

Strategic plan
2023-25

HQ
790 Bay





Sexual, mental-health and social-support services by and for the community of cis guys into guys and two-spirit, transgender and non-binary people

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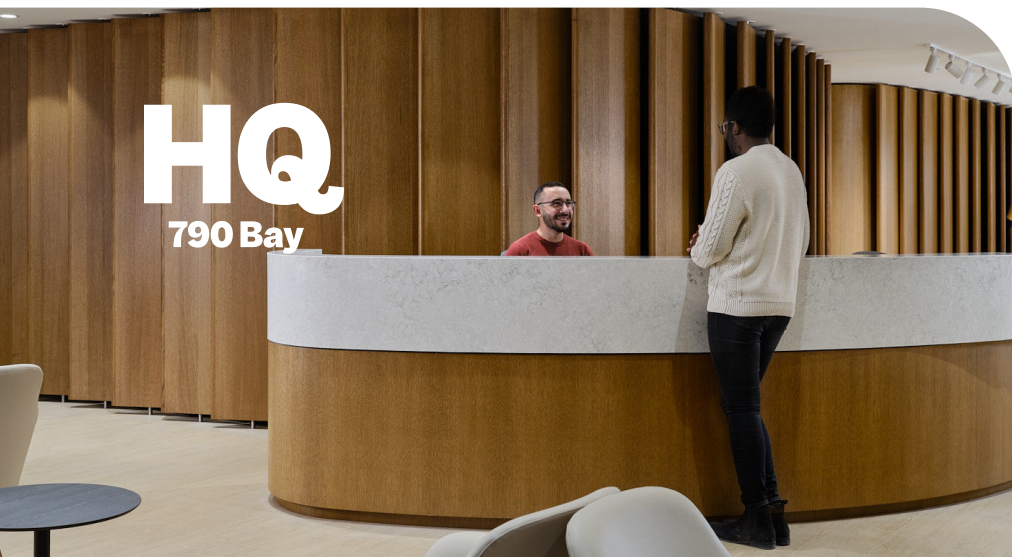
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Why we are here

A. To address unmet needs, and enhance health equity and resilience

We—cis guys into guys and two-spirit, transgender and non-binary people—have higher-than-expected rates of sexually transmitted and blood-borne infections (including HIV), mental-health problems, substance-use problems, and social isolation. For decades we have foregone care out of fear about how we would be treated. Discriminated against when accessing care, we hid who we really are to access care and, as a result, missed out on the care we needed. HQ is now here to meet our needs, often with the services provided by people just like us—and always with services designed and continuously improved by people just like us.

Cis guys into guys and two-spirit, transgender and non-binary people who are Indigenous, Black and other people of colour have faced even greater challenges in accessing care, particularly care that is culturally responsive and that builds on our strengths. HQ and its partner agencies are now here to collectively enhance health equity and resilience.



HQ's partner agencies



Why we are here

B. To improve access to a spectrum of increasingly integrated services



We—cis guys into guys and two-spirit, transgender and non-binary people—cannot be reduced to our discrete health challenges. Sexual activity and substance use often go hand in hand. Mental health challenges and social isolation often go hand in hand. HQ is now here to focus on the whole person. If one of us is at HQ to access sexual health services and is facing an impulse to self-harm, HQ can help with both concerns. If one of us is at HQ for a social night with fellow Black transgender and non-binary people and is worried about a recent sexual encounter, HQ can provide same-day or next-day test results.

Some of us have a family physician or nurse practitioner who can meet our primary-care needs. For us, HQ is now here to provide more specialized sexual health and mental health services and for social-support services. For those of us who are not out to our family physician or nurse practitioner—almost half of cis guys into guys and two-spirit, transgender and non-binary people—HQ is now here to help with all of the concerns that would not be addressed otherwise. For those of us who have an OHIP card but no family physician or nurse practitioner, HQ now fills the gap in the short term and works to connect us to a family physician or nurse practitioner who is the right match for our needs. For those of us living with HIV who do not have insurance coverage and need primary care, HQ now fills the gap for as long as is needed. HQ also works to connect us with trans-informed care.

Why we are here

C. To relieve pressure on other parts of the health system

After an unsafe sexual encounter, many of us show up in a hospital emergency room to access the drugs that can help to prevent HIV (post-exposure prophylaxis, or PEP). Each case of HIV prevented can save the Ontario health system more than \$10,000 a year and over \$500,000 over a lifetime. Lacking insurance coverage or an experienced primary-care physician, many of us face long delays between HIV infection and diagnosis, between diagnosis and treatment, and between treatment and getting HIV to undetectable levels—and wind up needing complex specialized care. Other jurisdictions that have taken similar approaches to HQ—56 Dean St. (London) in the UK and Strut (San Francisco) in the U.S.— have seen significant reductions in HIV and other sexually transmitted and blood-borne infections. Faced with long wait times for mental-health services, many of us show up in emergency rooms or find other ways into the acute-care system. HQ is now here for us so we can be seen by people who really see us, and so we can get the right care by the right provider at the right time.

Many primary-care physicians spend a lot of time on tasks like ordering injectable antibiotics to treat sexually transmitted infections and doing follow-up monitoring required for service users on PrEP. They receive a fixed dollar amount each year to care for patients, with a small amount for the younger service users more likely to need these injections and

monitoring. HQ is now here to efficiently handle these tasks so that primary-care physicians can spend more time with their complex patients. HQ is also a game-changer in making mental-health services readily accessible when primary-care physicians need to make a referral.



How you can help

Spread the word among cis guys into guys and two-spirit, transgender and non-binary people

HQ is here for you and your community.

Take the time to provide feedback if you use our services

HQ makes changes based on your input, and it is important that we hear from as many of our service users as possible.

Donate

HQ needs help to sustain and grow its impacts

Volunteer

HQ needs help to offer services and build community

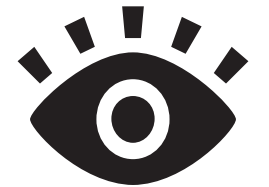
Tell elected officials about us

HQ needs political support to get onto a sustainable funding path

Our vision, mission and values

Vision

Cis guys into guys and two-spirit, transgender and non-binary people have the physical, mental, emotional and social well-being to thrive



Mission

To continuously improve care and support by and for the diverse community of cis guys into guys and two-spirit, transgender and non-binary people



Values

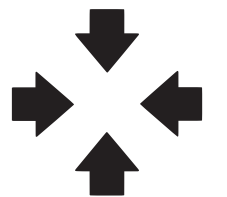
Community

We create a space where service users can connect, support one another, and enhance their well-being. We strengthen community, foster a sense of belonging, reduce social isolation and loneliness, and make a particular effort to reach and engage those who are vulnerable or marginalized.



Inclusivity

We believe in the power of equity, diversity and inclusion. We actively engage cis guys into guys and two-spirit, trans and non-binary people as staff, peers and volunteers and encourage them to use their lived experience to shape our services. We provide a welcoming, accepting space, free of judgement and discrimination, where all service users will see themselves and their cultures reflected in the people planning, delivering and receiving HQ services.



Compassion

We approach our work with empathy, respect and compassion. We create a welcoming space that supports service users in their unique journeys. HQ is an affirming, sex-positive, shame-free, bullying-free space where cis guys into guys and all two-spirit, trans non-binary people can celebrate their identities with pride and confidence.



Person-centred and strengths-based

We acknowledge the strengths and lived realities of our service users and tailor our services to each person's unique needs and experiences. HQ's services are affirming, strengths-based and trauma-informed. We listen and we learn.



Evidence-based

We strive to use the best available knowledge and experience to help service users build resilience and reduce harm and to ensure that the best care is provided in the appropriate setting. HQ provides evidence-based services that have been shown to make a difference and continually measures their effectiveness.



Strategic directions



Strategic directions

1. Provide rapid access to sexual-health prevention, testing and treatment services

For HQ, sexual health involves preventing, testing and treating the full range of sexually transmitted and blood-borne infections (STBBI), including chlamydia, gonorrhea, syphilis and HIV, as well as providing anal-cancer screening.

We provide immediate access to prevention services:

- ➔ pre-exposure prophylaxis (PrEP) for people at risk of HIV (assessments, same-day initiation, and follow-up monitoring)
- ➔ post-exposure prophylaxis (PEP) for people who may have been exposed to HIV through a sexual encounter or sharing needles
- ➔ screening for people at high risk of anal cancer.

For PrEP alone, HQ has reduced six steps to one step.

We provide immediate access to testing services, and same- or next-day test results delivered by text or email:

- ➔ express STBBI testing (self-swabbing) for people without symptoms
- ➔ provider-assisted STBBI testing for people with symptoms
- ➔ testing (and treatment) for anal cancer
- ➔ text or email reminders to return for routine STBBI testing (based on Ontario's new HIV testing guidelines).



We provide immediate access to treatment services:

- ➔ rapid initiation of treatment for STBBIs, including HIV
- ➔ ongoing care for service users diagnosed with HIV – until HQ can provide a ‘warm referral’ to an HIV primary-care provider (for those with an OHIP card or other insurance coverage), and as needed for newcomers and others without insurance coverage.

HQ has reduced the time from HIV testing to treatment initiation from 12 business days to one day.

Rapid access to testing and treatment services reduces the time from infection to diagnosis, from diagnosis to treatment, and from treatment to getting HIV to undetectable levels and preventing the ongoing transmission of STBBIs. In HQ's first six months of operation, **53 service users** were started on HIV treatment in less than 24 hours after being **diagnosed at HQ (13 users)** or being referred to HQ for treatment.

We can do all of this efficiently because it supports each sexual-health provider to work up to their full scope of practice (so we need only 1 full-time equivalent physician), it has an on-site laboratory, and it uses state-of-the-art digital tools. HQ's sexual-health staff includes family physicians, nurses, people taking blood samples, and medical-lab assistants – all working with ongoing training and support from an infectious-disease specialist.

We also partner with the Hassle Free Clinic, which sponsors community-based counsellors providing sexual-health services at HQ.

HQ has reduced the time from HIV testing to treatment initiation from **12 business days to one day.**

13

people diagnosed with HIV

53

people started HIV treatment



Strategic directions

2. Provide accessible, evidence-based and responsive mental-health services

Mental health involves managing mental-health conditions and substance-use problems as well as promoting emotional, psychological, and social well-being. Mental health conditions can include anxiety and depression, personality disorders, and the trauma arising from homophobia / transphobia, bullying, childhood sexual abuse, and intimate-partner violence. Substance-use problems can involve alcohol, crystal methamphetamine, and use of multiple different drugs.

We use evidence-based tools to assess needs for mental-health services, and we support partner agencies to use these tools as well. In HQ's first six months of operation, 18% of our service users were found to have unmet mental-health needs.

We provide immediate access to urgent services to address self-harm and suicidal ideation. In its first six months, HQ provided these urgent services to 101 service users.

We use a stepped-care model to get the right, evidence-based services to the right people in the most cost-effective way, which can include any of the following types of support:

- ➔ self-management
- ➔ group
- ➔ individualized
- ➔ individualized and specialized, as well as case management and system-navigation services.

We also support partner agencies to do the same, and provide training in how to offer evidence-based treatments. Common assessment tools and a stepped-care model gets more care to more people, and makes better use of HQ's and its partners' mental-health resources.

As with our sexual-health services, we can do all of this efficiently because we support each mental-health provider to work up to their full scope of practice (so we use resources like psychiatrists sparingly), it uses self-management support and group support for many service users (so we use individualized and specialized support sparingly), and it uses state-of-the-art digital tools. HQ's mental-health staff includes clinical social workers and a psychiatry resident – all working with ongoing training and support from a psychiatrist.

We partner with eight agencies, which fund and support their staff to provide culturally appropriate mental-health services at HQ. These partners have roots in and deep commitments to serving Indigenous peoples, specific racialized communities (Asian people, South Asian people, and African, Caribbean and Black people), specific linguistic groups (French and Spanish), people living with and at risk of HIV, and people using substances.



Strategic directions

3. Build community and belonging



Community and belonging can be particularly important for cis guys into guys and two-spirit, transgender and non-binary people, many of whom have either not come out to or not been accepted by family, friends and co-workers. Apps have made sexual encounters more readily available and sometimes social connection more difficult.

We support a sense of community and belonging in many ways:

- ➔ a safe welcoming space
- ➔ art on the walls made by and for cis guys into guys and two-spirit, transgender and non-binary people
- ➔ meeting rooms with the ventilation needed to allow smudging and other Indigenous healing practices and ceremonies
- ➔ community programming organized and delivered by other cis guys into guys and two-spirit, transgender and non-binary people drawn from a range of cultural communities, including newcomer communities
- ➔ support services to reduce loneliness and social isolation.

Our efforts to build community and belonging are themselves a community undertaking. Our partner agencies host many events at HQ, and involve both their own volunteers and sometimes HQ's volunteers in their work.

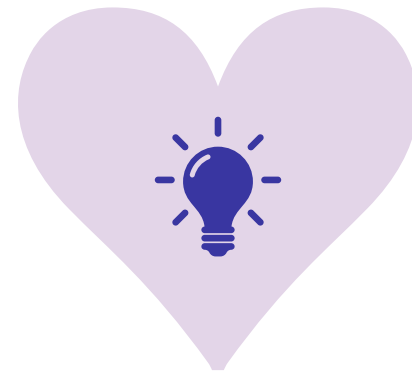
Examples of our community programming include:

- ➔ drumming and talking circles for Indigenous queer people
- ➔ drop-ins for same-gender-loving Black men, for people who use substances, and for trans men living with HIV
- ➔ meet-ups for people with HIV
- ➔ movie nights for queer Latinx community members
- ➔ a social program for 50+ cis guys into guys navigating sex and relationships in the age of apps
- ➔ voice classes for trans people
- ➔ social activities for French-speakers and people from the Middle East, South Asia and East Asia with the option for testing before or after the social activities
- ➔ workshops on sexual health, dealing with a recent diagnosis of HIV, navigating the workplace as a trans person, and safety skills for community members who engage in outreach at high-risk spaces
- ➔ classes on writing and poetry, and the spoken word.



Strategic directions

4. Deliver care and support differently



We are demonstrating by example how the health system needs to change. We have put in place the eight 'building blocks' that underpin the transformational Ontario Health Teams model.

- ➔ we serve a defined population with unmet needs – cis guys into guys and two-spirit, transgender and non-binary people living in and travelling to the Greater Toronto and Hamilton area
- ➔ we offer an array of culturally appropriate services – sexual, mental-health and social-support services – that are person-centred, and that relieve pressure on more expensive parts of the health system
- ➔ we engage our service users and communities in co-designing care models, in continually improving our services, and in making strategic decisions about HQ's future (for example, through our Client and Community Advisory Council, our Collaborative Leadership Council, and our board of directors)
- ➔ we use a 'population-health management' approach to equitably improve care experiences and health outcomes for our service users, which means using a stepped-care model – especially for our mental health services – to get progressively more complex services to those with greater needs and bigger barriers to accessing care

- ➔ we leverage digital health tools, such as our kiosks that allow service users to register for the right sexual-health services in any of 13 languages, our instructional videos that allow service users to self-test in any of six languages, and our electronic health record that allows our Quality Committee to monitor whether the right services are equitably reaching and benefiting all those who need them
- ➔ we embrace a collaborative leadership model – working as a coordinated set of partners who each have distinct roots in and commitments to the communities we serve – to adopt common assessment tools, provide culturally appropriate services, and ensure that the right partner delivers the services they are uniquely positioned to provide
- ➔ we strive to make the most effective use of limited funding, supporting our team members and partner agency staff to work up to their full scopes of practice and to achieve more significant impacts collectively than they can working independently
- ➔ we commit to ongoing learning and improvement – drawing on our rich data systems, our service users' and communities' lived experiences, and community-based research – so our service users, communities, partners and funders can see us getting better week after week, and year after year.



The need for the services HQ provides is not limited to the Greater Toronto and Hamilton area. Our commitments – in the short term to data and research that drive learning and improvement and to sharing knowledge and experiences, and possibly in the long run to training and mentoring and to exploring virtual models of care – position us well to extend our reach beyond those living in and travelling to this area. HQ will explore with partners across Ontario the potential for demonstrating by example how the health system needs to change across the entire province.



Partners and funders

Who got us here and who will keep us here

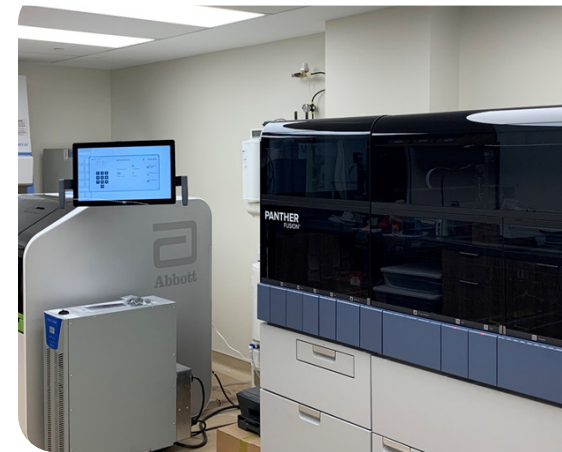
HQ has benefited significantly from support received from the Ontario HIV Treatment Network, and funding from the AIDS and Hepatitis C Programs, Ontario Ministry of Health. These funds were used to design and build HQ's exciting new space, to support some of its ongoing operating costs, and to support the infrastructure for ongoing learning and improvement.

HQ's beautiful welcome and reception area was generously supported by The P. Austin Family Foundation. The Canadian Foundation for AIDS Research (CANFAR) purchased two large testing machines for the laboratory. The AIDS Committee of Toronto, the Pride and Remembrance Run and the Red Dress Ball made generous donations, as did Ron Rosenes and a number of other philanthropists in the community. Click here to learn more about our donors.

Insured physician services are funded through the Ontario Health Insurance Plan.

HQ has received research funding from Gilead to assess the impact of rapid initiation of PrEP and from OHTN to assess the impact of rapid initiation of antiretroviral therapy. It has also received grants from TD Bank and ViiV to support mental-health services.

HQ is actively pursuing sustainable funding for its non-insured physician services, mental health services, and laboratory operations.



2016
New provincial AIDS strategy called for a more person-centred approach to improving the health of populations most at risk of HIV

2016
Representatives of agencies serving gay men came together to talk about developing a network of mental health services

2018
Pitching the Tents: Raising the Health of Gay Men in Toronto provided a forum for gay men to talk how best to improve their health and the concept for HQ becomes clearer

2018-09
Partner agencies began a series of meetings to plan for what becomes HQ, and establish what would later become the Collaborative Leadership Council

2014-09
Community leaders from Toronto visited Fenway Health, another source of inspiration for HQ for ideas

2019-01
Search for space begins

2009 and 2016
Clinics that inspired HQ opened in their current form in London's Soho (56 Dean St.) and San Francisco's Castro district (Strut)

2019-03
Consultations begin with transgender and non-binary people about expanding our services to include them

2019-10
Lease signed and design work begins for the space on the 8th floor of 790 Bay St.

2019-12
Consultations with the community about naming and branding HQ

2020-02
Report describing community leaders' perspectives on what was needed in a health hub released by the Toronto to Zero task group

2020-10
Construction began after many COVID-19 related delays, with more delays still to come

2021-12
Incorporation approved by the Government of Canada

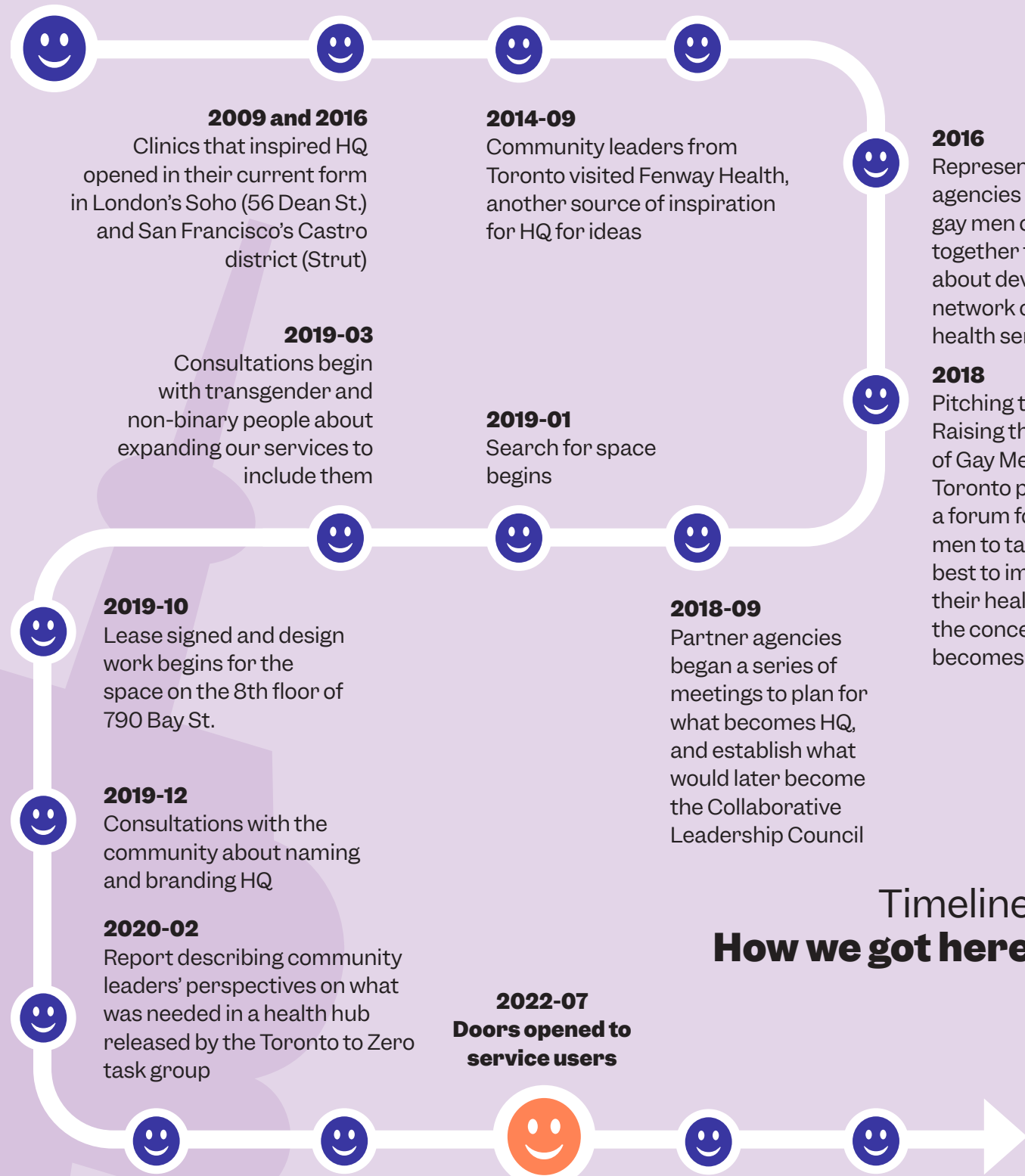
2022-08
Registered charitable status obtained

2022-10
Membership approved in the Alliance for Healthier Communities

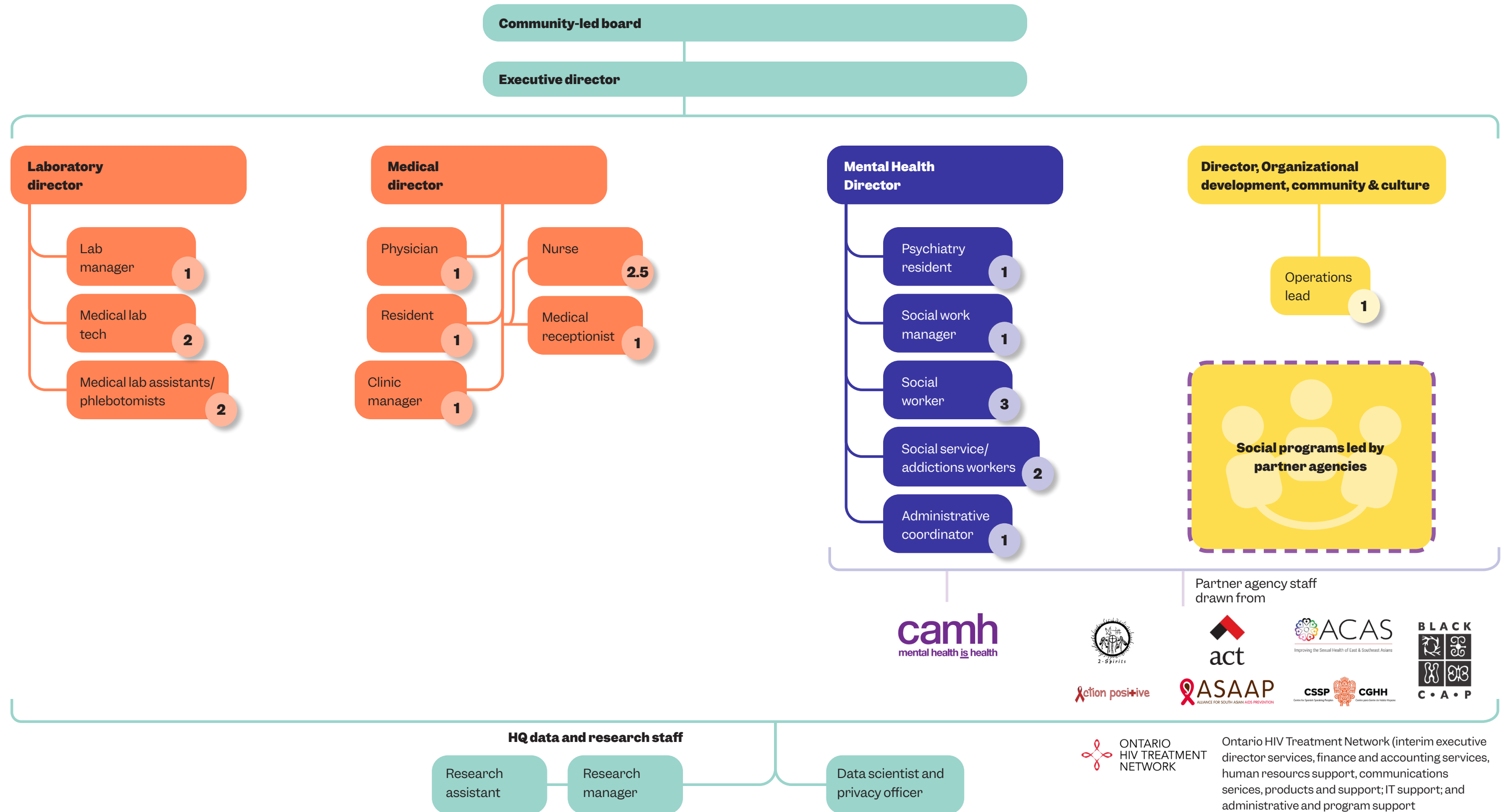
2022-07
Doors opened to service users

Timeline How we got here

1990s
First calls issued in Toronto to create something like what HQ now is



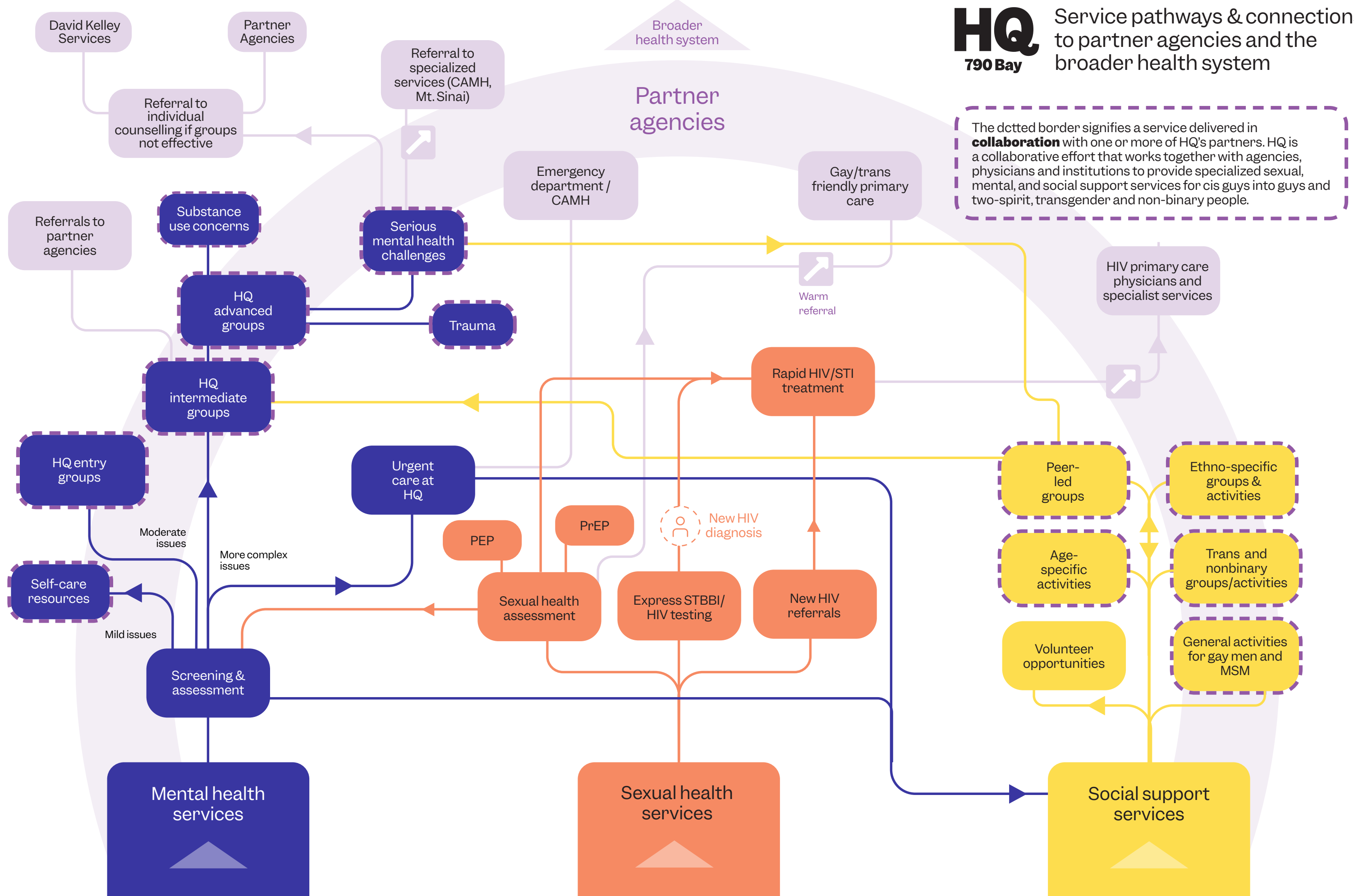
Organizational chart: Who we are



Ontario HIV Treatment Network (interim executive director services, finance and accounting services, human resources support, communications services, products and support; IT support; and administrative and program support)



Service pathways & connections to partner agencies and the broader health system



Performance

How **we** are doing so far

In our first six months:



- Cis guys into guys (85%)
- Trans women (1%)
- Trans men (0.7%)
- Non-binary (5.7%)
- did not declare a gender identity (1.6%)

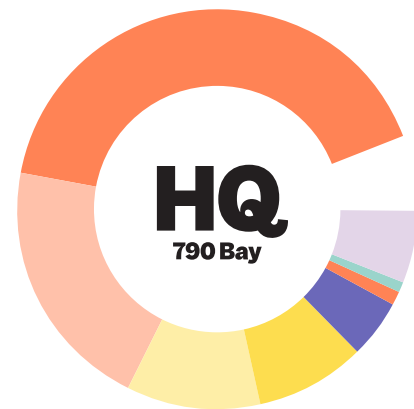
12%

reported being HIV positive

34

average age of our service users

In the same period our service users tended to be as or more ethnically diverse than the general Toronto population:



- Mixed race (6%) vs. 1.5% in general Toronto population
- Indigenous (1%) vs. 0.7% in general Toronto population
- Indo-Caribbean (1%) vs. 2% in general Toronto population
- Middle Eastern (5%) vs. 1.1% in general Toronto population
- Black (9%) vs. 8.5% in general Toronto population
- Latinx (11%) vs. 2.8% in general Toronto population
- Asian (21%) vs. 32% in general Toronto population
- White (42%) vs. 50% in general Toronto population



In our first six months, **3,297** unique service users made a total of **7,032** visits to HQ.

17,319

STI tests

1,885

HIV tests (antigen)

including

13

people diagnosed with HIV

53

people started HIV treatment

1,538

people treated for STIs



or 2214 visits were specifically for **express sexual-health testing**

37%

487

users came for **PrEP**

17%

specifically for **mental health services**

126

users came for **PEP**

550

users requested **mental health support**

89 of whom are HIV positive

219

users requested **substance use support**

46 of whom are HIV positive

98

users requested **suicide-self-harm support**

15 of whom are HIV positive and **30** of whom are trans, non-binary or two-spirited

More than one quarter of service users (884 people) reported using substances as part of sexual activities. About 4% of service users were matched to self-management support, 28% to group support, and 63% to group support plus an individualized assessment.

HQ will soon have data on all service users' care experiences and on improvements in health outcomes. The anecdotal data from in-person encounters and online service-rating systems are glowingly positive.

Very friendly, helpful, and polite staff. Very convenient and quick service. Very safe environment for everyone.

Amazing STI clinic for queer men and trans people! Staff is very professional, and the clinic is clean, fast, and very discrete. The best experience possible for an STI clinic. The staff were knowledgeable and made a potentially embarrassing or awkward experience pleasant 😊

Once you're in their system, if you need STI testing, you simply walk in, swipe your health card, the computer prints out your own ID labels, you take your own samples in the express testing bathrooms and drop it off at the on-site lab. Results are texted back to you the following day (typically). They have literally removed almost ALL the barriers to STI testing. The impact the spread of knowledge of this service will have on STI rates... will have to be significant. I can only imagine the average time to knowing of an infection for those getting STI testing will drop by a huge number because of this place. It is a huge benefit to public health and a shining example of what smart, innovative thinking can bring to what can be a clunky, cumbersome, and embarrassing-for-some system.

HQ
790 Bay