

Dear Ms. Buffone,

Thank you for your letter of November 9<sup>th</sup>, 2020 and for bringing your concerns to our attention. At The Hospital for Sick Children (SickKids), we take feedback from patients and families very seriously and are troubled in hearing of any family who has expressed displeasure with their care. We would encourage families to reach out directly to us should they have particular concerns or experiences they would like to review and address. In response to your inquiries, we would like to describe the clinic's approach to the care of gender incongruent youth and our processes.

The primary function of the interdisciplinary SickKids Transgender Youth Clinic (TYC) is to provide information, options, and care to pubertal youth experiencing gender dysphoria, which includes assessment and treatment planning. The SickKids TYC takes an affirming approach to gender identity and care. Through ongoing assessment and discussions, a youth is supported in exploring their evolving identity formation and reviewing options for care. The clinic does not see youth until they have started puberty and continues following its patients until they turn 18.

A youth's first visit to the program is a general Adolescent Medicine assessment scheduled for 90 minutes. Members of the clinical team typically meet with the youth (first with the youth and parents/guardians together and then with the youth individually) to learn of their experiences, expectations and to develop an initial understanding of the youth's well-being and gender identity. The development of a care plan may begin during this initial visit; however, the team typically takes time to get to know the youth and the family and to decide together on future steps. Because of limited clinic capacity, most patients have communicated their gender identity and considered options for at least a year prior to their first assessment as they wait for an initial appointment.

The care plan of each patient is individualized and may include discussion of options for hormone blocking if that is part of the youth's goals and if the clinical team's assessment determines this to be clinically appropriate. Further medical options may be discussed at subsequent visits based on the youth's stated intent. Options presented by the TYC team are aligned with current World Professional Association for Transgender Health (WPATH) and Endocrine Society guidelines, as well as expert opinion and practice. At each visit, the youth is encouraged to reflect on their gender journey to date, and to consider whether their previously articulated plan is still in keeping with their evolving goals, identity and needs.

Should medical interventions be a part of a youth's care goals, the care team determines if the patient is capable to make a decision on a medical intervention. This involves an assessment of their capacity to understand and appreciate the implications of a medical decision, including the risks and benefits of therapy, as it pertains to the decision at hand. An important aspect of the TYC's typical process is to require a period of additional reflection before proceeding with medical intervention. This period of reflection may result in a young person choosing not to proceed with medical intervention, or in deciding to move ahead.

The TYC care team supports patients in examining and exploring their experiences while taking into consideration their physical, developmental and psychological health. During assessment, if conditions are identified that warrant mental health intervention, efforts are made to ensure the youth is connected with appropriate care. The TYC team includes a social worker and a consulting adolescent psychiatrist, who can see youth in urgent situations or in instances where community providers cannot be identified. Ongoing mental health and wellness assessments are embedded into initial and subsequent encounters.



Staff at the TYC emphasize the importance of having supportive adults in the lives of youth and reinforce the value of open and honest dialogue between a youth and their caregiver(s). Adolescent patients who are capable of providing informed consent inform the level of family engagement and these patients' care teams have a duty to uphold principles of confidentiality. However, the care team prioritizes and strongly advocates for family involvement with the goal of helping families and youth come to decisions together.

Across the continuum of involvement with the clinic, patients and families/caregivers are encouraged to seek out additional information and resources to empower them to remain informed and up to date regarding care of gender incongruent youth. The team also reviews and contributes to available literature and is active in professional organizations, research partnerships, and clinical networks to broaden and enrich its understanding of best practices in adolescent gender care. By doing so, the team works to ensure that all care provided adheres to the highest standard of evidence-informed practice.

We value the opportunity to review any concerns that may have impacted families' individual experiences at the hospital. If a family's experience is not aligned with the TYC's philosophy and typical practices as outlined above, we would invite them to connect with us by emailing <a href="mailto:patient.experience@sickkids.ca">patient.experience@sickkids.ca</a> or calling 416-813-6181 to discuss their specific concerns.

Donna McGhee

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