



30th July, 2024

Deputy Duncan Smith, TD
Dáil Éireann
Leinster House
Kildare Street
Dublin 2

PQ 31806/24 - To ask the Minister for Health further to Parliamentary Question No. 620 of 8 May, the number of adverse events there have been per year in the National Gender Service, broken down by category; and if he will make a statement on the matter

PQ 31807/24 - To ask the Minister for Health further to Parliamentary Question No. 620 of 8 May 2024 (20789), the number of assessment appointments the National Gender Service needs on average to complete assessment; and if he will make a statement on the matter

PQ 31808/24 - To ask the Minister for Health further to Parliamentary Question No. 621 of 8 May 2024, if the National Gender Service still requires meeting with a consultant psychiatrist as part of the assessment pathway as is currently indicated on its website (details supplied); and if he will make a statement on the matter

Details supplied - <https://nationalgenderserviceireland.com/our-pathway/>

Dear Deputy Smith,

The Health Service Executive has been requested to reply directly to you in relation to the above parliamentary question, which you submitted to the Minister for Health for response. I have consulted with the National Clinical Advisor and Group Lead for Children and Young People (NCAGL C&YP) on your question and have been informed that the following outlines the position.

HSE is aware that gender healthcare services are limited at this time and are not meeting people's full range of needs. In addition, evidence for the best and safest type of healthcare in this area is evolving, in Ireland and internationally. The new National Clinical Programme (NCP) for Gender Healthcare will develop an updated clinical model of care for gender healthcare services for the Irish population over the next two years.

The existing and emerging evidence base, including international evidence on health outcomes and studies looking at the changes in demographics and clinical needs in those presenting to clinical services over the years, will be reviewed as part of this work. International evidence on clinical interventions, including but not limited to, hormone therapies, including puberty blockers and gender affirming surgery, will be included in this review of the evidence base, as will international reports such as the recent Cass Review.

Gender healthcare is complex, and as with existing HSE Clinical Models of Care such as obesity or stroke, the Model of Care developed for gender healthcare will leave room for individualised clinical approaches specific to the service user's clinical needs. Given the individualised approach, providing the average number of appointments would be misleading, as every person's journey is different.

It is recognised that there is a need to define clinical pathways to help both service users and clinicians navigate the care pathways, and to inform ongoing service development and quality improvement. This will be considered in the development of the HSE Model of Care for Gender Healthcare. The National Gender Service website www.nationalgenderserviceireland.com includes an outline of existing clinical

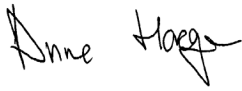
processes and is currently accurate with respect to current waiting times, number of appointments in standard pathways and the involvement of the whole multidisciplinary team (MDT), including psychiatry.

As with all clinical interventions, complications and adverse outcomes can occur with hormone therapy use and with gender-affirming surgery. At the time of writing HSE is unable to provide a retrospective review of adverse events. However, adverse event reporting is undergoing a change with the introduction of the National Incident Management System across the HSE. It is recognised that recording of adverse events is needed in the clinical pathways being developed as part of the National Clinical Programme and this information will contribute to data on clinical outcomes. This will be considered in the development of the HSE Model of Care for Gender Healthcare.

HSE is committed to building a service in Ireland for the Irish population that is based on experience and clinical evidence, respect, inclusiveness and compassion.

I trust this information is of assistance to you but should you have any further queries please do not hesitate to contact me.

Yours sincerely



Anne Horgan
General Manager