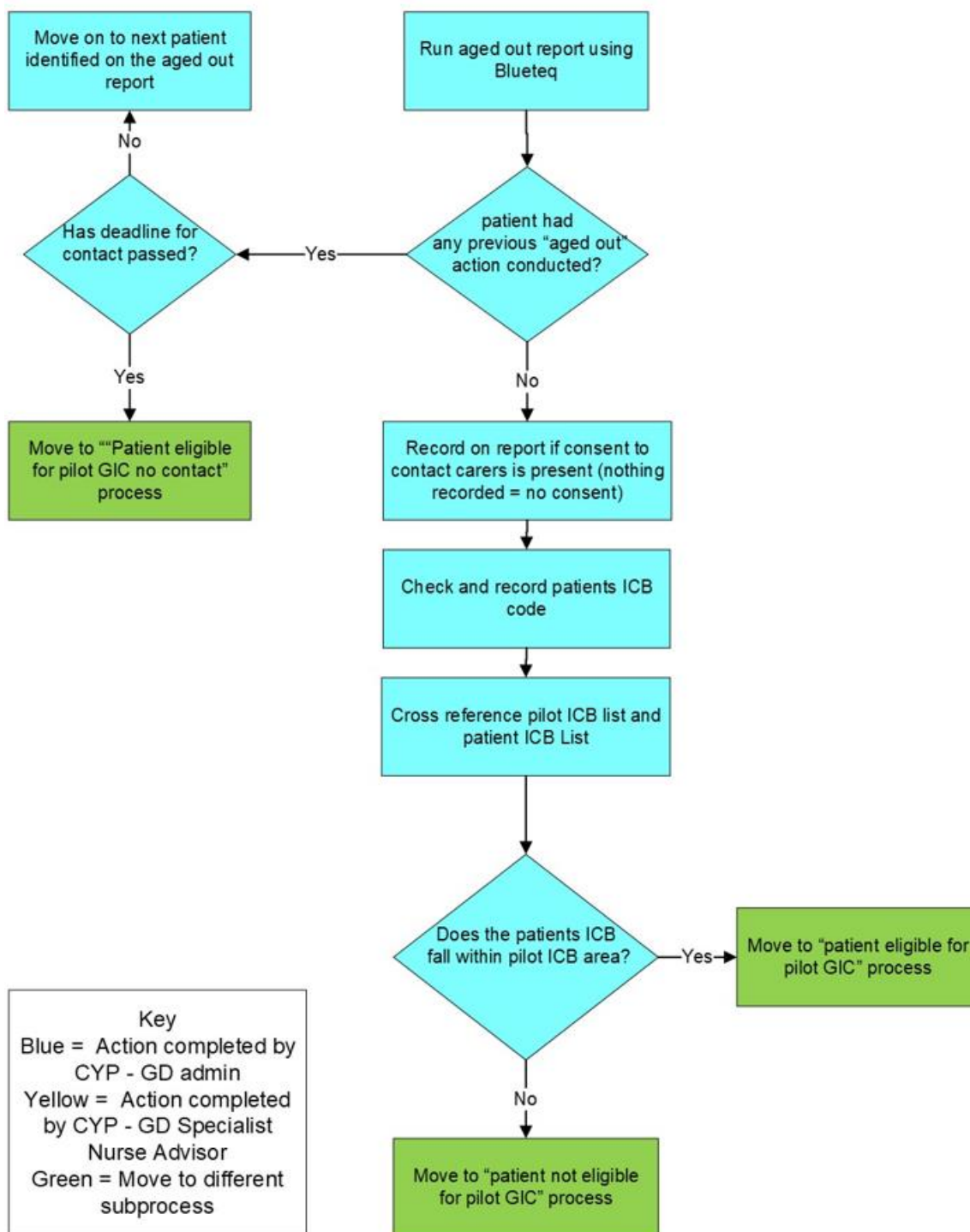
Early Adopter Service

Any referrals identified as appropriate to remain on the waiting list for an early adopter service will be held by the CYP-GNRSS in date order until these services are operational.

Aged out patients

As a result of long waits to access the service, it is necessary for the CYP-GNRSS to identify and contact patients who have reached 17 years and 6 months to facilitate a smooth transfer to an adult service where appropriate.

Identification of Patients eligible for a pilot GIC (Gender Identity Clinic)

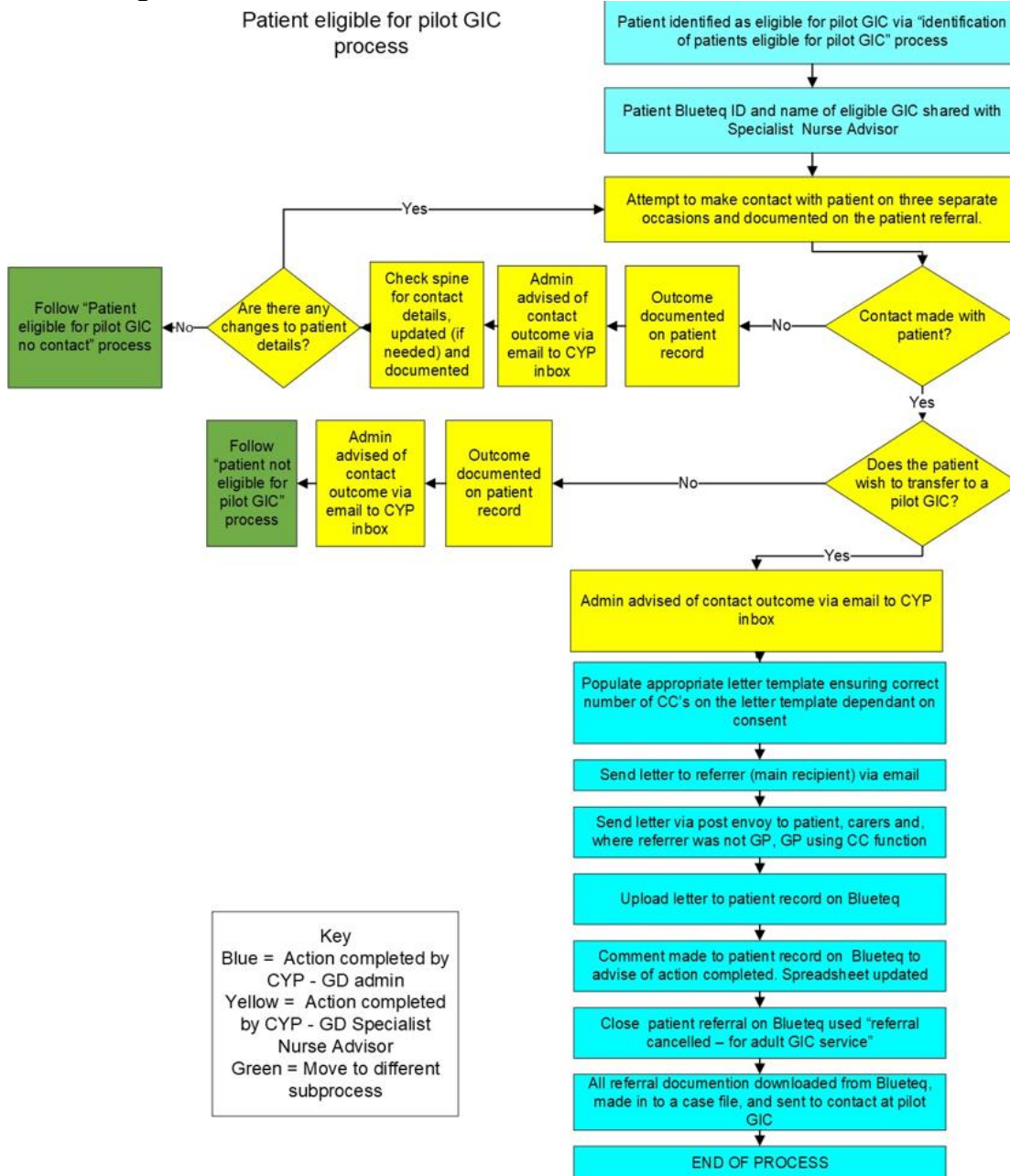


Eligibility for the pilot GIC's is determined by the patient's Integrated Care Board (ICB) code.

33. Complete a run of the 'Aged out' report on Blueteq to identify cohort of patients for transfer.

34. The CYP-GNRSS to cross reference the ICB's codes for the patients on the report with the eligible codes that fall within the pilot GIC's area.

Patient eligible for Pilot GIC



35. A Specialist Nurse Advisor (SNA) will make 3 attempts to contact the patient via telephone, documenting each contact on the system.

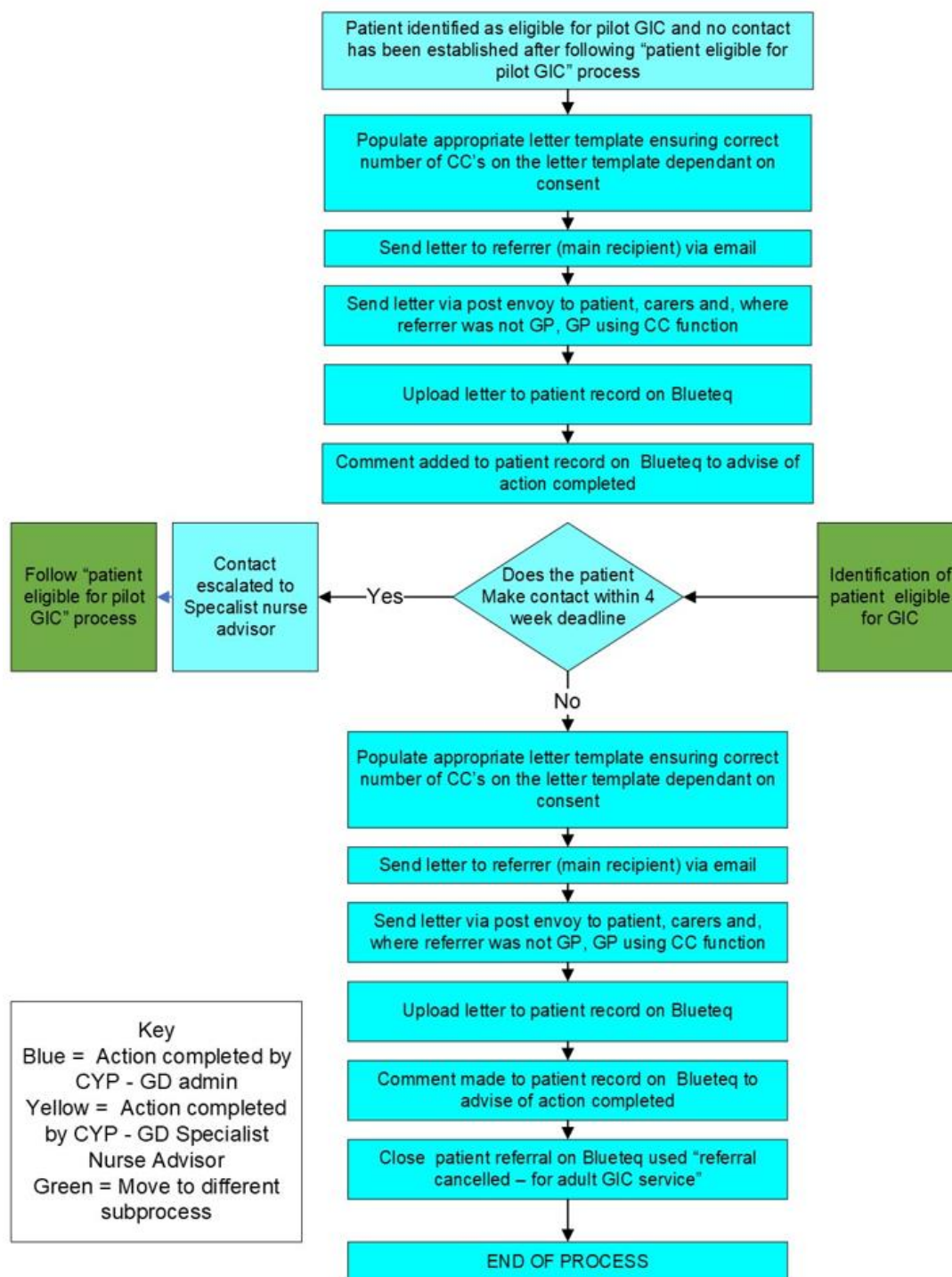
Where the CYP-GNRSS make contact the with patient, the below process will be followed:

The patient will confirm if they would like to be transferred to a Pilot GIC. Patients not wishing to be transferred to a Pilot GIC will follow the process below for 'patients not eligible for Pilot GIC'. A note of the patient's choice will be added to the system.

36. A letter will be sent to the referrer (copying in the patient, carer - where consent is given) confirming the transfer. A copy will be uploaded to the patient's record. The referral will be closed by selecting the Blueteq status of 'referral cancelled – for adult GIC service'.

37. All referral information will be downloaded from Blueteq into a casefile and forwarded to the Pilot GIC via email.

Aged out – Unable to contact patient process (Pilot GIC only)

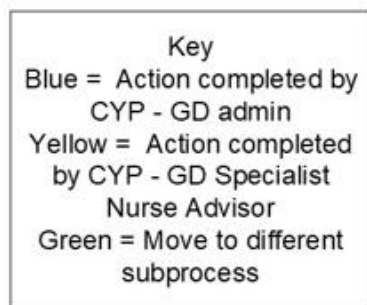
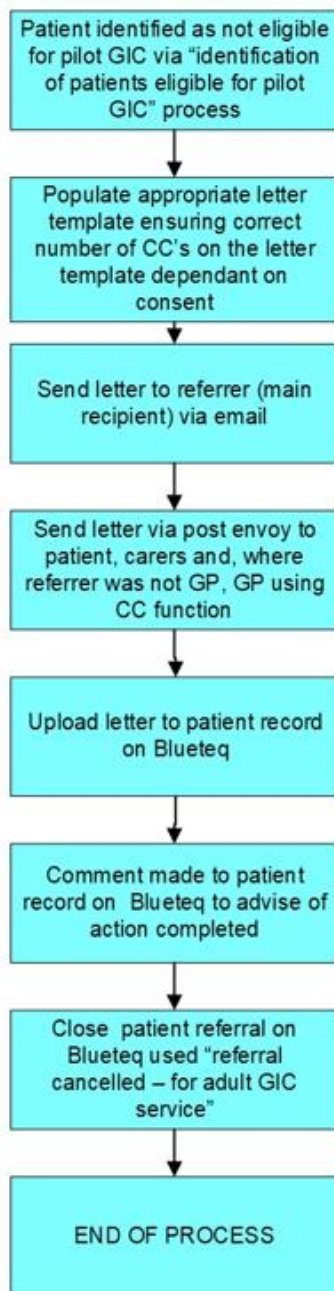


38. Where the CYP-GNRSS are unable to contact the patient via telephone, a letter will be sent by post to the patient (copied to the carers where consent is given), referrer (where not the

GP) and GP) giving a 4-week deadline to contact the CYP-GNRSS. A copy of the letter will be uploaded to Blueteq.

39. If CYP-GNRSS there has been no contact from the patient by the specified deadline, the CYP-GNRSS will write to the referrer in line with the 'Patient's not eligible for Pilot GIC' process. The letter will advise the referrer that the CYP-GNRSS has attempted to contact the patient without success, and they should consider a referral to adult services, where appropriate. A copy of the letter will be uploaded to Blueteq, and the referral will be closed, by selecting the system status of 'Referral Cancelled – for Adult GIC Service.

Patients not eligible for pilot GIC



40. For patients excluded from the Pilot GIC's due to their ICB code, a letter will be sent to the referrer (copying in the GP, where the referrer is not the GP, patient, carer - where consent is given) explaining that the patient has aged out of the CYP-GNRSS Service and no longer

meets the criteria. The referrer will be advised, where appropriate, to make a referral to an adult service.

41. The correspondence will be uploaded to Blueteq with comments of the action taken.

42. The referral will be closed on the system by selecting the Blueteq status of 'Referral Cancelled – for Adult GIC Service'.

Appendix 1

Referral Criteria and Minimum Data Set

Referral criteria

- The service user is under the age of 16 years and under
- The service user is seeking support and/or treatment around their gender identity
- Referral for patients in England
- Welsh referrals made by Welsh Health Specialised Services Committee (WHSSC).
- Referrals for young people aged 17 years as they are unlikely to be seen by the time of their 18th birthday which is the cut off point for CYP services – you may consider a referral to an adult Gender Dysphoria Clinic from 17 years of age, should you consider that the young person is likely to meet the acceptance criteria

Rejection Criteria

- Hand-written referrals
- Referrals made without use of the referral form
- Referrals for under 16s where parental consent is not present (please contact agem.cyp-gd@nhs.net for advice)
- Referrals where it has been indicated that the young person is the only person to be contacted, but the contact provided is the parents/carers postal address
- Self-referrals from young people or families
- Referrals received for Welsh patients made by anyone other than other than Welsh Health Specialised Services Committee (WHSSC)
- Referrals for Northern Ireland
- Referrals for Scotland

Minimum Data Set

- The service user's name
- The service user's date of birth
- Date of referral
- The service user's sex assigned at birth
- The service user's Gender Identity
- Age of young person at time of referral
- The service user's postcode
- The service user's address
- The service user's NHS number
- The service user's / Guardian Email and telephone number – indicating preferred method
- If the young person has consented
- Parental / guardian consent to referral
- An indication of who has parental responsibility
- An indication as to whether the young person Looked After or in Special Guardianship
- An indication as to whether the correspondence should be sent to young person only or to the legal guardian and the young person
- The service user's ethnicity
- At least one Parent / Carer / Guardian contact:
 - o Name
 - o Address if different to the service user's
 - o Relationship to patient
 - o Email and telephone number

Appendix 2 - [Letter - CYP Referrals - Rejection .docx](#)

Appendix 3 - [Letter - CYP Referrals - risk identified no action identified V8 - Final.docx](#)

Appendix 4 - [Letter - CYP Referrals - request missing information need to use referral form V4 - Final.docx](#)

Appendix 5 - [Letter - CYP Referrals - risk identified no action identified AND missing info required.docx](#)

Appendix 6 - [Letter - CYP Referrals - information missing at screening - V4 - FINAL.docx](#)

Appendix 7 [Email - GIDS referral processing - To referrer - confirmation of request to cancel referral V4.docx](#)

Appendix 8

Outcomes of NHFT RRGs Review:

	Outcome	Remain on waiting list	Template Letter	Option for additional narrative by NCTH	What happens to Referral in this status	AGEM Actions	Blueteq notes
1.	Recommend GP referral to CAMHS	Y / N Can select both options e.g., not appropriate for GIDS and only need CAMHS will remove off list	√	√	Letter to referrer and young person/ family then Close if N Letter to referrer and young person/ family and then remain on list if Y	Send letter and include additional narrative. Mark referral as closed Send letter and include additional narrative.	Still need to be able to search for referral or reopen if further information sent / new referral made System to flag something has changed and goes back in NCTH RRGs workflow
2.	Recommend GP referral to Social Services	Y / N	√	√	Letter to referrer and young person/ family and then Close if N Letter to referrer and young person/ family and then remain on list if Y	Send letter and include additional narrative. Mark referral as closed Send letter and include additional narrative.	Still need to be able to search for referral or reopen if further information sent / new referral made System to flag something has changed and goes back in NCTH RRGs workflow
3.	Recommend GP referral to local/national LGBTQ+ Support Group	Y / N	√	√	Letter to referrer and young person/ family and then Close if N Letter to referrer and young person/ family	Send letter and include additional narrative. Mark referral as closed	Still need to be able to search for referral or reopen if further information sent / new referral made System to flag something has changed and goes back in NCTH RRGs workflow

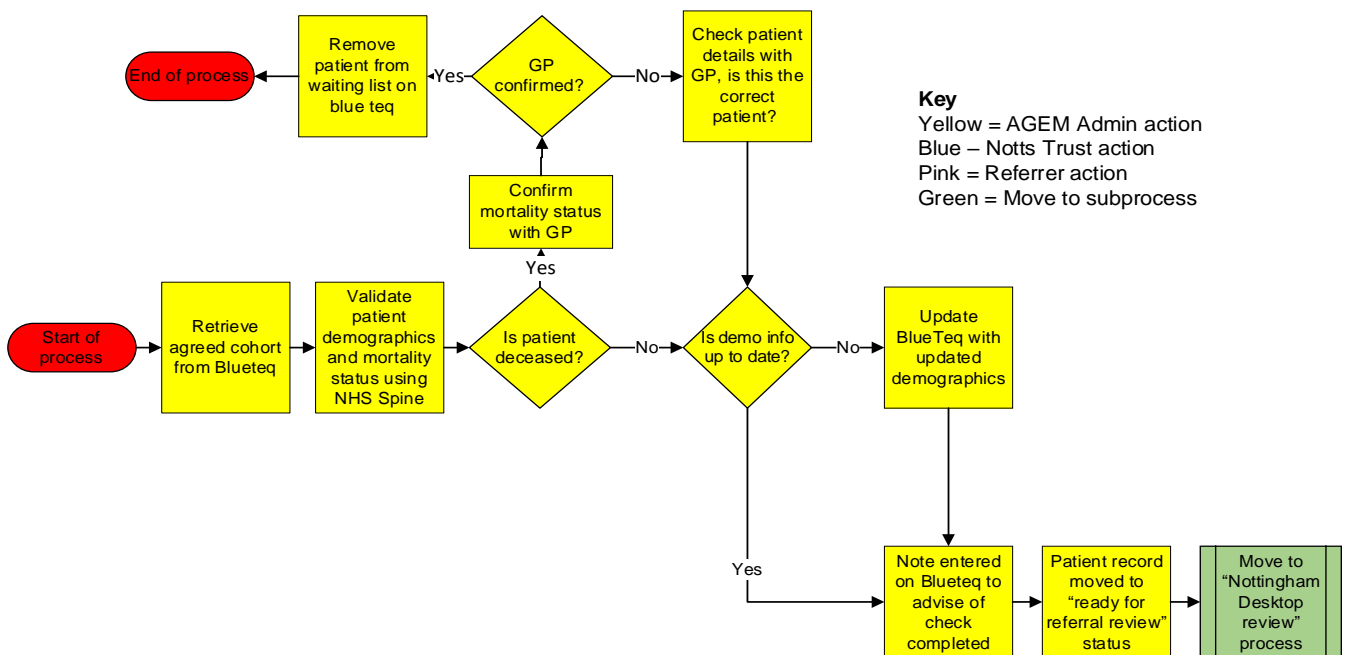
					and then remain on list if Y	Send letter and include additional narrative.	
4.	Recommend GP refers to Adult GIC	N Would be removed off waiting list	√	NA	Letter to referrer and young person/ family and then Close	Send letter and include additional narrative. Mark referral as closed	Still need to be able to search for referral or reopen if further information sent / new referral made System to flag something has changed and goes back in NCTH RRGs workflow
5.	Insufficient evidence that gender incongruence is significant, please re-refer with more information	Y These will remain on waiting list for 6 weeks while information comes in. After which will be closed, and new referral will be required.	√	√	Letter to referrer and young person/ family and then Close	Send letter and include additional narrative. Mark referral as closed	Still need to be able to search for referral or reopen if further information sent / new referral made System to flag something has changed and goes back in NCTH RRGs workflow
6.	Further information required / incomplete referral	Y These will remain on waiting list for 6 weeks while information comes in. After which will be closed, and new referral will be required	√	√	Letter to referrer and young person/ family and then Close if N Letter to referrer and young person/ family and then remain on list if Y	Send letter and include additional narrative. Mark referral as closed Send letter and include additional narrative.	Still need to be able to search for referral or reopen if further information sent / new referral made. System to flag something has changed and goes back in NCTH RRGs workflow
7.	Reviewed, continue to hold in GIDS-RMS waiting for Early Adopter	Y Stays on list	√	NA	Letter to referrer and young person/ family and held in status	Send letter. Referral stays open/ Held	System to flag something has changed and goes back in NCTH RRGs workflow

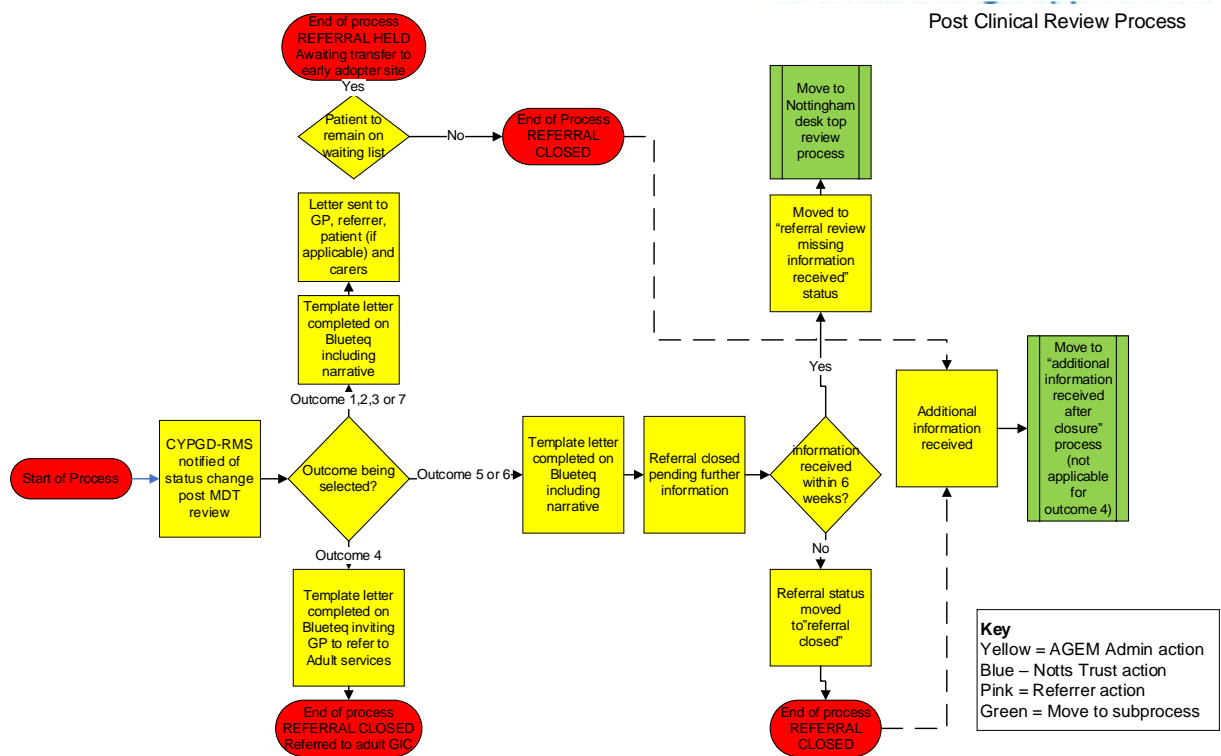
Appendix 9 – Pilot RRGs Process

The Pilot tested the total RRGs process. The longest waiting 50 referrals received by CYP-GNRSS were in the scope of the pilot. The purpose of the pilot was to:

- Test the Blueteq system functionality
- Test AGEM admin processes
- Test NHFT Clinical Review processes
- Clearly define the minimum information data set to enable an effective clinical review decision. This will inform AGEM's admin triage criteria. AGEM team will screen out referrals that do not provide sufficient information for NHFT to make an informed clinical decision.

CYPGD- RMS transfer of records for Clinical Review





Pilot NHFT RRGs Waiting List Review Outcomes

The pilot harm review outcomes will follow the same process as outlined above in the 'NHFT RRGs Waiting List Harm Review Outcomes' section above.