



Health Services
LOS ANGELES COUNTY

November 17, 2022

**Los Angeles County
Board of Supervisors**

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TO: Supervisor Holly J. Mitchell, Chair
Supervisor Hilda L. Solis
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

FROM: Christina R. Ghaly, M.D. 
Director

SUBJECT: **CARE WITH PRIDE: ESTABLISHING A
GENDER HEALTH PROGRAM IN LOS
ANGELES COUNTY (ITEM NO. 23 FROM THE
JUNE 14, 2022 BOARD MEETING)**

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Director

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Chief Deputy Director, Population Health

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On [June 14, 2022](#), the Los Angeles County (LA County) Board of Supervisors (Board) directed the Department of Health Services (DHS) to work in collaboration with the Department of Mental Health (DMH) and Department of Children and Family Services (DCFS) to further support the departments' Lesbian, Gay, Bisexual, Transgender, Queer+ (LGBTQ+) patients and clients with accessing gender affirming medical services, mental health services and social services. The Board directed the aforementioned departments to collaborate on further enhancing and expanding the recently established DHS led, Gender Health Program (GHP). Below are responses to the six directives listed in the motion.

- 1. Unify the recent expansion of LGBTQ+ services prompted by the Care with Pride motion passed in June 2021, to create a DHS-led Gender Health Program that standardizes and strengthens LGBTQ+ services for DHS-empaneled patients and include DCFS and DMH to ensure mental health and child welfare partners are core components of the GHP.**

DHS has established the GHP, a referral system between DHS, DMH, and DCFS designed to provide and coordinate clinical care for children, youth, and adults desiring gender affirming or other LGBTQ+ focused healthcare services. DHS has two clinics, the Alexis Project at LAC+USC Medical Center (LAC+USC MC) and the Gender Affirming Clinic at Hubert H. Humphrey Comprehensive Health Center (Humphrey CHC) that are dedicated to providing gender affirming healthcare for transgender, nonbinary, and gender diverse for DHS-

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empaneled patients of all ages. These clinics serve as the sites for clinical care for the GHP, and medical teams at the clinics partner with DMH and DCFS staff to coordinate care, mental health and community referrals, and other support services for patients in the program. In addition to on-site visits, telehealth services are also offered by the clinics.

Below are the roles of DMH and DCFS within the GHP.

Department of Mental Health

DMH is currently pursuing the implementation of two projects that will directly contribute to the GHP: 1) the Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex, Asexual and Two-Spirit (LGBTQIA2-S) Champion Network Program for which prospective champions from clinical and administrative staff are being selected, and 2) the Primary Care and Behavioral Health Integration program aiming to enhance cross-departmental gender affirming healthcare provisions, address health-related inequities, combat stigma, link clients to medical and/or mental health providers, and establish collaborative treatment models within DHS sites. Both programs incorporate the expertise of Gender Affirming Treatment Advocates (GAA).

DMH has identified several GAA DMH clinicians, that have been trained on writing support letters for transgender, non-binary, and gender expansive clients and connecting patients to mental health services. These are trained clinicians located in each Service Area who work with diverse age groups. Once positioned throughout the system of care, GAA will conduct specialized clinical and/or psychosocial assessments and write referral letters for gender affirming medical care. These services will engage the LGBTQIA2-S community and enhance service accessibility, quality, and treatment outcomes. For example, DMH's foster care program has staff fulfilling the GAA role as they can directly provide mental health services (e.g., including psychotherapy, targeted case management and psychiatric services) to youth patients at their clinical sites. GAA may also connect patients to mental health services as needed.

Collectively, these efforts support education of DMH providers outside of GHP (in the Medical Hubs and DMH clinics), to ensure appropriate readiness to provide ongoing services in DMH clinics. DMH services that will be provided include general mental health support, pre-surgical consultation (in collaboration with DHS psychiatrists), and family-centered mental health services to support teens and transitional aged youth desiring gender-affirming care. DMH will also foster linkages to appropriate providers at their clinics after initial assessment within the GHP and Medical Hub sites.

Patients can also connect with mental health services through the DMH Help Line and the virtual DMH Provider Network website, which serve as the primary referral hubs for DMH services. In addition, DHS has identified providers to co-locate in the GHP sites and to support education for DMH providers outside of GHP (in the Medical Hubs and

DMH clinics), to ensure appropriate readiness to provide ongoing services outside of the GHP sites.

DMH GHP services include general mental health support, pre-surgical consultation (in collaboration with DHS psychiatrists), and family-centered mental health services to support teens and transitional aged youth desiring gender-affirming care. DMH will also foster linkages to appropriate providers at their clinics after initial assessment within the GHP and Medical Hub sites. Linkages will be facilitated through the LGBTQIA2-S Champion Network once implemented within the Anti-Racism, Diversity, and Inclusion (ARDI) Division. Members of the LGBTQIA2-S Champion Network will serve as a mechanism to identify, engage, and train clinical providers and allied professionals in affirming service delivery for individuals seeking gender-affirming care. As knowledgeable and experienced LGBTQIA2-S community members, the champions will provide a visible LGBTQIA2-S affirming, supportive, and culturally responsive environment for clients and their family members.

Department of Children and Family Services

As of March 1, 2022, DCFS implemented a referral system to access their new program, LGBTQ+ Tailored Services to Youth. As part of the program, participating youth are offered, or referred and linked to gender affirming health and medical care. Additionally, the GHP has partnered with DCFS and the Medical Hubs to provide medical, mental health, and case management services to DCFS-involved LGBTQ+ youth, who are over-represented in the child welfare system, and their caregivers. DCFS has identified a GHP Child Welfare Coordinator to serve as the lead for DCFS to enhance current practice and procedures and will develop a system to identify LGBTQ+ youth so that they may be connected to desired support services, including gender affirming care. Additionally, DCFS is in the process of identifying a medical liaison who will assist in providing oversight of care coordination and family support activities for LGBTQ+ youth.

- 2. Ensure that DHS implements expected practices that are consistent with national standards of care regarding access to, and coordination around gender affirming care: medical/hormonal management, pharmaceutical formulary, mental health coordination and access to necessary surgical interventions for transgender and gender nonbinary people.**

DHS currently provides care consistent with the national standards of gender affirming care. DHS will review standards on an annual basis to ensure the department is meeting the most up to date standards of care.

- 3. Establish access points to ensure that transgender and nonbinary youth, particularly those in the child welfare system, are connected to gender affirming medical care, in accordance with California law.**

Within DHS the GHP has established a process through the internal DHS eConsult portal, community-based organizations, health plans, and self-referrals by which LGBTQ+ youth can access GHP services.

As of March 1, 2022, DCFS implemented a new pathway to access services entitled, "LGBTQ+ Tailored Services to Youth" program. Youth who identify as LGBTQ+ have the option of participating in the program, which offers an array of services by collaborating and partnering with the Los Angeles LGBT Center, Penny Lane Centers, The Help Group and Long Beach LGBTQ Center. After being referred, these participating agencies complete a comprehensive intake assessment of the referred youth to offer, link and connect them to needed services, including gender affirming health and medical care through the GHP or other affirming agencies and partners. With a formalized pathway to services now in place, DCFS is exploring additional opportunities to enhance access points for LGBTQ+ youth and young adults in the child welfare system.

- 4. Partner with key stakeholders to establish a referral process that can be easily accessed by LA County Departments, community-based organizations, and individuals to ensure coordination of medical, mental health and social services.**

When a patient desires LA County services, GHP staff in DHS, DCFS, and DMH assists with connecting patients to a point of entry for care. If the patient is DHS affiliated, intake is coordinated through the access points noted above. For patients without DHS affiliation, GHP helps potential GHP patients navigate their in-network services. If unsuccessful, GHP facilitates the transition to DHS coverage for entry into care.

- 5. Create a DHS Gender Health patient advisory board that includes both DHS patients and LGBTQ+ community organizations and LGBTQ+ -serving organizations to support DHS in developing and improving services for LGBTQ+ people in DHS hospitals and clinics.**

GHP brings DHS empaneled patients into the decision-making process to guide growth, expansion, and enhancement of services. GHP is working with the DHS partner, Patient and Family Centered Care (PFCC) to create a DHS Transgender, Nonbinary and Gender Diverse Patient Family Advisory Committee that will help further enhance services for LGBTQ+ DHS patients.

- 6. Report back to the Board in 90 days with a plan to implement directives 1-5 and include in the report back scope of services, estimated patient volumes, and budget needs within DHS, DMH, and DCFS to support the DHS Gender Health Program.**

Scope of Services

To provide LGBTQ+ patients with the most comprehensive medical care, the GHP is working closely with DMH and DCFS to provide coordinated care for medical, mental health, and social work/case management services. Care for GHP DHS- empaneled patients will include primary care, hormone therapy, referral for surgical services, mental health services (pre-surgical evaluation, medication management and psychotherapy), and case management. These services will be provided in the current GHP clinical sites at LAC+USC MC and Humphrey CHC, and via telehealth.

Estimated Patient Volume

A review of ORCHID data from last year has identified approximately 550 patients in DHS who have been seen for care related to gender health services (as determined by ICD-10 coding). These patients largely receive outpatient care for primary medical needs and hormone therapy, totaling nearly 2,000 visits in the past year. Based on national prevalence data and current utilization patterns, we estimate that 1,200 patients will desire services through the GHP.

The DHS, DMH, and DCFS GHP Staffing Model

The GHP staffing model creates an efficient referral process to ensure timely services. Departments have agreed to provide staff through in-kind contributions or through the reallocation of existing vacant items. The GHP staffing model described below is the current planned staffing model it will continue to evolve over time based on clinical and administrative needs.

Planned Cross-Departmental GHP Staffing Model

- Program Manager/Staff Analyst (0.5-1 FTE/DHS)
- Care Manager/Case Manager (1 FTE/DHS)
- Social Worker (1 FTE/DMH)
- Physician (1 FTE/DHS)
 - 50% clinical time/50% GHP oversight.
 - Additional DHS in-kind support for medical visits, pre-surgical assessments, surgical care, and specialty care.
- Mental Health Provider (0.5 FTE/DMH)
 - Additional in-kind allocation of existing providers to undergo additional training and to provide 100 hours per month of mental health visits for this population.
 - Additional in-kind allocation to support educational activities across DMH.
- Child Welfare Coordinator (0.5FTE/DCFS)

- Additional in-kind allocation to support educational activities and case finding across DCFS.
- Child Welfare Medical Liaison (0.05 FTE/DCFS)
- Additional in-kind allocation to provide medical interface between the DHS, DMH, and Medical Hubs
- Data Management Specialist (0.10 each for DCFS, DMH, DHS)
 - Specialists will be responsible for ongoing data collection and interpretation to help guide services.

Conclusion

DHS, DMH, and DCFS recognize the critical need to better serve the LGBTQ+ community and believe that partnering to create the GHP will improve the departments' ability to serve transgender, nonbinary, and gender diverse people, and in particular child welfare involved youth.

If you have any questions, you may contact me, or your staff may contact Dr. Shannon Thyne, DHS Director of Pediatrics, at sthyne@dhs.lacounty.gov.

CRG:kg

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Department of Mental Health
Department of Children and Family Services