

Dr Helen Webberley
MBChB MRCP (1995) (MFFP (2003))

Dear Government Equalities Office - FAO Maria Miller

I am a doctor working in the UK. I am a General Practitioner with specialist expertise in the management of transgender patients. Since solely specialising in the care of transgender patients from 2016, I have become extremely concerned about the transphobia and lack of professional duty shown by the General Medical Council.

I have requested to meet with the GMC on many occasions to discuss my concerns but my requests have been refused.

I write this complaint following on from the Transgender Equality Inquiry, the findings of which were published in 2016.

CONCERNS

I am concerned on seven counts:

One - the lack of standards for medical education for medical students and post-graduate doctors in this area. Since the report in 2016, no steps has been made to increase education.

Two - allegations of transphobia to the GMC are still not being addressed seriously. There is a deep-rooted lack of knowledge and understanding of transgender issues within the GMC, leading to institutional transphobia.

Three - the GMC promised to publish a position statement which would set out how their guidance applies when treating transgender patients. They did not do this.

Four - the framework that the GMC published that promised to cover doctors' training, did not include any specifics for the care of transgender patients.

Five - despite their assurances, the GMC have not taken any steps to consider what more they can do to encourage transgender and other vulnerable patients to raise their concerns.

Six - despite the existence of two high profile cases (Dr Russell Reid and Dr Richard Curtis) of where the GMC has investigated doctors who have provided gender-affirming care, the GMC have continued to investigate doctors who provide gender-affirming care while failing to investigate concerns about doctors who fail to provide care to transgender patients, or about doctors who are transphobic.

Seven - the GMC guidance on trans healthcare on their website underpins the fact that the GMC regard these patients differently to patients with other medical needs.

BACKGROUND

On 9 November 2015 The General Medical Council submitted written evidence to the Transgender Equality Inquiry (<http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/women-and-equalities-committee/transgender-equality/written/24277.pdf>)

In their evidence they made the following statements:

1. We oversee UK medical education and training.
2. We set the standards that doctors need to follow, and make sure that they continue to meet these standards throughout their careers.
3. We take action when we believe a doctor may be putting the safety of patients, or the public's confidence in doctors, at risk.
4. We will continue to explore opportunities within our regulatory role to strengthen the education and preparedness of doctors in the areas of medicine related to gender identity.
5. We are planning to publish a position statement on our website, which sets out how our guidance applies when treating transgender patients.

They also responded about high-profile fitness to practice investigations involving two doctors who worked with transgender patients, Dr Russell Reid and Dr Richard Curtis.

In the House of Commons Women and Equalities Committee First Report of Session 2015–16 on Transgender Equality the following is noted:

1. The GMC itself told us that it sets standards and outcomes for undergraduate and foundation training; and standards and requirements for postgraduate training. Curricula and assessment tools must fulfil these, but their actual content is owned by the medical schools, foundation schools and Medical Royal Colleges or faculties. The Council is working with the Academy of Medical Royal Colleges to develop a framework for generic professional capabilities, which will “identify, simplify and clarify the core professional values, knowledge, skills and behaviours” for doctors, to reduce variability in the postgraduate curriculum in this regard.
2. The General Medical Council must provide clear reassurance that it takes allegations of transphobia every bit as seriously as those concerning other forms of professional misconduct.
3. The Council is working with the Academy of Medical Royal Colleges to develop a framework for generic professional capabilities, which will “identify, simplify and clarify the core professional values, knowledge, skills and behaviours” for doctors, to reduce variability in the postgraduate curriculum in this regard.
4. Consideration must be given to the transfer of these services to some other relevant area of clinical specialism, such as endocrinology (which deals with hormone-related conditions), or their establishment as a distinct specialism in their own right.
5. Accordingly, we recommend that, in the current review of the service specification and protocol for the Gender Identity Development Service, consideration be given to reducing the amount of time required for the assessment that service-users must undergo before puberty-blockers and cross-sex hormones can be prescribed.

6. Appropriate training of public sector professionals on gender identity issues must be a key part of this new strategy.

EVIDENCE

I have made two Freedom of Information Requests to the GMC. The first was on 24 December 2018 (F18/9912/MM) and the second on 12 January 2019 (F19/9935/MM).

F18/9912/MM - 24 December 2018

I asked:

'Re - Women and Equalities Report 2016 Paragraph 29. 'There is a lack of Continuing Professional Development and training in this area amongst GPs.'

'Hence - Please give me details of any plans implemented to educate medical students and doctors in the care of transgender patients since the publication of this report.'

The GMC responded on 22 February 2019:

'The GMC is not responsible for delivering education to students and doctors. We are responsible for assuring the quality of education and training and identifying where our standards are not being met. The Royal College curricula are available on our website. We also monitor and check medical schools to make sure their students get the education that meets our standards. Postgraduate bodies and Local education providers must also demonstrate to us that they are meeting our standards.'

I am very concerned that in 2019, the Royal College and medical school curricula still contain no standards for the care of transgender patients. I have seen no evidence of any implementation of postgraduate or local education of training.

In their published guidance, Promoting excellence: standards for medical education and training, it is said that, 'The GMC sets the standards and requirements for the delivery of all stages of medical education and training.'

The GMC have failed to take any steps to set the standards and requirements for the education of medical students and postgraduates in the care of transgender patients.

I asked:

Re - Women and Equalities Report 2016 Recommendation 31. 'The General Medical Council must provide clear reassurance that it takes allegations of transphobia every bit as seriously as those concerning other forms of professional misconduct.'

'Hence - Please show me any reassurance that has been provided.'

The GMC responded on 22 February 2019:

'As you are aware, in response to the report the GMC gave that assurance to the Woman and Equalities committee. We have demonstrated our commitment to this issue by updating our guidance. The GMC participates in both Manchester and

London Pride every year and the Regional Liaison Service took part in an On Road Media project called All About Trans. You can read about the event [here](#). ‘

F19/9935/MM - 12 January 2019

I asked:

‘Dear GMC, in your letter to Maria Millar MP dated 16 March 2016, attached here, you state that, ‘we are about to publish a position statement about doctors’ professional responsibilities towards trans patients.’

‘Please forward me a copy of this position statement and show me where it is published as it does not seem to be published on your website section of position statements [nhttps://www.gmc-uk.org/education/standards-guidance-and-curricula/position-statements](https://www.gmc-uk.org/education/standards-guidance-and-curricula/position-statements)’

The GMC responded on 22 February 2019:

‘I can confirm that in relation to the position statement you requested, it was decided to publish our [guidance](#) on our website instead.’

The GMC have failed to publish a position statement about doctors’ professional responsibilities towards trans patients.

I asked:

‘You also state, ‘Alongside this we are introducing a new framework to make sure that doctors’ training covers broader behaviours and skills such as communication and leadership which we believe are essential to the delivery of compassionate care.’

‘Please direct me to the framework that is referenced to in that sentence.’

The GMC responded on 22 February 2019:

‘The framework you asked about is [here](#).’

However, this framework does not relate to training in the care of transgender patients. The framework does broadly cover skills and knowledge, yet there is no training or guidance published in the UK to inform doctors in this field.

I asked:

‘You also state, ‘we will consider what more we can do to encourage transgender and other vulnerable patients to raise their concerns.’

‘Please share with me any publications / training materials produced by the GMC to encourage transgender and other vulnerable patients to raise their concerns.’

The GMC responded on 22 February 2019:

‘In relation to the final part of your request, we hold nothing which falls into the scope of your request.’

The GMC have failed to take any action to consider what trans people can do to raise their concerns. I have examples of where patients have raised concerns, yet the GMC continue to fail to take action.

EDUCATION

The GMC website states 'We set the standards for providers of medical education and training, and we regularly check to make sure those standards are met. Here you'll find the standards, guidance and curricula we publish along with supporting materials.'

The GMC state their responsibility for providing medical education and training to medical students and doctors in the following ways:

- A) Medical schools must make sure the education their medical students receive meets our standards. We monitor and check to make sure these standards are maintained.
- B) Postgraduate bodies manage the delivery of postgraduate training and must show us they are meeting our standards.
- C) Local education providers - the GMC quality assure locations and approve trainers, so we can be sure our standards are being met and maintained.
- D) The UK's medical royal colleges and faculties set the curricula for specialty and GP training courses. The GMC approve curricula and assessment systems for each training programme.

Despite these four areas where the GMC's role is to assure the quality of education and training, the following are lacking:

- A) There is no national programme for medical education in UK medical schools for the care of patients with gender dysphoria.
- B) There is no national programme for postgraduate training for the care of patients with gender dysphoria.
- C) There are no nationally approved local education programmes for the care of patients with gender dysphoria.
- D) Not one of the curricula and assessments created by the royal colleges for 65 specialties and 32 sub-specialties contains any basic or comprehensive training on the care of transgender patients.
- E) The following curricula were approved by the GMC and published on their website since the date of the report, yet they continue to contain no reference to the care of transgender patients:
 - A) Endocrinology - 2017
 - B) Paediatrics 2018
 - C) Paediatric endocrinology - 2018
 - D) Child mental health - 2018
 - E) General Psychiatry - 2016
- F) There are no NICE guidelines on the treatment of patients with gender incongruence and none planned.
- G) Despite promises, the NHS interim protocol has still not been updated. (<https://www.england.nhs.uk/wp-content/uploads/2013/10/int-gend-proto.pdf>)
- H) There are no UK or NHS guidelines for the treatment of transgender children and adolescents.
- I) There continues to be no specialist register for doctors working in this field.

WEBSITE GUIDANCE

The GMC advice on the care of trans people has been updated on their website. This was undertaken without seeking any advice from the Gender Identity and Research Society (GIREs), even though the GMC purport to use 'their expertise to help us improve our equality, diversity and inclusion activities.'

The GMC website has an 'ethical hub' to 'help doctors address important ethical issues and incorporate good practice into their work'.

The hub covers the following areas:

- 1) Learning disabilities
- 2) Older adults
- 3) Trans healthcare
- 4) Remote consultations
- 5) Mental capacity

Even though the GMC state that they recognise that 'trans patients are recognised to experience the same health problems as everyone else and have very few differing needs' the inclusion of trans healthcare on an ethical hub with conditions such as older age and learning disability, underpins the fact that the GMC regard these patients differently to patients with other medical conditions.

There is no specific section on the GMC website for patients with any other medical diagnosis, such as diabetes, cancer, heart disease etc. However, the GMC feel it necessary to dedicate a section to patients with gender dysphoria alongside patients who may not be able to make decisions about their care such as those with learning disabilities or older age or mental health disorders.

Advice given in the Equalities Report was that 'Consideration must be given to the transfer of these services to some other relevant area of clinical specialism, such as endocrinology (which deals with hormone-related conditions), or their establishment as a distinct specialism in their own right.' However, the updated GMC guidance gives the overall message that unless patients have been seen by a Gender Identity Clinic, doctors in other fields should not initiate treatment.

TRANSPHOBIA

I met with the GMC in November 2016 to express my concerns about the lack of education in this area, and the monopoly created by the current specialist working in the NHS gender clinics. No minutes were taken of this meeting and no actions came as a result.

In 2017 / 2018 I have requested on seven occasions to meet with the GMC to discuss my concerns about the safety of transgender patients in the UK and the transphobic actions of the GMC. On each occasion a meeting has been refused.

My husband has requested evidence of Equality and Diversity and Child Safeguarding training in the GMC Case Examiner, but the GMC have failed to provide this.

I have submitted a detailed document regarding my allegations of transphobia to the GMC, I enclose a copy of it here. Both patients and doctors are still subject to transphobia by the GMC.

SUMMARY

I am extremely concerned that no standards have been set by the GMC for the education of doctors in the care of transgender patients. This has permitted a complete lack of educational materials in medical schools and Royal College curricula, which have been updated since your enquiry.

I am concerned that the GMC fitness to practice investigations are heavily weighted against doctors who provide care to transgender patients.

I am concerned that the website guidance has been compiled without discussion with equality and diversity champions, and can be perceived as grossly transphobic. The guidance also gives the message that a patient should not be treated without discussion with the Gender Identity Clinics, for which there is a 2-4 year wait on the NHS.

Public confidence in the profession requires that our regulator is perceived as doing its utmost to improve healthcare provided by UK doctors. I feel that this is in severe jeopardy and that too little action has been taken since the recommendations in your report.

Dr Helen Webberley
GP and Gender Specialist