Building Capacity for Trans Health Services: Challenges, Opportunities and Innovations in Systems Integration

> Jenna Rapues, MPH Seth Pardo, Ph.D.

> > June 18, 2015

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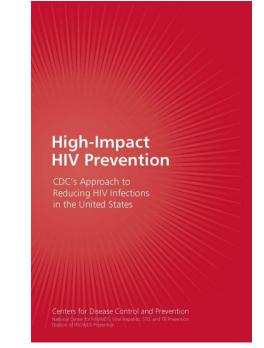
Social Media Hashtag: #SFTransHealth



CPN BUILDING THE CAPACITY OF THE NATION'S HIV PREVENTION WORKFORCE unded by Centers for Disease Control and Prevention

# What is Capacity Building Assistance (CBA)?

CBA attempts to provide information, training, and technical assistance to the HIV prevention workforce in order to increase the adoption and implementation of high impact prevention strategies







## HIV testing

- Community-based testing Thomas Knoble
- Testing in clinical settings Oliver Bacon, Stephanie
   Cohen
- Home testing- Hyman Scott, Oliver Bacon
- Novel HIV testing technologies Severin Gose
- Linkage/partner services- Charles Fann
- Internet Partner Services Frank Strona, Charles Fann
- Perinatal HIV and testing Shannon Weber, Deb Cohan
- Billing- Denise Smith, Athina Kinsley





## Prevention for High Risk Negative Persons

- PrEP/PEP- Oliver Bacon, Stephanie Cohen, Jonathan Fuchs, Albert Liu, Shannon Weber, Deb Cohan, Judy Auerbach
- Personalized Cognitive Counseling- Tim Matheson/Ed Wolf



Europe CPN Building THE CAPACITY OF THE NATION'S HIV PREVENTION WORKFORCE Funded by Centers for Disease Control and Prevention

# Policy/Planning

- Use of data to support HIV continuum efforts- Data to Care: Susan Scheer, Charles Fann, Erin Antunez, Darpun Sachdev
- Support of National HIV Behavioral Surveillance Henry Raymond Fisher
- Social media to support outreach Frank Strona, Megan Canon (SFAF), Sapna Mysoor (AP&IWC)
- Working with cross-sector partners Eileen Loughran
- Harm Reduction Strategies with IDU Eileen Loughran
- Jurisdictional Planning Dara Geckeler, Eileen Loughran





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#### Building Capacity for Trans Health Services



#### Jenna Rapues

Health Program Liaison, Community Health Equity & Promotion Branch, SFDPH



#### **Dr. Seth Pardo**

Lead Evaluator, Minority AIDS Initiative -Targeted Capacity Expansion Program (MAI-TCE), SFDPH



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# **Objectives:**

- Non-traditional partnerships within health departments on trans health
- Stakeholder engagement on trans health
- Addressing barriers and creating successes
- Lessons learned and next steps: What the Trans Health Services Program has accomplished so far and what will come next





# TRANSGENDER

"Transgender" is an umbrella term used to describe people with gender identities and /or gender expressions not traditionally associated with the sex that they were assigned at birth.

An individual may identify their gender in different ways over the course of a lifetime.

People of transgender and gender non-conforming (TGNC) experience





### SEX AND GENDER

- "Sex" refers to the biological and physiological characteristics that define males and females.
- "Gender" refers to the socially constructed roles, behaviors, activities, and attributes that a given society considers appropriate for men and







### What's new this month?











9:51 AM usatoday.com @ 🕈 83% 🛄) +

••ooo Sprint LTE

Annie Leibovitz, AP This photo taken by Annie Leibovitz exclusively for Vanity Fair shows the cover of the magazine's July 2015 issue featuring Bruce Jenner debuting as a transgender woman named Calityn

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# Transgender Health within SFDPH



- How many transgender people are there in San Francisco?
  - How many need and receive services in SFDPH?
- How can we answer these questions?
- Can we improve services and access by knowing the answers to these questions?





#### Transgender Social Determinants of Health

#### Our health starts where we live, learn, work and play...

-Jane Isaacs Lowe, Ph.D.,

Vulnerable Populations Portfolio, Robert Wood Johnson Foundation

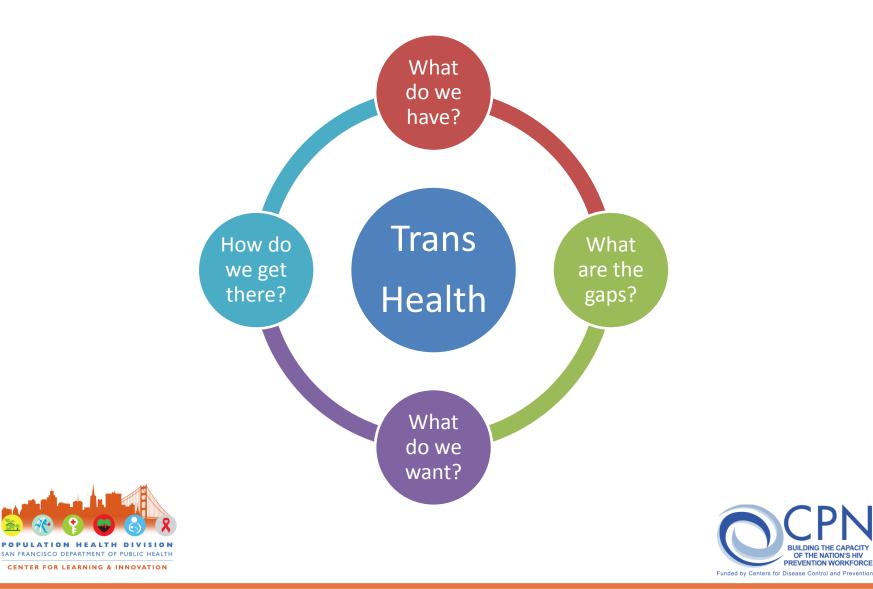




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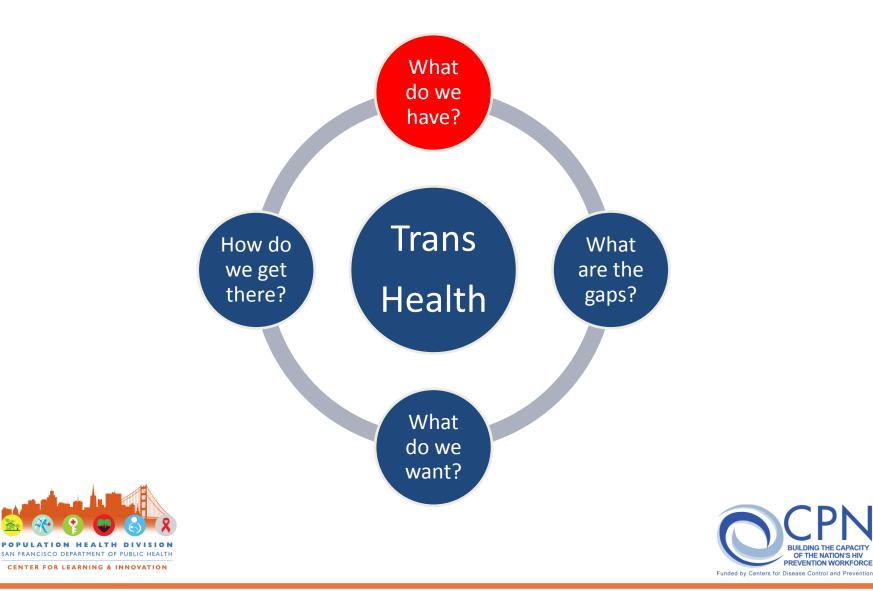
### Framework



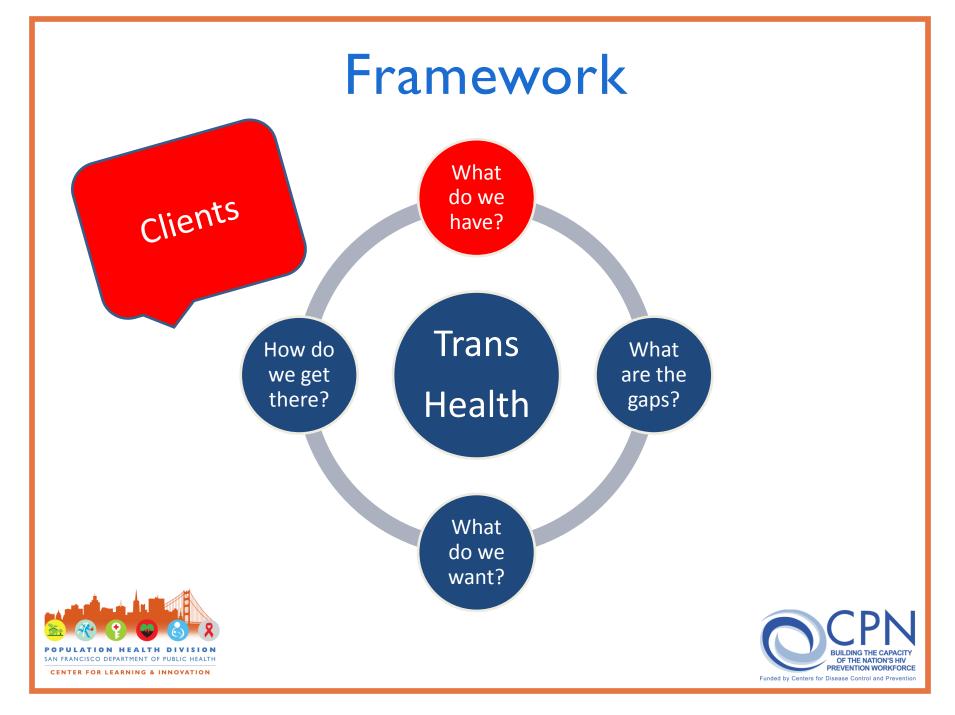
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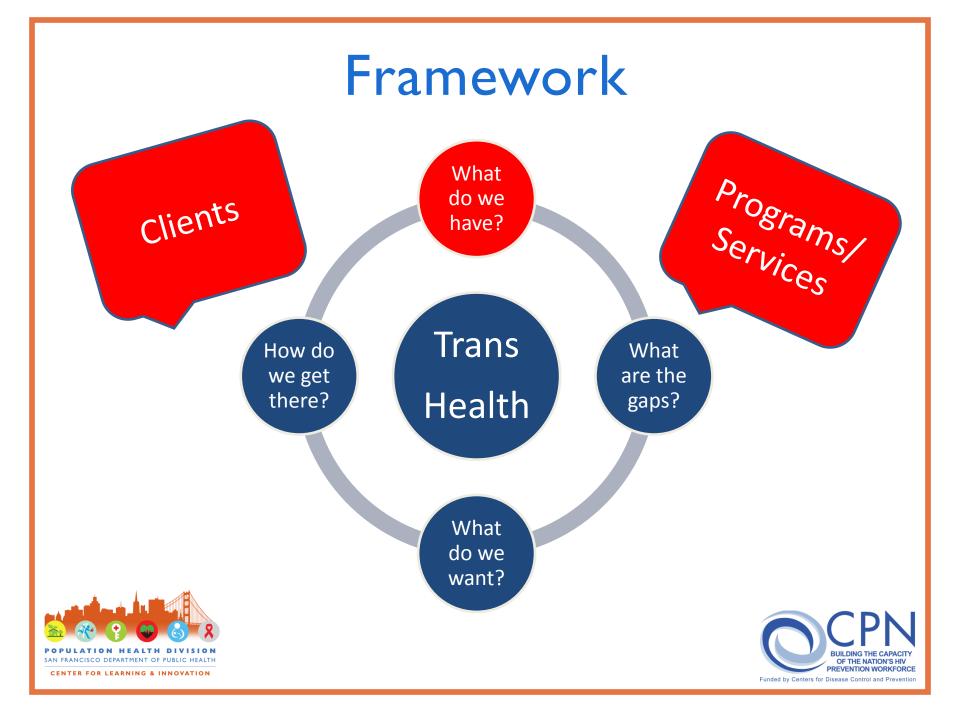
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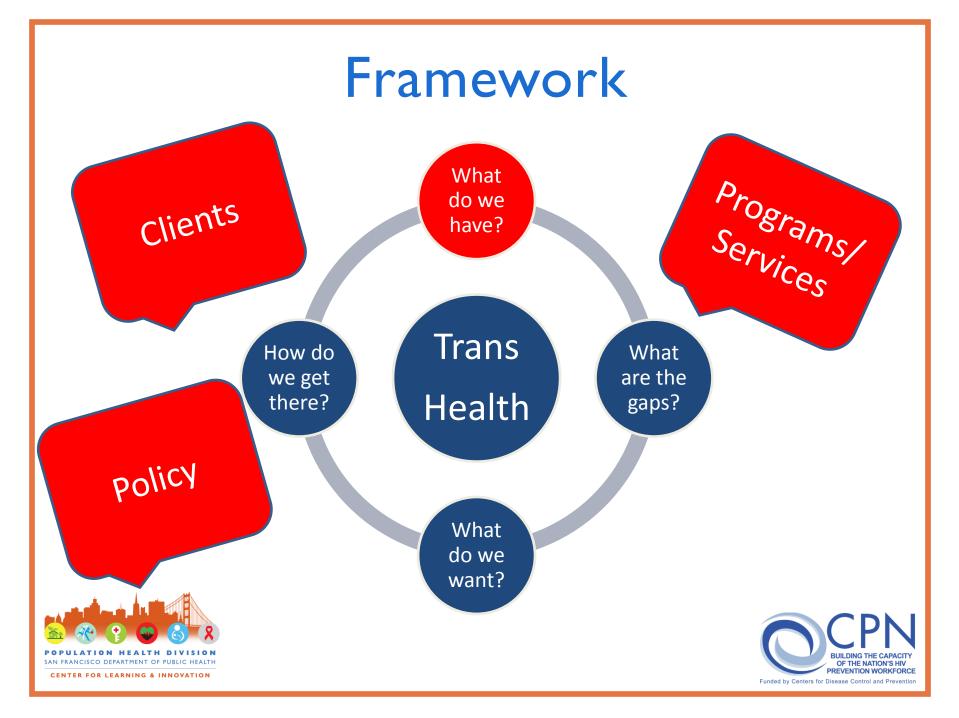
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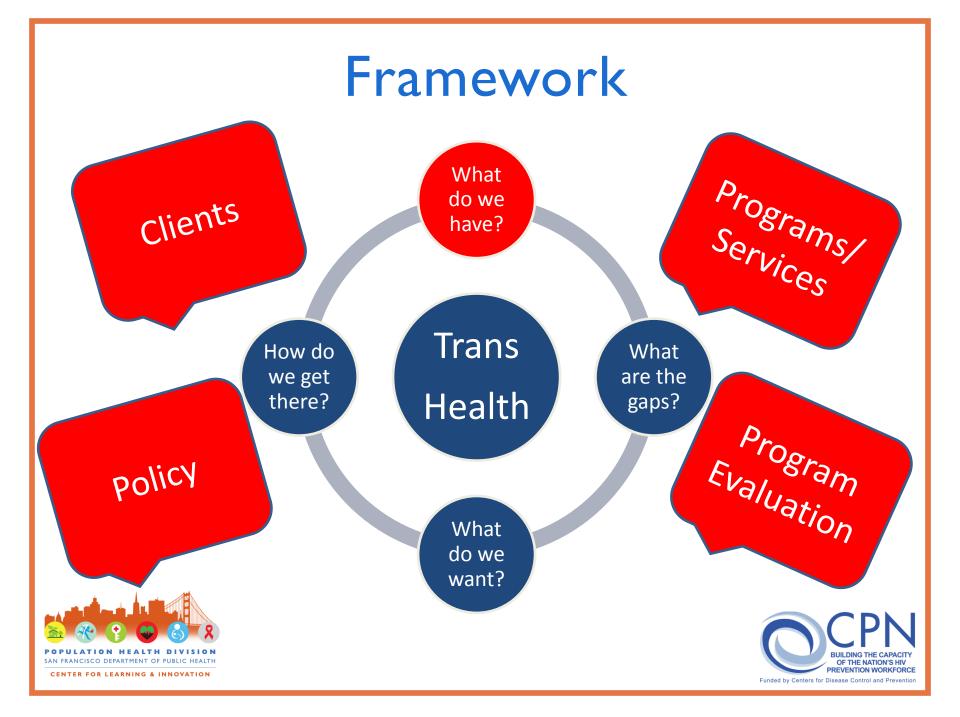


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# Clients: How many trans\* are served by SFDPH?

- 2 part question for gender identity approved but not widely implemented
- Best estimate assumptions
  - SF has more than average number of trans people due to "immigration" here as more accepting and tolerant
  - SFDPH sees more than expected proportion due to trans\* people more poverty and more health problems
- Best Estimate 1%





#### How many trans\* are served by SFDPH?

- All records in LCR and Avatar and CCMS were scanned for anyone served in SFDPH within last 5 years
  - -1/2009 3/2014
  - 400,000+
    - 100,000 usual estimate for those in care in SF Health Network services
  - Trans\* patients identified by
    - ICD 9 diagnostic code 302.85 (and 5 related codes)
    - transgender indicator (infrequently used in registration system used at SF General Hospital and primary care)
    - Seen at Tom Wadell Health Center transgender clinic (08 TG or 15 TG site code)





## Trans\* People served by SFDPH?

#### 2061 unduplicated individuals

- 13% identified through gender demographic (transgender indicator)
- 44% identified through visit history at TWHC transgender clinic
- 82% identified through Gender Identity Disorder billing code





#### SFDPH Programs on Trans Health

Policy	Mental Health	Research	Health Promotion	Clinical	Training and Guidelines
<ul> <li>Transgender Health Services – surgery access</li> <li>Sex and Gender Guidelines</li> <li>Trans Cultural Competency training</li> </ul>	<ul> <li>Transgender Life Care Program</li> <li>Dimensions Youth Clinic Behavioral Health</li> <li>Gender Program, SVN</li> </ul>	<ul> <li>Trans Male RAP</li> <li>TEACH 1</li> <li>TEACH 2</li> <li>SHINE study</li> <li>Stripe study</li> </ul>	<ul> <li>Transgender Advisory Group</li> <li>HIV Prevention CBO contract</li> <li>HIV/STD testing</li> </ul>	<ul> <li>Tom Waddell Urban Health Clinic</li> <li>Dimensions Youth Clinic</li> <li>Castro Mission Health Center</li> <li>Trans Health Services - eReferral</li> </ul>	<ul> <li>Gender Competence &amp; Cultural Humility Training Committee</li> <li>Trans Tues Clinic Guidelines</li> <li>SFHIV Health Services Trans Best Practices Guidelines</li> </ul>



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### SFDPH Programs on Trans Health

#### Policy

- Transgender Health Services – surgery access
- Sex and Gender Guidelines
- Trans Cultural Competency training

#### Mental Health

#### Transgender Life Care Program

- Dimensions Youth Clinic Behavioral Health
- Gender Program, SVN

#### Research

- Trans Male RAP
- TEACH 1
- TEACH 2
- SHINE study
- Stripe study

#### Health Promotion

- Transgender Advisory
- Advisory Group • HIV
- HIV Prevention CBO contract
- HIV/STD testing

#### Clinical

- Tom Waddell Urban Health Clinic
- Dimensions Youth Clinic
- Castro Mission Health Center
- Trans Health
   Services eReferral

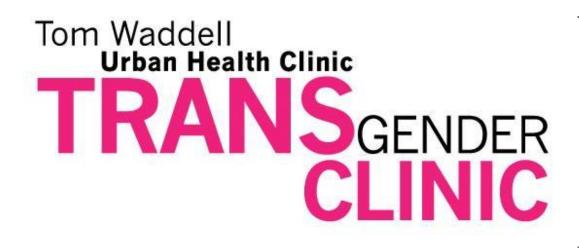
#### Training and Guidelines

- Gender
   Competence
   & Cultural
   Humility
   Training
   Committee
- Trans Tues Clinic Guidelines
- SFHIV Health Services Trans Best Practices Guidelines





### SF Programs with Trans\* Health Foci



http://www.twtransgenderclinic.org/



- Since 1993
  - Multidisciplinary primary care clinic for all medical and general health concerns, not just issues related to gender.
- Mental health and social services available
- Collaborations with community orgs.



## SF Programs with Trans\* Health Foci

#### HOWE abobut vossonorceaes people combatacet DENDEDD

#### Castro Mission Health Center Dimensions Clinic

Dimensions offers low-cost health services for queer, transgender and questioning youth ages 12 to 25. Medical & mental health professionals on staff to answer just about any question you might have, including things you may be too embarrassed to ask anyone else. Weekly transgender & gender-variant support group run by trans counselors.



www.dimensionsclinic.org



## SF Programs with Trans\* Health Foci

RANSGENDER HEALTH SERVICES Improves access and quality of healthcare for transgender San Franciscans via its Transgender Surgery Access Program for Healthy San Francisco and Medi-Cal patients.

It also partners throughout the SF Health Network to strengthen competency in transgender healthcare at all access points.

#### https://www.sfdph.org/transgenderhealthservices







#### **Transgender Health Services**

- Started August 2013
- Coordinate all surgery referrals for Healthy SF and Managed Medi-Cal patients in SF
- Train clinics all over SF how to work with trans patients and refer them for surgery

RANSGENDER HEALTH SERVICES



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### **Transgender Health Services**

- Education and preparation program for patients and caregivers
- SFDPH Mental Health Assessment Guidelines
- Advocacy for improved access and quality of care
- Support for patients waiting for and recovering from surgery







### Patients Referred 8/2013 – 3/2015

Procedure	Total Enrolled	Total Complete Referrals	Total Scheduled (Consult/ Surgery)	Total Surgery Complete
SCM (Subcutaneous Mastectomy)	26	17	3	14
SCM Revision	9	8	2	5
Hysterectomy/ Oophorectomy	9	7	1	6
Metoidioplasty	5	4	3	1
Phalloplasty	8	6	5	1
Orchiectomy	13	7	0	7
Vaginoplasty	109	56	33	17
Feminizing Mammoplasty	54	31	17	9
All Procedures	233	136	64	60

### SFDPH Programs on Trans Health

Policy
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#### Health Promotion

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#### Training and Guidelines

- Gender Competence & Cultural Humility Training Committee
- Trans Tues Clinic Guidelines
- SFHIV Health Services Trans Best Practices Guidelines



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## SFDPH Works with the Trans **Community for Research**

#### WHAT'S THE SHINE? Tell us how you Shine! Call or text 415-622-6371 to find out more. If you are eligible," you can earn \$50 cash

THE SHINE ST

theshinestudy.org facebook.com/The shim Study

\*Anyone 16-24 with a male sex at birth who identifies as something other - e.g., female transpender, gendergueer, etc







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## SFDPH Programs on Trans Health

#### Policy

- Transgender Health Services – surgery
- Sex and Gender Guidelines

access

 Trans Cultural Competency training

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# Sex & Gender Guidelines: Purpose

- To promote accuracy, transparency, and consistency in coding, collecting and reporting identity data
- To identify meaningful differences in
  - Health outcomes
  - Conditions that impact health
  - Delivery of health services





# **Guidelines Formed By**

- SFDPH Community Assessment, System/Program Evaluation, and Research (CASPER) Workgroup
  - Ethnicity 2006
  - Sex and Gender 2008
  - Sexual Orientation 2012
- Peer Review Community Forums DPH Leadership
- SF Health Commission
  - Ethnicity March 2011
  - Sex and Gender September 2014
    - Available online at: <u>https://www.sfdph.org/dph/files/PoliciesProcedures/COM5\_SexGenderGuidelines.pdf</u>
    - Sexual Orientation September 2014





# Identity Data: Sex / Gender

- I. What is your gender? (check one)
  - **Male**
  - **Female**
  - Trans Male
  - Trans Female
  - □ If not listed above, please specify\_\_\_\_
- 2. What was your sex at birth? (check one)
  - Male
  - **Female**

#### Also ask and record:

- What is the appropriate pronoun to use when addressing you?
- What is your chosen name?





# Sex & Gender Guidelines

- Data collection principles
- Policy recommendations



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### **SFDPH Trans Cultural Humility & Training**

**Transgender 101** 

- Summer 2013:Trans 101 mandate
- Trainings tailored to specific departmental needs
- In progress: Online courseware video training materials to expand current training offerings
- Current Offerings:

Workgroup

- IOI x 4/year
- 102 x 2/year (102.5 as needed)
- 103 x 2/year



Gender Competence and Cultural Humility



## Engaging Stakeholders in Trans Health across SFDPH Programs

			Health Promotion		
Policy <ul> <li>Transgender</li> <li>Health</li> <li>Services –</li> <li>surgery</li> <li>access</li> <li>Sex and</li> <li>Gender</li> </ul>	<ul> <li>Mental Health</li> <li>Transgender Life Care Program</li> <li>Dimensions Youth Clinic Behavioral Health</li> <li>Gender Program, SVN</li> </ul>	Research • Trans Male RAP • TEACH 1 • TEACH 2 • SHINE study • Stripe study	<ul> <li>Transgender Advisory Group</li> <li>HIV Prevention CBO contract</li> <li>HIV/STD testing</li> </ul>	Clinical <ul> <li>Tom Waddell Urban Health Clinic</li> <li>Dimensions Youth Clinic</li> <li>Castro Mission Health Center</li> <li>Trans Health Services - eReferral</li> </ul>	Training and Guidelines  • Gender Competence & Cultural Humility Training Committee • Trans Tues
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#### • SFDPH Trans Health Coordination and Collaboration Work Group





## Goal: To Advance Trans Health

"**Collaboration**" is the coming together of minds to create a shared understanding or plan

> "Coordination" is the process by which one ensures that disparate groups are executing according to an already-agreed-upon plan of action

- Breaking out of silos in our work
- Nontraditional partnerships
- Increased capacities
- Increased visibility and advocacy





## SFDPH Trans Health Coordination and Collaboration Workgroup

**Goal:** To improve the health of transgender and gender nonconforming residents by addressing systemic barriers to quality care within SFDPH and affiliated contractors.







## SFDPH Trans Health Coordination and Collaboration Workgroup

- Discuss programs (what's working / what's not)
- Discuss provider experiences (assess training needs)
- Discuss patient navigation experiences within DPH
- Part of the SFDPH trans health initiative expansion
- Fosters & strengthens partnerships

# Capacity building!





# Transgender Advisory Group

**MISSION:** Guide the Community Health Equity & Promotion (CHE&P) Branch (in SFDPH) to:

- Coordinate and improve transgender health priorities
- Foster healthy transgender communities in San Francisco

Regular meetings offer community members and providers a safe space to engage in cross training, advocacy, and coordination of transgender health

activities.





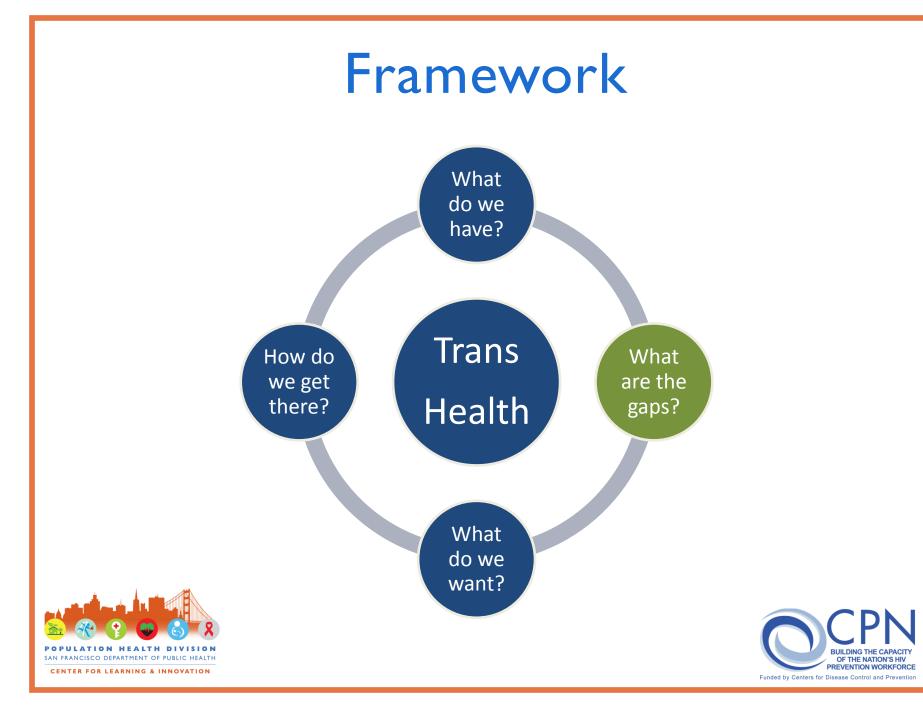
# Transgender Advisory Group

- 1997:Transgender Community Health Project (TCHP) emerged from the trans communities that were mobilizing around HIV
- SFDPH, Population Health partnership with trans communities
  - HIV
  - Research
  - Community planning
  - Policies
  - Funded CBO's to address Health and HIV disparities









## BARRIERS TO ENGAGEMENT/CARE

#### **Social Contexts**

- Housing
- Employment
- Behavioral health
- Discrimination
- Stigma
- Isolation

### Health Care Systems

- Provider/Staff cultural competency
- Lack of community trust
- Gender affirming best practices
- Electronic Health Records (EHRs)





### Electronic Health Records – What are the gaps?

- Wrong name / gender
  - People are "outed" in the waiting room
  - Even after legal name/gender changes
- Procedure confusion
- Billing denials
  - Staff change EHR to complete billing
- Duplicate records
- Limited EHR workarounds





## **Electronic Health Records**

- Different e-systems across clinics
  - 2-part sex/gender questions not used
  - Limited gender options on forms/e-systems
- Limited quality assurance
  - Clinical Impact: patients need routine GYN care but no one knows
- Limited program evaluation

- Memo to: Albert Yu, MD, MPH, MBA, Director of Ambulatory Care, SF Health Network, Chief Health Informatics Officer
- From: SFDPH Transgender Health Coordination and Collaboration Internal Workgroup Contact: Julie Graham, 415-642-4519, julie.graham@sfdph.org
- Date: 12/15/14
- Subject: Recommendations for Implementing the DPH Sex/Gender and Sexual Orientation Guidelines in EMRs Supporting the SFHN

SFDPH Transgender Health Coordination and Collaboration Workgroup, a group of providers from various departments within the SFDPH working to improve the care of transgender, transsexual and gender non-conforming consumers, would like to offer suggestions regarding the implementation of the new sex/gender and sexual orientation guidelines.

Successful implementation of the guidelines depend on two variables: changing the EHRs throughout the city and creating a sensitive, informed protocol for asking sex and gender questions. We can improve the experience of patients receiving care through the sensitive and thoughtful implementation of these new guidelines as we simultaneously improve the accuracy of the data itself.

Through the sensitive and thoughtful implementation of the new guidelines, the SFHN can improve patient care as we simultaneously improve the accuracy of the data itself. SFHN is attempting to create a "welcoming" and culturally sensitive environment for our GLBTQ clients and adjusting the Electronic Health Records (EHRs) will assist in creating a positive experience for patients. We can improve continuity of care and patient experience as we gather necessary statistical data and clinical data.

#### Recommendations:

- Offer a brief educational experience to staff at the same time the sex and gender and sexual orientation guidelines are released. Have definitions for these categories for consistent implementation across programs.
- Standardize who gathers information about sex, gender, and name, pronoun and when that happens. For instance, which information gets gathered by registration staff and when? Which information gets gathered by clinicians and when?
- Add a field for client's preferred name that is separate from the guarantor name and a field for the correct pronoun as EHRs are updated. There are anatomical differences that should be noted as well in the EHR.
- Identifying sexual behaviors for clinical intervention. Adding a clinical question, "With whom do you have sex?" followed by a field that accepts free text.

The SFDPH Transgender Health Coordination and Collaboration Internal Workgroup is happy to assist and consult on any of these recommendations.

#### Background

We know that transgender, transsexual and gender non-conforming people and gay, lesbian and bisexual people suffer from health care disparities related to stigma as well as insensitivity and lack of knowledge



# Challenges with working in silos

The Silo Mentality as defined by the <u>Business Dictionary</u> is a mindset present when certain departments or sectors do not wish to share information with others in the same company. This type of mentality will reduce efficiency in the overall operation, reduce morale, and may contribute to the demise of a productive company culture.

- Mindset
- Organizational barriers
- Dependent on funding objectives
- Loss of creativity
- Reduce efficiency
- Reduce morale







## Sex & Gender Guidelines: Data Collection Principles

- Naming should be self-identified.
- Transgender and Sexual Orientation data should be coded with caution and care when working with minors in consideration of the fact that health data are legally accessible by guardians.
- Keep information up-to-date.
- Naming should allow for both consistency and relevance and compliance and comparability.



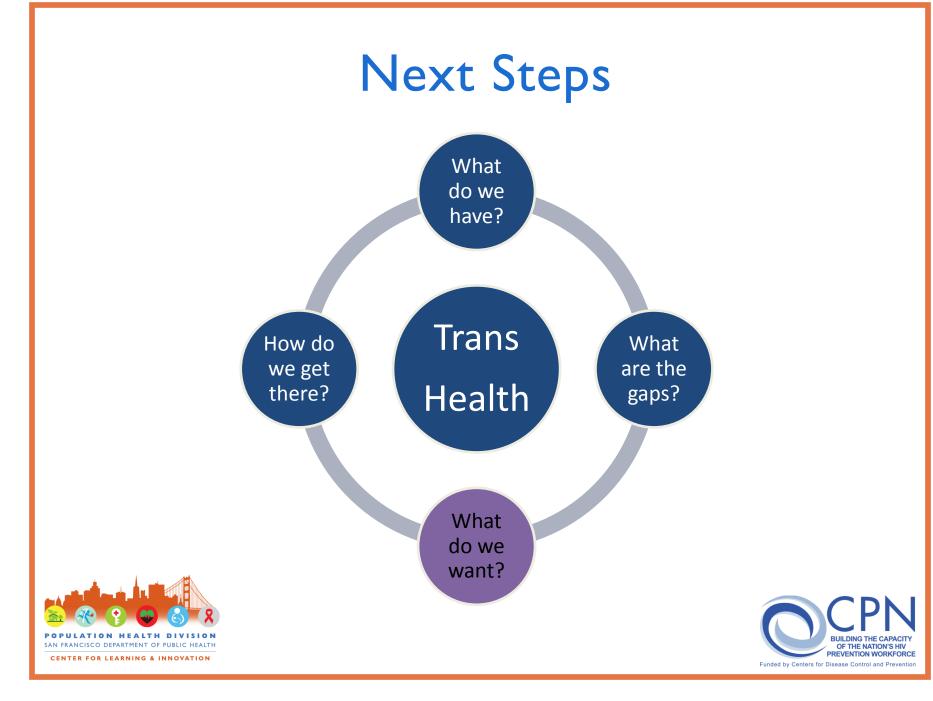


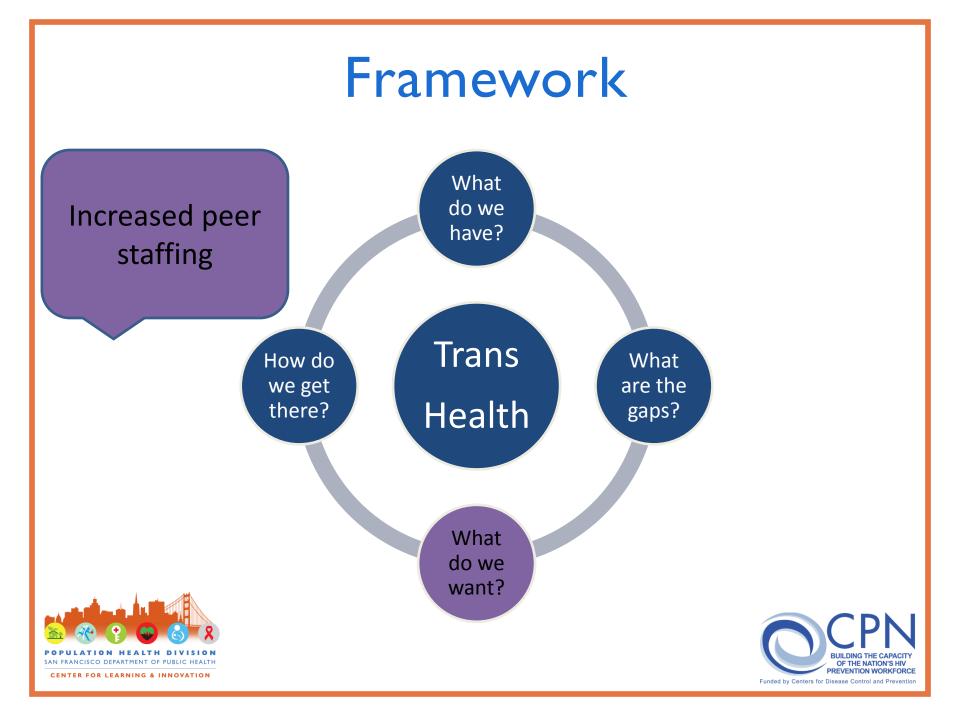
### Sex & Gender: Policy Recommendations

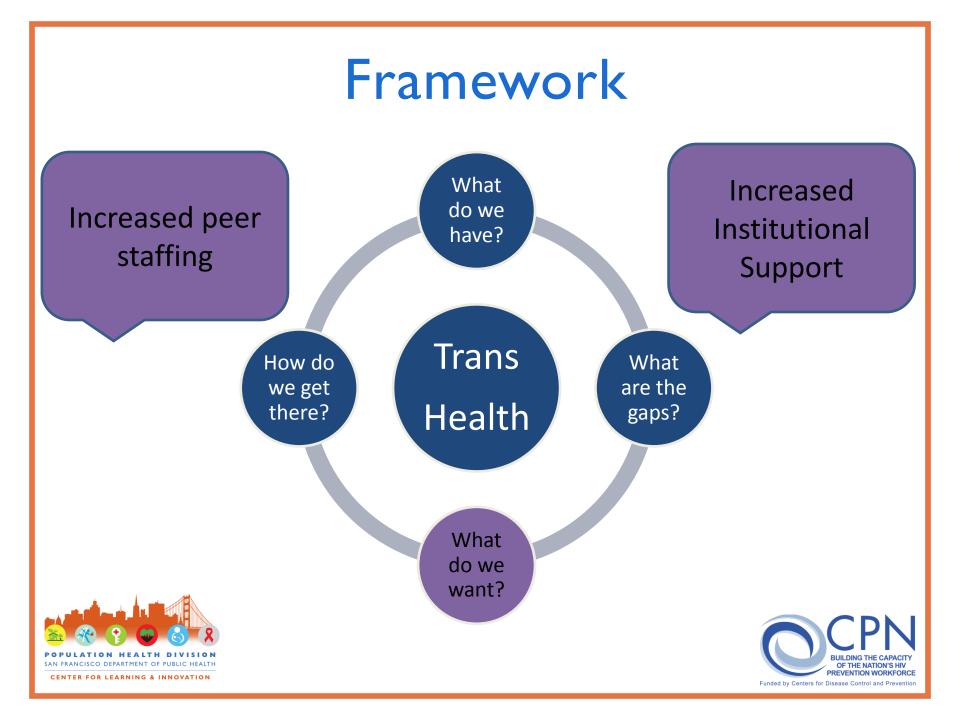
- Assess training and technical assistance needs of SFDPH, agencies, and community service providers;
- Develop and make available implementation materials to ensure that identity data can be collected appropriately in a variety of SFDPH settings;
- All new data collection systems must have the ability to track data in accordance with the guidelines;
- Engage in continuous quality improvement by evaluating the sex & gender guidelines through data analysis and stakeholder feedback.

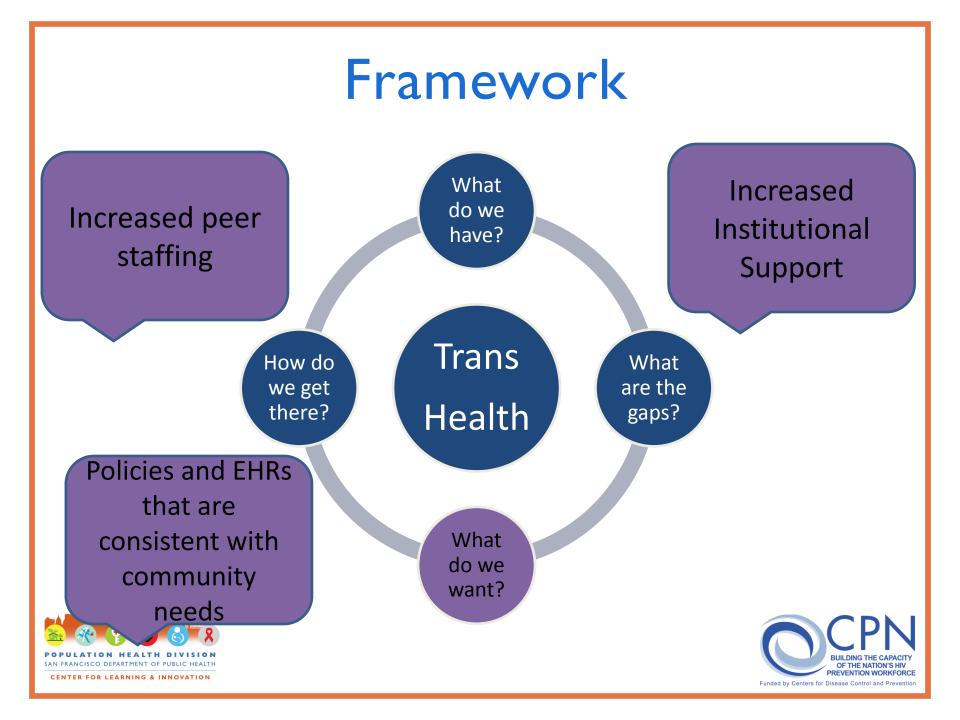


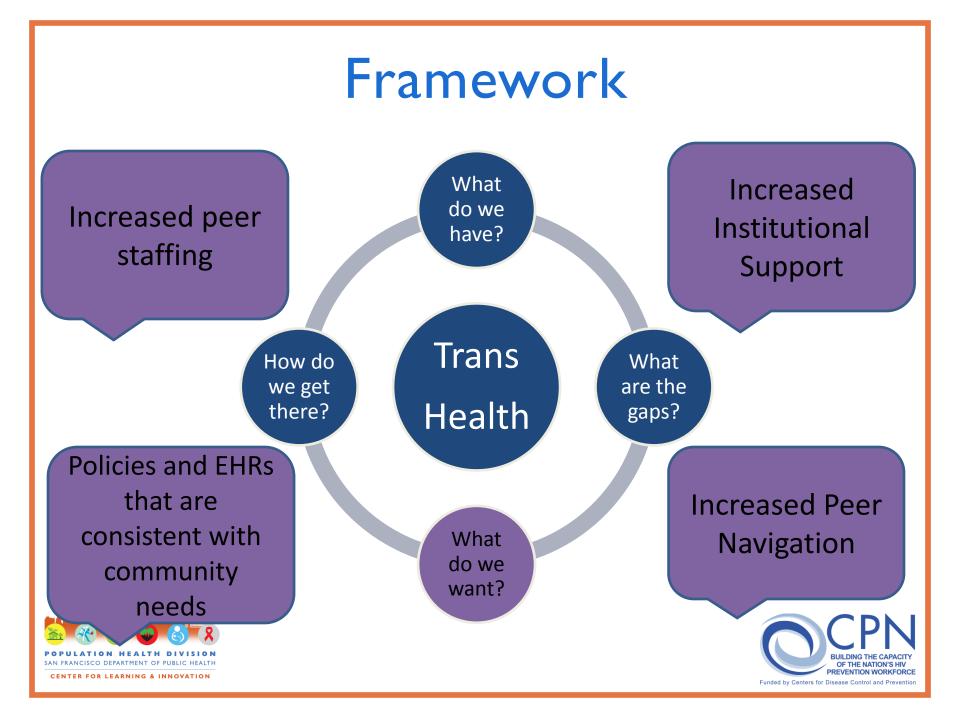




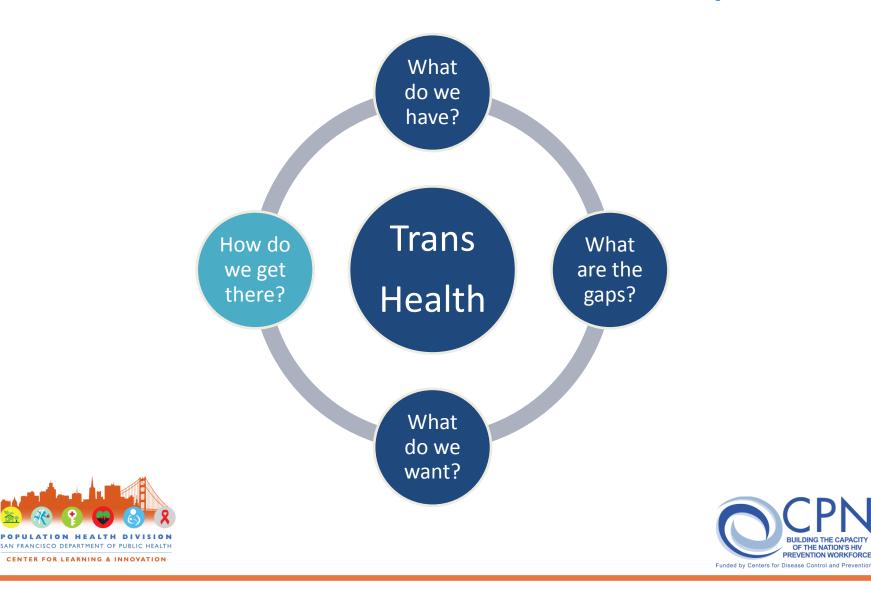








### Lessons Learned & Next Steps



# Increasing Trans Health Capacity

- Update data collection protocols
- Identify stakeholders (especially community leaders and champions)
- Foster stakeholder relationships
- Train your staff regularly
- Coordinate and collaborate outside of HIV framework
- Engage clinicians, therapists, behaviorists, case managers on trans health issues
- Engage in continuous quality improvement
- Increase professional development opportunities for peers in the SFDPH system for advancement opportunities
- More peer to peer client navigation





### Steps for Increasing Stakeholder Engagement and Non-traditional partnerships

- Data matters when talking about health disparities and outcomes
- Apply current transgender social justice issues
- Approach and educate administrators, planners, and staff
- Utilize work groups, coalitions, advisories and community planning bodies
- Identify trans champions and allies
- Attain institutional and community buy in
- Systems approach
- Foster networks of support





# Helpful things to consider when planning to evaluate a program

- Objectives should be "SMART":
- <u>Specific</u>
- <u>Measurable</u>
- <u>A</u>chievable
- <u>R</u>ealistic
- <u>Time-phased</u> (in a specific time frame)





# Conclusions

- Trans Health is ever evolving and changing
- Support
  - Increased participation and membership from SFDPH staff
  - Expand partnerships/participation from other departments
  - Administrative
- Resources
- How to task our projects?
- Trans Health Initiative
- Process and outcome evaluation





# Thank you!



### Jenna Rapues

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