

Gender Care IPC Team

Program Description:

The Gender Care IPC team includes a Nurse Practitioner and Systems Navigator who provide gender transition related care and services within a holistic framework for a time-limited length of service. The team aims to create a safe, confidential, inclusive and affirming space for trans, gender diverse, gender non-conforming, non-binary and questioning youth and adults in the Durham Region. Specific services include social, legal and medical transition support, hormone related therapy, surgery referral support, advocacy, and health system navigation. We tailor our services to the needs and transition goals of our clients. Clients may retain their primary care providers while seeking gender transition related care from the team and upon completion of goals will be transferred back to their providers.

Inclusion/Exclusion Criteria:

| Inclusion Criteria | Exclusion Criteria |
|--|---|
| <input type="checkbox"/> Geographical location: Client must <u>currently</u> reside in the Durham Region. | <input type="checkbox"/> Actively suicidal and/or pose a high risk to themselves or others. *NOTE: self harm behaviours are NOT exclusionary. |
| <input type="checkbox"/> Age: 12yr+ *NOTE: Medical transition support (puberty suppression, hormone therapy and GRS referrals) is currently 17yr+ and/or post-puberty. | <input type="checkbox"/> Severe impairment in cognitive function (e.g. dementia) that would interfere with informed consent and/or treatment care planning. |
| <input type="checkbox"/> Self-identify as trans, gender diverse, gender non-conforming, non-binary or questioning. | <input type="checkbox"/> Symptoms of acute mania and/or active psychosis. |
| <input type="checkbox"/> Seeking gender transition or gender related care services. | <input type="checkbox"/> Problematic use of substances that impacts client's ability to actively participate in their care. |
| <input type="checkbox"/> Individuals without an OHIP card (uninsured, immigrants, refugees) are accepted. | |

Locations:

Primary location:
360 Bayly St W, Unit 5
Ajax, ON L1S 1P1

Other locations include Pickering and Oshawa.

How to Refer:

Referrals are accepted from Primary Care Providers (MD or NP), self-referral and internal referrals from CAREA (consultation stream). See Referral Form for more details.

Contact Info:

Ajax Medical Secretaries T: (905) 428-1212 F: (905) 428-9151