



SUMMARY

Transgender/Trans* Health Steering Committee

Date/Time: Thursday January 8, 9:00am-12:00pm

Location: PHSA Corporate – 700-1380 Burrard St. Room A

Participants: Vanessa Barron, Fin Gareau, Lorraine Grieves, Dr. David Hall, Gwen Haworth, Dr. Gail Knudson, Arden Krystal, Julia O’Dwyer, Raven Salander, ChrYs Tei, Dr. Marria Townsend, Natasha Wolfe

Phone: Laura Case, Steve Kabanuk, Theresa Kennedy, Michele Lane, Janice Penner

Regrets: Dr. Soma Ganesan, Dr. Daniel Metzger, Connie Coniglio, Anne McNabb, Kyle Shaughnessy, Evan Taylor

	ITEM	ACTIONS
1.0	<p>Welcome & Introductions of new members</p> <ul style="list-style-type: none"> - Dr. Marria Townsend, Lead Physician, Transgender Care, VCH - Theresa Kennedy, Interim Chief Communication Officer PHSA - Steve Kabanuk will participate on surgical working group, not Steering Committee 	
2.0	<p>Action Log</p> <ul style="list-style-type: none"> - Michele clarified that: <ul style="list-style-type: none"> o there is no cap on the number of bottom surgeries (phalloplasty/ metoidioplasty/vaginoplasty) o Gender Reassignment Surgery (GRS) is an insured benefit and pre-approval from MSP is no longer required o Still working on statistics about referrals to Montreal (through Health Insurance BC) – volumes determined by how many surgeries the Montreal clinic can accommodate - The group noted that after care in Montreal is not covered under MSP because this is a private convalescent clinic - Travel costs are not covered within BC for other populations (i.e. cancer, pediatrics). There are community supports and charities which may support some of this. 	<p>Michele to follow-up on criteria for Travel Assistance Program (TAP) which provides some reduction on the cost of air travel.</p>
3.0	<p>Draft Terms of Reference</p> <p>Some revisions made.</p>	<p>Vanessa will work with Natasha and ChrYs on further wording changes to be disseminated to the group for review and sign-off at next meeting</p>

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4.0	<p>Current State Overview of Adult Services – Dr. Knudson</p> <ul style="list-style-type: none"> - Vancouver is seen as a leader in the world in transgender/trans* care - Question whether funding would be threatened if gender dysphoria is no longer part of the DSM →Noted that not all conditions in the DSM are publically funded. Gender dysphoria/incongruence are still part of the ICD-9 and upcoming ICD-11 which are the billing codes for care; therefore, funding will continue. - Confirmed that letters (Real Life Experience/RLE) are no longer required to confirm whether a person is living for a year with gender congruence as part of the surgical assessment →many care providers are not aware of this change and using outdated standards of care. - Additional challenges noted for people in the corrections system where genders are segregated based on genitalia→currently health services in provincial correctional facilities are overseen by the justice system. Planning is currently underway to consider transitioning responsibility for the provision of health/medical services to the MOH, under PHSA. - Demand for services are hard to measure as the physician billing system is based on ICD-9 codes which use outdated old language/terms. Physicians may also use other codes that are difficult to attribute to transgender/trans* care such as endocrine codes or sexual disorders. Primary care delivered in community health centres is also not captured in the current billing system→proxy measures will need to be considered for planning purposes. <p>SERVICE GAPS IDENTIFIED:</p> <ul style="list-style-type: none"> • There is no provincial network or mechanism to communicate system and process changes throughout the province to people and their care providers • No program infrastructure is in place (i.e. VCH has a BC Trans Primary Care Consultation service which currently supports youth (<25yrs) outside of the catchment, although this is not part of their mandate) • Surgical care program for bottom surgery <ul style="list-style-type: none"> ◦ require connection to aftercare ◦ critical mass/volumes are needed to provide bottom surgery in BC (also dependent on availability of urologists, and operating room time/space). <p><i>Note: Working group to review the program in Belgium as a</i></p>	<p>Vanessa will send presentations out to group</p> <p>Dr. Knudson to add information on youth services</p>

	ITEM	ACTIONS
	<p><i>benchmark, and consider costs of post-op complications as well as social consequences</i></p> <ul style="list-style-type: none"> • Access to standards of care (i.e. including hormone therapy) • Education/competence of care providers (across the lifespan youth to aging demographics) 	
5.0	<p>Current State Overview of THiP – Lorraine</p> <ul style="list-style-type: none"> - Question about the need for counselling and mental health support – is it primarily related to hormone/surgical assessment? No, the transgender/trans* population is at higher risk due to social distress. - Questions about the Survey Process – 2 rounds of surveys were done working with the community engagement team at VCH to develop questions. Disseminated through networks and online. Representation of sex trade workers in downtown eastside were ~14-18 of total respondents. 	<p>Dr. Townsend to send recent research article from Belgium comparing access to care. (note: Belgium is considered a top surgical program in Europe)</p> <p>Michele and Arden to have follow-up discussion with Ministry of Education</p> <p>Michele and Arden to discuss MoH expectations about transferring program responsibility to PHSA.</p>
6.0	<p>Next Steps</p> <p>What else do we need to know to understand the current services and supports for transgender/trans* health?</p> <p>ChrYs asked if anyone could help her in establishing an e-mail distribution list of transgender/trans* people in BC.</p>	<p>Vanessa & Arden to contact Health Authorities about Transgender/Trans* services in their regions.</p> <p>Lorraine to share list of resources collected by VCH in 2013.</p>

Next Meetings:

- Wednesday January 21, 11:00am-2:00pm
- Thursday February 5, 1:00-4:00pm
- Tuesday February 17, 1:00-4:00pm
- Thursday March 5, 1:00-4:00pm
- Tuesday March 17, 8:30-4:00pm
- Thursday April 2, 1:00-4:00pm
- Tuesday April 21, 1:00-4:00pm