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Transgender and non-binary patient care: How to create safe spaces

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Although there is more cultural awareness around transgender issues, generally speaking, the majority of western medical establishments from doctor's offices and clinics to hospitals and emergency services are still not safe places for transgender, trans and non-binary patients. Historically, the rate of mortality for trans people has been much higher than their cisgender counterparts because of the lack of cultural competence on behalf of the medical establishment. Some of this stems from older medical models from 19th and 20th century sexologists and the DSM which labeled trans people as sick. Nurses are often at the front lines of healthcare and it is precisely nurses who can help lead the way in making medical access a positive and empowering rather than a negative and degrading experience. This presentation will provide tools and focus on various ways that clinical and hospital settings can move toward becoming safe spaces for all people to be able to access medical care. I will discuss various clinical models from the Tom Waddell Clinic in San Francisco which works with a large trans homeless and poverty level population to a rural Canadian clinic that has become a model of trans care for larger cities. This will be a multi-media presentation with the possibility (depending on time) for working in groups to problem-solve several situations. I will also be discussing the most recent World Professional Association for Transgender Health (WPATH) findings from the 2016 Amsterdam convention.

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Service user involvement in training for the prevention and management of violence and aggression

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Involving service users in the education of mental health practitioners is seen as important. It provides the opportunity for developing greater awareness and understanding through the unique insights of people's lived experience of mental health conditions and of their contact with mental health services. There is a growing understanding of the contribution that makes to the improvement of services and in developing the mental health practitioners fuels the increase in its practice. In particular, the pre-registration training of mental health professionals includes social workers, nurses and psychologists. This presentation describes the involvement of service user trainers in the development and delivery of a short training course on physical restraint for mental health practitioners. It considers the impact of including service users who themselves have experience of being restrained in acute mental health settings from the perspectives of course participants, tutors and the service user trainers themselves. A key element of this involvement is the creation of a forum where service users' contributions are intently listened to and valued by practitioners. Both parties put heads together to critically analyze the good and bad experiences of restraint practices and, the lessons learnt are powerful as evidenced in course participants' feedback: I really gained a fresh perspective and will take this experience forward in my future practice and; service user involvement is very relevant and thought provoking—a good way to see how our work affects/impacts patients. In sharing this experience, it is hoped that this practice is adopted and sustained across the setting.

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