



Halifax Sexual Health Centre's Annual Report 2020-2021

Coming straight off the heels of a very busy 2019-20 fiscal full of change (new space, new banking software, new EMR) our team was planning a quiet and boring 2020-21. We thought we would take our time settling in to our new digs and spend the year looking toward the future with the development of a new strategic plan. That lasted a mere 14 days when, exactly two weeks into the start of the new fiscal, the first wave of the global Covid-19 health pandemic hit Nova Scotia. The quiet and boring year we had planned quickly became one of uncertainty and adaptability.

Working with the guidelines that were available, requests from NSHA's lab regarding specimen processing, local government, Doctors NS and other community partners we quickly formulated a plan and adapted our services to ensure the safety of our clients, staff, and doctors. Within a couple of weeks, we had completely adapted our practice. For the first time ever, all of our doctors began offering telehealth appointments, we streamlined in person visits to essential services only, and we revamped the schedule to stagger in person bookings to limit patient and staff volume in the clinic. I was and continue to be blown away by the adaptability and resilience of our team! Despite this being an unprecedented year, everyone at HSHC did their part to figure out a path forward.

Although the HSHC team did an exemplary job navigating how to offer services during this pandemic the past year was not easy. The challenges HSHC and our clients face in providing/access sexual and reproductive health care worsened as a result of reduced services and uncertain revenue. Wait times increased creating testing and service backlogs that we are still trying to manage. It is no surprise that services impacting female and 2SLGBTQIA+ health appeared disproportionality impacted and an already strained system became further burdened.

As we go forward, HSHC will reflect on this year's lessons. We will advocate for telehealth to stay as we've observed significant benefits with regard to access and efficiency. We will continue to fight for improvements for trans health care and we will look to our government leaders for additional support to improve STI/STBBI testing. If the pandemic has taught us anything it's that Nova Scotia can implement a strong and far reaching response when there is a public health crisis. Our goal will be to adapt some of the Covid-19 testing efforts when working to quash STI outbreaks across the province and improve access to testing. I look forward to the work ahead and am happy to be joined by the HSHC team.

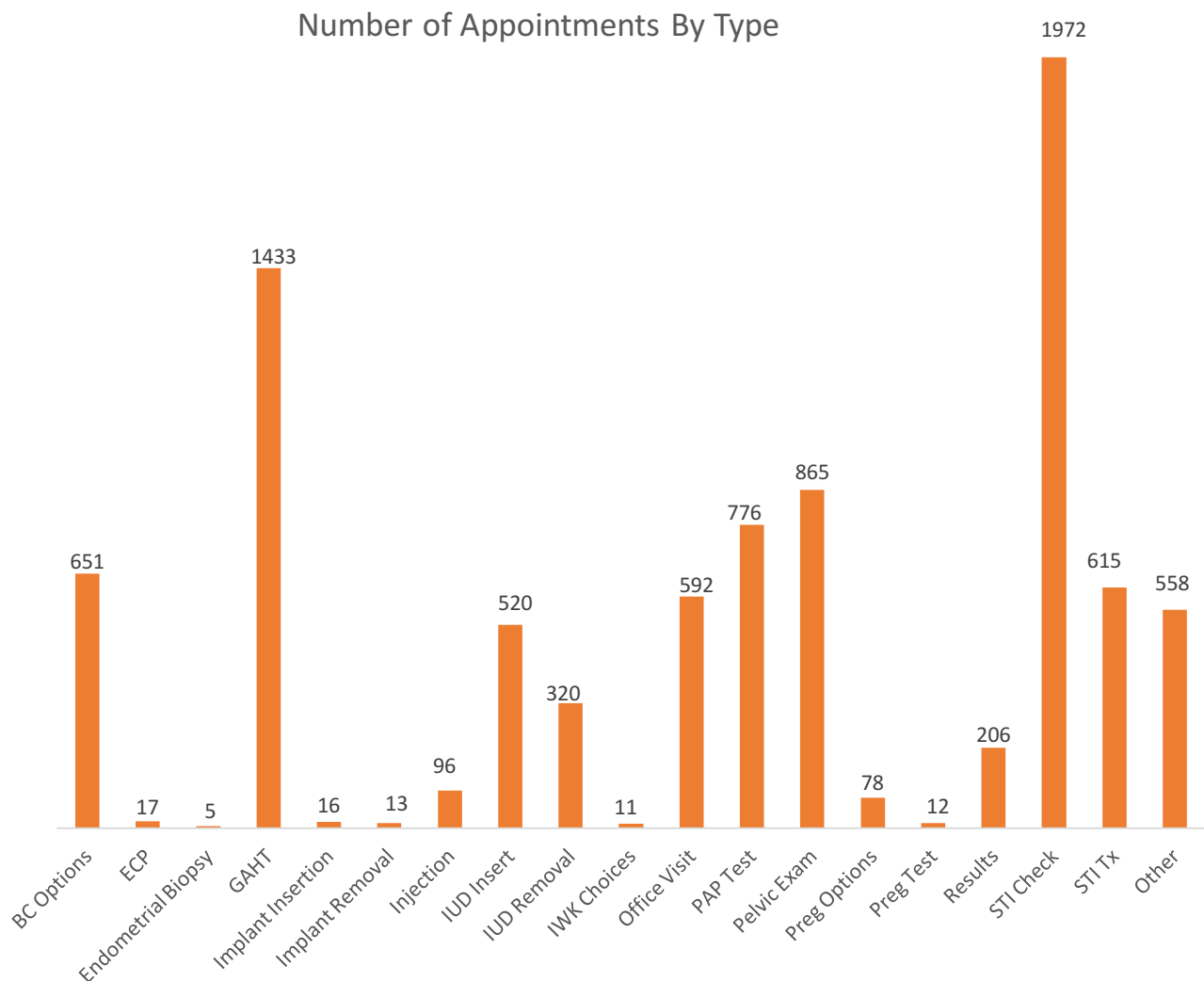
Onward and upward,

A handwritten signature in black ink, appearing to read 'K. Calnan', with a long horizontal flourish extending to the right.

Kate Calnan
Executive Director, HSHC

Operations & Services

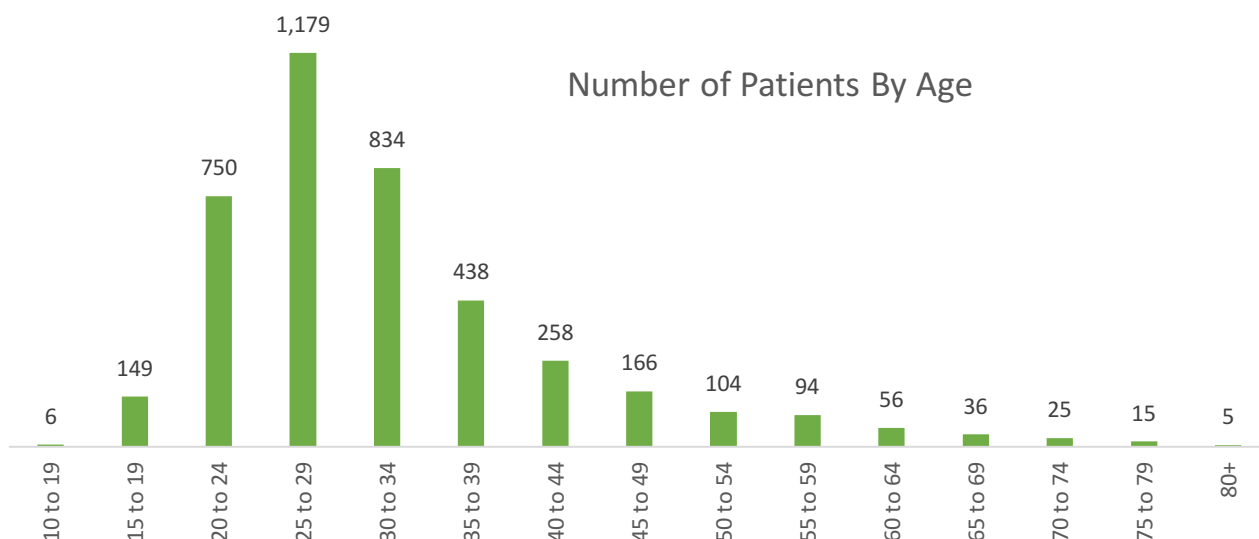
HSHC provided primary sexual and reproductive health care to **4,115 clients** and booked **8,760 appointments** during the 2020-21 fiscal year (not including STBBI testing). We are not a walk-in clinic as **we require an appointment for all physician and nurse visits**. In addition to our primary care services with our physician team, we offer nurse run anonymous and non-nominal HIV/STBBI testing. This fiscal we performed over 130 STBBI tests (blood draws). Overall, services in highest demand were STI Testing (1972 appointments), Gender Affirming Hormone Therapy (1433 appointments), Pelvic Exams (865 appointments), PAP Testing (776 appointments), Birth Control Options (651 appointments), STI Treatment (615 appointments), Office Visits (592 appointments), and IUD Insertions (520 appointments). Finally, we were thrilled to introduce a new service offering this year, Nexplanon (i.e., birth control) implants.



Gender affirming care is a major focus at HSHC with several of our physicians offering transgender health services. This past year HSHC supported 422 **transgender clients** with gender affirming hormone therapy. Gender affirming care continues to be a high demand service. The current wait time for new clients is 5 months. Clients must have a letter of readiness before being added to our waitlist.

This year the global health pandemic changed the way we provide care! HSHC implemented **telehealth services** (we offered **2,437 televisits**) and we were so lucky to have our Student Service Learner from Dal Med conduct a survey evaluation of telemedicine at HSHC. Results indicated **95%** of folks who had a telehealth appointment at HSHC during the past year **felt they received the help they needed over the phone**. Following their telehealth appointment, 40% of folks needed an in person follow-up visit with either a doctor or nurse at HSHC while the other 60% did not require an additional appointment. The majority of respondents (**95%**) said they felt telehealth services **improved their ability to access care** and **100% of folks said they would like telehealth continued after the pandemic!**

Of the over 4000 clients we saw at HSHC this year the majority were between the ages of 20 and 45 years old.



This fiscal the Halifax Sexual Health Centre was open from 8:30-4:30 Monday, Wednesday, Thursday, and Friday and 8:30-8:00 on Tuesday. Our average **wait time for an in person appointment throughout the year was approximately 5 weeks, however, tele visit appointments were often offered within a week of the appointment request.**

Health Promotion

Health Promotion is a priority at HSHC and we've been working hard to improve our resources and online content. With the pandemic keeping many of us at home there was no better year to focus on our online presence. Our Health Promotion Coordinator did an outstanding job this past year developing and sharing relevant content across our social media pages.



Highlights from the year include our Instagram take over Q&A with Zarena Francis, BIPOC Sex Ed, our history of gynecology series, and the history and current state of reproductive health for BIPOC.



We currently have 1,700 followers on Facebook and 1,800 on Instagram, more than double our followership as compared to 2019. The majority of our Canadian followers are local with a few from other provinces including Ontario and British Columbia. International followers are keeping up to date with our pages from the US, UK, Pakistan, India, the Philippines, and Nigeria among others.

Through post sharing and likes our reach on Facebook extended to over 15,500 people (up 51.7% from last year) and to 8,680 people on Instagram (an increase of 330% as compared to last year).



The Team

At the heart of everything HSHC does is our dedicated team of professionals who work hard to ensure HSHC offers the best quality care and service to all of our clients. Without our multidisciplinary team, HSHC would not be able to meet the clinical or educational sexual and reproductive health needs of our community.

Volunteers

We are very grateful to our current and past volunteers who help with our daily operations (e.g. reception, appointment bookings and reminders, specimen management, etc.) and our fundraising initiatives. Unfortunately, due to the health pandemic we were not able to welcome our volunteers into the clinic nearly as often this year. It was imperative that we keep staff and client numbers low and limit in person interactions wherever possible. We are looking forward to building up our volunteer support team again next year as public health restrictions continue to loosen.

Administrators

This past fiscal HSHC employed 2 full-time Medical Office Administrators and 1 casual Administrator. One of our administrators also works as our Health Promotion Coordinator organizing educational presentations and workshops and developing resources for physicians, staff, and clients. Most notable this year was our social media presence on Instagram and Facebook. Our Health Promotion Coordinator did an incredible job bolstering our content, improving followership, and extending reach.

Nurses

This fiscal, HSHC employed 1 full-time RN. Nursing is an integral part of our service model and proved invaluable this past year. With all of our physicians transitioning to tele medicine and limiting in person clinics to one per day our nurse provided critical follow-up of all urgent issues, ran the STBBI testing and treatment program, worked closely with trans clients to initiate new assessments and provide injection teaching, and was available to answer clients' questions by phone on a daily basis.

Physicians

Like past years, HSHC continued to face challenges when it came to physician recruitment and retention and these challenges were made all the more difficult because of Covid-19. However, once again our current team of physicians went above and beyond to ensure our essential services went uninterrupted and quality care was offered to all of our clients. This past year HSHC included a team of 12 physicians who worked anywhere from one clinic a week (or every second week) to 4 clinics a week at our Centre. We are not the primary practice for any one

physician because we specialize in one area – sexual and reproductive health – of primary health care. Therefore, we rely on locums and local physicians who are willing to allocate time away from their own practice to work at our centre.

In addition to seeing clients, our physician team also works hard to facilitate practical learning opportunities in our specialized primary care setting. They frequently train medical residents, medical students, and registered nursing students in gender affirming care and other sexual and reproductive health specialities. Learner opportunities continued throughout the pandemic with many learners getting a mix of in person and tele medicine experience.

Contracts

In addition to our core team, HSHC also relies on several contracted workers to ensure our operation runs smoothly. Very special thanks to our Medical Director who offers ongoing support and leadership of our clinical service offerings, policy and resource development, and who has been instrumental in helping HSHC navigate the Covid-19 health pandemic. Thanks also to our Financial Controller/ Bookkeeper who has worked closely with the Executive Director to ensure financial stability during a year of uncertain revenue due to fewer clinics and our reduced ability to fundraise.



Our Funders

HSHC derives its revenue from a variety of sources (MSI, fundraising, private donations, etc.) but without support from government, small grants, and community partners we would not be able to sustain our operations.

Special thanks to the Nova Scotia Department of Health and Wellness, Nova Scotia Department of Community Services, Sexual Health Nova Scotia, The Plum Foundation, and United Way for supporting HSHC.

Huge thanks to our private donors for your many contributions big and small that have an equally important impact. This past year more than ever, every donation made a huge difference!



Fundraising & Donations

The Covid-19 pandemic significantly impacted our ability to fundraise over the past year. With no in person events and strict gathering limits in place virtual fundraising initiatives were all that was possible. Despite the added challenges caused by the pandemic we are thrilled to announce HSHC raised **\$45,000** in support of our programs and services! The majority of these funds came directly from donors which is incredibly meaningful. Special thanks also to The Murphy Foundation who provided us with a generous donation that enabled us to double our community education programming time. We are so grateful to our community of donors, we would not be able to offer the same services and level of care without your support!



Partnerships & Research

Although many projects slowed down or were paused due to the pandemic, HSHC still had the opportunity to partner with a variety of professionals, community groups, researchers, and national organizations over the past year to continue the hard work of advancing sexual and reproductive health. Some of the projects we've participated in throughout the year include:

- Being a community partner for the Dalhousie Medical School Service Learning program. This year's project focused on virtual medicine specific to HSHC!
- Participating in the Leaders for Queer health Working Group. We meet monthly and discuss ongoing initiatives and partnership opportunities. The group is comprised of organizational leaders from various local non-profits (e.g. ACNS, Pride Health, CBRC)
- Working with CBRC on several STI testing, health promotion, and advocacy projects
- Partnering on the GotBlood2Give research project funded by Canadian Blood Services
- Exploring opportunities for rural STI/STBBI testing
- Being a partner organization for the YWCA's program targeting sexual exploitation and trafficking
- Providing Safe Sex Supplies to several community groups such as MOSH, The Elizabeth Frye Society, Laing House, and various student groups
- Engaging with International advocacy workers to support sexual health learning in Ghana
- Working with Dalhousie University and other post-secondary institutions across Canada to provide clinical residency rotations to all family doctor residents
- Offering student placements for the Dalhousie University Political Science Departments Community Outreach class
- Partnering with Saint Mary's University to offer volunteer placements that give students formal credit for supporting a community-based organization

