

Hospital and Provincial Health Services Division

PHSA Supplemental Note – Trans Care BC

Gender Affirming Care – Overarching Care Landscape

Current Issues: Gender-affirming care in BC is individualized and occurs through varied pathways-building up care pathways and hubs is an ongoing effort.

Care Pathway

- In BC, care for trans and gender diverse people is individualized and generally follows guidance in the WPATH Standard of Care V8 (2022).
- Transition-related medical interventions: Depending on the client’s needs and goals, the patient may begin with assessment for hormone therapy, and then may progress to surgery and post-operative care.
- Hormone care options are available in a range of care settings. GPs and NPs trained in hormone assessment, initiation and maintenance, as well as endocrinologists, provide this care in BC. Multi-disciplinary care is best for wraparound support yet is not fulsomely available.
- Funded gender-affirming surgeries in BC include, chest and breast surgeries (upper surgeries), gonadectomy surgeries and genital reconstruction surgeries (lower surgeries).
- Criteria and funding for out-of-province/out-of-country gender-affirming surgeries, is overseen by Medical Services Plan (MSP).
- The Gender Surgery Program is operated by Vancouver Coastal Health and funded by Trans Care BC, PHSA.
- On February 15, 2023, Trans Care BC aligned gender-affirming surgical care processes with the new WPATH Standard of Care V8 (2022) reducing barriers for patients seeking gender-affirming surgery. Key changes include:
 - Only one surgical assessment, instead of two, is now advised for all gender-affirming genital surgeries.
 - A former ‘congruent living’ requirement was removed.
 - The length of recommended hormone therapy prior to genital surgeries for adults, if indicated, was reduced from one year to six months.
- Since the inception of Trans Care BC, the volume of upper body surgeries (chest and breast) has increased. Wait times have been reduced over time.
 - In the last couple of years there has been a plateauing of demand. There are approximately 650 referrals into the central waitlist for chest and breast surgeries annually.
- Trans Care BC Health Navigators provide information about care pathways and steps in gender-affirming care processes for clients, loved ones and care providers. In 2022-2023, TCBC health navigators had over 6,000 interactions with community members, family members, loved ones and care providers to help people find care as close to home as possible. This is an 18% increase from 5,184 interactions in 2021-2022.

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- Trans Care BC's voice feminization program, Changing Keys, was established in 2004. This intensive speech and voice training program is the only publicly funded program of its kind in B.C. that supports trans women with feminizing their speech.
 - In 2022-2023, 56 clients completed the program through virtual one-on-one sessions and virtual group sessions.
 - By Feb 2024, 46 clients have completed the program through virtual one-on-one sessions and virtual group sessions during the 2023-2024 fiscal year.
 - Trans Care continues to review this resource to try to reduce wait time and expand access to those with voice goals that aren't suited to the Changing Keys modality.

Issues Management Actions/Initiatives Undertaken and Timeline:

- An ongoing challenge has been supporting equitable access to care for those who are feminizing (trans women). Because estrogen therapy often does not net adequate feminization, trans women tend to require more surgery. Facial feminization and feminizing hair removal is not funded in BC but is commonly required. This is an out-of-pocket expense for many. These procedures were scoped and costed by TCBC (2016-17) via business case to MOH but not approved.
- Timely access to gender-affirming mental health and counselling support is a known gap in care. TCBC's small community grants funds some of this support but more is needed.
- Further progress has been made on development of care pathways with a goal of bringing care closer to home, including:
 - Funding and supporting a network of community-based psychosocial, mental health and peer support providers and groups.
 - Enhancing the health navigator team; building and maintaining an inventory of gender-affirming care options.
 - Creating new clinical tools, educational resources and training new care providers.
 - Conducting a surgical client experience survey to monitor chest and breast surgery experience. Applying learnings to improve experience over time.
 - Continuing to streamline and improve access to genital surgeries, bringing this care closer to home.

Partners Engaged: Trans Care BC's work is all partnership based. Key partners related to the overarching care landscape are varied and include: Regional health authorities, First Nations Health Authority, Foundry BC, Divisions of Family Practice, fee-for-service care providers, BC Children's Hospital, BCCDC, and many community-based non-profit providers.

Financial Implications: Trans Care BC's current budget from MOH is \$6.8M with \$2.4M of this budget being for the VCH Gender Surgery Program

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Gender Affirming Care – Upper Surgery

Current Issues: This note describes the Trans Care BC centralised upper surgery waitlist, related surgical volumes and quality improvement efforts underway.

Central Waitlist Background and Current state

- As of January 1, 2018, the central waitlist for publicly funded gender-affirming upper surgeries moved from a Vancouver Coastal Health surgeon’s office to Trans Care BC (under PHSA).
- Trans Care BC has streamlined the surgical referral process. The pooled waitlist approach allows patients to select the first available surgeon (if a client does not have a preference for a specific surgeon) and has improved communication with patients, referring providers and surgeons.
- 12 surgeons receive referrals from the Trans Care BC pooled waitlist and perform gender-affirming upper surgeries in Abbotsford, Burnaby, Campbell River, New Westminster, Port Moody, Prince George, Quesnel, Smithers, Surrey, Squamish, Vancouver, North Vancouver, and Victoria.
- Trans Care BC works collaboratively with the surgeons and health care leaders associated with the pooled waitlist to review and make improvements to it.
- Currently the volume of upper surgeries and wait times are disparate depending on the region, surgeons’ capacity, and practice patterns. This is under review by Trans BC, in partnership with the surgeons, with an aim to improve consistency and availability of upper surgeries regionally so that care can be accessed closer to home for those outside the Lower Mainland
- There was steady increase in demand for upper surgeries the first few years that Trans Care BC operated the waitlist. In the last couple of years there has been a plateauing of demand. There are approximately 650 referrals into the central waitlist for chest and breast surgeries annually.
- In 2022-2023, there were 660 gender-affirming chest and breast surgeries completed by 15 surgeons in all 5 health authorities.
- Percentage of chest and breast surgeries completed within 26-week target:

Fiscal Year	% of chest surgeries completed within 26-week target and total # of surgeries	% of breast construction surgeries completed within 26-week target and total # of surgeries
2018 – 2019	72% (200 surgeries)	67% (24 surgeries)
2019 – 2020	68% (389 surgeries)	70% (40 surgeries)
2020 – 2021	79% (597 surgeries)	62% (39 surgeries)
2021 – 2022	91% (578 surgeries)	87% (69 surgeries)
2022 – 2023	95% (582 surgeries)	83% (78 surgeries)
2023 – 2024 (to end of P10)	93% (502 surgeries)	85% (33 surgeries)

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Issues Management Actions/Initiatives Undertaken and Timeline:

- Work is underway with MSP and surgeons to review the criteria for breast surgeries to improve access. [s. 13](#)
- The structure and function of the upper surgery centralised waitlist is under review [s. 13](#)
- One surgeon operating in Fraser Health, Dr. Dan McKee, has significantly shorter wait times and does more of these procedures than any other surgeon working from the pooled waitlist. [s. 13](#)

Partners Engaged:

Regional health authority surgical directors, MSP and Tariff Committee, Surgeons participating in the upper surgery waitlist, Patients (via patient experience survey), surgical assessors, Primary care providers (source of referrals).

Financial Implications: These procedures are funded through MSP. Volumes have increased over time; this will have had an impact on billings. The waitlist coordination is funded through the core budget of Trans Care BC.

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Gender Affirming Care – Lower Surgery

Current Issues: This note describes the launch and function of the Gender Surgery Program at VCH.

Background:

- Historically patients have travelled to Montreal, Quebec or to the USA for gender-affirming genital reconstruction surgeries. These procedures are now offered in Vancouver via the VCH Gender Surgery Program BC, reducing the need for out-of-province surgical care.
- The program is funded through Trans Care BC and launched in fall 2019, with the support of Trans Care BC and the Ministry of Health, Vancouver Coastal Health. This made B.C. the first in Canada to offer all gender-affirming genital surgeries in the public system of care.
- A data and reporting clean-up is happening with MOH/PHSA and VCH to better track these procedures. To-date, the VCH Gender Surgery Program has fully implemented the program which offers vaginoplasty, metaoidioplasty and phalloplasty surgeries. Current program statistics:¹
 - In 2022-2023, 118 cases were completed.
 - In 2023-2024 FY 103 cases have been completed to date as of the end of P10.
- As a part of the rollout of this new program, the Ministry of Health funded medically necessary, pre-surgical hair removal which is a prerequisite for some gender-affirming genital surgeries. Trans Care BC is responsible for funding and contracting these hair removal providers. In 2023/2024 there are currently 17 sites offering hair removal for gender-affirming surgeries, with a total of 26 providers.

Issues Management Actions/Initiatives Undertaken and Timeline:

- Wait times for consult for this new program and patient engagement has been a concern. The VCH Gender Surgery program continues to work on improving access and capacity.
 - The program recently implemented a Waitlist Coordinator role to assist with communication with patients and access to information about the program.
- The VCH GSP needs to increase volumes to keep up with current demand ^{s. 13}

Partners Engaged: VCH surgical directors and operational leadership, Patients (via client experience survey), Surgeons, surgical assessors, Primary care providers (source of referrals), Hair removal providers

Financial Implications: Further investment is needed to scale up program – current confirmed budget for the VCH GSP is 2.4 million with 300,000 at TCBC for medically necessary, pre-surgical hair removal services. This year is projected to be a full spend of this budget for the first time since program began.

¹ There are known reporting discrepancies between Vancouver Coastal Health and Surgical Patient Registry (SPR) data. A collaborative effort is underway between Ministry of Health, VCH and Trans Care BC to address this issue by standardizing reporting.

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Gender Affirming Care – Care for Children and Youth

Current Issues: This note describes population-specific issues regarding the care of trans, Two-Spirit and non-binary (TTNB) children and youth.

Background:

- Trans, Two-Spirit and non-binary (TTNB) children, youth and their families/supportive adults are a population that TCBC has focused on due to the unique care needs and historical and current gaps in service.
- Over time, an increasing number of young people have presented for care with a range of care needs, from basic to more complex.
- TTNB children, youth and their families often require more psychosocial support services such as counselling and peer support. For children, youth and families, most counselling remains private pay; however, some free or low-cost options exist through services such as Foundry, Child and Youth Mental Health and some community services. Gender-affirming competency differs from site-to-site.
- Youth in the care of the Ministry of Children and Family Development (MCFD) and engaged in MCFD services are of particular concern for our PHSA trans health programs as these individuals often face additional barriers to wellness and care.
- Ideally, the care needs of TTNB children are met in a place-based way with stepped care pathways in place.
- Only some TTNB youth require specialized services, but for many, basic place-based resources skilled at engaging this population still don't exist.
- There are many strengths to be built on around B.C., and Trans Care BC is well positioned to continue supporting system improvements; however, this is a growing population and many existing services are under-resourced.
- For most youth, there is no medical intervention needed, just social support.
- For some, timely access to puberty blockers at the time of puberty onset is critical.
 - Currently, it is a challenge to access blockers around BC.
- Assessment and timely access to care for blockers, hormone therapy and other future medical interventions for trans youth requires more resource and is difficult to access for many youth and families.

Trans Care BC work:

Trans Care BC has continuously worked on improvements to care for TTNB children, youth and their families/caregivers. Some key aspects of the work are:

- **Health Navigation:** For children, youth and families seeking mental health supports, the Trans Care BC Health Navigation team can provide information about public and private mental health resources in their area. This team offers support to bridge parents, caregivers and youth to gender-affirming resources. Additionally, this team maintains a real-time inventory of available care access points.
- **Advisory work:** Trans Care BC continuously seeks feedback on key aspects of program-work related to children, youth, and their families/caregivers. The program hosts a Clinical Advisory Group and has a growing list of community and parent/caregiver advisors with lived experience who inform program work and development.

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- **Support groups:** Stemming from consultation with community, Trans Care BC created a funded network of community-based, peer-driven support groups, some in partnership with mental health providers. Of the 35 funded groups:
 - 23 support youth
 - 10 support children
 - 18 support families/caregivers (some support all 3 cohorts)
- **Online education:** Creation of online and virtual courses and educational opportunities:²
 - Indigenous Gender Diversity: Creating Culturally Relevant and Gender-affirming services E-learning module (3 hours);
 - Supporting Gender Creative Children and their Families E-learning module (90 min);
 - Live and advanced practice trainings on clinical practice with trans, gender diverse and Two-Spirit youth;
 - Piloted Project ECHO in May 2023: This CME accredited, successful pilot will be adapted and offered routinely in order to build more capacity for community care; a youth focus will be integrated into future offerings;
 - In June 2023, Trans Care BC and BCCH piloted a new, CME-accredited, advanced practice and live training for pediatricians and adolescent medicine providers to teach gender-affirming care of pubescent youth and puberty blockers;
 - Weekly Clinical Mentorship Call for providers who are supporting TTNB people with rotating mentors including child and youth experts, autism care experts;
 - Developed a revised live training in 2022 for mental health and counselling providers focused on supporting youth and families. This was offered to MCFD and other teams online three times in 2022-2023.

Issues Management Actions/Initiatives Undertaken and Timeline:

- Trans Care BC is currently working on activities within a new strategic action plan that aims to close key gaps in gender-affirming care via active partnerships. Most aspects of the strategic action plan will positively impact children, youth and families.
- The Right to Thrive report released by the Child and Youth Representative BC notes significant challenges for TTNB youth engaged in MCFD services. Cross Ministry work is underway to define principles and an action plan to remedy concerns.

Partners Engaged: Foundry BC, Regional health authorities and First Nations Health Authority, BC Children's Hospital, CYMH Community services, Community based peer support groups for TTNB youth, TCBC Health Navigation team, community advisors, non-profit community partners and agencies.

Financial Implications: There is work to do to quantify resource needs for this population. Because young people cross so many Ministries, cross-Ministry collaboration is required to continue to improve access to care and support.

² Please see information relating to educational offerings in the final section of this document.

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Gender Affirming Care – Partnerships, Networks and Education

Current Issues: This note overviews key partnerships, networks and educational activities.

Background:

Educational Resource Development

- Since 2016, Trans Care BC has developed in-person, live and asynchronous E-Learning trainings and educational resources through needs assessment, review, engagement with partners, and input from subject matter experts from a range of backgrounds.
 - As of P10 2024, more than 50,000 registrants completed TCBC's Introduction to Gender Diversity course.
 - TCBC continues to offer the well-attended, weekly, noon-hour, virtual Clinical Mentorship Call with numerous new mentors added to the rotation from a broad range of disciplines and practice settings.
 - On March 31, 2022, a new Indigenous Gender Diversity course was launched with more than 3,300 registrants signing up to complete the course, to-date.
- In late-March 2022, Trans Care BC and BC Centre for Disease Control (BCCDC) worked in partnership to share a first-of-its-kind Hormone Injection Supplies Toolkit resource.

Health Canada Funding

- In April 2022, Trans Care BC was awarded \$3.2M from the Sexual and Reproductive Health Fund (federal government) to develop an enhanced suite of educational tools and resources for care providers, patients and their supporters.
 - This funding was enhanced, through an amendment, with an additional \$1.8M in March 2022 to add additional content and communication resources to amplify aspects of the project that will be highest impact.
 - In collaboration with many organizational partners, a learning and communications campaign focussed on clarifying care and support needs for trans, Two-Spirit and non-binary (TTNB) and parents/caregivers, will be launched in Spring 2024. Tools and resources to teach care providers and parents/caregivers about how to be alert to mis and disinformation presently circulating about gender-affirming care will be a part of the campaign.
 - The enhanced suite of educational tools and resources include:
 - A new Learning Management System (LMS) has been developed alongside a suite of new asynchronous E-learning modules and tools. The new Learning Management System 'soft-launched' as of February 2023.
 - a live evidence-based clinical educational program (Project ECHO); the successful 2023 ECHO pilot has been expanded with over 130 learners currently enrolled (as of P10) in two streams of education over a twelve-month period.
 - a new program website created through extensive user experience research with

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community members and users with the goal of increasing access to information and site accessibility.

Additional work

- In January 2022, Trans Care BC partnered with the B.C. provincial government to announce updates to changing gender designations on provincial identification documents. Two-Spirit, transgender and gender diverse people 12 years and older in British Columbia can now change their gender designations on the BC Services Card, B.C. driver's licence, BCID card and B.C. birth certificate through a self-declaration process.
- Trans Care BC provided 35 community grants to peer supported mental health & well-being projects in 2022-2023. In 2023-2024, 35 groups have been funded. The team hosted Provincial Network Calls and an in-person gathering (partially funded by Health Canada) of the funded projects in March 2023 to provide feedback to Trans Care BC, connect and share support, resources, and knowledge.

Research Partnership Highlights

- Current Trans Care BC research partnerships (as of February 2024) include:
 - Sex and Gender Working Group - Canada Health Infoway
 - PROGRESS (Patient-Reported Outcomes of Genital Reconstruction and Experiences of Surgical Satisfaction)
 - CIHR Catalyst Grant - Youth and gender-affirming care questions
 - Gender-Diverse Youth Chronic Pain Study - UBC and BC Children's Hospital
 - PRIDE-RX (Promoting 2SLGBTQIA+ Inclusion, Diversity, and Equity in Pharmacy Education) – UBC
 - Health Canada funded Information Campaign - UBC School of Nursing

Issues Management Actions/Initiatives Undertaken and Timeline: Trans Care BC has been challenged to meet the information and education needs on trans health topics. These new resources should help those seeking information or learning opportunities access in a more seamless way.

Partners Engaged: Regional health authorities, First Nations Health Authority, non-profit providers, care providers from a range of settings and disciplines, community SMEs including trans and gender diverse people and their loved ones.

Financial Implications: Trans Care BC has applied for an extension of Health Canada funding to further refine educational tools and resources.

LEGISLATIVE SESSION – ESTIMATES NOTE

Trans Care BC and Gender Affirming Surgery Program

Topic: Trans Care BC (TCBC) is a Provincial Health Service Authority (PHSA) program that was established in 2015 in BC to provincially coordinate and improve access to transgender health services, including lower gender-affirming surgery (LGAS) through the Gender Surgery Program (GSP).

CURRENT SITUATION

- TCBC provides information, resources and pathways to care related to trans health and wellness.
- TCBC Health Navigators provide information about care pathways and steps in gender-affirming care processes for clients, loved ones and care providers. In 2022-2023, TCBC health navigators had over 6000 interactions, an 18% increase from 2021-2022.
- TCBC has developed online trainings and educational resources to support trans individuals, their families, service providers, and community members.
 - As of P10 2024, more than 50,000 registrants completed TCBC's Introduction to Gender Diversity course.
 - TCBC continues to offer the well-attended, weekly, noon-hour, virtual Clinical Mentorship Call with numerous new mentors added to the rotation from a broad range of disciplines and practice settings.
 - On March 31, 2022, a new Indigenous Gender Diversity course was launched with more than 3,300 registrants signing up to complete the course, to-date.
- In April 2022, Trans Care BC was awarded \$3.2 million from the Sexual and Reproductive Health Fund (federal government) to develop an enhanced suite of educational tools and resources for care providers, patients and their supporters. The new tools and resources include:
 - A new Learning Management System (LMS) has been developed alongside a suite of new asynchronous E-learning modules and tools.
 - A live, evidence-based clinical educational program (Project ECHO). The successful 2023 ECHO pilot has been expanded with over 130 learners currently enrolled (as of P10) in 2 streams of education over a twelve-month period.
- TCBC's voice feminization program, Changing Keys, was established in 2004. This intensive speech and voice training program is the only publicly funded program of its kind in BC that supports trans people with changing their speech.
 - In 2022-2023, 56 clients completed the program through virtual one-on-one sessions and virtual group sessions.
 - By February 2024, 46 clients have completed the program through virtual one-on-one sessions and virtual group sessions during the 2023/24 fiscal year.

Upper Gender Affirming Surgery (UGAS):

- As of January 1, 2018, the central waitlist for publicly funded UGAS moved from a Vancouver Coastal Health surgeon's office to TCBC (under PHSA).
- Using a pooled waitlist approach, TCBC has streamlined the surgical referral process for UGAS and has improved communication with patients, referring providers and surgeons.
- Work is underway with the Medical Services Plan (MSP) and surgeons to review the criteria for breast surgeries with an aim to improve access. There is currently a special MSP approval step for breast surgeries that is not in place for chest surgeries which has been noted as a barrier for patients and surgeons.
- In BC there are 12 surgeons in 5 regional health authorities that accept patients from the central waitlist for UGAS. In 2023-2024 (to end of P10):
 - 502 chest surgeries have been completed to date and 92% were completed within the 26-week target.
 - 33 breast surgeries have been completed and 85% of these were completed within 26-week target.

LEGISLATIVE SESSION – ESTIMATES NOTE

- UGAS procedures are funded through MSP. The waitlist coordination is funded through the core budget of TCBC.

Gender Surgery Program BC (GSP-BC):

- In 2019, with the support of TCBC and the Ministry of Health, Vancouver Coastal Health Authority (VCH) opened the doors of the new Gender Surgery Program BC, making BC the first in Canada to offer all gender-affirming genital surgeries in the public system of care.
- The GSP-BC is operated by VCH and funded by TCBC, PHSA. Physician funding is provided through the Ministry’s Alternative Payments Program (APP).
- To-date, the GSP-BC has fully implemented the program which offers vaginoplasty, metaoidioplasty and phalloplasty surgeries.

Table 1: Lower Gender Affirming Surgery at VCH GSP-BC¹

	2019/20	2020/21	2021/22	2022/23	2023/2024 (P10 YTD)
Total Lower Gender Affirming Surgeries at VCH	54	76	100	120	86

Note: data represents all lower gender affirming procedures completed at VCH and performed by the 2 specialists under the GSP.

- To reduce barriers to LGAS, the Ministry funds medically necessary, pre-surgical hair removal which is a prerequisite for some gender-affirming genital surgeries. TCBC is responsible for funding and contracting these hair removal providers. In 2023/2024, there are 17 sites offering hair removal for gender-affirming surgeries, with 26 providers.
- Further reducing barriers to LGAS, the assessment process was streamlined to align with newly released World Professional Association of Transgender Health Standard of Care V8.
 - As of February 2023, only 1 surgical readiness assessment is required for all gender-affirming surgeries. Previously 2 assessments from 2 different assessors were required for genital reconstruction surgeries.
 - Prior to TCBC’s start in 2015, there were 14 publicly funded surgical assessors across the province. With TCBC and clinical partners offering continuous specialized training and practice support for assessors, this number has increased to over 100.
- GSP-BC has reduced the need for out-of-province (OPP) surgical care for LGAS, however, patients can still access OPP gender affirming surgeries. Criteria and funding approval for out-of-province/out-of-country health services, including gender-affirming surgeries, is overseen by MSP.

FINANCIAL IMPLICATIONS

- The operating costs associated with the implementation of a provincial program for transgender health services have been determined incrementally as the program grows and develops.
- In 2023-2024 the TCBC budget from PHSA is \$7.0 million, with \$2.5 million of this budget being for the VCH GSP.

KEY BACKGROUND

- TCBC was established in fall 2015 as a program of PHSA and assumed responsibility for the provincial coordination of trans health services in BC. These services were previously uncoordinated at a provincial level.
- The program, which is the first of its kind in Canada, sets direction and provides leadership for transgender health services and supports in BC. The program uses an evidence-based approach to support improved

¹ Data Source: Health Sector Information, Analysis and Reporting (HSIAR), Gender Affirming Surgeries, RMS 7733, Site 399, restated data.

LEGISLATIVE SESSION – ESTIMATES NOTE

quality of care for trans, two-spirit, and non-binary people of all ages in BC through a strengthened and networked system of care.

- The program works with the Ministry, First Nations Health Authority, regional health authorities, organizational partners and transgender community advisors on continuous improvements and a provincial model of care.

LAST UPDATED

The content of this estimates note is current as of February 26, 2024, as confirmed Eugene Johnson.

APPROVALS

2024 03 15 – Christine Voggenreiter obo Martin Wright, Health Sector Information, Analysis and Reporting Division

2024 04 04 – Peter Klotz obo Rob Byers, Finance and Corporate Services Division

2024 04 04 – Kristy Anderson, Hospital and Provincial Health Services Division

Reporter

Iain Burns, Reporter
New Media Group – KelownaNow

Deadline Thursday, April 11, 2024 1:00 PM

Request

I'm writing a little piece up about the Cass Review in the UK. The report concerns transgender care and transgenderism generally. It appears to be causing quite a stir around the world already.

Here's the summary:

<https://cass.independent-review.uk/home/publications/final-report/>

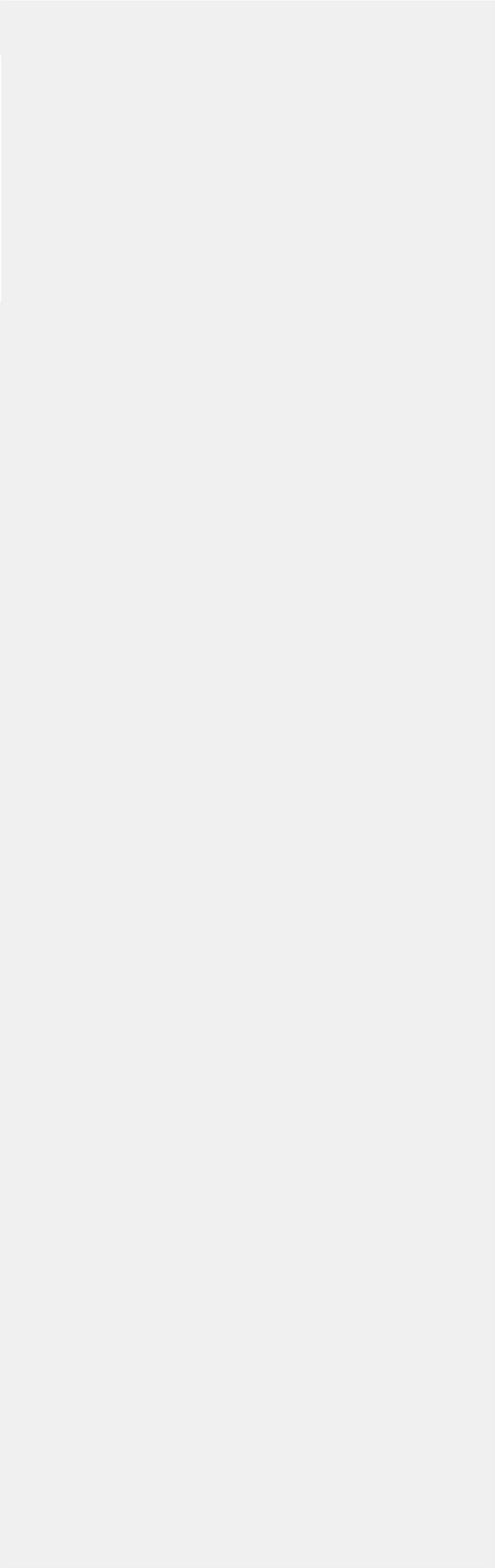
I just wanted to ask if BC government officials are planning to read it, and whether – particularly given the findings in the report about puberty blockers and the lack of evidence for various treatments – the Province still has full confidence in its transgender care policies.

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Background



Statement regarding the delivery of gender-affirming care for youth in B.C.

February 1, 2024

The Provincial Health Services Authority (PHSA), including BC Children’s Hospital (BCCH) and Trans Care BC (TCBC), is committed to ensuring that trans, Two-Spirit and non-binary British Columbians have access to the health care and supports they need. We continue to work, with our partners in care, on improving access and availability of this care in our province.

In B.C., our health-care providers are proud to provide evidence-based gender-affirming care, ensuring that individuals, including children and youth, seeking this care receive it safely, inclusively, and closer to home.

TCBC is a provincial clinical program of PHSA with a mandate to plan, coordinate, and monitor trans health services and supports in B.C. The Gender Clinic at BCCH offers wraparound care for young people and their caregivers. This care may include puberty blockers and/or gender-affirming hormones for trans, Two-Spirit and non-binary youth, with rigorous oversight from pediatric specialists, including endocrinologists, mental health providers, adolescent medicine specialists, and others.

PHSA and its programs provide education and clinical care in accordance with accepted international standards of care for transgender health, including The World Professional Association for Transgender Health ([WPATH](#)) Standards of Care V8 (2022) and the [Endocrine Society’s 2017 Clinical Practice Guidelines](#).

At PHSA, we firmly believe that every child and youth seeking care in our province has a right to safe, quality, and compassionate care.

For more information, please visit www.transcarebc.ca or the [BC Children’s Hospital Gender Clinic webpage](#).

From: Grieves, Lorraine [PHSA](Lorraine.Grieves@phsa.ca)
To: Cassandra.Sullivan@gov.bc.ca, Sullivan, Cassandra HLTH:EXkile.brokop@phsa.ca, Brokop, Kile [PHSA]
To: lucas.wilson@phsa.ca, Wilson, Lucas [PHSA]
Subject: RE: UBC Trans Coalition Meeting
Sent: 02/16/2024 22:41:47

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Cassandra,

Maureen has asked that one of my provincial leads, Lucas Wilson copied above, attend this meeting with her and the group at noon February 26th. Is this the same meeting? If so, this is great as Lucas and I have met with this coalition together a number of times. I will be off on vacation that week.

We would like to better understand your questions so please reach back to us if this is not what you are looking for. Some notes for reference are below:

- Hormone therapy for adults can, in many cases, be provided via the same physician assessing and prescribing just as one would for any other medication. There are zones in this province where it is more of a specialist pathway, despite the care being more straightforward and appropriate to sit in primary care, for example.
- There is a range of comfort level and bias in the physician space- some are simply unwilling to work with this patient cohort or feel underprepared or are under assumptions based of former models of care that are now outmoded.
- the funding coverage for the medication varies depends on the circumstances of the patient. There are various forms of the medications- injectible estrogen is compounded and not funded- this is seen as a barrier. [s. 13](#)
- The pathways and practices around hormone initiation in our province still vary and have quite a historical legacy in this province and have shifted with each new Standard of Care. We train and support providers according to the newest Standard of Care which is WPATH Standard of Care V8 (2022).
- The model we have been supporting is a public system model and we are working as much as we can to embed this care in primary care settings, and other publicly funded care environments where appropriate.
- There are some different assessment practices with a smaller segment of the population still undergoing a private pay assessment which is required by some prescribers such as endocrinologists working in this space. The assessor could be a private pay psychologist, for example, and this is seen as a barrier to some who cannot afford this or feel this is 'over-assessing'. We have been supporting a model that attends to the complexity of the patient and the care required.
- Trans Care BC's work has been to train and support public providers, including primary care providers in a range of settings, to deliver this care. We continuously train and support care providers to do this; it's some of our core business and our recently launched ECHO training has 130 providers registered.
- Upcoming changes to our website and clinical resources will include a digital "Clinical Handbook" which will be a supportive resource for prescribers.

As mentioned, the UBC group is up to date with Trans Care BC's work and Lucas is a great resource for additional information. Lucas will also be joining my next one to one with Maureen to brief her. I hope this is helpful.

Thanks,

Lorraine

Lorraine Grieves, MA,RCC

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I acknowledge, with gratitude, that my place of work is on the ancestral, traditional and unceded territories of the xʷməθkʷəy̅əm (Musqueam), Skwxwú7mesh (Squamish), and selilwítlh (Tseil-waututh) Nations.
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From: Sullivan, Cassandra HLTH:EX <Cassandra.Sullivan@gov.bc.ca>
Sent: Friday, February 16, 2024 10:02 AM
To: Grieves, Lorraine [PHSA] <Lorraine.Grieves@phsa.ca>; Brokop, Kile [PHSA] <kile.brokop@phsa.ca>
Subject: UBC Trans Coalition Meeting

EXTERNAL SENDER. If you suspect this message is malicious, please forward to spam@phsa.ca and **do not** open attachments or click on links.

Hi Lorraine and Kile, its me again!

I have been asked to prepare some bullets for Maureen and Kristy Anderson to prep for their meeting with the UBC Trans Coalition. The two topics that we are gather info on are 1) increased funding/access for hormone therapy and 2) DEI (Diversity, Equity, Inclusion) initiatives in government. We already have updates from our Ministry partners but I wanted to reach out and see if there is any updates from TransCare BC that you think is relevant to include. I am hoping to have the info gathered (so I can start drafting bullets) by EOD Tuesday. Recognizing the short timeline, I am happy the receive the information in any way/format that is easiest for you.

Kindly,

Cassandra Sullivan
Director, Provincial Clinical Programs
Provincial Services Branch
Hospital and Provincial Health Services
Ministry of Health
Cassandra.Sullivan@gov.bc.ca
Office: (778) 698-4932
Cell: (250) 480 6766

I acknowledge that my place of work is within the ancestral, traditional and unceded territory of the Coast Salish Nations.

From: Cote, Piper HLTH:EX(Piper.Cote@gov.bc.ca)
To: Cassandra.Sullivan@gov.bc.ca, Sullivan, Cassandra HLTH:EX
Subject: Media Review: GAC
Sent: 04/16/2024 22:29:58
Attachments: Media Review - Changes to Care for Trans Youth .docx

Hi Cassandra,

Attached is the media review I did on changing policies for gender-affirming care for minors. Please let me know if you have any questions/concerns/edits 😊

Cheers,

Piper Cote (she/her)

Senior Project Management Analyst, Results Management Office
Provincial Services Branch | Hospital and Provincial Health Services Division

Ministry of Health 
Office: 778.445.5322 | piper.cote@gov.bc.ca

Grateful to live, work, and play on the traditional territories of the Lək̓ʷəŋən speaking people.

Media Review: Changes to Care for Trans Youth

Canada

Alberta: the provincial government announced its intention to **ban both top and bottom surgeries for minors under the age of 18**. However, those under 18 are already ineligible for bottom surgery funding. Under the current rules, a person must be 16 to be eligible for top surgery in Alberta.

Under Smith's proposed policy, **puberty blockers and hormone therapies for the purpose of gender affirmation will no longer be permitted for anyone under 16, except for those who have already commenced treatment**. It would be Canada's first ban on such medication.

While Smith's age restrictions break new ground in Canada, she follows Saskatchewan and New Brunswick with **her plan to require parental consent when teens under 16 want to change their names or gender pronouns in classrooms, and went further by requiring parents be notified if their 16- or 17-year-olds do the same**.

- <https://www.cbc.ca/news/canada/calgary/trans-youth-restrictions-canadas-toughest-danielle-smith-politicized-analysis-1.7102590>
- <https://www.cbc.ca/news/canada/calgary/alberta-trans-youth-rules-international-landscape-1.7135324>

Saskatchewan: Saskatchewan Premier Scott Moe is ready to use the notwithstanding clause to protect a **new rule requiring parental permission for transgender and non-binary students under 16 to use different names or pronouns at school**. In the face of a court challenge brought against the new education policy, Moe announced late last week that his provincial government would seek to enshrine the changes in legislation to be introduced this fall.

- <https://www.cbc.ca/news/canada/saskatchewan/sask-premier-ready-to-use-notwithstanding-clause-to-protect-newschool-pronoun-and-name-rules-1.6966385>

New Brunswick: Policy 713 was designed to protect LGBTQ students in schools. But earlier this year, New Brunswick's Progressive Conservative government made changes that, in part, mean **teachers are no longer required to use the chosen names and pronouns of transgender or non-binary students under 16 without parental consent**.

- <https://www.cbc.ca/news/canada/new-brunswick-trans-lgbtq-higgs-1.6889957>
- <https://www.cbc.ca/news/politics/poillievre-new-brunswick-lgbtq-students-1.6889770>

Europe – General

- General overview: <https://www.politico.com/news/2023/10/06/us-europe-transgender-care-00119106>
- There is a call for Finland to follow other European countries in restricting gender-affirming care for minors: <https://segm.org/Dutch-protocol-debate-Netherlands>

Sweden

Sweden decided in February 2022 to halt hormone therapy for minors except in very rare cases, and in December, the National Board of Health and Welfare said mastectomies for teenage girls wanting to transition should be limited to a research setting.

- <https://www.france24.com/en/live-news/20230208-sweden-puts-brakes-on-treatments-for-trans-minors>
- Policy: <https://www.socialstyrelsen.se/globalassets/sharepoint-dokument/artikelkatalog/kunskapsstod/2023-1-8330.pdf>

England

Children in England will no longer be prescribed puberty blockers at gender identity clinics. Under the new policy, **puberty blockers for those under 18 will only be available as part of research studies.**

- <https://www.cbc.ca/news/health/england-national-health-service-puberty-blockers-minors-1.7142300>
- Updated NHS policy: <https://www.england.nhs.uk/publication/clinical-policy-puberty-suppressing-hormones/>
- Details on how the policy will be implemented: <https://www.england.nhs.uk/commissioning/spec-services/npc-crg/gender-dysphoria-clinical-programme/implementing-advice-from-the-cass-review/>

United States

The following states have banned gender-affirming care for minors: Alabama, Arizona, Arkansas, Florida, Georgia, Idaho, Indiana, Iowa, Kentucky, Louisiana, Mississippi, Missouri, Montana, Nebraska, North Carolina, North Dakota, Ohio, Oklahoma, South Dakota, Tennessee, Texas, Utah, West Virginia, and Wyoming.

24 states have enacted laws/policies limiting youth access to GAC. **22 states** impose professional or legal penalties on health care practitioners providing minors with GAC. **38%** of trans youth (ages 13-17) live in a state with a laws/policies limiting their access to GAC.

- <https://www.usnews.com/news/best-states/articles/2023-03-30/what-is-gender-affirming-care-and-which-states-have-restricted-it-in-2023>
- <https://www.kff.org/other/dashboard/gender-affirming-care-policy-tracker/>

From: Brokop, Kile [PHSA](kile.brokop@phsa.ca)
To: Cassandra.Sullivan@gov.bc.ca, Sullivan, Cassandra HLTH:EXAun.Jaffery@gov.bc.ca, Jaffery, Aun HLTH:EXConnie.Quaedvlieg@gov.bc.ca, Quaedvlieg, Connie HLTH:EX
To: Lorraine.Grieves@phsa.ca, Grieves, Lorraine [PHSA]lucas.wilson@phsa.ca, Wilson, Lucas [PHSA]catherine.jenkins@phsa.ca, Jenkins, Catherine [PHSA]
Subject: We are Allies Campaign Launch
Sent: 07/11/2024 22:33:11

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello,

We are pleased to share that the [We Are Allies](#) website and social media campaign launched last week on July 2nd 2024.

Developed by researchers and subject matter experts from a broad range of backgrounds, this campaign showcases research-based information and personal narratives from a range of perspectives about gender diversity and gender-affirming care for youth.

We Are Allies will run a social media campaign for six weeks from July 2nd to mid-August to drive traffic to the website and to share positive messages drawn from campaign content broadly, online. Some paid media such as TV ads will run in some key locations.

This campaign is a **positive, strengths-based, awareness-raising** campaign focused on sharing various perspectives on how gender-affirming care and support improves the health and wellness of trans, Two-Spirit and non-binary youth.

The campaign builds awareness about the prevalence of health misinformation and the importance of learning accurate information by lifting up the voices of young trans people, supportive relatives/parents/caregivers, Indigenous leaders, healthcare providers and other experts. This campaign was shaped by community members, parents/caregivers, healthcare providers and researchers from across Canada, and showcases stories from people from across the country.

Please reach out to tcbcpartners@phsa.ca if you have any **questions or would like to learn more about the campaign.**

We invite you to support and share the campaign by:

- Checking out weareallies.ca
- Following **We Are Allies** on social media:
 1. [Instagram](#)
 2. [Facebook](#)
 3. [TikTok](#)
 4. [LinkedIn](#)

Kile Brokop (he/him)

Provincial Lead, Health System Quality and Evaluation, Trans Care BC

Provincial Health Services Authority

Email: kile.brokop@phsa.ca

www.transcarebc.ca

I acknowledge that my home and work place is within the ancestral, traditional and unceded territory of the Katzie First Nation, which lies within the shared territories of the Kwantlen, Matsqui, Semiahmoo and Sto':lo First Nations.

From: Grieves, Lorraine [PHSA](Lorraine.Grieves@phsa.ca)
To: Kristy.Anderson@gov.bc.ca, Anderson, Kristy HLTH:EX Eugene.Johnson@gov.bc.ca, Johnson, Eugene HLTH:EX
modonnell@phsa.ca, XT:ODonnell, Maureen HLTH:INeric.lun@phsa.ca,
To: eric.lunsusan.wannamaker@phsa.ca, Wannamaker, Susan
[PHSA]Cassandra.Sullivan@gov.bc.ca, Sullivan, Cassandra HLTH:EX
Subject: GPCE green light: For awareness, Proactive Media - We Are Allies Campaign
Sent: 06/21/2024 16:25:36
Attachments: Summary for GCPE June 20.docx

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Kristy and Eugene,

I am writing to share the attached GPCE summary and the update that GPCE has given a green light related to this communication.

Please let us know if you have any questions or need any further information. Thanks for your ongoing support of our work.

Thanks,

Lorraine

Lorraine Grieves, MA,RCC
Provincial Program Director, Trans Care BC
Provincial Health Services Authority
175 West Broadway
Vancouver, BC V5Y 1P4
604-875-4489 ext 22994
Email:lorraine.grieves@phsa.ca
<http://www.phsa.ca/transcare>



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Hey good news! Green light (and quickly!) from GCPE. LG, please still share with your MOH colleagues and note that GCPE has given the go-ahead. And the teasers should be fine next week. Congrats – it's happening...

Libby

Libby Brown

Senior Director, Communications & Engagement

c. 604-763-5076

From: Brown, Libby [PHSA] <Libby.Brown@phsa.ca>
Sent: 21 June 2024 07:16
To: Grieves, Lorraine [PHSA] <Lorraine.Grieves@phsa.ca>
Cc: O'Donnell, Maureen [PHSA] <modonnell@phsa.ca>
Subject: FW: Proactive Media - We Are Allies Campaign

Hi lg,

Here is the message that has gone to GCPE with a short summary document. This content also went to David last night.

Please share with Kristy and your MOH colleagues.

I am out of the office today but keeping an eye on this!

Libby

Libby Brown

Senior Director, Communications & Engagement
c. 604-763-5076

From: Olivier, Cassidy [PHSA] <cassidy.olivier@phsa.ca>
Sent: Friday, June 21, 2024 7:09 AM
To: stephen may <stephen.may@gov.bc.ca>; Crofts, Amy E GCPE:EX <Amy.Crofts@gov.bc.ca>; Thouli, Sabreena GCPE:EX <Sabreena.Thouli@gov.bc.ca>; Bourgeois, Danielle GCPE:EX <Danielle.Bourgeois@gov.bc.ca>; Bru, Carolyn GCPE:EX <Carolyn.Bru@gov.bc.ca>; chris shewchuk <chris.shewchuk@gov.bc.ca>
Cc: Dawkins, Laurie [PHSA] <laurie.dawkins@phsa.ca>; Brown, Libby [PHSA] <Libby.Brown@phsa.ca>; Chou, Vincent [PHSA] <Vincent.Chou@phsa.ca>; Foulds, Christopher [PHSA] <christopher.foulds@phsa.ca>; Peng, Jenny [PHSA] <jenny.peng@phsa.ca>
Subject: Proactive Media - We Are Allies Campaign

Good morning,

Please find attached a summary of the *We Are Allies* campaign that is set to launch late June/early July. In brief:

- This is a national information campaign, supported from Health Canada funding, aimed at addressing misinformation about gender-affirming care.
- While Trans Care BC is a core partner, it involves a broad coalition of support, including from UBC, Children's Health Care Canada, Foundry, FNHA, VCH, and MOH (Kristy Anderson is aware of this).
- Campaign details are included in the summary, as well as the current media plan (social, web stories, targeted pitching).

Please reach out if you have additional questions.

Thanks,

Cassidy

Cassidy Olivier

Director, Media Relations & Issues Management
Provincial Health Services Authority
200 – 1333 W Broadway
Vancouver, British Columbia
V6H 4C1 Canada
604-786-5496 Cell
778-867-7472 Media line
www.phsa.ca

I acknowledge with gratitude that my place of work is within the unceded land of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh Úxwumixw (Squamish), and salíilwətaʔ (Tseil-Waututh) Nations.

Campaign overview

We Are Allies

In 2022-2023, Trans Care BC received funding from Health Canada's Sexual and Reproductive Health Fund for an information campaign to address misinformation about gender-affirming care for trans, Two Spirit and non-binary (TTNB) youth via a broad and compelling communications campaign. Based on positive, research-backed, key messages, the campaign has been developed based on national consultation, available evidence and an expertly crafted social marketing communications campaign. Sharing and uptake of campaign materials will be supported through a provincial and national coalition of health organizations who have been a part of informing and shaping the project.

Trans Care BC has partnered broadly with community leaders and organizations across Canada to develop this project. Researchers from the University of British Columbia, TTNB youth, their families, and healthcare providers have helped co-create these resources that aim to dispel harmful narratives and draw audiences to positive, fact-based resources.

More than 100 provincial and national partners have expressed support for the campaign. As of June 20, 20 partners have formally signed to support the campaign with more being added over the next days. This will mean that their logo will be present on the campaign website, showing their support, and they will be part of amplifying *We Are Allies* social media content over the six weeks of the campaign. Many more are expected over the coming weeks as organizations complete their required internal review and sign-off for partnership.

Ministry of Health is a significant partner through program support in the Hospital Services portfolio.

Core partners who have been a part of the campaign's development from the point of funding application and inception include: Health Canada, University of BC, Science Up First, Children's Healthcare Canada, Foundry BC, Vancouver Coastal Health- Trans Specialty Care program, Community Based Research Centre, First Nations Health Authority, Northern Gender Clinic - PG Division of Family Practice, Squamish Nation, PHSA Indigenous Health Youth Wellness Team.

We Are Allies is set to launch late June 2024 and includes the following components:

- A communications campaign developed in consultation with a broad range of subject matter experts. The campaign will be disseminated via organizational networks, and by earned and social media, to draw key audiences to a micro-website hosting a range of video-based stories and fact sheets about the benefits and evidence about gender-affirming care and youth.
 - The campaign uses video vignettes based on positive information themes to share the facts and to humanize trans and gender diverse people with the objective to invite audiences to learn more and hear various perspectives.
 - Inviting the audiences to come to their own conclusions, video vignettes will be backed up by evidence-based fact sheets, hosted on the campaign website, clarifying key areas of misinformation about gender health care and youth.

- The campaign website will host the following:
 - Campaign videos
 - Fact sheets on key topics about gender diversity and gender-affirming care of youth
 - Link to an e-learning module on addressing mis and disinformation
- The project also includes advanced practice curriculum for health care providers teaching on gender-affirming care, to be piloted in 2024.
- A trusted messenger approach to support relational and locally focused ways of sharing campaign information. Indigenous partners will be engaged in first round of work to support distinctions-based approach.

The campaign highlights Two-Spirit, trans and non-binary wellbeing, joy and storytelling, and shares knowledge and research related to best practices in youth gender health.

- Goal: Increase awareness and understanding about campaign assets on gender-affirming care and TTNB youth.
- Goal: TTNB youth, parents/caregivers and healthcare practitioners gain confidence addressing misinformation about youth gender-affirming care and feel more prepared to identify and address health misinformation.
- Goal: TTNB youth, parents/caregivers and healthcare practitioners feel represented and supported in the public-facing *We are Allies* campaign.
- Goal: Moveable middle parent/caregiver audience learns new information about gender diversity and gender-affirming care.

Channels:

- Key partners: local, regional, national.
 - Core Partners (see above)
 - National Coalition Partners- engaged to endorse, amplify and utilize materials
 - Provincial Partnerships & Networks (Community & Clinical) –TCBC Clinical Advisory Group, Program partners including BCCH gender clinic, Foundry BC, regional health authority gender clinics and DEI teams, Foundry BC, Provincial Peer network
 - Clinical Mentorship Call members
 - External (non-TCBC) provider listservs (e.g. BCTCG)
 - Division of Family Practice; targeted reach-outs to divisions, colleges, registration bodies
 - Ministry of Health (provincial)
 - Health Canada (federal)
 - Non-coalition national partners: TBD
- Health authority and FNHA staff via internal channels
- Public: Social media (PHSA, TCBC's Facebook) and website articles
- Public: paid media- tv and bus shelters

- Media: website articles and social media will inform media of this campaign. There are no plans to hold an event or issue a release. There will be some individual outreach to media who have worked on stories recently in a supportive (or objective) manner.
- Clients, allies: presence at summer Pride festivities with hard-copy information sheet, swag.
- Health Canada channels: e.g. Minister's Communications team

From: Sullivan, Cassandra HLTH:EX(Cassandra.Sullivan@gov.bc.ca)
Meghan.Day@gov.bc.ca, Day, Meghan ECC:EXCara.Williams@gov.bc.ca, Williams, Cara
ECC:EXKristina.Ponce@gov.bc.ca, Ponce, Kristina MMHA:EXBryce.Caetano@gov.bc.ca,
To: Caetano, Bryce MMHA:EXKate.Cotie@gov.bc.ca, Cotie, Kate L
MCF:EXCynthia.Lee@gov.bc.ca, Lee, Cynthia MCF:EXAndrea.Griffore@gov.bc.ca,
Griffore, Andrea MCF:EX
To: Eugene.Johnson@gov.bc.ca, Johnson, Eugene HLTH:EX
Subject: RCY response: Rec 2/3 language
Sent: 06/10/2024 15:48:05

Hello All,

As promised, below is some general language we are using to describe the progress on recommendation 2a/b and 3. Happy to discuss further if needed.

"In November 2023, HLTH brought together representatives from Ministry of Education and Child Care (ECC), Ministry of Mental Health and Addictions (MMHA), and Ministry of Children and Family Development (MCFD) to form the Right to Thrive Working Group (RTT-WG).

The role of the RTT-WG is to formalize governance, appropriate structures, and processes to address the RCY recommendations and to identify guiding principles for gender-affirming care for youth to ensure an aligned approach towards the review of gender-affirming policies, programs, and supports. The RTT-WG reports to the Joint Executive Steering Committee on Children and Youth (JESC), comprised of Assistant and Associate Deputy Ministers from HLTH, ECC, MCFD, and MMHA.

The Right to Thrive Working Group (RTT-WG) has made progress towards developing shared principles to guide a coordinated approach to gender-affirming care for 2STNBGD children, youth, and their families, including conducting a jurisdictional scan of guiding principles and a thematic analysis of each ministry's priority principles. In February 2024, the JESC met to start the discussion on approvals and next steps for finalizing recommendation 2. This discussion included a presentation of the RTT-WG work to date and the key themes in which the finalized principles will be built upon. JESC has not yet completed discussions that would enable them to endorse the proposed next steps of the RTT-WG at this time.

In the interim, HLTH has begun discussions about the approach to recommendation 3, including how to align this work with other Ministry projects and a coordinated approach to engaging with Ministry partners to develop an action plan."

Kindly,

Cassandra Sullivan
Director, Provincial Clinical Programs
Provincial Services Branch
Hospital and Provincial Health Services
Ministry of Health
Cassandra.Sullivan@gov.bc.ca
Office: (778) 698-4932
Cell: (250) 480 6766

I acknowledge that my place of work is within the

ancestral, traditional and unceded territory of the Coast Salish Nations.

From: Sullivan, Cassandra HLTH:EX(Cassandra.Sullivan@gov.bc.ca)
To: Meghan.Day@gov.bc.ca, Day, Meghan ECC:EXCara.Williams@gov.bc.ca, Williams, Cara ECC:EXKristina.Ponce@gov.bc.ca, Ponce, Kristina MMHA:EX
Subject: Right to Thrive - Combined Principles
Sent: 06/03/2024 22:26:22
Attachments: Joint Executive Committee_Briefing_Feb 2024 - RCY Slides.pptx

Hi Folks,

Attached are the RTT slides that were presented to the Joint Exec in Feb, including the combined themes that came out of our prioritization exercise/thematic analysis that the principles were going to be built on (Slide 8). Keep in mind, the discussion that exec had did deviate from where the slides intended for the discussion to go.

Kindly,

Cassandra Sullivan
Director, Provincial Clinical Programs
Provincial Services Branch
Hospital and Provincial Health Services
Ministry of Health
Cassandra.Sullivan@gov.bc.ca
Office: (778) 698-4932
Cell: (250) 480 6766

I acknowledge that my place of work is within the
ancestral, traditional and unceded territory of the Coast Salish Nations.



Joint Executive Committee Children's Service Coordination and Planning

Status Report – Right to Thrive
Recommendations

February 2024

Overview on *Right to Thrive* and intended outcomes

- In June 2023, The Representative for Children and Youth (RCY) released a report entitled *The Right to Thrive: An Urgent Call to Recognize, Respect and Nurture Two Spirit, Trans, Non-Binary and other Gender Diverse Children and Youth*.
- This report makes eight recommendations to the B.C. government aimed to improve outcomes and foster the wellbeing of Two Spirit, Trans, Non-Binary and other Gender Diverse (2STNBGD) children and youth in B.C.

Recommendation 2

Recommendation 2 calls for the Ministry of Health to lead the ongoing design and implementation of a cross-government commitment to gender-affirming care by:

A) Developing cross-ministry and partner structures.

B) Forming a set of principles to guide a coordinated approach to creating action plans for gender affirming care.

(Recommendation 3 and 5)

Right to Thrive Working Group

Purpose: Collaborate among MoH, MECC, MCFD, and MMHA along with additional partners to fulfill recommendations 2a and 2b of the *Right to Thrive* report.

Role of the working group:

- Formalize governance, appropriate structures, and processes
- Ensure an aligned approach towards the review of gender-affirming policies
- Identify potential gaps and opportunities to improve the quality of services
- Identify guiding principles for gender-affirming care for youth
- Review individual and cross-ministry program policies to ensure a coordinated approach



Approach to addressing Recommendation 2a/b



To produce meaningful work that can be communicated to RCY within the agreed upon timeframe, the RTT-WG will:



Build on existing work.



Ensuring meaningful engagement with key partners.



Leverage existing structures and relationships.



Learn from previous engagement.

Recommendation 2a/b – Work Completed



DEVELOPED A
TERMS OF
REFERENCE.



CREATED AN
ACTION PLAN.



IDENTIFIED
REPRESENTATIVES
FROM EACH
MINISTRY.



DRAFTED
STAKEHOLDER
ADVISORY AND
GOVERNANCE
MODELS.



COMPLETED A
JURISDICTIONAL
SCAN OF
GUIDING
PRINCIPLES.



DETERMINED
THEMES TO
GUIDE THE
DEVELOPMENT
OF THE
PRINCIPLES



DRAFTED
EXAMPLES OF
PRINCIPLES TO
REPRESENT EACH
THEME.



COMPILED A LIST
OF
STAKEHOLDERS
TO ENGAGE.



Next Step

Gain endorsement for the engagement plan (approach, key partners, timelines) from Joint Executive Steering Committee.





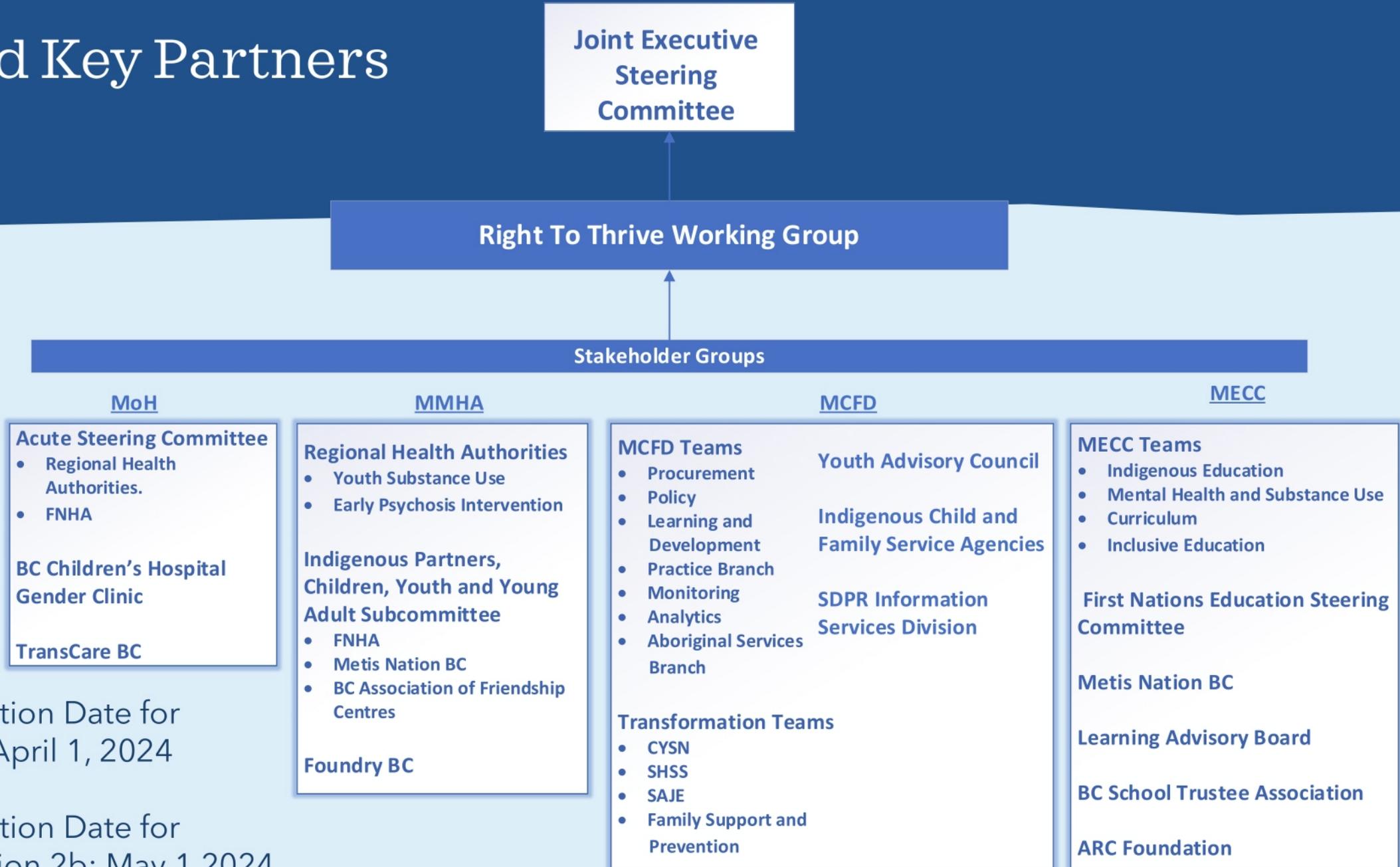
Approach For Engagement



Themes:

- 1) Cultural safety and trauma informed
- 2) Respect, Inclusive/equitable, Accessible, Relevant
- 3) Evidence-Informed, Accountable, Outcomes-Focused, Continuous Improvement
- 4) Collaborative, Intersectional Services
- 5) Strength Based, Person-Centered, Protect/Preserve Dignity

Proposed Key Partners



Target Completion Date for Engagement: April 1, 2024

Target Completion Date for Recommendation 2b: May 1, 2024

Next Steps: February-April



Finalize stakeholder list and schedule engagement sessions.



Developing engagement materials, including key messaging and engagement questions.



Consolidate engagement feedback to finalize principles.



Circulate finalized principles for approvals and report approved principles to the RCY.

From: Dudley, Alison FIN:EX(Alison.Dudley@gov.bc.ca)
To: Eugene.Johnson@gov.bc.ca, Johnson, Eugene HLTH:EX
To: Cassandra.Sullivan@gov.bc.ca, Sullivan, Cassandra HLTH:EX
Subject: RE: 506818 - PS Sig_Tei.docx - Quick review
Sent: 04/08/2024 17:07:48

Thanks for looking at this so quickly Eugene. I appreciate it. Yes, if Cassandra could send any brief bullet about Trans Care's community engagement that would be great – we'll update the letter accordingly. Thanks again.

From: Johnson, Eugene HLTH:EX <Eugene.Johnson@gov.bc.ca>
Sent: Monday, April 8, 2024 9:32 AM
To: Dudley, Alison FIN:EX <Alison.Dudley@gov.bc.ca>
Cc: Sullivan, Cassandra HLTH:EX <Cassandra.Sullivan@gov.bc.ca>
Subject: FW: 506818 - PS Sig_Tei.docx - Quick review

Hi Alison,

s. 13

Trans Care BC has fairly robust engagement structures and strategies. I've copied my Director, Cassandra, who can get a brief summary if you would look to include something about their commitment to ongoing community engagement.

Cheers

Eugene Johnson
Executive Director, Provincial Services Branch
Hospital and Provincial Health Services Division
Ministry of Health
Eugene.Johnson@gov.bc.ca or (778) 698-8428

From: Dudley, Alison FIN:EX <Alison.Dudley@gov.bc.ca>
Sent: Monday, April 8, 2024 9:15 AM
To: Johnson, Eugene HLTH:EX <Eugene.Johnson@gov.bc.ca>
Subject: 506818 - PS Sig_Tei.docx - Quick review

You don't often get email from alison.dudley@gov.bc.ca. [Learn why this is important](#)

Hi Eugene:

I hope you're well. Can I please ask you to quickly review a paragraph in the attached draft response letter and advise if this looks ok to you?

s. 13

Many thanks,

Alison

Alison Dudley (she/her)

Executive Director
Gender Equity Office
Ministry of Finance
Cell: 236-818-1150

I respectfully and gratefully acknowledge that I work on the traditional, unceded territories of the xʷməθkʷəy̓əm (Musqueam), Skwx_wú7mesh (Squamish) and səliłwətał (Tseil-Waututh) Peoples.