DHB Office **Braemar Campus**

Private Bag 18 Nelson, New Zealand



1 December 2020
Via Email:
Dear
Response to a request for official information

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Thank you for your request for official information received 10 September 2020 by Nelson Marlborough Health (NMH)¹, followed by the necessary extension of time 8 October 2020 and notice of decision 20 November 2020, where you seek the following information:

- 1. Of the following list of services, which (if any) does the Nelson-Marlborough District Health Board provide? Does the DHB provide any services for transgender health care not listed, if so, what?
 - A. Puberty blockers
 - B. Hormone replacement therapy
 - C. Fertility preservation
 - D. Mastectomy
 - E. Hysterectomy
 - F. Orchiectomy
 - G. Facial hair removal
 - H. Breast augmentation
 - I. Voice training
 - J. Facial feminization surgery
 - K. Genital reconstruction surgery
 - L. Counselling
 - M. Other mental health support (please specify services in response)

NMH response: The DHB funds [A] Puberty blockers, [B] Hormone replacement therapy and [I] Voice training, and these services are available through a contracted provider.

¹ Nelson Marlborough District Health Board

For services provided by the DHB:

2. What is their current status? What clinic (or clinics) provides the service? Are they accepting new patients?

<u>NMH response</u>: The Endocrinology service will see patients for hormonal therapy in clinic, if they are aged 16 and over. They are accepting new patients. The Paediatric Service will see patients aged under 16.

3. Broken down by provided services (and initial consultation and readiness assessments or other if applicable), how long is the current wait time on appointments for transgender health? How long have these wait times been in previous years that the service was available?

<u>NMH response</u>: Current wait time is the same as for any other endocrinological disposition or disorder not deemed to be an emergency or involve cancer; a wait time of under 100 days from referral to first specialist appointment. There is no readily retrievable data for previous years.

4. What set(s) of transgender health guidelines are used to inform practice?

<u>NMH response</u>: Transgender healthcare providers are aware of the *Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand* (Transgender Health Research Lab, University of Waikato, 2018).

5. What requirements are there for patients accessing care? (Eq. Readiness assessment)

<u>NMH response</u>: A psychological assessment, as a pre-requisite for a gender dysphoria client seeking endocrine therapy or surgery, is funded by the DHB and available through a contracted service provider which manages the assessment.

Ongoing support is provided by private practice Clinical Psychologists and General Practitioners (GPs) with special interest in gender dysphoria.

All assessments include informed consent.

6. For HRT specifically, what is the standard practice regarding choice of medication and dosages? Are GPs expected to be able to provide HRT, and if so what support are they given to ensure quality of care? What measures are in place to ensure that all patients are fully informed of all medications that could meet their HRT needs besides the suggested treatment plan?

<u>NMH response</u>: Treatment is tailored to the individual patient based on their wishes and medical co-morbidities. GP's are expected to provide some follow up on Hormone Replacement Therapy (HRT). Advice is given upon patient discharge from the Endocrinology service. Known risks and benefits of the therapy are documented in the initial discharge letter and a copy of this is sent to the patient.

7. Does the DHB have a Transgender Health Key Worker (or similar)?

NMH response: No.

8. Are there any youth-specific service providers? How would an underage person access transspecific healthcare in the DHB?

<u>NMH response</u>: Referrals for underage people can be made to the Paediatric Service in Nelson & Wairau (Blenheim) Hospitals. These referrals are usually from the GP.

9. When were the available services first offered?

NMH response: We are not aware of a start date for services.

10. Have these services ever been unavailable, and if so, between what dates?

NMH response: We are not aware of unavailability of services.

For the services that are not provided by the DHB:

11. Are patients referred elsewhere for these services? If so, where are they referred to?

<u>NMH response</u>: The Gender Dysphoria section of the Nelson Marlborough *Health Pathways* website at <u>www.nm.pathways.org.nz</u> provides guidance on community-based care and management of trans-gender patients.

A gender dysphoria Steering Group made up of stakeholders and experts, including Medical Clinic practitioners, private practise Clinical Psychologists, GPs, NMH staff – paediatricians, specialists, psychology lead, and project manager, continues to review and discuss gender dysphoria client needs.

12. Were any of these services ever previously provided by the DHB?

NMH response: No.

Regardless of transgender health service status:

13. Is there any additional support made for healthcare needs that are not particular to transgender health but are particular areas of interest for transgender health? Eg. Substance use, mental health care.

<u>NMH response</u>: Treatment for substance use and general mental health care is provided in both primary and secondary services according to the level of severity of the presenting problem.

14. What plans are there, if any, to expand or improve care for transgender patients within the DHB?

<u>NMH response</u>: The current pathway of community based care has been expanded so as to enable more people to be seen.

15. Have there been any internal reviews of the care provided or outcomes for transgender patients? If so, what were the results of those reviews, and what action was taken based on them?

<u>NMH response</u>: The current *Health Pathway* was established in 2016 following a comprehensive review including feedback from stakeholders across the community. These pathways are reviewed as we respond to feedback from users, new evidence emerges or new resources become available.

16. What measures does the DHB currently have in place to educate healthcare workers not working in transgender health areas on the needs of transgender patients they may encounter? How is their right to be treated with dignity upheld?

<u>NMH response</u>: One of the NMH values is respect for the needs of our diverse people and communities. The Code of Health and Disability Services Consumers' Rights (the Code) establishes the rights of consumers, and the obligations and duties of providers to comply with the Code.

17. Have any actions been taken based on complaints by transgender patients? If so, what actions have been made in response to complaints?

NMH response: We are not aware of specific complaints.

This response has been provided under the Official Information Act 1982. You have the right to seek an investigation by the Ombudsman of this decision. Information about how to make a complaint is available at www.ombudsman.parliament.nz or free phone 0800 802 602.

If you have any questions about this decision please feel free to email our OIA Coordinator OIArequest@nmdhb.govt.nz I trust that this information meets your requirements. NMH, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released. If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider.

Yours sincerely

Dr Peter Bramley
Chief Executive

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