

Sherbourne Health Centre



“The Role & Scope of Social Workers regarding Transition Related Surgeries (TRS) and Support”

We would like to begin by acknowledging that the land on which we gather is the traditional territory of the Huron-Wendat and Petun First Nations, the Seneca, the Haudenosaunee and most recently the territory of the Mississaugas of the New Credit First Nation. The territory was the subject of the Dish With One Spoon Wampum Belt Covenant, an agreement between the Iroquois Confederacy and the Anishnaabe and allied nations to peaceably share and care for the resources around the Great Lakes.

This territory is also covered by the Upper Canada Treaties.

Today, the meeting place of Toronto (from the Haudenosaunee word Tkaronto) is the home to many Indigenous people from across Turtle Island and we are grateful to have the opportunity to work/present in this territory.

Sherbourne Health Centre

May 24, 2018

OCSWSSW Annual Meeting and Education Day

Daniel Pugh, BSW, MSW, RSW

Ashley Edwardson, MSW, RSW



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Objectives:

- 1) To increase your knowledge of TRS;*
- 2) To increase our capacities to support clients effectively through TRS;*
- 3) To increase your understanding of the role of social workers in TRS;*
- 4) To provide additional tools and resources.*



Agenda



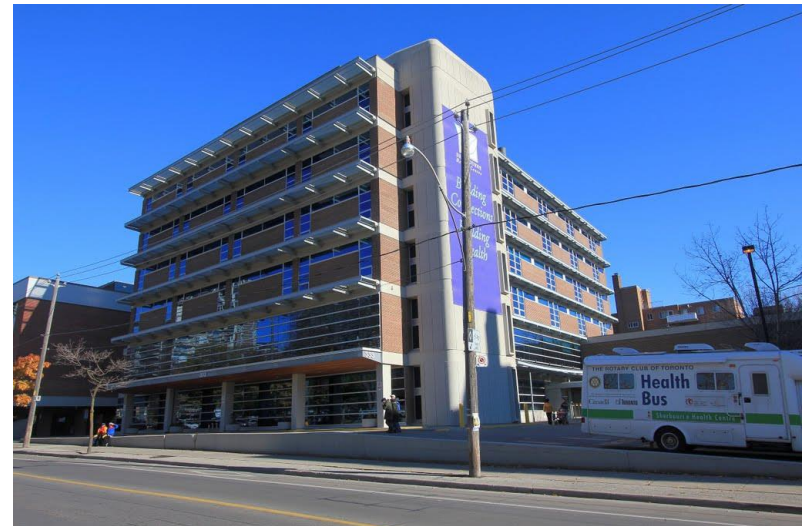
1. Brief introductions
2. “Gender 101”
3. TRS policy changes – MOHLTC
4. Impacts on role of Social Work
5. WPATH Standards of Care
6. OHIP reporting and requirements
7. TRS process – start to finish
8. Secondary assessments review
9. Resources
10. Q and A

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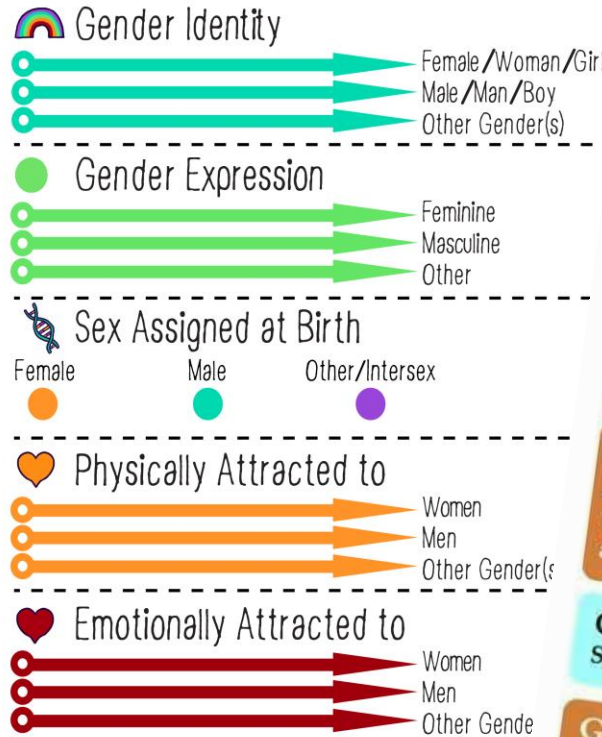
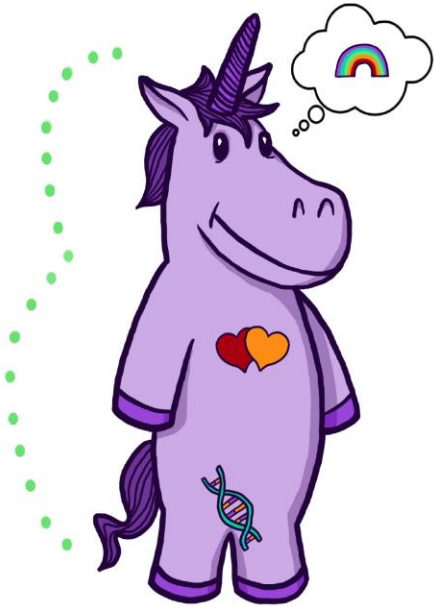
- ❑ Population Health: *Urban (homeless/under housed), Newcomer & LGBTQ2S*
- ❑ Hep C programming
- ❑ Acute Respite Care – TRS specific needs
- ❑ SOY: Supporting Our Youth
- ❑ (LGBTQ2S) Parenting Network

- ❑ 333 Sherbourne Street, Toronto ON
- ❑ www.sherbourne.on.ca
- ❑ 416.324.4180



The Gender Unicorn

Graphic by:
TSER
Trans Student Educational Resources



To learn more, go to:
www.transstudent.org/gender

Design by Landyn Pan and Anna Moore

Gender 101

Gender Binary:
The categorization of gender into two distinct, opposite sexes.



Trans*/Transgender:
An umbrella term applied to those whose gender identity is not the same as the sex they were assigned at birth.



Cisgender:
Someone who is not transgender.



Genderqueer:
A term applied to individuals who do not identify within the gender binary.



Transition:
The process of changing one's gender expression to match their gender identity.



For more information, go to
www.transstudent.org



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Transition-related surgery, also known as “TRS”, refers to a range of surgical options people may require for gender transition. This is also known as sex-reassignment surgery (SRS), gender-confirming surgery (GCS) or gender-affirming surgery (GAS).



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Information Update – August 17, 2016

In March (2016), the Minister of Health announced that people seeking OHIP approval for transition-related surgeries (TRS, also known as gender affirming surgeries or GAS, or Sex Reassignment Surgeries or SRS) would be able to get assessments and referrals from “qualified” primary care providers, as well as the Centre for Addiction and Mental Health (CAMH).

Sherbourne has been working to ensure that our providers are fully trained and competent to provide assessments and referrals for trans clients. We are now able to provide assessments and referrals for SHC clients.



TRS Assessments and Referrals



Before March 2016

- CAMH – long wait lists*
- Psychiatric assessments*
- Research to reveal long-term impacts to mental health & well-being for trans/ GNB (Trans Pulse Project)*

After March 2016

- Multiple/ open access points*
- Provincial collaboration*
- OHIP*
- Primary/ secondary assessments: GP, NP, RN, psychologist and RSW 😊*
- CAMH – new classification**

***diagnosis of Gender Dysphoria still required!*

CAMH Referrals (updated)



- Straightforward referrals (which can be served in primary care once further capacity is developed)
- Secondary Assessment referrals
- Client with complex presentations or where treatment of MH is indicated for readiness (this would be a wide range of diagnoses)
- Clients with complex psychosocial issues
- Clients with intellectual disabilities or acquired brain injuries for whom capacity to consent to medical treatment is being investigated
- Clients with varying levels of ASD
- Clients with involvement with the legal system and histories of violence

Implications for Social Work



- Training and professional development – “*qualified MH professional*” (see next)
- Opportunity for interdisciplinary collaboration
- Awareness of TRS related surgeries – specifically ‘lower’
- “Surgery Planning Visits” – TRS (2nd) assessment reports
- OHIP documentation
- Supporting Gender Dysphoria (**not** diagnose)
- Mental health support and maintenance
- Treatment plans and goals
- After care support – social, housing, travel, food, etc...
- Overall:** *assisting in the facilitation/increased access of health and wellness planning for trans and gender NB Ontarians****

“Qualified”...as per WPATH

- Competency w/ DSM V
- Recognize, discern, support, advise re: co-existing mental health concerns, unrelated to GD
- Registered, clinical supervision, training...
- Knowledge of gender non-binary identities, expression, etc. + assessment/treatment/support of GD
- Continuing ed/PD
- Continue to develop/increase cultural competence
- Seek out other supervision...

“Assessor” can be Misleading...



*“The true purpose of these appointments really isn't to prove someone's gender but **rather to prepare them for surgery**”*

– LS, SHC 2016

- ❑ World Professional Association for Transgender Health
- ❑ Standards of Care, version 7, especially sections:
 - Section 3 - Differences between gender non-conformity and gender dysphoria (GD)
 - *Explore variations and alternatives to formal guidelines around GD, lived experiences, stories, examples, anecdotes, etc...*
 - Section 5 - Overview of therapeutic approaches for GD
 - Section 12 - Post-op care and follow up

OHIP Reporting and Requirements



- Review and familiarize myself with Ontario MOHTLC's "Request for Prior Approval Funding of Sex Reassignment Surgery" (esp. page 6) – available online at:
[http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/GetFileAttach/5041-77E~1/\\$File/5041-77E.pdf](http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/GetFileAttach/5041-77E~1/$File/5041-77E.pdf)
- When requested, complete page 6 and sign off/submit forms



Request for Prior Approval for Funding of Sex-Reassignment Surgery

Sex-reassignment surgery (SRS) is insured under the Ontario Health Insurance Plan (OHIP) when prior authorization has been obtained from the Ministry of Health and Long-Term Care (ministry).

Instructions

1. This SRS application must be completed to request prior approval for full payment by the ministry for insured SRS.
2. For patients requesting in-province or out-of-province within Canada services, this form must be completed by an attending Ontario physician or nurse practitioner.
3. In accordance with subsection 28.4(7) of Regulation 552 under the *Health Insurance Act*, patients seeking insured SRS out-of-country (OOC) must have section 8 of this form completed by a practicing Ontario physician.
4. Regardless of the proposed service location, referring providers will be notified by letter regarding the outcome of this funding application. A copy of the notification will also be provided to the patient.
5. Please ensure the patient's health number and address is correct and current (i.e., they must match the information on the ministry's database) or the application will be returned.
6. If completed manually, print clearly and ensure that all sections of this form are submitted. Incomplete or illegible forms will be returned.
7. When complete, fax form to: Health Services Branch, Program Manager, Policy and Projects Team at 613 536-3188. For information or clarification regarding this form, please call 1 866 684-8620.

Supporting Assessments

This prior authorization request must include supporting assessment(s) that recommend surgery and confirm that the criteria listed in the Schedule of Benefits for Physician Services are met.

The supporting assessment(s) must be completed by a provider trained in the assessment, diagnosis, and treatment of gender dysphoria in accordance with the World Professional Association for Transgender Health (WPATH) Standards of Care that are in place at the time of the recommendation.

A provider must be able to provide documentation of their training in the assessment, diagnosis and treatment of gender dysphoria on request by the ministry.

The physician or nurse practitioner submitting a request for prior authorization may also be one of the providers completing a supporting assessment.

Supporting assessments recommending surgery may be provided by an appropriately trained:

1. Physician;
2. Nurse Practitioner;
3. Registered Nurse;
4. Psychologist; or
5. Registered social worker.

Note: "Registered social worker" refers to a social worker who has a master's degree in social work and who holds a current certificate of registration from the Ontario College of Social Workers and Social Service Workers.

Checklist

Prior to submitting this application, please ensure that you have completed and/or included:

- Section 1 - Location of Services
- Section 2 - Patient Information
- Section 3 - Referring Physician or Nurse Practitioner
- Section 4 - Proposed Health Facility/Hospital
- Section 5 - Treatment- General Information
- Section 6 - Treatment Availability (This section should be completed only for patients seeking OOC services and must be completed by an Ontario physician)
- Section 7 - Signatures
- Section 8 - Supporting Assessments

Assessment 2: External Genital Surgery and/or Hysterectomy, Salpingo-Oophorectomy, Orchidectomy

Check relevant procedures:

- External Genital Surgery (clitoral release, glansplasty, metoidioplasty, penectomy, penile implant, phalloplasty, scrotoplasty, testicular implants, urethroplasty, vaginectomy, vaginoplasty)
- Hysterectomy, Salpingo-oophorectomy, Orchidectomy



Patient Information

| | | | |
|-------------------------|----------------------------|------------------------------|--------------------------------|
| Last Name | | First Name | |
| Preferred Name | | Date of Birth (yyyy/mm/dd) | Health Number and Version Code |
| Current Mailing Address | | | |
| Unit Number | Street Number | Street Name | PO Box |
| City/Town | | Province | Postal Code |
| Telephone Number (Home) | Telephone Number (Daytime) | Email Address (if available) | |

Provider Information

| | | | |
|--------------------------------------|--|------------|--|
| Last Name | | First Name | |
| OHIP Provider Number (if applicable) | | | |

Office Address

| | | | |
|------------------|---------------|------------------------------|-------------|
| Unit Number | Street Number | Street Name | PO Box |
| City/Town | | Province | Postal Code |
| Telephone Number | Fax Number | Email Address (if available) | |

Declaration:

I recommend _____ as an appropriate
(name of insured person)

candidate for the requested surgery and confirm that this patient meets all of the following criteria:

- Has a diagnosis of persistent gender dysphoria;
- Has completed twelve (12) continuous months of hormone therapy (unless hormones are contraindicated); and
- Has completed twelve (12) continuous months of living in a gender role that is congruent with their gender identity (External Genital Surgery only).

| | |
|-----------|-------------------|
| Signature | Date (yyyy/mm/dd) |
|-----------|-------------------|

TRS Process: start to finish...



Phase 1 - OHIP

- Primary assessment – others
- Secondary assessment – MSW/RSW
- Full OHIP forms completed
- MOHLTC submission
- MOHLTC approval

Phase 2 - surgeons

- Primary assessment – others
- (lower) Secondary assessment – MSW/RSW
- Patient consult
- Wait listing
- Surgery
- After care

Secondary Assessments – what to cover

1. Interviewer Education & Experience
2. Presentation & Demographics
3. Eligibility
4. Ruling Out of Differential Diagnoses (*i.e.; psychosis, dissociation, schizophrenia...*)
5. Readiness - General
6. Readiness - Substance Use (*alcohol, drugs, tobacco*)
7. Readiness - Mental Health
8. Supports
9. Treatment Goals
10. Treatment Plans
11. Recommendations



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Assess 'wellbeing' via
biopsychosocial factors:

*housing, supports, strengths,
physical/mental health status –
mood, anxiety, sleep,
hospitalizations, Rx, SI/SH,
substance use....*



Resources for You!



1. **Rainbow Health Ontario:** www.rainbowhealthontario.on.ca
 - Weekly (WED) mentorship calls – Trans Health Connection
 - “Guide to Caring for Trans and Gender-Diverse Clients” (2017)
 - RHO trainings:
 - *LGBTQ Emotional and Mental Health*
 - *LGBTQ Seniors*
 - *Making Your Organization LGBTQ-Positive*
 - *Transition in the Workplace*
2. **The 519** – education and trainings: www.the519.org
3. **WPATH:** www.wpath.org
4. **CPATH:** www.cpath.ca



Q&A

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Thank you/Merci



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