

Regional Planning Table Minutes

Zoom Meeting, May 20, 2021



1. Participation at the Meeting

Present:

Karen Luyendyk, community member
Lisa Loeffen, CHEO
Lynsey James, Centretown Community Health Centre
Jonathan Schmidt, Family Services Ottawa
Jesse Bosse, community member
Marcia Gibson, LHIN / Ontario Health
Annie Chen, community member
Oliver Thorne, community member
Asha-Maria Bost, community member
Brittany Smyth, Family Services Ottawa
Fae Johnstone, Wisdom2Action
Lynne Tyler, Catalyst Research and Communications, facilitator

Guest: Max Housany, AIDS Committee of Ottawa

Regrets/Did not attend: Leyla Shahid, community member; Mel Thompson, community member; Noah Parchment, community member; Irena Druce, The Ottawa Hospital; Larissa Silver, Youth Services Bureau.

2. Welcome and Acknowledgement of Algonquin Territory

The RPT acknowledged that we were meeting (online) on the territory of the Algonquin people, and we reminded ourselves that many of us are guests here and to act, as much as possible, in accordance with local protocols.

3. Welcome to New RPT Members

The RPT welcomed new community members Annie Chen, Oliver Thorne and Asha Bost, who have joined through the second round of applications to the RPT. The working group of Karen and Fae who have been working on this also indicated that they are hopeful that a parent member can be found soon.

4. Approval of April Minutes

The April minutes were approved with two corrections: the spelling of Jesse's name was corrected, and Patricia's name was deleted from "Regrets" because she had already resigned from the RPT by the time of the meeting.

5. AIDS Committee of Ottawa

Max Housany is the new Men's Outreach Co-ordinator for the AIDS Committee of Ottawa, and as part of his work is reaching out to various community agencies and groups. He approach the RPT and we were pleased to have the opportunity to meet him and introduce the various members of the table. He briefly described his work and invited RPT members to share his contact information in their networks.

6. Update from Working Group on Policy for Community Members Working for Service Provider Members

A working group was set up at the April meeting, composed of Lynsey, Jesse, Lisa and Jonathan, and had prepared a report for the RPT with some initial recommendations, which was circulated prior to the meeting. In light of the substantive content and the fact that not everyone had been able to review the report, it was decided to move the discussion to the next meeting.

7. Update from W2A

Fae provide an update on several aspects of the ongoing workplan for W2A, and touched on the following areas:

- a) recruitment of new RPT community members,
- b) seniors outreach,
- c) capacity-building,
- d) website,
- e) pathways to care.

Out of the discussion came three action items for W2A:

- a) Convene a conversation among Centretown CHC, CHEO and Dr. Druce about the needs of youth transitioning out of CHEO and into adult services.
- b) Gather a group of RPT members to develop an "ideal state" of health services to the trans, intersex, Two Spirit, non-binary and gender diverse community (possibly a visual document).
- c) Prepare a standard section to share with all OHTs that they can use to guide them in integrating the needs of trans+ clients into their health planning, This could be based on the "ideal state" document created.

8. Terms of Reference for Community Table

Fae walked the RPT through a preliminary draft of the terms of reference for the Community Table, and there was a discussion on several aspects. Fae will prepare a revised version and bring it back to the next RPT for further discussion.

9. Capacity-Building

One of the tasks in the W2A work plan is related to capacity-building, and the focus is on building the skills, knowledge and comfort of primary care physicians to provide trans-affirming services. Two main elements emerged:

- a) Explore a partnership with RHO to annualize a set of standard trainings in Ottawa, e.g. three trainings of which 1 or 2 could be core. It was suggested that at least one of these should be piggy-backed onto an existing accredited training event that physicians already attend, to reach those practitioners who would not necessarily come to a trans-specific training as a stand-alone.
- b) Create list of physicians willing and able to provide trans-affirming services, building on the registrant list. Also, RHO has a list, THIO had a list, and there is a list in Québec. All of these have different processes and criteria for creating their list, so we need to consider various factors before creating our list. We may have additional considerations, such as the ability to speak languages other than English or French.

Actions:

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- Prepare a standard section to share with all OHTs that they can use to guide them in integrating the needs of trans+ clients into their health planning, This could be based on the “ideal state” document created.
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