

# Framework for the Specialist Trans and Gender Diverse Health Service for People Under 25 Years

14 July 2023



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The NSW Ministry for Health acknowledges the traditional custodians of the lands across NSW. We acknowledge that we live and work on Aboriginal lands. We pay our respects to Elders past and present and to all Aboriginal people.

Further copies of this document can be downloaded from the NSW Health webpage [www.health.nsw.gov.au/lgbtiq-health/Pages/TGD-Framework.aspx](http://www.health.nsw.gov.au/lgbtiq-health/Pages/TGD-Framework.aspx)

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# Introduction

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The Framework for the *Specialist Trans and Gender Diverse Health Service for People Under 25 Years* (the Framework) provides guidance on how evidence-based trans and gender diverse health care will be delivered through the Specialist Trans and Gender Diverse Health Service (the TGD Health Service) to NSW Local Health Districts (LHDs) and Speciality Health Networks (SHNs). The Framework will guide treatment and care decisions by NSW Health clinicians, private clinicians, General Practitioners (GPs), non-government organisations (NGOs), trans and gender diverse people under 25 years and their families and carers.

This document outlines the key principles and minimum care requirements, roles and responsibilities of key stakeholders and support available to facilitate delivery of the TGD Health Service.

The TGD Health Service is comprised of a Statewide Coordinator and two Specialist Hubs - one based in Newcastle supporting rural and regional areas and the second based in Sydney supporting metropolitan areas. Each Hub is expected to deliver the minimum requirements of the Framework within their geographic area. The scope of the Hubs is limited to specialist trans and gender diverse health care and will rely on a networked approach with existing support services to provide holistic care for young people and their families and carers.

The Framework is informed by:

- consultations with public and private clinicians, trans and gender diverse young people, families and carers, NGOs, GPs and Primary Health Networks,
- an evidence check by Sax Institute and,
- mapping of current health service provision.

The Framework also aligns with priorities of the [NSW LGBTIQ+ Health Strategy 2022-2027](#).

This document should be considered alongside existing clinical guidance (see [Section 3.2](#)) and the *Information Bulletin on Consent Requirements for Gender Affirming Medical Treatments for Young People*<sup>i</sup>. The Framework will inform the development of future Clinical Guidelines for the TGD Health Service which will provide further detail on how services are delivered. Development of the Clinical Guidelines will be led by the Clinical Advisory Group.

Definitions of key terms used in this document are included in [Appendix 1 – Glossary](#).

<sup>i</sup> The Information Bulletin is currently under development and will be released publicly by mid-2023.

## 1.1 Purpose

### The Framework has been developed in view of the specific need to:

- Holistically address health needs associated with gender incongruence.
- Ensure that psychosocial and medical health services for trans and gender diverse young people and their families are delivered in culturally safe ways that affirm the person's gender and considers their experiences, health needs and social context.
- Address the growing demand in NSW for expert clinical care for trans and gender diverse young people.
- Provide leadership to support the development of a skilled workforce specialising in trans and gender diverse healthcare.

### The purpose of the Framework is to:

- Describe the principles that underpin the delivery of NSW Health care to trans and gender diverse young people.
- Outline the minimum care requirements to be implemented by the TGD Health Service across NSW.
- Support the delivery of holistic health care to trans and gender diverse people under 25 years as part of a networked system, including specialist health care.
- Guide treatment and care decisions by NSW Health clinicians, private clinicians, GPs, trans and gender diverse young people and their families and carers.

### Implementation of the Framework aims to:

- Improve timely access to trans and gender diverse health services for people under 25 years in NSW, regardless of where they live.
- Provide evidence-based, high-quality specialist care through NSW Health including comprehensive assessment, diagnosis, and ongoing treatment or specialist review (as required) for trans and gender diverse young people.
- Improve health outcomes and health care experiences for trans and gender diverse young people.
- Provide a clear care pathway for trans and gender diverse children and young people from childhood, through adolescence to adulthood.

- Further develop capacity and competence in public and private practitioners across NSW to support the health needs of trans and gender diverse young people.

## 1.2 Trans and gender diversity

There is diversity in the ways in which people identify in transgender and gender diverse communities. Terminology relating to bodies, gender and sexuality is evolving and it is acknowledged that terms used in the community may change over time. The terminology 'trans and gender diverse' is used throughout this Framework and meanings are detailed below. An expanded glossary is provided in the [Appendix](#).

**Trans and gender diverse** are the terms used in this Framework and may arise in working with trans and gender diverse people, their families and carers and support services. These are umbrella terms used to refer to people whose assigned sex at birth does not match their internal gender identity, regardless of whether their internal gender identity is outside the gender binary or within it.

Trans people may position 'being trans' as a history or experience, rather than an identity, and consider their gender as being female, male, non-binary or another gender identity. Some trans people connect strongly with their trans experience, whereas others do not. Gender affirmation may or may not be part of a trans or gender diverse person's life – some people may wish to affirm their gender through social, medical, legal or other processes. The path chosen is unique to each person<sup>1</sup>. It is important to show respect for an individual's journey by using appropriate language. Trans or gender diverse people may use a variety of different pronouns, including he, she, they, hu, fae, ey, ze, zir and hir.

A person's experience and health is shaped by multi-dimensional and overlapping factors such as gender, sexuality, intersex variation, and other social determinants such as age, race, culture, language, religion, disability, and geographic location. For example, gender diverse people within Aboriginal or Torres Strait Islander communities, sometimes referred to as Sistergirls and Brotherboys, have experienced

trauma as a result of colonisation, including the associated violence and loss of land and culture, resulting in long lasting and intergenerational impacts on health that may be compounded with social attitudes or environments related to gender diversity.

Young people who are trans and gender diverse are an especially vulnerable group<sup>2</sup>. They are at high risk of harm caused by discrimination, bullying, social exclusion and physical assault<sup>4</sup>. Trans and gender diverse young people also have a higher than average prevalence of co-occurring mental health conditions due to minority stress, including depression, anxiety, self-harm, and suicidality<sup>4</sup>. Providing access to gender-affirming treatments, care and support can improve the mental health and wellbeing of trans and gender diverse people and is shown to be a protective factor against suicidality<sup>3</sup>.

While acknowledging higher rates of trauma and some co-occurring conditions, there is great strength and resilience among individuals and in trans and gender diverse communities, including young people; resilience that is both the learned behaviour of individuals and a reflection of the strengths involved in connection to a larger community<sup>4</sup>.

It is important that all NSW Health organisations and staff ensure language and terminology is correctly used in documentation and delivery of health services. If unsure, please seek guidance from the [NSW LGBTIQ+ Health Strategy 2022-2027](#) or local diversity and inclusion champions.

### 1.3 Principles

These principles underpin the delivery of high-quality, safe, inclusive and responsive psychosocial and medical gender affirming care to trans and gender diverse people under 25 years. The principles are critical to enabling NSW Health to provide appropriate care.

#### **Trans and gender diverse people under 25 years and their families and carers can expect to receive:**

- High quality, safe, timely, affordable, accessible and evidence-based care.
- Person-centred and individualised care recognising each person's journey is unique and goals may change over time.

- Developmentally appropriate care according to age and developmental stage.
- Holistic care that supports their gender identity and expression, including referrals to appropriate support services.
- Culturally safe and inclusive spaces and staff.
- Trauma-informed care that recognises the impact of traumatic experiences.

#### **Trans and gender diverse people under 25 years and their families and carers can expect to:**

- Access evidence-based information in a way that supports informed decision-making.
- Be able to express their views, and to be heard and acknowledged.
- Participate in decision-making and, as appropriate to their capacity, to make decisions about their care.
- Have family, carer, and kin relationships supported by the NSW Health service providing care.
- Be respected for their individual characteristics, beliefs, language and culture.

## 1.4 Context

The Framework has been developed recognising the increasing demand for gender services and the inequity in access to appropriate care for trans and gender diverse young people across NSW. The statewide approach is informed by the service mapping of current provision across NSW, an evidence check conducted by the Sax Institute, clinical guidance (outlined in [Section 3.2](#)) and consultations with key stakeholders.

### **Sax Institute Evidence Check**

NSW Health commissioned a Sax Institute Evidence Check<sup>5</sup> to identify the benefits and risks of treatment for trans and gender diverse children and young people up to the age of 18. The evidence check, conducted in January 2020, aimed to address key questions about the effective clinical medical and psychosocial interventions for trans and gender diverse people up to the age of 18 and those with gender dysphoria; the potential risks and harms of those interventions;

and any variations in effectiveness. The evidence check also outlined limitations in the existing evidence base and opportunities for further research. At July 2023, Sax Institute is working on an update to the evidence check.

For more information about the Sax Institute evidence check, see [www.saxinstitute.org.au/evidence-check/evidence-for-effective-interventions-for-children-and-young-people-with-gender-dysphoria/](http://www.saxinstitute.org.au/evidence-check/evidence-for-effective-interventions-for-children-and-young-people-with-gender-dysphoria/).

## NSW LGBTIQ+ Health Strategy 2022-2027

The provision of accessible, user-led pathways for gender-affirming holistic care is a key priority of the NSW LGBTIQ+ Health Strategy 2022-2027. The NSW LGBTIQ+ Health Strategy aims to ensure LGBTIQ+ people in NSW receive high quality, safe, inclusive and responsive healthcare that delivers outcomes that matter to them. One of the four priorities of the Strategy is to respond to the health needs of trans and gender diverse people in NSW, through three key actions:

- Elevating capability: Work with transgender and gender diverse people to promote and embed best practice in NSW Health services for delivering care to this community.
- Support to young people and families and carers: Strengthen evidence-informed care to transgender and gender diverse young people aged 24 and under, and their families and carers
- Gender-affirming care: Establish an accessible, user-led pathway of care for people aged 25 and above who are affirming their gender, including mental health and other wrap around supports.

The Framework aligns with and supports the outcomes expected under the second action:

- Young people seeking to affirm their gender, and their families and carers, are supported to access gender affirming treatments and care.
- An evidence-informed statewide model of care coordinates the delivery of high quality, safe, inclusive and responsive gender affirming care to young people.

The Strategy also focuses on increasing LGBTIQ+ awareness and capability in the NSW Health workforce; improving the collection of data on sexuality, gender and intersex variations at the point of care and population level; responses to service gaps and emerging issues; and the importance of co-design of care and services with LGBTIQ+ people.

For more information about the Strategy, see [www.health.nsw.gov.au/lgbtiq-health/Pages/default.aspx](http://www.health.nsw.gov.au/lgbtiq-health/Pages/default.aspx).

The Strategy also supports the implementation of the NSW Sexually Transmissible Infections Strategy 2022-2026. For more information, see [www.health.nsw.gov.au/sexualhealth/Pages/nsw-sti-strategy.aspx](http://www.health.nsw.gov.au/sexualhealth/Pages/nsw-sti-strategy.aspx).

## NSW Youth Health Framework 2017-24

The NSW Youth Health Framework 2017-24 supports NSW Health to consider the health and wellbeing of young people aged 12 to 24 years when planning and delivering services.

The Framework supports:

- holistic healthcare that supports young people as partners in their own care
- targeted health promotion and early intervention that is focused on prevention and harm minimisation
- timely access to appropriate healthcare and youth-friendly services
- person-centred, integrated care and transition support for young people with complex needs, including chronic illness and disability
- service models that respond to the needs of vulnerable young people at higher risk of poor health
- workforce capacity to provide responsive care to young people that promotes safety, welfare and wellbeing
- consumer participation in health by young people
- monitoring and improvement of health services for young people.

For more information about the NSW Youth Health Framework, see [www.health.nsw.gov.au/kidsfamilies/youth/Pages/yh-framework.aspx](http://www.health.nsw.gov.au/kidsfamilies/youth/Pages/yh-framework.aspx).



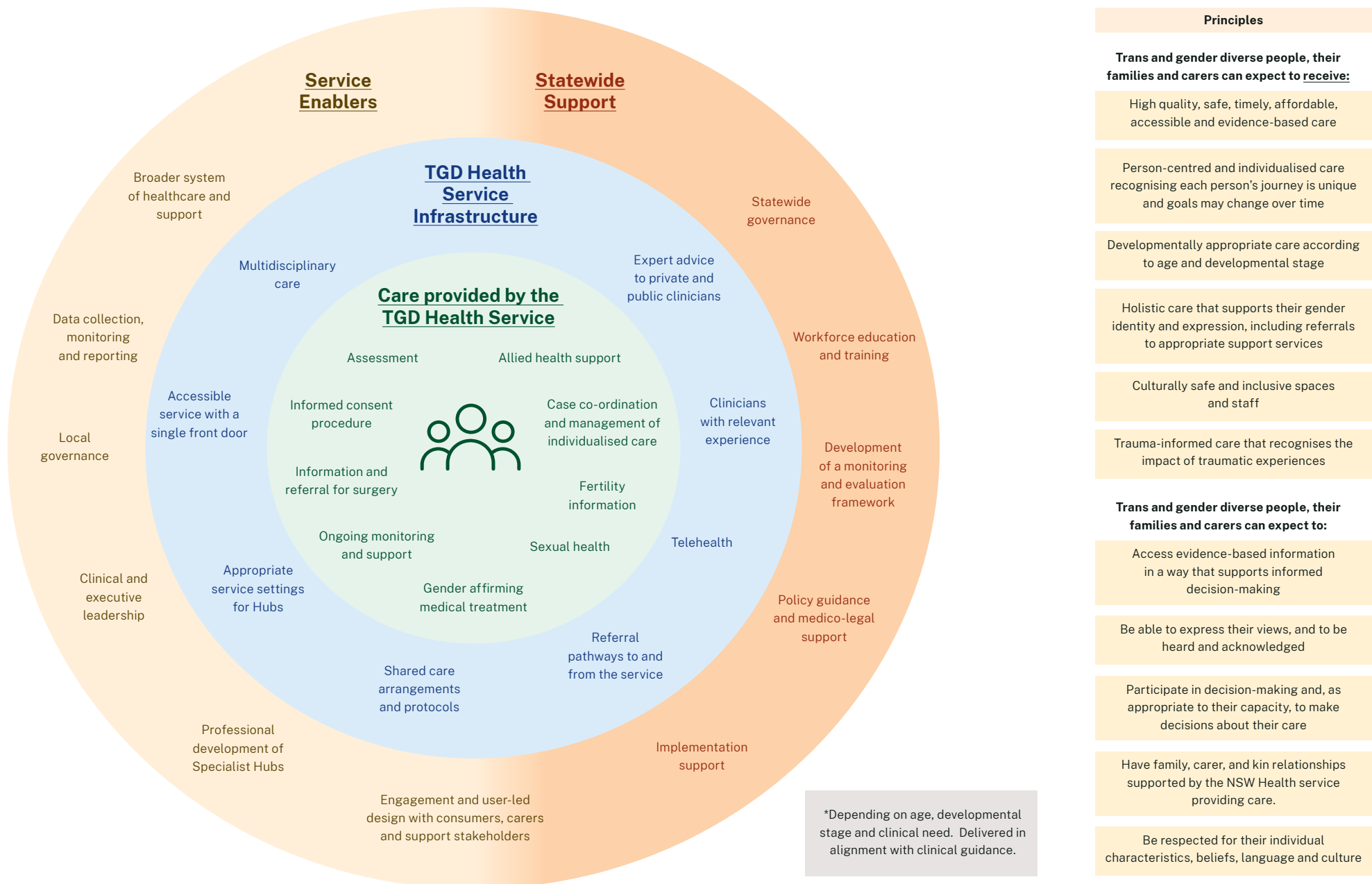
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# Framework at a glance

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Figure 1: The Framework at a glance



# Minimum requirements

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### 3.1 Overview

The Framework places people under 25 years, with their families and carers, at the centre of trans and gender diverse specialist health services.

The components of the Framework are:

- The provision of **specialist health services and continuity of care** to trans and gender diverse people up to the 25<sup>th</sup> birthday, in line with specified clinical pathways that include comprehensive medical and psychosocial assessment; case co-ordination and management; informed consent procedures; access to gender affirming medical treatment; fertility information; sexual health support; allied health interventions and support; information and referral for surgery and ongoing monitoring and support.
- **Specialist service infrastructure** including multidisciplinary care; support from clinicians with relevant experience; an accessible service with a single entry point; appropriate service settings; access to telehealth; referral pathways to and from the service; shared care arrangements and consultation and liaison to private and public clinicians.
- **Specialist service enablers** including local governance; data collection monitoring and reporting; appropriate consumer engagement; professional development of staff in the Specialist Hubs; clinical and executive leadership and support from supplementary and complementary services.
- **Statewide support** including a governance structure for the service; policy guidance and medico-legal advice; education and training; development and implementation of a monitoring and evaluation framework and other implementation support.

### 3.2 Clinical guidance

The Framework aligns with accepted good practice in the Australian context. Care is informed by the existing evidence base and will be modified as new evidence emerges. In the absence of robust evidence, expert clinical consensus will be drawn on. Clinical Guidelines for the TGD Health Service will be developed by a Clinical Advisory Group to outline how the below guidance will be implemented.

#### The recommended clinical guidance resources are:

- Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents<sup>6</sup> (endorsed by Australian Professional Association for Trans Health (AusPATH))
- AusPATH's Australian Informed Consent Standards of Care for Gender Affirming Hormone Therapy<sup>7</sup>
- Australian Position Statement on Hormonal Management for Adults<sup>8</sup> (endorsed by AusPATH, Endocrine Society of Australia and Royal Australasian College of Physicians)
- Endocrine Society Clinical Practice Guideline: Endocrine Treatment of Gender-Dysphoric/ Gender-Incongruent Persons<sup>9</sup>
- World Professional Association for Transgender Health – Standards of Care for the Health of Transgender and Gender Diverse People, Version 8<sup>10</sup>

### 3.3 Clinical pathway

The Framework provides a clinical pathway for gender affirming care for trans and gender diverse people up to the 25<sup>th</sup> birthday.

The clinical pathway is responsive to assessed health and psychosocial needs and provides support aligned to the person's goals, age and developmental stage. The TGD service will support a young person if their goals change along the way, including discontinuing medical treatments if needed. The clinical pathway reflects the clinical guidance and evidence-based practice.

Specialist trans and gender diverse health services are provided to children, adolescents and young adults through a specialist multidisciplinary team.

The multidisciplinary team work collaboratively to support individualised treatment through communication and informed decision-making. Participation in appropriate clinical governance mechanisms is also expected.

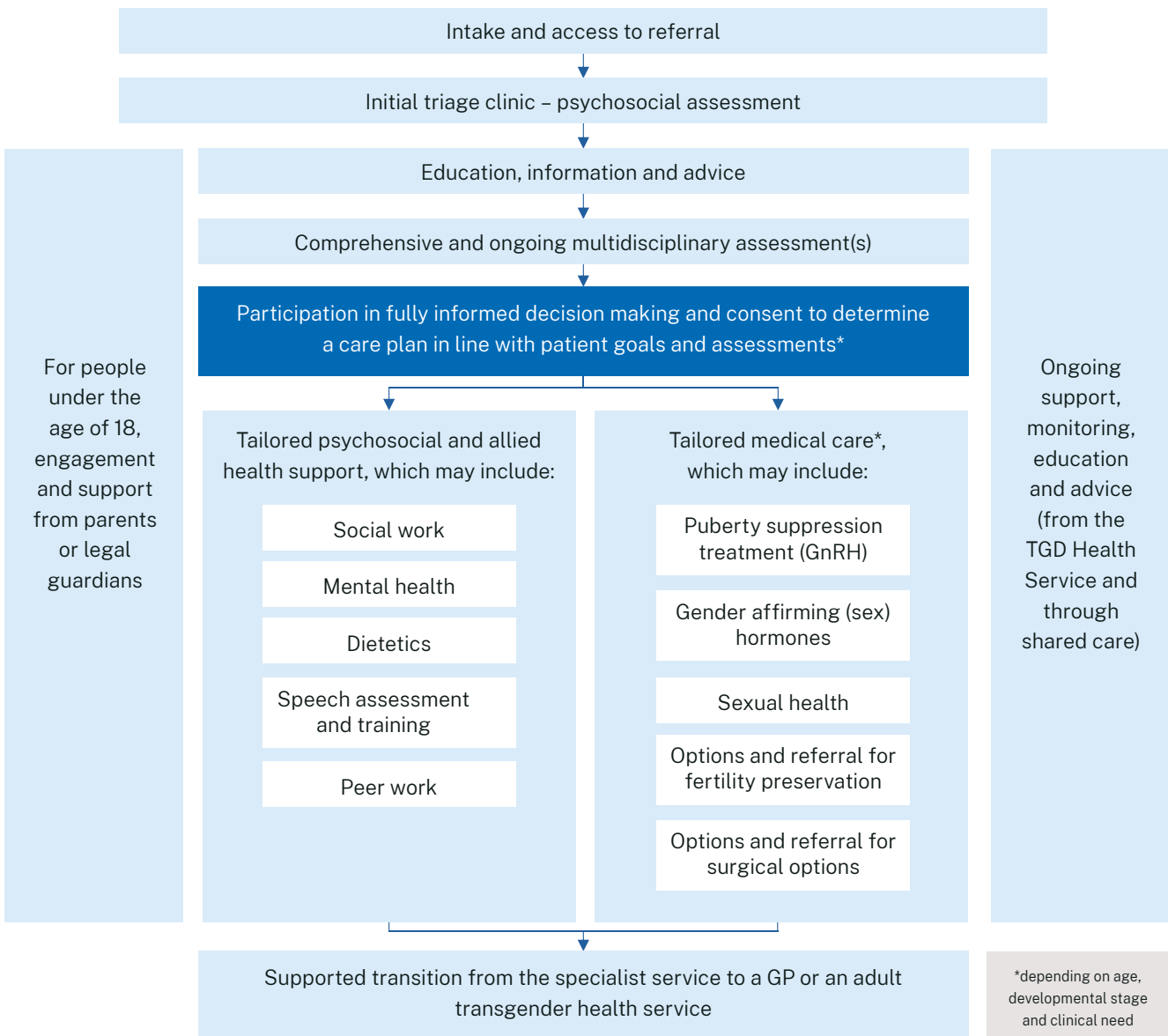
Young people may enter the clinical pathway at any age up to their 25<sup>th</sup> birthday. Children and adolescents under the age of 18 are supported by specialists with relevant developmental experience and with the engagement and support from their parents or legal guardian(s).

Young adults may exit the pathway at any time prior to their 25<sup>th</sup> birthday and transition either to a GP selected by the young person or an adult transgender health service. GPs will be provided information and support by the TGD Health Service to facilitate the transition of care.

**Child, adolescent and youth specialist multidisciplinary teams with appropriate experience include:**


<b>Core team members in the TGD Health Service</b>	<b>Additional support (as needed)</b>
<ul style="list-style-type: none"> <li>• Paediatrician with adolescent medicine expertise</li> <li>• Paediatric endocrinologist</li> <li>• Adult physician/adult endocrinologist</li> <li>• Child and adolescent psychiatrist</li> <li>• Clinical psychologist</li> <li>• Specialist nursing</li> <li>• Social worker</li> </ul>	<ul style="list-style-type: none"> <li>• Dietetics</li> <li>• Speech</li> <li>• Sexual health</li> <li>• Peer worker</li> <li>• Other support as needed</li> </ul>

Figure 2: Clinical pathway for the Specialist Trans and Gender Diverse Health Service for people aged under 25 years



### 3.4 Care components

The clinical pathway delivered by the TGD Health Service includes the following key components:

Clinical pathway component	Description and implementation standard
<p><b>Assessment</b></p> 	<ul style="list-style-type: none"> <li>• An initial triage clinic for psychosocial assessment soon after referral.</li> <li>• Multidisciplinary comprehensive, longitudinal assessment/s and ongoing monitoring and care (including assessment of psychosocial, medical, psychiatric, neurodevelopmental issues, endocrinology needs and preventative health factors).</li> <li>• A diagnosis of gender dysphoria is not essential to access the TGD Health Service (gender incongruence is sufficient).</li> <li>• For those aged under 18, accessing gender affirming medical treatment requires assessment by a multidisciplinary team, diagnosis of gender dysphoria and fulfilment of consent procedures. See <a href="#">Appendix 1 – Glossary</a> for the definition of terms.</li> <li>• Involvement of parents or legal guardian(s) is essential throughout the journey for young people aged under 18 years. Referral to appropriate support services is provided to young people without parental or guardian consent.</li> <li>• For co-occurring conditions identified through assessments, referral to external services is provided for ongoing support.</li> </ul>
<p><b>Case co-ordination and management of individualised care</b></p> 	<ul style="list-style-type: none"> <li>• Case co-ordination and management to share information and ensure continuity of care.</li> <li>• Care and treatment to be individualised and decision-making aligned with the expressed needs of the young person and their families and carers.</li> </ul>
<p><b>Informed consent procedures</b></p> 	<ul style="list-style-type: none"> <li>• Provision of evidence-based information for children, adolescents, parents and guardian(s) regarding treatment and care options.</li> <li>• Formal and endorsed informed consent procedures for medical care.</li> <li>• For gender affirming medical treatment to commence for a person under 18, written consent of both parents or legal guardian(s) and the child (if Gillick competent) is required.</li> <li>• If there is any uncertainty about consent, Gillick competence, diagnosis or treatment, an application to the Federal Circuit and Family Court of Australia is required before treatment commences. On a case-by-case basis, additional approval may be required from the NSW Civil and Administrative Tribunal.</li> <li>• For those aged 18 and over, an informed consent model is generally appropriate. If there is concern about the capacity of a young adult to consent to the treatment, a developmental and mental health assessment is recommended to ensure appropriate management of co-occurring issues.</li> <li>• Further detail on the legal framework for informed consent will be released publicly via a NSW Health Information Bulletin by mid-2023.</li> </ul>

### Gender affirming medical treatment



- Access to safe and effective hormone treatment where appropriate and indicated, in accordance with clinical guidance, for those seeking medical treatments for puberty suppression (GnRH) and gender affirming (sex) hormones.
- Gender affirming medical treatment can only be accessed once informed consent requirements are fulfilled.

### Fertility information



- Provision of standardised fertility preservation information prior to commencement of puberty suppression (GnRH) and gender affirming (sex) hormones.
- Referral pathways for fertility preservation as required.

### Sexual health support



- Information and referral for sexual health needs, including contraception information and screening for sexually transmissible infections (STIs) and prevention education.

### Allied health support



- Allied health support may include interventions such as dietetics, psychology, social work, peer workers and speech assessment and training.
- Support provided for patients, families and carers is related to gender affirming care only. Ongoing support for co-occurring conditions will require external referral to support providers. See [Section 7](#) for further details.

### Information and referral for surgery



- Information on surgical options and referral as clinically appropriate.
- A key priority in the NSW LGBTIQ+ Health Strategy is to establish a pathway of care for adults who are affirming their gender. Surgical options for adults will be considered as part of the work.





### Ongoing monitoring and support



- Ongoing monitoring and support is required, particularly for those accessing hormone treatments.
- Monitoring includes monitoring of bone health for those on puberty suppression (GnRH) treatment, and also at key transition points, for example from puberty suppression (GnRH) to gender affirming (sex) hormones.
- People may continue to need access to specialist care over their lifespan. Further work will be carried out under the NSW LGBTIQ+ Health Strategy to establish a holistic gender affirming care pathway for people aged over 25.
- Shared care models with primary care and health service providers will support monitoring and support. GPs will be provided information and support by the TGD Health Service to facilitate shared care.

## 3.5 Service infrastructure

The delivery of specialist trans and gender diverse health services includes the following infrastructure:

Service infrastructure component	Description and implementation standard
<p data-bbox="113 517 384 546"><b>Multidisciplinary care</b></p> 	<ul data-bbox="450 517 1501 813" style="list-style-type: none"> <li>• Health services are provided by multidisciplinary teams.</li> <li>• The core members of multidisciplinary teams are outlined in the <a href="#">Clinical Pathway</a> section.</li> <li>• The multidisciplinary team and care structure is directed and guided by the Local Health District (LHD)/Specialty Health Network (SHN) hosting the Specialist Hubs.</li> <li>• The teams will support collaboration and supportive transition from paediatric into adult healthcare services.</li> </ul>
<p data-bbox="113 907 400 972"><b>Clinicians with relevant experience</b></p> 	<ul data-bbox="450 907 1501 1155" style="list-style-type: none"> <li>• Specialist health services are led and staffed by clinicians who are skilled in working in trans and gender diverse health and with people under 25 years (according to the patient age and developmental stage).</li> <li>• Care is delivered in line with the principles outlined.</li> <li>• Staff have access to best practice guidance through education, training and research.</li> </ul>
<p data-bbox="113 1279 405 1344"><b>Accessible service with a single entry point</b></p> 	<ul data-bbox="450 1279 1501 1704" style="list-style-type: none"> <li>• The TGD Health Service is structured so it is accessible, and care is co-ordinated limiting need to attend multiple service sites where possible.</li> <li>• Patients access the service through a single entry point.</li> <li>• Ideally the core clinical team members will be co-located allowing timely collaboration, communication and decision-making.</li> <li>• At a minimum the clinical team works closely as part of a co-ordinated and collaborative service.</li> <li>• Information will be provided on travel and accommodation support available through the <a href="#">NSW Health Isolated Patients Travel and Accommodation Assistance Scheme</a>.</li> </ul>
<p data-bbox="113 1839 389 1937"><b>Appropriate service settings for Specialist Hubs</b></p> 	<ul data-bbox="450 1839 1501 2123" style="list-style-type: none"> <li>• Services are provided in a safe, welcoming and accessible environment that supports the affirmation and expression of a person's identity.</li> <li>• Specialist trans and gender diverse health services are provided in age appropriate settings noting the need for family engagement and vulnerabilities of trans and gender diverse people under 18.</li> <li>• Consideration may be given to youth health, sexual health and other community health settings.</li> </ul>

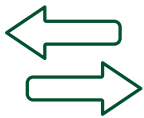


### Telehealth



- Where suitable, age appropriate telehealth facilities will support statewide service delivery, particularly to improve access in rural and regional areas.
- Shared care arrangements with GPs and other health professionals are supported through telehealth.

### Referral pathways to and from the service



- Referral to the TGD Health Service for specialist gender affirming treatment is provided through GPs and LHDs/SHNs. Standardised information to support referrals is provided through the Health Pathways portals.
- Referral pathways for complementary and supplementary support services are in place with primary care, LHDs/SHNs, private clinicians and NGOs. See [Section 7](#) for further details.
- Transition pathways are in place within Specialist Hubs to support continuity of care from childhood to adolescence to young adulthood. Further information is included in [Section 3.3](#).
- Young adults are supported to exit the pathway at any time prior to their 25<sup>th</sup> birthday and transition either to a GP selected by the young person or an adult transgender health service. GPs are provided information and support by the TGD Health Service to facilitate the transition of care.

### Shared care arrangements and protocols



- Effective trans and gender diverse healthcare involves Specialist Hubs working alongside support service providers (as outlined in [Section 7](#)), including through shared care arrangements.
- GPs' role includes ongoing monitoring and general health support (including prescribing ongoing medications as required) for trans and gender diverse people under 25 years as appropriate.
- Sexual health services support the sexual health needs of trans and gender diverse people. In multidisciplinary teams, they may administer hormone therapies for people over 18.

### Expert advice to private and public clinicians



- Members of the specialist multidisciplinary team provide consultation and liaison services to GPs and public and private clinicians within the referral pathway or network.
- Expert advice is also provided to other organisations involved in the care of trans and gender diverse young people, within the capacity of the TGD Health Service.

### 3.6 Service enablers

The enablers for the TGD Health Service include the following:

Service enablers	Description and implementation standard
<b>Local governance</b>	<ul style="list-style-type: none"> <li>The hosting LHDs/SHN provide appropriate local clinical governance and support mechanisms for the Specialist Hubs.</li> <li>The multidisciplinary teams oversee clinical supervision, team meetings, application of clinical guidance and adherence to the Framework.</li> </ul>
<b>Data collection, monitoring and reporting</b>	<ul style="list-style-type: none"> <li>Processes are in place to enable collection of agreed qualitative and quantitative data. Data will support clinical care, service monitoring and management, and evaluation.</li> <li>Specialist Hubs will provide data/information to contribute to centralised collation, monitoring, evaluation and reporting.</li> <li>Data is used in line with relevant data and privacy policies. Data collection aligns with relevant data standards, including guidance from the Australian Bureau of Statistics<sup>1</sup>, and any other national standards.</li> <li>As part of the NSW LGBTIQ+ Health Strategy, work will commence to improve data collection and reporting through the Electronic Medical Records system.</li> </ul>
<b>Engagement and user-led design with consumers, carers and support stakeholders</b>	<ul style="list-style-type: none"> <li>Mechanisms for engagement and user-led design are incorporated in local and statewide governance.</li> <li>Engagement, communication and empowerment of consumers, carers and support stakeholders and services are embedded in service delivery.</li> <li>Service enablers include a Consumer Advisory Panel, collaboration with consumers in the ongoing refinement of the Framework and seeking consumer input into the development of service information.</li> <li>Evaluation, monitoring and/or translational research is conducted in consultation with consumers and trans and gender diverse community stakeholders.</li> </ul>
<b>Professional development of the Specialist Hubs</b>	<ul style="list-style-type: none"> <li>Appropriate professional development supports for all staff working in Specialist Hubs, including through clinical supervision, networking, education and training.</li> </ul>
<b>Clinical and Executive leadership</b>	<ul style="list-style-type: none"> <li>Local leadership is provided to the TGD Health Service through the governance structure.</li> <li>Support is provided from Executive teams in hosting LHDs/SHNs.</li> </ul> <p>A Clinical Advisory Group will lead development of Clinical Guidelines for the TGD Health Service based on review of emerging evidence and clinical guidance.</p>

### Broader system of healthcare and support

- NSW Health, private clinicians, GPs, NGOs and other stakeholders provide supplementary and complementary wrap around care to trans and gender diverse young people and their carers and families.
- The scope of the TGD Health Service is limited to supporting issues related to gender affirming care. Referral to ongoing supports for co-occurring conditions or other support requirements is integral.

## 3.7 Statewide supports

NSW Health is providing statewide support components for the TGD Health Service, including the following:

Statewide support component	Description and implementation standard
Statewide governance	<ul style="list-style-type: none"> <li>• Ministry of Health develops a governance structure for the TGD Health Service to provide mechanisms for consumer advice and stakeholder input, local and statewide oversight and advise on best-practice clinical care.</li> </ul>
Policy guidance and medico-legal advice	<ul style="list-style-type: none"> <li>• Ministry of Health provides medico-legal guidance through formal policy documents, such as the <i>Information Bulletin on Consent Requirements for Gender Affirming Medical Treatments for Young People</i> (currently under development and due for release by mid-2023), and ongoing advice on complex cases.</li> <li>• Clinical Guidelines, standardised consent forms and information sheets are developed to encourage consistency and evidence-based practice across the TGD Health Service.</li> </ul>
Education and training	<ul style="list-style-type: none"> <li>• The Statewide Coordinator supports identification of education and training priorities to deliver high-quality wrap around care for trans and gender diverse young people to inform wider strategic planning for NSW Health.</li> <li>• The Statewide Coordinator leads professional development activities for staff working in the Specialist Hubs.</li> <li>• Priority training and education projects will be identified and led by the Statewide Coordinator to upskill shared care providers. Further work will be done to identify critical system needs.</li> <li>• Information on existing training and education resources/programmes developed by professional networks (such as AusPATH) and other stakeholders will be shared with public and private clinicians.</li> <li>• The TGD Health Service will provide expert advice to inform planned initiatives under the NSW LGBTIQ+ Health Strategy to increase LGBTIQ+ awareness and capability in the NSW Health workforce.</li> </ul>

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**Development of a monitoring and evaluation framework**

- The TGD Health Service contributes to building the evidence-base through relevant data collection, in order to improve treatment responses and health outcomes.
- Monitoring, evaluation and reporting is conducted in consultation and collaboration with relevant stakeholders.
- These efforts have a translational focus to contribute to the evidence base for medical and psychosocial interventions.

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**Implementation support**

- The Statewide Coordinator for Trans and Gender Diverse Health Services provides leadership, engages with stakeholders and co-ordinates the TGD Health Service through oversight of key governance groups and monitoring activities.
  - The Ministry of Health provides funding to operate the Specialist Hubs and deliver coordination services.
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# Governance

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04

## 4.1 Purpose

The governance structure defines and implements a framework to operate and oversee the TGD Health Service. Specifically, the governance structure will support the TGD Health Service by:



Improving service design and delivery through a focus on evidence, monitoring, evaluation, and reporting at all levels of governance.



Facilitating and prioritising co-design of the TGD Health Service with trans and gender diverse people, their families and carers, and support services, through the Community Advisory Panel.



Linking the Specialist Hubs in an integrated service as part of a networked system including strategic policy and investment, clinical innovation, clinical excellence and workforce education and training.

## 4.2 Overview

There are four statewide governance groups for the TGD Health Service:

- *Statewide Steering Group* – provides oversight and high-level strategic leadership around system issues,
- *Operational Committee*– enables collaboration, oversees clinical processes and supports consistent implementation of the Framework by the Specialist Hubs
- *Community Advisory Panel* – provides advice on emerging issues and input for co-design of the TGD Health Service,
- *Clinical Advisory Group* – supports evidence-based clinical care through the development of the Clinical Guidelines.

LHDs and SHNs that host a Specialist Hub will also have local governance structures, which are not detailed in this document.

Draft details on the proposed membership, roles and responsibilities for each group are included in the [Appendix](#). The final scope and membership will be endorsed at the first meeting of each group and will be updated to reflect emerging priorities. In year one of the TGD Health Service, the role and need for each group will be assessed depending on evolving operational and implementation requirements. Where possible, participation of members with lived experience will be encouraged across all groups.

All governance groups will operate in line with NSW Health best practice guidelines on stakeholder engagement to ensure respectful, safe and productive collaboration. The NSW Consumer Engagement Framework is currently under development and will provide further information on how to effectively co-design services with consumers. Remuneration will be considered for consumer representatives in line with the Consumer Engagement Framework guidance.

# Roles and responsibilities

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05

## 5.1 Organisational overview

The Specialist Hubs, LHDs/SHNs, Statewide Coordinator, the Ministry of Health and the Pillar agencies work together in the TGD Health Service as outlined below:

Organisational parts of TGD Health Service	Description of roles and responsibilities
<b>Specialist Hubs</b>	<ul style="list-style-type: none"> <li>Two Specialist Hubs deliver trans and gender diverse health care in accordance with the Framework, including local and statewide clinical leadership and governance.</li> <li>The Newcastle Hub is managed by Hunter New England LHD and provides care to trans and gender diverse young people up to 25 in Central Coast LHD, Far West LHD, Hunter New England LHD, Mid North Coast LHD, Murrumbidgee LHD, Northern NSW LHD, Southern NSW LHD and Western NSW LHD.</li> <li>The Sydney Hub is managed by Sydney Children’s Hospitals Network and South Eastern Sydney LHD and provides care to trans and gender diverse young people up to 25 in Illawarra Shoalhaven LHD, Nepean Blue Mountains LHD, Northern Sydney LHD, South Eastern Sydney LHD, South Western Sydney LHD, Sydney LHD and Western Sydney LHD.</li> <li>Specialty Health Networks refer to Specialist Hubs based on the Local Health District area the young person resides in.</li> <li>While there may be some operational differences between the Specialist Hubs based on local staffing, settings and consultation, the standardised elements of the Specialist Hubs are outlined in the Framework.</li> <li>Through the governance structure, Clinical Guidelines for the TGD Health Service will be developed to support consistent service delivery across NSW. Development of the Clinical Guidelines will be led by the Clinical Advisory Group.</li> </ul>
<b>Statewide Coordinator for Trans and Gender Diverse Health Services</b>	<ul style="list-style-type: none"> <li>Ministry of Health provides funding for the Statewide Coordinator for Trans and Gender Diverse Services, which is hosted by Hunter New England LHD.</li> <li>The Statewide Coordinator supports coordination and monitoring of the TGD health service delivered through both Specialist Hubs, including acting as the Secretariat for Community Advisory Panel and the Operational Committee and overseeing monitoring and reporting processes.</li> <li>The Statewide Coordinator will facilitate the networking stakeholders providing health services for trans and gender diverse people at a state and national level to support improved referral pathways to and from the TGD Health Service.</li> <li>The Statewide Coordinator supports identification of training and education needs related to trans and gender diverse health care to inform system planning and implements priority projects to upskill shared care providers at a statewide level. They provide expert advice to support development education and training initiatives under the NSW LGBTIQ+ Health Strategy.</li> </ul>



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**Local Health Districts/  
Specialty Health  
Networks**

- Referral pathways to and from the TGD Health Service are in place within NSW Health from LHDs and SHNs. LHDs and SHNs are responsible for ensuring that their role in the referral pathway is effective.
- Provision of supportive health care for people under 25 years accessing the specialist trans and gender diverse health service including mental health (Child and Adolescent Mental Health Services/Child and Youth Mental Health Services/Mental Health Services), sexual health, youth health, violence abuse and neglect services and other community and allied health services.
- Referring LHDs and SHNs also contribute to service design, shared care arrangements and protocols, consultation and liaison for their health professionals working with trans and gender diverse young people, and consumer, family and carer and community stakeholder consultation.
- Further work will be done to identify the capacity of existing services and any education and training priorities specific to trans and gender diverse health care.

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**Other health  
organisations  
(e.g. NSW Ambulance,  
NSW Health Pathology,  
eHealth NSW)**

- Staff from other health organisations, should be aware of the TGD Health Service and the clinical pathway.
- The TGD Health Service will engage with health organisations as needed to support how the health system responds to the needs of trans and gender diverse young people.

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**Ministry of Health**

- The Ministry of Health guides the development of services and investments in the NSW public health system to ensure that the health priorities of the NSW Government are achieved<sup>12</sup>, including strategies such as the NSW LGBTIQ+ Health Strategy 2022-2027.
  - The Ministry of Health (in consultation with key stakeholders) is responsible for providing enhancement funding to deliver the Specialist Hubs and Statewide Coordinator, developing a Monitoring and Evaluation Framework to monitor service implementation and impact and providing strategic policy direction, including advice on the medico-legal framework for specialist care and treatment.
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**Agency for Clinical Innovation, Clinical Excellence Commission and Health Education Training Institute**

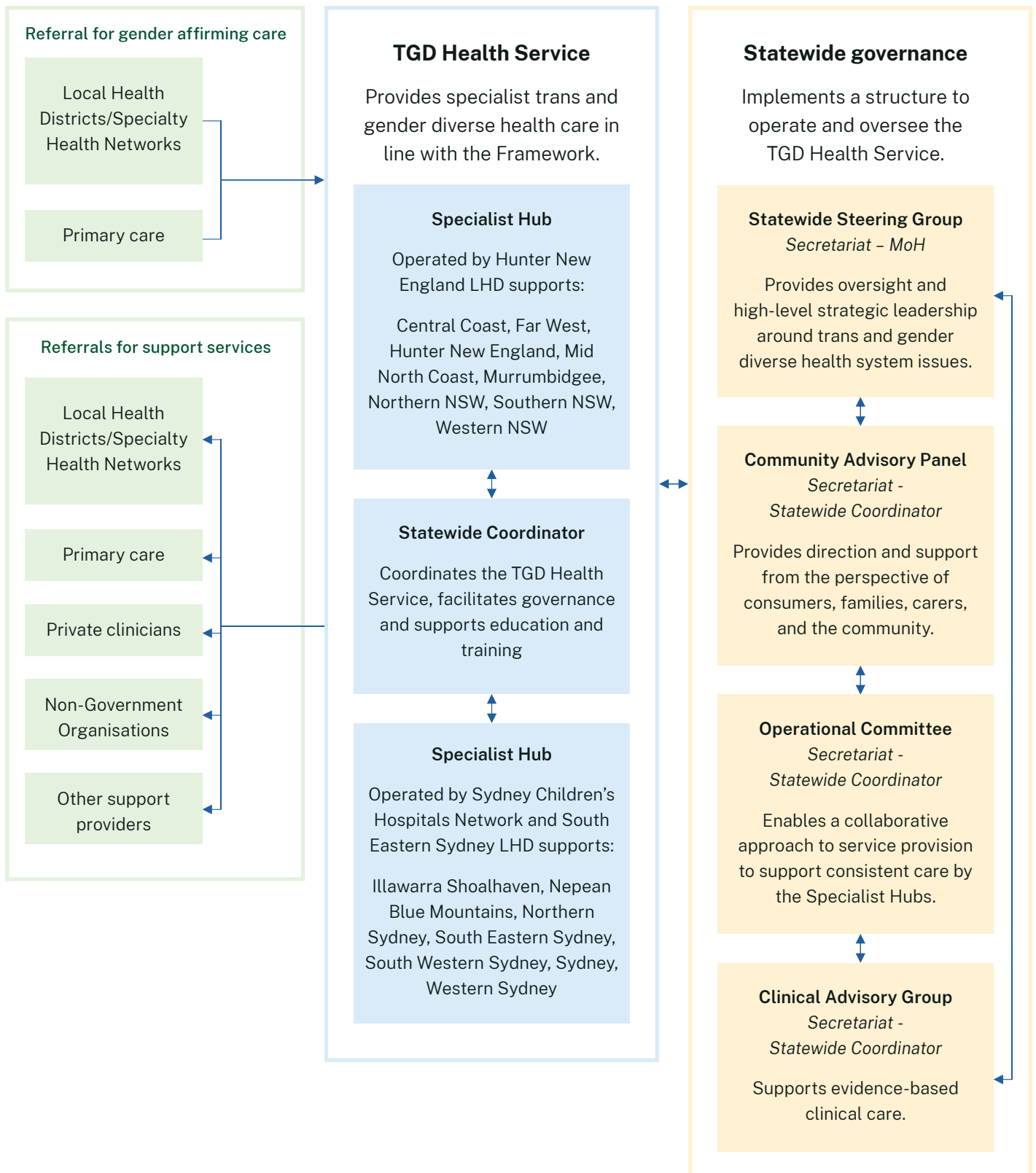
- The NSW Health pillars have specific responsibilities to enable and support the public health system. Each pillar will play a role in supporting the Ministry of Health.
- Health Education and Training Institute: The Health Education and Training Institute (HETI) is a leading provider of high quality training and education to support more than 110,000 clinical and non-clinical staff, trainers, managers and leaders across the NSW Health system. HETI is currently collaborating with the Ministry of Health to increase LGBTIQ+ awareness and capability in the NSW Health workforce.
- Agency for Clinical Innovation: The Agency for Clinical Innovation (ACI) brings patients, clinicians and managers together to support the design and implementation of innovation in health care. It does this through clinical networks, support for innovation (such as research) and statewide programs including Leading Better Value Care. The ACI may provide advice on supporting a network of clinicians across NSW Health working with trans and gender diverse people under 25 years, as well as how to improve on services and build evidence towards clinical innovation.
- Clinical Excellence Commission: The Clinical Excellence Commission (CEC) is the lead agency supporting safety improvement in the NSW Health system. The CEC keeps patients safe, reviews clinical incidents and improves quality of care. The CEC can contribute expertise to governance of the TGD Health Service through its role in driving improvements in safety and quality in clinical care.

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**Primary care (GPs, Primary Care Networks)**

- While primary care providers are not within NSW Health, they are an integral part of the referral pathway to and from the service.
  - Primary Care Networks assess the needs of their community and commission health services so that people in their region can get coordinated health care where and when they need it.
  - GPs can provide referrals for gender affirming care to the TGD Health Service. This process is facilitated through clear information and advice via the Health Pathways portals.
  - GPs also provide ongoing monitoring and general health support (including prescribing ongoing medications as clinically appropriate).
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Figure 3: Relationships in the TGD Health Service



## 5.2 Responsibilities for meeting minimum requirements

The responsibilities of the NSW Health agencies for meeting the minimum requirements are outlined below:

Operational elements of the Framework (for detail see <a href="#">Section 3</a> )	Specialist Hubs / Hosting LHDs & SHNs	Referring LHDs and SHNs
<b>Principles of care</b>	✓	✓
<b>Care and treatment</b>		
Assessment	✓	
Case co-ordination and management of individualised care	✓	
Informed consent procedures	✓	
Gender affirming medical treatment	✓	
Fertility information	✓	
Allied health support	✓	✓
Sexual health	✓	✓
Information and referral for surgery	✓	
Ongoing monitoring and support	✓	✓
<b>Service infrastructure</b>		
Multidisciplinary team	✓	
Clinicians with relevant experience	✓	
Accessible service with a single entry point	✓	
Appropriate service settings for Specialist Hubs	✓	
Telehealth	✓	
Referral pathways to and from the service	✓	✓
Shared care arrangements and protocols	✓	✓
Expert advice to private and public clinicians	✓	
<b>Service enablers</b>		
Local governance	✓	
Data collection, monitoring and reporting	✓	✓

Operational elements of the Framework (for detail see <a href="#">Section 3</a> )	Specialist Hubs / Hosting LHDs & SHNs	Referring LHDs and SHNs
Consumer, carer and support stakeholder engagement and user-led design	✓	✓
Professional development for the Specialist Hubs	✓	
Clinical and Executive leadership	✓	
Broader system of healthcare and support		✓
<b>Statewide support</b>		
Statewide governance	✓	✓
Policy guidance and medico-legal advice		
Education and training	✓	✓
Development of a monitoring and evaluation framework	✓	
Implementation support	✓	

# Consumers, carers and support service stakeholders

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06

A key component of the TGD Health Service is effective engagement with consumers, carers and support service stakeholders, from information resources for families and carers, to user-led design of services and referral pathways, and monitoring and evaluation. The development of the Framework and the NSW LGBTIQ+ Health Strategy 2022-2027 included consultation with families and carers of trans and gender diverse young people. Recommended engagement approaches highlighted by stakeholders included:

- Establishment of the Consumer Advisory Panel for the service, with representation and involvement from consumers with lived experience, parents and carers and community-based groups and organisations;
- Holding regular consumer forums;
- Collaboration with consumers in the development and refinement of the Framework;
- Seeking consumer input into the development of service information;
- Involving consumers in evaluation research, including in setting research questions and participatory research where feasible;
- Establishing multiple modes for consumers to participate including face to face and online; and
- Having peers involved in service delivery.

Mechanisms for engagement and co-design are incorporated in the governance structure for the TGD Health Service. Engagement, communication and empowerment are also embedded in the principles of care for trans and gender diverse young people.

# The broader system of healthcare and support

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07



The TGD Health Service sits within a broader system of healthcare and support for trans and gender diverse young people and their families and carers. This service system includes NSW Health, private clinicians, GPs, Primary Health Networks, Non-Governmental Organisations and support groups. As a whole, the system is intended to provide developmentally appropriate, holistic, specialised trans and gender health care to people under 25 years.

Supplementary and complementary services for trans and gender diverse health services include (but are not limited to):

Supplementary and complementary services	Providers
Mental health and psychosocial support services	<ul style="list-style-type: none"> <li>• Child and Adolescent Mental Health Services / Youth Mental Health Services/ Mental Health Services for adults in LHDs</li> <li>• Youth Health Services in LHDs</li> <li>• NGOs – ACON, The Gender Centre, Twenty10,</li> <li>• Headspace</li> <li>• Online and telephone counselling services (e.g. Kids Helpline, QLife)</li> </ul>
Allied health support/ disability health services	<ul style="list-style-type: none"> <li>• A range of different services may be accessed depending on individual health needs via LHDs, private providers, primary care and community care.</li> </ul>
Violence, abuse and neglect services	<ul style="list-style-type: none"> <li>• Trauma-informed and trauma-specific, integrated psychosocial, medical and forensic responses to sexual assault, child physical abuse and neglect, and domestic and family violence presentations delivered through LHDs.</li> </ul>
Primary care services	<ul style="list-style-type: none"> <li>• Services provided by GPs across the state, including general health services for trans and gender diverse young people, as well as provision of gender-affirming hormones in shared care arrangements with the TGD Health Service.</li> </ul>
Sexual health services	<ul style="list-style-type: none"> <li>• Provided by NSW Health Sexual Health Services, youth health services and primary care.</li> </ul>
Information, education, case coordination and support services for trans and gender diverse young people	<ul style="list-style-type: none"> <li>• Provided by relevant NGOs, including ACON (TransHub), the Gender Centre, Minus18, Twenty10, and others.</li> <li>• In school settings, support is provided by Student Support Officers, and Wellbeing Nurses. Additional support and advice is provided by NGOs, such as The Gender Centre.</li> </ul>
Family and carer support services	<ul style="list-style-type: none"> <li>• Support for families and carers with complex needs provided by The Gender Centre and Twenty10.</li> <li>• Formal and informal online support groups provided by various providers, such as Transcend.</li> </ul>

For the TGD Health Service to provide holistic care, it will be important to establish effective referral pathways to and from the wider service system. To improve referral pathways, the Statewide Coordinator will lead work with the input of the governance groups to:

- Network and engage with key organisations and providers working in trans and gender diverse health care (as outlined in the table above).
- Map existing support services and identify any key gaps and/or upskilling requirements to inform future strategic planning.
- Identify priority training and education projects to respond to critical system needs.

# Evaluation and Monitoring Framework

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08

The Ministry of Health will lead the development of an Evaluation and Monitoring Framework. The document will focus on assessing the TGD Health Service against this Framework and will need to incorporate both process and impact evaluation measures described below:

- *Process evaluation*: designed to assess whether the TGD Health Service was implemented as outlined in the Framework and whether it reached/was accessible to its intended population.
- *Impact evaluation*: designed to assess whether the TGD Health Service achieved its intended objectives and outcomes.

A range of evaluation questions and associated indicators will be developed, with details about the timing and collection of information and data.

There is a relationship between this process evaluation and monitoring and the reporting that is required through the governance structure. The information collected through the implementation of the Monitoring and Evaluation Framework will sit within a continuous cycle of program development.

# Implementation status

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09

Work is currently underway to support delivery of the TGD Health Service. In March 2021, Maple Leaf House, the first Specialist Hub operated by Hunter New England Local Health District opened. A Statewide Coordinator for Trans and Gender Diverse Services has been engaged and is hosted at Maple Leaf House to work with the Specialist Hubs and referring LHDs and SHNs. The Gender Service at the Children's Hospital at Westmead, part of the Sydney Children's Hospitals Network is working to enhance current service provision and is collaborating with South Eastern Sydney LHD to finalise the operational details of the Sydney Hub.

Over the first 18 months of the Framework, the two Specialist Hubs will be operating towards full implementation of the Framework.

During the first 18 months, additional implementation supports will be provided including:

- **Monitoring and evaluation:** The Ministry of Health will develop a Monitoring and Evaluation Framework for the TGD Health Service, including a set of statewide indicators.
- **Service Framework:** The Framework will be finalised and the governance structure will be established by the Statewide Coordinator and the Ministry of Health. This will promote consistency and co-ordination across the Specialist Hubs, integration with LHDs, co-design and engagement with consumers, families and carers and support stakeholders, and escalation pathways for managing implementation issues as part of the NSW Health network. Work on Clinical Guidelines for the TGD Health Service will commence via a Clinical Advisory Group.
- **Medico-legal Framework:** Ministry of Health will publish an Information Bulletin on the consent requirements for gender affirming medical treatments for young people.
- **Enhanced community support:** In 2022, NSW Health committed \$2.6 million to The Gender Centre, Twenty10, ACON and Equality Australia to strengthen supports available for trans and gender diverse people and their families and carers. These initiatives will be linked to the TGD Health Service to support a networked approach to service delivery for trans and gender diverse young people.
- **Education and Training:** Work will commence on identifying education and training priorities led by the Statewide Coordinator with guidance from the governance groups.
- **Referral pathways:** Work will commence to improve standardised information provided to clinicians through the Health Pathways portal. Further work will be completed to map referral pathways and network with wider sector stakeholders.
- **Communication Strategy:** A website and communication strategy will be implemented by the Ministry of Health to share key messages and stories about trans and gender diverse people's health needs and services.
- **NSW LGBTIQ+ Health Strategy:** Actions under the LGBTIQ+ Health Strategy Implementation Plan around increasing LGBTIQ+ awareness and capability in the NSW Health workforce and improving data collection on sexuality, gender and intersex variations will continue under the oversight of the LGBTIQ+ Health Strategy Implementation Committee.<sup>13</sup>

# Appendices

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10

## Glossary

The following terms have been collated from current sources to explain terminology that may arise in communicating with and providing care for trans and gender diverse children, adolescents and young adults, their families and carers and support services. NSW Health acknowledges that this is not a comprehensive list of all bodies, genders and sexualities. Definitions for terminology have been sourced from [Child Family Community Australia](#) and [TransHub](#). Further information and definitions can be found at these websites.

Term	Definition
<b>Cisgender/cis</b>	A term used to describe people who identify their gender as the same as what was presumed for them at birth (male or female). 'Cis' is a Latin term meaning 'on the same side as' <sup>14</sup> .
<b>Cultural safety</b>	Refers to designing and providing services that meet the needs of patients through a process of self-reflection, awareness of cultural biases and processes to actively respond in a way that will benefit the patient's health and wellbeing <sup>15</sup> .
<b>Deadname</b>	A term used by some trans people to describe the name they were given and known by prior to affirming their gender and/or coming out <sup>1</sup> .
<b>Gender/ Gender identity</b>	One's sense of whether they are a man, woman, non-binary, agender, genderqueer, genderfluid, or a combination of one or more of these definitions <sup>14</sup> .
<b>Gender affirmation</b>	The process of socially, medically, legally or otherwise affirming a person's gender when it does not align to their sex assigned at birth <sup>14</sup> .
<b>Gender-affirmative health care</b>	Can include any single or combination of a number of social, psychological, behavioural or medical (including hormonal treatment or surgery) interventions designed to support and affirm an individual's gender identity <sup>16</sup> .
<b>Gender binary</b>	Something that is binary consists of two things, or can refer to one of a pair of things. When talking about genders, binary genders are male and female, and non-binary genders are any genders that are not just male or female, or aren't male or female at all <sup>1</sup> .
<b>Gender dysphoria</b>	A term applied by mental health assessment according to the Diagnostic and Statistical Manual of Mental Disorders (DSM) characterised by a marked incongruence between one's experienced gender and physical characteristics, and a strong desire for medical affirmation <sup>1</sup> .
<b>Gender incongruence</b>	Is a descriptive umbrella term to describe when a person's assigned sex at birth does not match their gender identity. It is used to refer to young people that have not received DSM-V diagnosis of gender dysphoria from a psychiatrist.

Term	Definition
<b>Gender pronouns</b>	These refer to how a person chooses to publicly express their gender identity through the use of a pronoun, whether it is a gender-specific or a gender-neutral pronoun. This can include the more traditional he or she, as well as gender-neutral pronouns such as they, their, ze, hir and others <sup>17</sup> .
<b>Genderqueer/ Non-binary gender</b>	Terms used to describe gender identity that does not conform to traditional gender norms and may be expressed as other than woman or man, including gender neutral and androgynous <sup>20</sup> .
<b>Gender questioning</b>	Not necessarily an identity but sometimes used in reference to a person who is unsure which gender, if any, they identify with <sup>20</sup> .
<b>Intersex/ People with innate variations of sex characteristics</b>	People who are born with anatomical, chromosomal and hormonal characteristics that are different from medical and conventional understandings of female and male bodies. The term 'intersex' incorporates a wide range of physical variations and conditions. There are currently at least 40 relevant clinical entities known <sup>14</sup> .
<b>Misgendering</b>	Referring to a person's gender by incorrectly assuming their gender or using incorrect pronouns, either intentionally or unintentionally <sup>18</sup> .
<b>Sexual characteristics</b>	Physical parts of the body that are related to body development/ regulation and reproductive systems. Primary sex characteristics are gonads, chromosomes, genitals and hormones <sup>14</sup> .
<b>Sistergirl/ Brotherboy</b>	Terms used for gender diverse people within some Aboriginal or Torres Strait Islander communities. Sistergirls and Brotherboys have distinct cultural identities and roles. Sistergirls are Indigenous people who were classified male at birth but live their lives as women, including taking on traditional cultural female practices. Brotherboys are Indigenous people who were classified as female at birth but who have a male spirit <sup>20</sup> .
<b>Puberty suppression (GnRH) treatment</b>	Consists of puberty suppressant hormones known as puberty blockers. These hormones hold off the onset of puberty and the physical characteristics that may be incompatible with gender identity.
<b>Gender affirming (sex) hormones</b>	Involves administering either feminising or masculinising hormones to produce development of physical characteristics compatible with gender identity. Some effects of gender affirming (sex) hormones treatment are irreversible.



Term	Definition
<p><b>Transgender/ Trans/Gender diverse</b></p>	<p>Umbrella terms used to refer to people whose assigned sex at birth does not match their internal gender identity, regardless of whether their internal gender identity is outside the gender binary or within it. Transgender/trans or gender diverse people may identify as non-binary, that is: they may not identify exclusively as either gender; they may identify as both genders, they may identify as neither gender; they may move around freely in between the gender binary; or they may reject the idea of gender altogether. Transgender/trans or gender diverse people may choose to live their lives with or without modifying their body, dress or legal status, and with or without medical treatment and surgery. Transgender/trans or gender diverse people may use a variety of terms to describe themselves including but not limited to: man, woman, trans woman, trans man, transguy, trans masculine, trans feminine, tranz, gender-diverse, gender-queer, gender-non-conforming, non-binary, poly gendered, pan gendered and many more.</p> <p>Transgender/trans or gender diverse people have the same range of sexual orientations as the rest of the population. Transgender/trans or gender diverse people's sexuality is referred to in reference to their gender identity, rather than their sex. For example, a woman may identify as lesbian whether she was assigned female at birth or male<sup>20</sup>.</p>
<p><b>Trauma-informed care</b></p>	<p>Is based on the understanding trans and gender diverse young people are more likely to have experienced trauma including harassment and assault due to stigma and marginalisation<sup>19</sup>. Trauma-informed care involves principles of safety, trust, choice, collaboration, empowerment and respect for diversity. For more information, see <a href="http://www.health.nsw.gov.au/mentalhealth/psychosocial/principles/Pages/trauma-informed.aspx">www.health.nsw.gov.au/mentalhealth/psychosocial/principles/Pages/trauma-informed.aspx</a></p>

## Proposed governance structure

There are four statewide governance groups for the TGD Health Service – the Statewide Steering Group, the Operational Committee, the Community Advisory Panel and the Clinical Advisory Group.

The final scope and membership of each group will require endorsement at the first meeting of each group and may be updated to reflect emerging priorities.

In year one of the TGD Health Service, the role and need for each group will be assessed depending on evolving operational and implementation requirements.

### A2.1 Statewide Steering Group

<b>Purpose</b>	To provide oversight of statewide trans and gender diverse health services policy development, systems, and service issues. The Steering Group will provide leadership, advice, and strategic decisions on delivery of a coordinated system of care for trans and gender diverse people under 25 years.
<b>Co-Chairs</b>	<ul style="list-style-type: none"> <li>• An expert in paediatric or young adult trans gender care who is an acknowledged clinical leader (who will also be a member of the Operational Committee, below)</li> <li>• The Deputy Secretary of Health System Strategy and Planning, Ministry of Health or Executive Director of Health and Social Policy Branch, Ministry of Health</li> </ul>
<b>Secretariat</b>	Health and Social Policy Branch, Ministry of Health
<b>Responsibilities</b>	<ul style="list-style-type: none"> <li>• To provide strategic advice on development of services, projects, or policies for trans and gender diverse health services to the Ministry of Health.</li> <li>• To provide oversight of statewide monitoring, research, and evaluation, including alignment with Trans and Gender Diverse Health Services in other jurisdictions to work towards a nationally consistent framework.</li> <li>• To provide feedback and exchange information on future and current issues relevant to trans and gender diverse people under 25 years, as raised by the Community Advisory Panel.</li> <li>• To resolve critical issues escalated by the Operational Committee and the Community Advisory Panel.</li> </ul>

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<b>Membership</b>	<p>Membership should include:</p> <ul style="list-style-type: none"> <li>• An expert in paediatric or young adult trans gender care (Co-Chair)</li> <li>• Ministry of Health (Executive Director, Health and Social Policy Branch or Deputy Secretary, Health System Strategy and Planning) (Co-Chair)</li> <li>• Executives of LHDs/SHNs hosting Specialist Hubs</li> <li>• Statewide Coordinator for Trans and Gender Diverse Services</li> <li>• Director of Community Care and Priority Populations, Ministry of Health</li> <li>• Director of Mental Health Children and Young People, Mental Health Branch, Ministry of Health</li> <li>• Director of System Purchasing Branch, Ministry of Health</li> <li>• Director of Centre for Population Health, Ministry of Health</li> <li>• Director, Disability Youth and Paediatric Healthcare, Health and Social Policy Branch</li> <li>• Co-chair of the Community Advisory Panel</li> <li>• Representative/s of consumers or Non-Government Organisation or Community Managed Organisation supporting trans and gender diverse young people, their families, and carers</li> <li>• Agency for Clinical Innovation</li> <li>• Representative of Primary Health Networks</li> <li>• Representatives of referring Local Health Districts</li> </ul>
<b>Role of Co-Chairs</b>	<p>The Co-Chairs are responsible for:</p> <ul style="list-style-type: none"> <li>• Liaising with the Secretariat to determine meeting agendas</li> <li>• Managing the conduct of the meetings on a rotating basis</li> <li>• Communicating with Operational Committee and Community Advisory Panel as needed</li> </ul>
<b>Role of Secretariat</b>	<p>The Secretariat is responsible for:</p> <ul style="list-style-type: none"> <li>• Liaising with the Co-Chairs to determine meeting agendas</li> <li>• Preparing and distributing meeting papers (agenda and meeting record)</li> <li>• Maintaining a record of attendance and apologies at meetings</li> <li>• Other communication and liaison as required to support the Co-Chairs to perform their responsibilities.</li> </ul>
<b>Frequency of meetings</b>	<p>Six monthly as required. Additional meetings may be convened as necessary.</p>

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## A2.2 Operational Committee

<b>Purpose</b>	To enable collaboration, oversee clinical processes and support consistent implementation of the statewide Framework by the Specialist Hubs.
<b>Co-Chairs</b>	Co-Chairs will be clinical representatives from the two Specialist Hubs
<b>Secretariat</b>	Statewide Co-ordinator – Trans and Gender Diverse Services.
<b>Responsibilities</b>	<ul style="list-style-type: none"> <li>• To support implementation of the statewide networked approach, including ensuring a comprehensive and integrated clinical pathway for trans and gender diverse people under 25 years.</li> <li>• To ensure clinicians receive consistent information on emerging evidence and medico-legal advice in collaboration with the Clinical Advisory Group, including but not limited to the model of informed consent to be used within the specialist service and issues related to clinical ethics.</li> <li>• To collaborate with the Community Advisory Panel to identify and resolve statewide issues and coordinate responses.</li> <li>• To monitor quality and consistency of care across the TGD Health Service in line with the Framework (as amended from time to time based on change and improvement considering new evidence/ outcomes from evaluation and feedback from the Community Advisory Panel).</li> <li>• To provide advice on key performance indicators to inform evaluation and monitoring governance.</li> <li>• To endorse information resources about the TGD Health Service for stakeholders including people under 25 years, their families and carers, and support services, as well as clinicians in public and private health systems in NSW.</li> <li>• To ensure the Trans and Gender Diverse Health Pathway is embedded and reviewed within all LHDs to support referral from primary care and shared care arrangements.</li> <li>• To endorse strategies for professional development for clinicians in the TGD Health Service.</li> </ul>
<b>Membership</b>	<p>Membership should include:</p> <ul style="list-style-type: none"> <li>• Clinical representatives, with experience in paediatric and adult health from each of the Specialist Hubs</li> <li>• Clinical Nurse Consultant and Allied Health representative from each of the Specialist Hubs</li> <li>• Statewide Co-ordinator – Trans and Gender Diverse Services</li> <li>• Representative of the Ministry of Health (at Director or Principal Policy Officer level)</li> <li>• A member of the Community Advisory Panel representing consumers or families and carers</li> </ul>

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<b>Working Groups</b>	Working groups may be established as required to enable additional input from paediatric, adolescent, and young adult services. Additional expertise will be called upon as required (e.g. clinical ethics and legal expertise).
<b>Reports to</b>	Statewide Steering Group
<b>Role of Co-Chairs</b>	The Co-Chairs are responsible for: <ul style="list-style-type: none"><li>• Liaising with the Secretariat to determine meeting agendas</li><li>• Managing the conduct of the meetings on a rotating basis</li><li>• Communicating with and reporting to the Statewide Steering Group and Community Advisory Panel as needed.</li></ul>
<b>Role of Secretariat</b>	The Secretariat is responsible for: <ul style="list-style-type: none"><li>• Liaising with the Chair to determine meeting agendas</li><li>• Preparing and distributing meeting papers (agenda and meeting record)</li><li>• Maintaining a record of attendance and apologies at meetings</li><li>• Other communication and liaison as required to support the Chair to perform their responsibilities</li><li>• Communicating meeting outcomes to Districts who are not members of the Group.</li></ul>
<b>Frequency of meetings</b>	Quarterly in each year of operation. Additional meetings may be convened as necessary.

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## A2.3 Community Advisory Panel

<b>Purpose</b>	To provide input for co-design and advice on emerging issues for the TGD Health Service from the perspective of consumers, families, carers, and the community.
<b>Co-Chairs</b>	<p>Statewide Co-ordinator – Trans and Gender Diverse Services.</p> <p>A young adult consumer Co-Chair or representative from a support service for trans and gender diverse young adults.</p>
<b>Secretariat</b>	Statewide Co-ordinator – Trans and Gender Diverse Services.
<b>Responsibilities</b>	<ul style="list-style-type: none"> <li>• To provide advice and co-design service delivery to improve patient experience.</li> <li>• To provide advice on monitoring and evaluation, including on the development of a monitoring and evaluation framework.</li> <li>• To co-design opportunities for peer workers/support in service delivery.</li> <li>• To collaborate with the TGD Health Service and provide input to service information for community audiences.</li> <li>• To provide input to the design, implementation, and content of regular consumer forums.</li> <li>• To provide advice and information to governance groups on emerging issues as identified by the Community Advisory Panel or as requested by the other groups.</li> </ul>
<b>Membership</b>	<p>Membership should include:</p> <ul style="list-style-type: none"> <li>• Up to six community members reflecting a balance of consumers, families, and carers from metropolitan, rural, and regional communities as well as appropriate cultural representation</li> <li>• Community representation should include at a minimum one lived experience representative from the young adult cohort, and a lived experience representative from the adolescent cohort (who may be supported by attendance of a parent or legal guardian(s) or appropriate support worker who will not themselves be a member)</li> <li>• Up to three representatives of organisations supporting consumers, families, and carers of the specialist service</li> <li>• Nominated members from each of the Specialist Hubs from the Operational Committee</li> <li>• Representative of the Ministry of Health (at Principal Policy Officer level).</li> </ul>
<b>Reports to</b>	Statewide Steering Group and provides advice and membership to the Operational Committee.

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**Role of Co-Chair**

The Co-Chairs are responsible for:

- Liaising with the Secretariat to determine meeting agendas
- Managing the conduct of the meetings on a rotating basis
- Communicating with and reporting to the Statewide Steering Group and Operational Committee as needed.

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**Role of Secretariat**

The Secretariat is responsible for:

- Liaising with the Co-Chairs to determine meeting agendas
- Preparing and distributing meeting papers (agenda and meeting record)
- Maintaining a record of attendance and apologies at meetings
- Other communication and liaison as required to support the Co-Chairs to perform their responsibilities.

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**Frequency of meetings**

Biannually in each year of operation, with engagement and/or meetings more frequently as needed.

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## A2.4 Clinical Advisory Group

<b>Purpose</b>	To support evidence-based clinical care through <b>development of the Clinical Guidelines for the TGD Health Service.</b>
<b>Chair</b>	An independent chair will be selected by the Ministry of Health
<b>Secretariat</b>	Statewide Co-ordinator – Trans and Gender Diverse Services
<b>Membership</b>	Membership will include medical, allied health and mental health experts with experience delivering care for trans and gender diverse young people.
<b>Reports to</b>	Statewide Steering Group
<b>Role of Co-Chair</b>	<p>The Co-Chairs are responsible for:</p> <ul style="list-style-type: none"> <li>• Liaising with the Secretariat to determine meeting agendas</li> <li>• Managing the conduct of the meetings and conflicts of interest</li> <li>• Communicating with and reporting to the Statewide Steering Group and Operational Committee as needed.</li> </ul>
<b>Role of Secretariat</b>	<p>The Secretariat is responsible for:</p> <ul style="list-style-type: none"> <li>• Liaising with the Chair to determine meeting agendas</li> <li>• Preparing and distributing meeting papers (agenda and meeting record)</li> <li>• Maintaining a record of attendance and apologies at meetings</li> <li>• Other communication and liaison as required to support the Chair to perform their responsibilities.</li> </ul>
<b>Frequency of meetings</b>	To be determined based on activity requirements



# References

- <sup>1</sup> ACON (2021) *Trans Hub: Health and Gender Affirmation in NSW. Language*. Retrieved from [www.transhub.org.au/language?rq=language](http://www.transhub.org.au/language?rq=language)
- <sup>2</sup> Watson, C., Davidson, S., Bourke, S., Bouchier, L., Temple-Smith, M., Sanci, L. (2020) *Evidence for effective interventions for children and young people with gender dysphoria: an Evidence Check rapid review brokered by the Sax Institute for the NSW Ministry of Health*. Retrieved from [www.saxinstitute.org.au/evidence-check/evidence-for-effective-interventions-for-children-and-young-people-with-gender-dysphoria/](http://www.saxinstitute.org.au/evidence-check/evidence-for-effective-interventions-for-children-and-young-people-with-gender-dysphoria/)
- <sup>3</sup> AusPATH (2021) *Public Statement of Gender-affirming Healthcare, including for Trans Youth*. Retrieved from [auspath.org/gender-affirming-healthcare/](http://auspath.org/gender-affirming-healthcare/)
- <sup>4</sup> Singh, A.A., Hays, D.G., Watson, L.S. (2011) *Strength in the face of adversity: Resilience strategies of transgender individuals*. *Journal of Counseling & Development*. Jan; 89(1):20-7.
- <sup>5</sup> Watson, C., Davidson, S., Bourke, S., Bouchier, L., Temple-Smith, M., Sanci, L. (2020) *Evidence for effective interventions for children and young people with gender dysphoria: an Evidence Check rapid review brokered by the Sax Institute for the NSW Ministry of Health*. Retrieved from [www.saxinstitute.org.au/evidence-check/evidence-for-effective-interventions-for-children-and-young-people-with-gender-dysphoria/](http://www.saxinstitute.org.au/evidence-check/evidence-for-effective-interventions-for-children-and-young-people-with-gender-dysphoria/)
- <sup>6</sup> Telfer, M.M., Tollit, M.A., Pace, C.C. & Pang, K.C. (2020) *Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents*. Melbourne: The Royal Children's Hospital.
- <sup>7</sup> AusPATH (2022) *Australian Informed Consent Standards of Care for Gender Affirming Hormone Therapy*. Australia: Australian Professional Association for Trans Health.
- <sup>8</sup> Cheung, A.S., Wynne, K., Erasmus, J., Murray, S. and Zajac, J.D. (2019) *Position statement on the hormonal management of adult transgender and gender diverse individuals*. *Medical Journal of Australia*, 211: 127-133. <https://doi.org/10.5694/mja2.50259>.
- <sup>9</sup> Hembree, W.C., Cohen-Kettenis, P.T., Gooren, L., Hannema, S.E., Meyer, W.J., Murad, M.H., Rosenthal, S.M., Safer, J.D., Tangpricha, V., T'Sjoen, G.G. (2017) *Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society Clinical Practice Guideline*. *The Journal of Clinical Endocrinology & Metabolism*. 102(11): 3869-3903. <https://doi.org/10.1210/jc.2017-01658>.
- <sup>10</sup> E. Coleman, A. E. Radix, W. P. Bouman, G. R. Brown, A. L. C. de Vries, M.B. Deutsch, R. Ettner, L. Fraser, M. Goodman, J. Green, A. B. Hancock, T. W. Johnson, D. H. Karasic, G. A. Knudson, S. F. Leibowitz, H. F. L. Meyer-Bahlburg, S. J. Monstrey, J. Motmans, L. Nahata, T. O. Nieder, S. L. Reisner, C. Richards, L. S. Schechter, V. Tangpricha, A. C. Tishelman, M. A. A. Van Trotsenburg, S. Winter, K. Ducheny, N. J. Adams, T. M. Adrián, L. R. Allen, D. Azul, H. Bagga, K. Başar, D. S. Bathory, J. J. Belinky, D. R. Berg, J. U. Berli, R. O. Bluebond-Langner, M.-B. Bouman, M. L. Bowers, P. J. Brassard, J. Byrne, L. Capitán, C. J. Cargill, J. M. Carswell, S. C. Chang, G. Chelvakumar, T. Corneil, K. B. Dalke, G. De Cuypere, E. de Vries, M. Den Heijer, A. H. Devor, C. Dhejne, A. D'Marco, E. K. Edmiston, L. Edwards-Leeper, R. Ehrbar, D. Ehrensaft, J. Eisfeld, E. Elaut, L. Erickson-Schroth, J. L. Feldman, A. D. Fisher, M. M. Garcia, L. Gijs, S. E. Green, B. P. Hall, T. L. D. Hardy, M. S. Irwig, L. A. Jacobs, A. C. Janssen, K. Johnson, D. T. Klink, B. P. C. Kreukels, L. E. Kuper, E. J. Kvach, M. A. Malouf, R. Massey, T. Mazur, C. McLachlan, S. D. Morrison, S. W. Mosser, P. M. Neira, U. Nygren, J. M. Oates, J. Obedin-Maliver, G. Pagkalos, J. Patton, N. Phanuphak, K. Rachlin, T. Reed, G. N. Rider, J. Ristori, S. Robbins-Cherry, S. A. Roberts, K. A. Rodriguez-Wallberg, S. M. Rosenthal, K. Sabir, J. D. Safer, A. I. Scheim, L. J. Seal, T. J. Sehoole, K. Spencer, C. St. Amand, T. D. Steensma, J. F. Strang, G. B. Taylor, K. Tilleman, G. G. T'Sjoen, L. N. Vala, N. M. Van Mello, J. F. Veale, J. A. Vencill, B. Vincent, L. M. Wesp, M. A. West & J. Arcelus (2022) *Standards of Care for the Health of Transgender and Gender Diverse People, Version 8, International Journal of Transgender Health*, 23 (sup1): S1-S259. [doi.org/10.1080/26895269.2022.2100644](https://doi.org/10.1080/26895269.2022.2100644)
- <sup>11</sup> Australian Bureau of Statistics (2021) *Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Variables*. Retrieved from: <https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release>
- <sup>12</sup> NSW Health (2022) *Our Structure*. Retrieved from: [www.health.nsw.gov.au/about/ministry/pages/structure.aspx](http://www.health.nsw.gov.au/about/ministry/pages/structure.aspx)
- <sup>13</sup> NSW Ministry of Health (2022) *NSW LGBTIQ+ Health Strategy 2022-2027 Implementation Plan First Phase. St Leonards: NSW Ministry of Health*. Retrieved from [www.health.nsw.gov.au/lgbtiq-health/Pages/lgbtiq-implementation-plan.aspx](http://www.health.nsw.gov.au/lgbtiq-health/Pages/lgbtiq-implementation-plan.aspx)

<sup>14</sup> NSW Ministry of Health (2021) *NSW LGBTIQ+ Health Strategy 2022-2027*. Retrieved from [www.health.nsw.gov.au/lgbtiq-health/Publications/lgbtiq-health-strategy.pdf](http://www.health.nsw.gov.au/lgbtiq-health/Publications/lgbtiq-health-strategy.pdf)

<sup>15</sup> Western NSW Primary Health Network (2017) *Cultural Safety Framework Australian Institute of Health and Welfare*. Retrieved from [www.wnswphn.org.au/about-us/our-region/cultural-safety-framework](http://www.wnswphn.org.au/about-us/our-region/cultural-safety-framework)

<sup>16</sup> World Health Organization (2021) *WHO/Europe brief: transgender health in the context of ICD-11*. Retrieved from [www.euro.who.int/en/health-topics/health-determinants/gender/gender-definitions/whoeurope-brief-transgender-health-in-the-context-of-icd-11](http://www.euro.who.int/en/health-topics/health-determinants/gender/gender-definitions/whoeurope-brief-transgender-health-in-the-context-of-icd-11)

<sup>17</sup> Australian Institute of Family Studies (2022) *LGBTIQ+ glossary of common terms*. Retrieved from [aifs.gov.au/sites/default/files/publication-documents/22-02\\_rs\\_lgbtiqa\\_glossary\\_of\\_common\\_terms\\_0.pdf](http://aifs.gov.au/sites/default/files/publication-documents/22-02_rs_lgbtiqa_glossary_of_common_terms_0.pdf)

<sup>18</sup> Minus 18 (2022) *What are pronouns and why are they important*. Retrieved from [www.minus18.org.au/articles/what-are-pronouns-and-why-are-they-important](http://www.minus18.org.au/articles/what-are-pronouns-and-why-are-they-important)

<sup>19</sup> Hill, A.O., Lyons, A., Jones, J., McGowan, I., Carman, M., Parsons, M., Power, J., Bourne, A. (2021) *Writing Themselves In 4: The health and wellbeing of LGBTQIA+ young people in Australia*. National report, monograph series number 124. Australian Research Centre in Sex, Health and Society. La Trobe University: Melbourne.

