HEI 2018 RESOURCE GUIDE

The HEI Resource Guide is a comprehensive instructional and reference accompaniment to the Healthcare Equality Index (HEI) Survey. This Resource Guide can be used by survey submitters, healthcare administrators and LGBTQ patient advocates working to implement the policies and practices covered by the HEI Survey.

A comprehensive handbook to the HEI Survey
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Introduction

The HEI Resource Guide is a comprehensive instructional and reference accompaniment to the Healthcare Equality Index (HEI) Survey. The HEI Resource Guide covers all of the sections of the HEI survey in great detail, providing explanations of why these policies and practices we ask about are important, example policies, links to outside resources, and more. The resources provided here are certainly not the only ones available to help guide your organization in LGBTQ patient-centered care; however, we hope they can help you get started on implementing best practices in equitable and inclusive care for LGBTQ patients.

The HEI Resource Guide is also designed to help facilities better understand what is required to receive credit for each question as part of the HEI scoring criteria.

We hope you find the HEI Resource Guide helpful in taking steps to ensure equitable and inclusive treatment for LGBTQ patients, families and employees at your facility. If you have any further questions about the HEI, please do not hesitate to contact our team at hei@hrc.org. Additionally, if you have a resource or best practice at your facility that you’d like to share with us for inclusion in future versions of this guide, please reach out to hei@hrc.org.
Non-Discrimination and Staff Training:
Patient Non-Discrimination

For more information about the Patient Non-Discrimination Criterion, visit hrc.org/patient-non-discrimination

Why an LGBTQ inclusive patient non-discrimination policy?

LGBTQ people experience many forms of discrimination in healthcare because of their sexual orientation (lesbian, gay, and bisexual people) and/or their gender identity (transgender people). A large survey by Lambda Legal revealed that 56% of lesbian, gay, and bisexual respondents had experienced serious discrimination in healthcare, while 70% of transgender respondents had experienced serious discrimination. Creating and broadly communicating a patient non-discrimination policy that includes both “sexual orientation” and “gender identity or expression” is a crucial step in ensuring equitable, high-quality care for LGBTQ patients (see definitions of “sexual orientation,” “gender identity” and “gender expression” here). In addition, Section 1557 of the Affordable Care Act prohibits sex discrimination in any hospital or health program that receives federal funds, and the U.S. Department of Health & Human Services, Office of Civil Rights, has issued regulations that this prohibition extends to claims of discrimination based on gender identity and sex stereotyping.

When a healthcare organization includes the terms “sexual orientation” and “gender identity or expression” in its patient non-discrimination policy, it sends an important message to patients and employees alike: LGBTQ people must receive equal treatment. In some cases, inclusion of these terms reflect state law, affirming that the organization is aware of and committed to legal requirements of non-discrimination. In areas without a state law prohibiting LGBTQ discrimination, adding “sexual orientation” and “gender identity or expression” to a non-discrimination policy signals a clear and welcome commitment to equity and inclusion. As The Joint Commission LGBT Field Guide notes, explicit statements that healthcare organizations are committed to LGBTQ non-discrimination are deeply appreciated by LGBTQ members of the community and provide important guidance to employees.

It has become common for organizations’ non-discrimination statements to include the terms “sexual orientation” and “gender identity or expression.” For example, leading healthcare organizations have adopted policies that prohibit discrimination against LGBTQ people by including the terms “sexual orientation” and “gender identity or expression.”

The Joint Commission Standard

In 2011, The Joint Commission implemented standard RL01.01.01, EP 29, calling on accredited facilities to prohibit discrimination based on both “sexual orientation” and “gender identity or expression.” For more information about the standard, which is surveyed, see The Joint Commission publication Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care for the LGBT Community: A Field Guide, available for free download at: jointcommission.org/lgbt.

It is important to note that The Joint Commission Standard on patient non-discrimination does not currently require the adoption of a written non-discrimination policy. This is a requirement of the HEI. However, a written policy is one of the surest ways to confer adherence to The Joint Commission Standard and it conveys an organizational commitment to LGBTQ non-discrimination.
In the HEI

The HEI asks whether both the terms “sexual orientation” and “gender identity or expression” (or at a minimum “gender identity) are included in an organization’s patient non-discrimination policy (or patients’ bill of rights) and how this policy is communicated to patients and employees.

To receive credit, an organization must document that both terms are included in the policy and that the policy is communicated to patients in at least two of the following ways:

- Posted on facility website
- Posted or displayed in waiting rooms and other public areas of the facility
- In materials routinely given to patients at admitting/registration
- In materials routinely given to patients at other time(s)
- In materials routinely available for take-away in patient waiting areas
- Posted in patient waiting area(s)

To receive credit, an organization must also inform its employees of its LGBTQ-inclusive patient non-discrimination policy in at least one of the following ways:

- Posted on facility intranet site
- Posted in employee work area(s)
- In materials routinely given to employees at orientation
- Reviewed in in-person employee training
- Reviewed in online employee training

Sample Policies

The following excerpts from healthcare organizations' patient non-discrimination policies (or patients' bills of rights) meet the HEI Patient Non-Discrimination criterion of including the terms “sexual orientation” and “gender identity or expression.”

Mount Sinai Beth Israel Medical Center (New York, NY)

This LGBTQ-inclusive non-discrimination policy makes it clear that it applies to all facets of patient care. Additionally, this policy goes the extra step of declaring respect of their patient’s gender identity and preferred pronouns, extending a clear welcome to transgender patients.

*It is the policy of MSBI to provide equitable healthcare without discrimination against, or harassment of, any person on the basis of race, color, national origin, language, religion, sex, age, disability, citizenship, marital status, creed, sexual orientation, gender expression or gender identity (the patient’s preferred gender will be respected, and the patient will be referred to by their name and pronoun of choice, whenever feasible) or other non-medically relevant factor or any other characteristic protected by federal or state law. Any such discrimination or harassment is prohibited and will not be tolerated. This applies to admission, treatment, discharge or other participation in any of MSBI’s programs, services or activities, including, but not limited to:*

- all patient admissions;
- all care, whether inpatient, outpatient or emergency in nature;
- all patients’ room, floor or section assignments or transfers, except in those cases where patient safety or health condition is a necessary consideration; and employee assignments to patient services.
Rush University (Chicago, IL)

This university affiliated hospital’s LGBTQ non-discrimination policy delineates its application to all members of the university community.

*Discrimination or harassment against any member of the Rush University Medical Center community (i.e., employee, faculty, house staff, student, or patient) because of age, ancestry, color, disability as defined by Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act, gender, gender identity and/or expression, marital or parental status, national origin, pregnancy, race, religion, sexual orientation, veteran’s status or any other categories protected by federal or state law is prohibited and will not be tolerated, nor will any person for those reasons be excluded from the participation in or denied the benefits of any program or activity within Rush University Medical Center or Rush University.*

Cincinnati Children’s Hospital Medical Center (Cincinnati, OH)

This patient non-discrimination policy for a pediatric facility specifically incorporates the patient’s family in the non-discrimination statement, addressing the worries faced by same-sex parents.

*Patients and parents/guardians have the right: to be treated considerately and respectfully regardless of the patient and/or family’s race, religion, sex, sexual orientation, gender identity/expression, cultural background, economic status, education or illness.*

Faulkner Hospital (Boston, MA)

This is a concise non-discrimination policy with clear, LGBTQ-inclusive language.

*It is the policy of Faulkner Hospital to treat all patients and not to discriminate with regard to race, color, religion, national origin, age, sex, sexual orientation, gender identity or expression, or disability.*

Vanderbilt Hospital and Clinics (Nashville, TN)

This short statement is at the forefront of Vanderbilt’s Rights and Responsibilities document.

*We will treat you without regard to your race, nationality, religion, beliefs, age, disability, sex, sexual orientation, gender identity or expression, or source of payment.*

Saint Luke’s Health System (Kansas City, MO)

This statement in the system’s patient rights and responsibilities has concise, LGBTQ-inclusive language.

*The patient has the right to treatment without discrimination as to race, age, religion, sex, national origin, socioeconomic status, sexual orientation, gender identity or expression, disability, veteran status, or source of payment.*

**Publicizing Your Patient Non-Discrimination Policy to Patients**

Communicating your LGBTQ-inclusive patient non-discrimination policy to patients is just as, if not more important than having the policy itself in place. Adding the words “sexual orientation” and “gender-identity or expression” to your facility website, patients’ bill of rights brochure, intake form, or patients’ rights poster can help to alleviate the added anxiety LGBTQ patients face when receiving care. Public, explicitly inclusive language not only allows LGBTQ patients and families to feel safe and welcomed at your facility – it can be the deciding factor for an LGBTQ patient when determining where to receive care.
For these reasons, the HEI requires survey participants to document not only that they have a LGBTQ-inclusive patient non-discrimination policy, but also that they make this policy readily accessible to patients in at least two ways. The following are examples of how participants communicate their patient non-discrimination policy.

**Posted on facility website**

- **HCA**, one of the largest healthcare networks in the US, took the initiative to integrate their system-wide patient non-discrimination and equal visitation policies into each of their hospital facility websites. These websites are model sites for the following reasons: 1. The Patient Rights and Responsibilities page can easily be found through each hospital’s homepage menu structure; 2. Their non-discrimination statement is clearly spelled out at the top of the pages; and 3. The page also includes their equal visitation policy. See an example of an HCA hospital website [Patient Rights page](#) at Dominion Hospital, part of HCA Virginia Health System.

- **University of Mississippi Medical Center**, has this statement lead their patients rights which is easy to find on their website under the Patient/Visitor page: *Patients have the right to receive considerate, respectful delivery of care regardless of age, race, color, national origin, culture, ethnicity, language, socioeconomic status, religion, physical or mental disability, sex, sexual orientation, or gender identity or expression, or manner of payment.*

**In materials given to patients at admitting/registration**

- **Henry Ford Macomb Hospital** has a comprehensive patient handbook that delineates “sexual orientation” and “gender identity” in the first bullet in their Patient Rights & Responsibilities (pg. 15). Under the section “Involvement in Care and Decisions” (pg. 16), the first bullet clearly communicates that patients have a right to designate the visitor of their choice.

**In materials given to patients at other time(s)**

- Number 1 on **California Pacific Medical Center** [Patient Rights and Responsibilities flier](#) lists an LGBTQ inclusive patient non-discrimination statement. Number 28 also communicates an equal visitation policy, ensuring patients have a right to designate a visitor of their choosing, including a same-sex domestic partner.

**In materials available for take-away in patient waiting areas**

- **Christiana Care Health System** has a [Patient Rights and Responsibilities brochure](#) (also available in [Spanish](#)) that lists “sexual orientation” and “gender identity or expression” as protected classes under the first bullet in “Participating in your care.” Under “Representatives and visitors,” the first bullet ensures that patients have the right to designate visitors of their choosing, including a same-sex domestic partner in the list of visitors a patient might designate.

**Posted in patient waiting area(s)**

- **Children’s Mercy Hospitals** have a [cute poster](#) with a simple non-discrimination statement that is posted in patient areas.

- **Bon Secours Health System** has a poster with a sign underneath adding LGBTQ-inclusive language to their existing publication materials, without having to reprint posters. The extra sign goes a long way for LGBTQ patients, who deeply appreciate the additional welcoming language.
View our webpage on publicizing your policies for more examples of how facilities communicate their policies to patients.

Publicizing Your Patient Non-Discrimination Policy to Employees

The HEI also requires facilities to share their LGBTQ-inclusive Patient Non-Discrimination Policy with its employees in at least one of the following ways:

Posted on facility intranet site

- **Sharp Memorial Hospital**’s intranet system called SharpNET creates an easy way for employees to access policies and procedures.

- Bridgeport Hospital of **Yale-New Haven Health System** uses Policy Manager so employees can readily access their Patients’ Rights and Responsibilities document.

Note that while having the policy posted on the intranet will allow a facility to meet this criterion, we strongly encourage facilities to promote these policies to their employees in a more proactive way such as through training.

Posted in employee work area(s)

- **Steps to Recovery** displays its Patient Non-Discrimination and Equal Visitation in employee only areas such as the lunchroom.

In materials routinely given to employees at orientation

- **VA Coatesville Medical Center and other VHA facilities** provide this handout in each employee’s orientation packet. The handout includes links to the patient non-discrimination policies as well as other LGBTQ patient initiatives and policies.

Reviewed in in-person employee training

- **NYC Health + Hospital’s facilities** review the patient and resident rights in their new employee orientation.

- Similarly, **Boston Children’s Hospital** includes a review of the patient non-discrimination policy in their new employee training.

Reviewed in online employee training

- **F.F. Thompson Hospital** requires employees to review their key non-discrimination policies using this online training module.

- Similarly, a southern California hospital uses this online training module to review patient’s rights policies with employees.
Non-Discrimination and Staff Training:
Equal Visitation

For more information about the Equal Visitation criterion, please visit hrc.org/visitation

Why an equal visitation policy?

Research and experience have shown that a patient’s access to visitors is a crucial part of the healing process. Yet LGBTQ people have been denied the same access to their loved ones as other patients and visitors. To help remedy this discriminatory practice, President Obama issued a memorandum in April 2010 ordering the Department of Health and Human Services to guarantee the visitation rights of LGBTQ people, inspired by the tragic experience of Janice Langbehn, Lisa Pond and their children, who were kept apart by discriminatory hospital officials as Lisa lay dying.

When inpatient healthcare organizations explicitly guarantee equal visitation to LGBTQ patients, they offer vital assurance to patients and clear guidance to employees.

The Joint Commission and CMS Standards

In 2011, in response to the President’s memorandum, the Centers for Medicare and Medicaid Services (CMS) revised their CMS Conditions of Participation to require covered facilities to “not restrict, limit or deny visitation privileges” based on sexual orientation or gender identity. The Joint Commission simultaneously aligned its visitation standards (see RI.01.01.01 EP 2 Note) with the CMS requirements. Revisiting Your Hospital’s Visitation Policy, a joint publication from HRC and the American Health Lawyers Association, details the CMS’ and The Joint Commission’s requirements and provides a wealth of other background information, as does The Joint Commission LGBT Field Guide. In addition, some state laws guarantee equal LGBTQ visitation.

CMS explicitly requires that hospitals must adopt written policies and procedures concerning patients’ visitation rights, including any clinically reasonable and necessary restrictions or limitations on visitation. Additionally, hospitals must provide notice to patients or support persons of their visitation rights, including the right to receive visitors designated by the patient. Hospitals may not deny visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

The Joint Commission also requires hospitals to have written policies that address procedures regarding visitation rights, aligned with the same CMS standards of allowing the presence of a support individual of the patient’s choice, and prohibiting discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.
In the HEI

The HEI asks if an organization has a visitation policy explicitly ensuring equal visitation for LGBTQ people and how this policy is communicated to patients and employees.

To receive credit, an organization must document that it has an equal visitation policy and that the policy is communicated to patients in at least two of the following ways:

- Posted on facility website
- Posted or displayed in waiting rooms and other public areas of the facility
- In materials routinely given to patients at admitting/registration
- In materials routinely given to patients at other time(s)
- In materials routinely available for take-away in waiting areas
- Posted in waiting area(s)

To receive credit, an organization must also inform its employees of its equal visitation policy in at least one of the following ways:

- Posted on facility intranet site
- Posted in employee work area(s)
- In materials routinely given to employees at orientation
- Reviewed in in-person employee training
- Reviewed in online employee training

Sample Policies

Many facilities go above and beyond explicitly noting that patients may designate the visitor(s) of their choice and prohibiting discrimination in visitation based on sexual orientation or gender identity. To further alleviate worries held by LGBTQ patients and families, hospitals often make an explicit reference to equal visitation for same-sex couples and same-sex parents. In addition, it is a best practice for facilities to include an explicitly LGBTQ-inclusive definition of “family,” or link to or make direct reference to such a definition in the visitation policy.

The following excerpts from healthcare organizations' visitation policies meet the HEI Equal Visitation criterion. See more examples and template language here.

**AtlantiCare Regional Medical Center (Atlantic City, NJ)**

This equal visitation policy clearly indicates that patients have the right to designate a visitor of their choosing, along with alleviating LGBTQ-specific worries by including “same-sex partner” in the list of those who might visit, and finally through a non-discrimination statement that includes both “sexual orientation” and “gender identity.”

*It is the policy of AtlantiCare Regional Medical Center (ARMC) to promote patient and family-centered care while providing a therapeutic environment for patients and a safe environment for patients, family, visitors, and staff.*

*ARMC will provide notice to patients or their Support Persons (where appropriate) of their visitation rights, including the right to receive, subject to the patient’s consent, visitors designated by the patient, including but not limited to a spouse, civil union partner, domestic partner (including a same sex partner), another family member, or a friend. The notice must also advise of the patient’s right to withdraw or deny consent at any time either orally or in writing. The provision of notice will be documented in the medical record.*
ARMC will not restrict, limit, or deny visitation privileges based on race, skin color, age, national origin, ancestry, nationality, religion, sex, gender identity or expression, sexual orientation, or disability. All visitors enjoy full and equal visitation privileges consistent with patient privileges and the limitations set forth in this policy.

Thomas Jefferson University Hospital (Philadelphia, PA)

This is shorter equal visitation policy that also clearly indicates that patients have the right to designate a visitor of their choosing, along with alleviating LGBTQ-specific worries by specifically including “same-sex partner” in the list of those who might visit, and finally through a non-discrimination statement that includes both “sexual orientation” and “gender identity.”

In support of each patient’s rights, the hospital allows patients to receive visitors that the patient designates including, but not limited to, a spouse, domestic partner (including a same sex domestic partner), family members, or a friend, for emotional support during the course of his/her stay. Patients are able to withdraw or deny such consent at any time. TJUH prohibits discrimination against visitors based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression. Visitors designated by the patient (or support person, where appropriate) do not have to be legally related to the patient and shall enjoy visitation privileges that are no more restrictive than those that immediate family members would enjoy.

Children’s Mercy Kansas City (Kansas City, MO)

This equal visitation policy specifically addresses the worries LGBTQ families have when visiting their children. By including a broad definition of “family,” this policy welcomes LGBTQ families in addition to other diverse families.

Purpose: To define the expectations for persons visiting hospitalized patients, recognizing our commitment to non-discrimination and providing access without regard to race, color, sex, national origin, disability, age, religion, marital status, citizenship, gender identity, gender expression, sexual orientation, and/or other legally protected classification at all Children’s Mercy inpatient locations

Specific Considerations:

1. Children’s Mercy promotes and supports a patient and family centered approach to care delivered in a context sensitive to the importance of relationships.

2. Children’s Mercy recognizes the importance of contact with family members and friends for the mental and physical well-being of patients.

3. For purposes of visitation “family” means any person(s) who plays a significant role in an individual’s life. This may include person(s) not legally related to the individual. Members of “family” include:
   a. Spouses, domestic partners, partners in civil union and both different-sex and same-sex significant others.
   b. Minor patient’s parents, regardless of the gender of either parent.
   c. Parents may be legal parents, foster parents, same-sex parents, step-parents, those serving in loco parentis, and other persons operating in caretaker roles.
4. The PICU, ICN and Fetal Health Center unit specific visitation policies do not restrict visitors based on race, color, sex, national origin, disability, age, religion, marital status, citizenship, gender identity, gender expression, sexual orientation, and/or other legally protected classification.

Publicizing Your Equal Visitation Policy to Patients

Communicating your equal visitation policy to patients is just as, if not more important than having the policy itself in place. Adding your equal visitation policy to your facility website, patient bill of rights poster or brochure alleviates the added anxiety LGBTQ people face when visiting their loved ones.

For these reasons, the HEI requires survey participants to document not only that they have an equal visitation policy, but also that they make this policy readily accessible to patients and families in at least two of the following ways (see corresponding examples in the patient non-discrimination section on page 6, or visit our webpage on publicizing your policies for more examples of how facilities communicate their policies to patients):

Posted on facility website

We encourage hospitals to post their visitation rights in multiple places on their websites such as contained within the patient bill of rights that is posted and on the visitation page along with other information about visiting (hours, directions, etc.)

- **Tulane Medical Center** has a comprehensive visitation policy outlined in their online patient bill of rights, which they also link to on their general visitation page.

- **University of Kentucky Albert B. Chandler Hospital** lists the patient’s visitation rights on their general information/visitation page.

In materials given to patients at admitting/registration

- **Holtz Children’s Hospital and JMH Women’s Services** gives its visitation policy to patients at admission.

- **Howard University Hospital** disseminates its Patient Bill of Rights to patients prior to hospital admission.

In materials given to patients at other time(s)

- **USC Verdugo Hills Hospital**’s Patient Rights Booklet provides patients with quick and easy access to their visitation rights.

In materials available for take-away in patient waiting areas

- **Christiana Care Health System’s Wilmington Hospital** includes their Visitation Policy in patient waiting areas.

- Check out **St. Louis Children’s Hospital’s** Patient Rights and Responsibilities brochure which has their inclusive visitation policy and is made available for all in patient waiting areas.

Posted in patient waiting area(s)

- **Park Nicollet Methodist Hospital** posts their Patient Rights and Responsibilities in their patient waiting areas to display their Patient and Equal Visitation policies.
Publicizing Your Equal Visitation Policy to Employees

The HEI also requires facilities to share their LGBTQ-inclusive equal visitation policy with its employees in one of the following ways:

**Posted on facility intranet site**

- Jackson Health System gives an example of its Visitation policy posted on its intranet.

  Note that while having the policy posted on the intranet will allow a facility to meet this criterion, we strongly encourage facilities to promote these policies to their employees in a more proactive way such as through training.

**Posted in employee work area(s)**

- Steps to Recovery uses a display case in an employee area to showcase its Patient Non-Discrimination and Equal Visitation policies to employees.

**In materials routinely given to employees at orientation**

- Many facilities indicated that they give new employees copies of the actual visitation policy at orientation.

**Reviewed in in-person employee training**

- In their employee training, Steps to Recovery reviews their facility’s equal visitation policy in a PowerPoint slide.

**Reviewed in online employee training**

- F.F. Thompson Hospital requires employees to review their key non-discrimination policies using this online training module.

- Similarly, a southern California hospital uses this online training module to review patient’s rights policies with employees.
Non-Discrimination and Staff Training: Employment Non-Discrimination

Why an LGBTQ inclusive employment non-discrimination policy?

A healthcare organization’s LGBTQ employees play a vital role in ensuring LGBTQ patient-centered care by informally educating their co-workers about patient concerns, offering feedback about organizational policies and practices, and conveying the organization’s commitment to LGBTQ equity and inclusion to the local community. An employment non-discrimination policy that explicitly bans discrimination on the basis of sexual orientation and gender identity ensures equal treatment for LGBTQ employees and also sends a welcoming message to LGBTQ job applicants, helping the organization retain and recruit a diverse, talented staff.

Including the terms “sexual orientation” and “gender identity or expression” in an employment non-discrimination policy underscores an employer’s dedication to workplace equity. It is becoming commonplace for employers’ non-discrimination statements to include the terms “sexual orientation” and “gender identity or expression.” For example, a majority of the country’s Fortune 500 employers have explicit, LGBTQ-inclusive non-discrimination policies. In some cases, inclusion of these terms reflects state law, indicating that the organization is aware of and committed to legal requirements of non-discrimination. In areas without a state law prohibiting LGBTQ discrimination, adding “sexual orientation” and “gender identity” to a non-discrimination policy affirms an employer’s commitment to workplace equity and inclusion. Explicit statements that healthcare organizations are committed to LGBTQ non-discrimination can create a positive workplace environment and are deeply appreciated by LGBTQ members of the community.

For more information about how the LGBTQ workplace environment can affect the retention and productivity of all employees, healthcare organizations are encouraged to read HRC’s Degrees of Equality report. In addition, healthcare organizations with 500+ employees are also invited to participate in HRC’s Corporate Equality Index, an excellent resource which offers a wealth of suggestions for workplace equality.

The Joint Commission Recommendations

The Joint Commission’s LGBT Field Guide explicitly notes that a hospital can only provide welcoming and competent care through a workforce that is prepared to do so. The first step in delivering LGBTQ patient-centered care is to take steps to provide equitable treatment and inclusion for its LGBTQ employees by having an employee non-discrimination policy that includes both “sexual orientation” and “gender identity or expression.” The Joint Commission also notes the importance of reviewing other employment policies and benefits to ensure that LGBTQ staff members are treated equitably. The Employee Benefits and Policies section of the HEI offers a great way to review employment policies and benefits.
In the HEI

The HEI asks that healthcare organizations implement and document an employment non-discrimination policy that explicitly protects LGBTQ people by including both the terms “sexual orientation” and “gender identity or expression.”

To receive credit, an organization must document that both terms are included in the facility’s employment non-discrimination policy.

To receive credit, the HEI also requires that this policy be communicated to prospective and current employees in at least one of the following ways:

- Posted on employment page of website
- Posted on job announcements
- Posted on job applications/job application system
- Posted in employment brochure

Sample Policies

The following excerpts from healthcare organizations' employment non-discrimination policies meet the HEI Employment Non-Discrimination criterion of including the terms “sexual orientation” and “gender identity and expression.” See more examples and template language online here.

Cedars-Sinai (Los Angeles, CA)

This LGBTQ-inclusive employment non-discrimination policy clearly includes the terms “sexual orientation,” “gender identity” and “gender expression,” along with ensuring that the policy applies to all aspects of employment.

Cedars-Sinai does not unlawfully discriminate on the basis of race, religion, color, national origin, citizenship, ancestry, physical or mental disability, legally protected medical condition (cancer related or genetic characteristics or any genetic information), marital status, sex, sexual orientation, gender identity, gender expression, pregnancy, age (40 or older), military and/or veteran status or any other basis protected by federal or state law. All personnel decisions are to be administered in accordance with this policy and in compliance with applicable federal and state law, including, but not limited to, decisions regarding recruitment, selection, training, promotion, compensation, benefits, transfers, lay-offs, tuition assistance, and social and recreational programs.

UAB Medicine (Birmingham, AL)

UAB’s non-discrimination statement includes their commitment to diversity and culture in addition to being LGBTQ inclusive.

UAB Medicine is an Equal Opportunity/Affirmative Action Employer committed to fostering a diverse, equitable and family-friendly environment in which all faculty and staff can excel and achieve work/life balance irrespective of race, national origin, age, genetic or family medical history, gender, faith, gender identity, and expression as well as sexual orientation.
Palms of Pasadena Hospital (St. Petersburg, FL)

This LGBTQ inclusive employment non-discrimination policy clearly includes “sexual orientation” and “gender identity,” and enumerates its applicable aspects of employment.

*Equal employment opportunities are provided to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability, sexual orientation, gender identity, genetic information or status as a Vietnam-era or special disabled veteran in accordance with applicable federal laws. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, transfer, leaves of absence, compensation, and training.*

Publicizing Your Employment Non-Discrimination Policy

The HEI requires survey participants to document not only that they have an LGBTQ-inclusive Employment Non-Discrimination policy, but also that they make this policy readily accessible to the public and job applicants.

To receive credit a facility must clearly post a non-discrimination statement that includes protections for both sexual orientation and gender identity or expression. Statements such as “XYZ Hospital is an Equal Opportunity Employer” do not count for credit because federal equal opportunity employment laws do not include sexual orientation and gender identity or expression.

The following are examples of how participants communicate their employment LGBTQ inclusive non-discrimination policy.

On their employment or career webpage

- **Christiana Care Health System** not only posts their employment non-discrimination statement on their Careers website but also provides a link to the official Employment policy (in PDF). In the third paragraph, you’ll see a link where you can download the full Employment Non-Discrimination policy.

- **University Hospitals of Cleveland** also follows the practice of posting their Employment Non-Discrimination statement online.

On job descriptions, job postings, job applications or on the job application system site

- **Memorial Sloan Kettering Cancer Center** posts its employment non-discrimination statement below each job posting. At the bottom of each job description you’ll see the LGBTQ-inclusive non-discrimination statement—alerting potential job applicants of their inclusive workforce.

- **Texas Children’s Hospital** has a clear statement on their online job application form.

- **OneWorld Community Health Center** has a clear statement at the end of each job description.
Non-Discrimination and Staff Training: Training in LGBTQ Patient-Centered Care

Why have training in LGBTQ patient-centered care?

As all healthcare organizations know, employee training is critical for policies to be lived out fully and consistently. Organizations have found training particularly important for ensuring LGBTQ patient-centered care. Training employees in LGBTQ concerns not only ensures that LGBTQ patients receive equitable and culturally competent care – it also helps to improve the general hospital climate towards all LGBTQ people, specifically LGBTQ employees.

The Joint Commission Recommendations

The Joint Commission’s LGBTQ Field Guide explicitly notes that a hospital can only provide welcoming and competent care through a workforce that is prepared to do so. The Field Guide urges healthcare facilities to provide its employees with training in LGBTQ patient-centered care, stating that “hospitals should offer employees high-quality training that equips them with the tools to provide equitable, knowledgeable, and welcoming care for LGBT patients and their families.” The Field Guide further provides a list of suggested LGBT topics to cover in trainings, varying methods to train employees, and other key recommendations in training employees in LGBT patient-centered care.

In the HEI

The HEI asks that healthcare organizations provide expert training in LGBTQ patient-centered care to key facility employees. To assist facilities in meeting this HEI criterion and to ensure high-quality training, the HEI offers easily accessible, online trainings, which also provide CME/CEU credit to all HEI participants, free of charge. Participants can choose from over 60 different training options that include topics ranging from the basics of LGBTQ Patient-Centered Care to more specialized topics for clinicians. Over the past three years, over 80,000 hours of LGBTQ related training has been provided as part of the HEI.

To receive credit, a facility must meet either the Executive Briefing Training Requirement, which is typically met during the first year of HEI participation, or the On-Going LGBTQ Education Requirement, if the Executive Briefing Training Requirement has already been met. A facility can learn which training requirement it needs to meet by logging into the HEI survey and reviewing the training section.

For facilities that need to meet the HEI Executive Briefing Training Requirement

For a healthcare organization to meet the HEI 2018 Executive Briefing Training Requirement, at least one senior manager in each of the following work areas must complete the online, three-part training series entitled “LGBTQ Patient-Centered Care: An Executive Briefing” by September 30, 2017.

- Organization leadership (e.g., CEO, COO, medical director, vice president, counsel, or similar “C-suite” leader)
- Nursing management
- Patient relations/services management
- Admitting/registration management
- Human resources management
The senior managers that attend this training must be the highest ranking staff member from each of these work areas for the specific facility. Senior managers are typically at the level of Director or higher.

“LGBTQ Patient-Centered Care: An Executive Briefing” is an engaging and interactive self-paced learning series consisting of 3 half hour sessions. Find more information about this training requirement here.

No outside training can be substituted for the Executive Briefing Training.

For facilities that need to meet the On-Going LGBTQ Education Requirement

Facilities that have previously met the HEI Training Requirement must have members of their staff participate in on-going expert training in LGBTQ Patient-Centered care. To meet this training requirement, a facility’s staff must complete a minimum of 25 hours of LGBTQ patient-centered training approved for HEI credit. NOTE:

- Ideally, at least 25 different staff members will participate in a training of an hour or longer. However, we use the 25 hour figure rather than 25 people to allow for some flexibility since the length of trainings may vary and to account for the fact that some people will want to take more than one training.

- We encourage staff members that are new to the topic to take one of the following general introductory trainings on LGBTQ patient centered care:

  **HRC Foundation Trainings on The CAL**
  - An Introduction to Your LGBTQ Patients
  - Expanding LGBTQ Cultural Competency
  - LGBTQ Patient-Centered Care: An Executive Briefing

  **The National LGBT Health Education Center:**
  - Meeting the Health Care Needs of Lesbian, Gay, Bisexual, and Transgender People: The End to LGBT Invisibility
  - Creating an Inclusive Environment for LGBT Patients and Staff at your Health Center
  - Calidad de cuidado para lesbianas, gays, bisexuales, transgéneros y transexuales: Eliminando la invisibilidad y las disparidades en salud

  **VA eHealth University (VeHU):**
  - Do Ask, Do Tell: A Practical, Patient-Centered Approach to Working with Lesbian, Gay and Bisexual Veterans*

For more information on the Ongoing Training requirement, click here

* Although these trainings are longer than one hour, they will only count for one hour towards meeting these guidelines.

External facility-led introductory trainings on LGBTQ patient centered care that have been pre-approved for HEI credit can also be used to meet this requirement. **Trainings that are not pre-approved will not count towards this requirement.** Learn more about the Requirements and Guidelines for HEI Approval of External Trainings in LGBTQ Patient Centered Care here.

We will also consider giving credit for other LGBTQ courses that offer CME credit (such as at conferences, other webinars, etc.). Please use this online form to submit CME certificates to request HEI credit.
Promotion of LGBTQ Patient-Centered training to organization staff

In addition to the training requirement listed above, to receive credit, facilities must promote the free trainings available for HEI credit. Promoting the availability of training options increases the ease with which facilities can meet the LGBTQ patient-centered training requirement and also increases the cultural competency and visibility of the LGBTQ-inclusion at your facility.

The HEI asks organizations to promote the availability of the free HEI training opportunities to all of their patient care services staff in at least one of the following ways:

Email blast

- Robert Wood Johnson University Hospital sent out this e-blast about the training opportunities.
- Senior officials at Cone Health reached out to their staff to encourage training completion.

Information placed on facility intranet

- Kaleida Health promotes the trainings on their intranet.
- Ochsner Health System’s intranet post training promotion emphasizes the HEI’s free CME offerings.

Included in training updates/newsletter

- Kaleida Health’s September issue of their monthly newsletter highlighted the free LGBTQ training options available to its employees.
- Rex Healthcare’s email highlights the training in their monthly newsletter.

Flyers or electronic displays in places where employees will see them

- California Pacific Medical Center created a wonderful flyer to boost training participation.
- Steps to Recovery posted their training promotion flyer on bulletin boards in staff areas.

Sample text and pre-designed posters to promote the free trainings are available through a link in the HEI survey.

Although the HEI only requires one form of communication about these training opportunities, we have found that the organizations that have the most success in easily meeting their training requirement are the ones that communicate these opportunities in multiple different ways and multiple times.
Patient Services & Support: LGBTQ Patient Services

The criteria on LGBTQ Patient Services and Support is designed to familiarize your organization with the best practices from The Joint Commission and other sources to enhance care to LGBTQ patients. Reviewing the services and support offered by other organizations and recommended by experts, your organization can identify and address gaps in your policies and practices.

Planning to Serve LGBTQ Populations

In 2013, the Office of Minority Health (OMH) of the US Department of Health and Human Services released the new National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (the National CLAS Standards), which are intended to advance health equity, improve quality and help eliminate health care disparities by providing a blueprint for individuals and health and healthcare organizations to implement culturally and linguistically appropriate services. The CLAS Standards are a nationally recognized and utilized tool for culturally competent healthcare.

The new CLAS standards fully incorporate the concerns of LGBTQ people into the framework of culturally and linguistically appropriate care and specifically include sexual orientation and gender identity in their broader definition of culture. OMH’s accompanying publication, “A Blueprint for Advancing and Sustaining CLAS Policy and Practice,” also shares examples of health disparities experienced by LGBTQ people and includes specific reference to LGBTQ health in many of the standards. One of the standards encourages healthcare organizations to conduct ongoing assessments of the organization’s CLAS-related activities and integrate CLAS-related measures into continuous quality improvement activities.

Question: Does your organization have an official plan, strategy or goals for reducing health disparities among your patients and/or providing culturally and linguistically appropriate services to your patient population?

a. If YES to above, does this plan or strategy specifically include LGBTQ patients in addition to race, ethnicity and linguistic concerns?

To receive credit a healthcare facility must provide a copy of a plan or other document that, at a minimum, lists the strategies that will be employed to improve LGBTQ health and/or that recognizes sexual and gender minorities as a population that experiences health disparities with a commitment to address those disparities.

- **Montefiore Medical Center’s** strategic plan to address LGBTQ health disparities includes cultural competency training, research, community outreach, and more.

- **Ochsner Health System’s** strategic priorities prioritize LGBTQ health needs through specific objectives about LGBTQ patient-centered care.

- With three specific goals, **Saint Luke’s Health System’s** plan to reduce LGBTQ health disparities also includes increased LGBTQ representation in governance and leadership.

- The **University of Pennsylvania Health System** has an excellent LGBT-specific strategic plan.
• Read NYC Health + Hospitals’ Plan to Enhance Equitable Care which integrates sexual orientation and gender identity throughout the plan.

• In 2012, UC Davis began its initiative to reduce health disparities for the LGBTQ population. Working throughout the health system, UC Davis was one of the first health systems to tackle LGBTQ health disparities and provide services to promote equitable care. See more information on their strategies here.

• H. Lee Moffitt Cancer Center and Research Institute has integrated LGBTQ inclusion into their Framework for Improving Effective Communication, Cultural Competence, and Patient-Centered Care across the Care Continuum.

Question: Does your organization have an advisory or planning committee that is focused on LGBTQ patient care issues?

• Read this article, Equality in Healthcare: The Formation and Ongoing Legacy of an LGBT Advisory Council which was originally published in the journal LGBT Health.

• New York City Health and Hospitals - Bellevue created a LGBT Patient & Family Advisory Council. See their brochure to read about the council’s mission and activities.

• Learn more about the Patient and Family Advisory Council for Gender and Sexuality at Brigham and Women’s Hospital in this post and video.

Serving LGBTQ Populations

Question: Does your organization have a public way to make LGBTQ-knowledgeable and -friendly providers or facilities known as such to interested patients or to make LGBTQ specific referrals?

To receive credit a facility must have a way for LGBTQ patients to identify LGBTQ-knowledgeable and –friendly providers or healthcare facilities. Directories may be a facility, health system or community specific listing. Clinics need to be listed on the hospital or health system website and the contact and process for receiving confidential referrals must be publicly promoted.

Organizations can create their own online referral system or directory to tag LGBTQ-friendly providers at their facility or within their system or community.

• Penn Medicine has an LGBT Patient Services Handbook, which has a list of providers with expertise in LGBT health and information on important LGBT health topics.

• Massachusetts General Hospital has an online listing of providers that volunteered to be listed in a directory due to their interest in treating and/or training with the LGBTQ patient population.

• The Columbus Public Health Department participates in the Greater Columbus LGBTQ Health Coalition that produces an annual Pride Provider Directory.

• The LGBT+ Service Directory flyer by NYC Health and Hospitals - Bellevue lists LGBTQ-specific health providers in one comprehensive document.

Organizations can also provide information about their LGBTQ specialty clinics.
• The Cleveland Clinic has information about their Center for Lesbian, Gay, Bisexual and Transgender (LGBT) Care which offers services at two different primary care health centers on a page about LGBT Health.

• This webpage provides information about the services offered by The Pride Clinic of the MetroHealth System.

Question: Does your organization offer any of the following specific services to meet the needs of LGBTQ patients? Check all that apply:

  • HIV/STD/STI testing and counseling
  • Provision of PrEP and/or PEP for patients at risk for HIV
  • HIV care and services
  • LGBTQ-focused mental health services
  • LGBTQ-focused alcohol and substance use treatment
  • LGBTQ family building assisted reproductive treatment

By “LGBTQ-Focused,” we mean programs that are specifically directed to and tailored for the LGBTQ population – NOT just inclusion of LGBTQ people in existing programs.

• Penn Medicine provides LGBT Family Building Fertility Services.

• The Tennessee Valley Healthcare System as well as many other Veterans Health Administration facilities provides LGBTQ specific mental health programming.

• The University of Rochester’s Strong Memorial Hospital created the AIDS Center to provide multidisciplinary care to persons with HIV and their families.

• Chicago Lakeshore Hospital’s Valeo Pride Program provide a safe, judgment free program designed to treat LGBTQ patients suffering from depression, anxiety, suicidal thoughts, alcohol and/or drug abuse, and other harmful behaviors.

Question: Has your organization reviewed any of its clinical services to identify possible LGBTQ-related gaps?

To receive credit, a facility must describe the assessment process and the outcomes of the assessment.

Example gaps to review might include:

  • Have clinicians in certain departments received more or less training in LGBTQ cultural competency and/or health disparities? What departments might be in need of further training?
  • Are LGBTQ patients aware of any LGBTQ-specific services available at your facility?
  • Are clinicians in relevant departments knowledgeable about pre- and post-exposure prophylaxis (PrEP and PEP) for HIV?
  • Is there a need for LGBTQ-focused providers in specific departments at your facility?
  • Are there gaps in pediatric services to LGBTQ patients, specifically transgender and gender non-conforming youth?
  • Are clinicians in relevant departments knowledgeable about anal PAPs for MSM patients?
Question: Does your organization have an externally promoted LGBTQ-focused office, point-person, patient advocate or ombudsman?

To receive credit this must be an externally-facing and publically promoted LGBTQ specific office, point-person, patient advocate or ombudsman. Simply having a patient advocate that has been trained in LGBTQ issues or having a diversity council that includes LGBTQ issues does not count.

- **Mount Sinai Beth Israel** has an office of LGBT Health Services. Visit their website to learn more about the services they offer LGBTQ patients.

- **Rush Medicine** has two licensed clinical social workers available to help LGBTQ patients, visitors, employees and students navigate resources within Rush and the broader community which are promoted on this webpage about their commitment to LGBTQ healthcare.

- **VA Palo Alto Healthcare System** has a special LGBT program for staff, veterans and allies.

- All of the Veterans Health Administration facilities have identified LGBT Veteran Care Coordinators that are typically promoted on facility webpage about LGBT care such as this one from the Edward Hines, Jr. VA Hospital.

Communications

Question: Does your organization provide information about LGBTQ services and/or health concerns on its public website?

To receive credit there must be a specific landing page focused on LGBTQ health issues.

- **Mount Sinai Beth Israel** has a special LGBT Health Services website detailing the LGBTQ specific services they offer to patients.

- **VA Palo Alto Health Care System** has a webpage welcoming LGBT veterans, providing veteran specific LGBTQ resources, resources for staff, and a section on their HEI Leader status.

- **Jackson Health System** has an LGBT page that affirms their commitment to the LGBTQ community, highlights specific services, and offers various resources.

- The LGBT Health Program at **Penn Medicine** has an extensive website with a variety of information about the LGBTQ specific work they do, as well as resources available to patients.

Question: Does your organization publish a brochure or other print material(s) designed to educate or support LGBTQ patients?

To receive credit these materials must be specifically developed by the healthcare facility (or system) to reach out to LGBTQ patients.

- **Vanderbilt Hospital and Clinics** has a brochure on their LGBTQ Health Program and the services offered.

- **City of Hope National Medical Center’s** Diversity Resource group created materials to inform the LGBTQ community about cancer prevention tips.
• **Chase Brexton Health Care** has a brochure outlining the transgender specific health services available at their clinics.

• **Contra Costa Regional Medical Center** has a Pride Initiative to provide safe, inclusive, and accessible care for LGBTQ patients. This brochure offers a description of the initiative, as well as meeting times, accomplishments, and further community resources.

• **The Family Tree Clinic** has a flyer designed to reach out specifically to transgender patients, reminding everyone who has a cervix to get a Pap test. The flyer not only serves as an educational tool, but also explicitly welcomes transgender patients.

• **Oregon Health & Science University** has a brochure to welcome both LGBT patients and employees. The brochure provides LGBT specific health information and services, employment opportunities for LGBT job seekers, and advertises OHSU’s status as a Leader in LGBT Healthcare Equality.

• **Cincinnati Children’s** brochure detailing LGBTQ resources for both patients and providers includes a list of LGBTQ inclusive questions providers can ask their patients.

• **VA Atlanta Medical Center** provides LGBT veterans with a welcoming brochure including LGBT specific services, as well as information for LGBT employees.

**Question:** Does your organization regularly make LGBTQ health material(s) published by other organizations available to patients?

Below are some free example materials available to download that you can distribute at your organization.

• **GLMA: Health Professionals Advancing LGBT Equality** provides four different pamphlets listing the “Top Ten Issues to Discuss with Your Healthcare Provider” for lesbians, gay men, bisexuals, and transgender persons. All four pamphlets are available to download as PDFs.

• **The American Cancer Society** has three LGBT specific brochures available for download as PDFs:
  - [American Cancer Society: Tobacco & the GLBT Community](#)
  - [American Cancer Society: Cancer Facts for Gay & Bisexual Men](#), also available in Spanish
  - [American Cancer Society: Cancer Facts for Lesbians & Bisexual Women](#), also available in Spanish

• **The National LGBT Health Education Center** at The Fenway Institute has a variety of patient handouts, available to download here in both Spanish and English.

• Download HRC’s and Greater than AIDS HIV/AIDS Resource Guide.
Patient Services & Support: Transgender Patient Services

This section is designed to familiarize your organization with best practices, from The Joint Commission and other sources, to enhance care for transgender patients, who can face an exceptional degree of discomfort and bias. A large survey by Lambda Legal revealed that 70% of transgender respondents had experienced serious discrimination in healthcare. In a 2011 survey of over 6,000 transgender Americans, 19% of the respondents reported being refused healthcare due to their transgender or gender-nonconforming status, with an additional 28% having postponed necessary healthcare when sick or injured, and 33% having delayed or not sought preventative care because of experiences of healthcare discrimination based on their transgender status. Reviewing the services and support offered by other organizations and recommended by experts, your organization can identify and address gaps in your policies and practices.

A process that you may find helpful to advance transgender healthcare is to undertake an organizational assessment to help determine what best practices to apply to your healthcare setting. CARDEA has developed a resource guide and toolkit on Advancing Health Equity through Gender Affirming Health Systems that provides guidance on this process.

Below are the questions listed in this section, along with corresponding resources and examples, to guide you through understanding and implementing these best practices in transgender patient services and support. For more information about transgender health services, visit our page on Transgender Patient Services & Support: Resources for Providers and Hospital Administrators.

Serving Transgender Patients

Question: Does your organization have a policy or policies that specifically outline procedures and practices aimed at eliminating bias and insensitivity, and ensuring appropriate, welcoming interactions with transgender patients? If YES, what procedures and practices are covered under this policy(ies)? Check all that apply:

- Recording of preferred name and pronouns in paper and/or electronic admitting/registration records
- Use of preferred name and pronouns when interacting with and referring to transgender patients
- Protocols for interacting with transgender patients
- Guidelines for room assignments for transgender patients
- Access to restrooms
- Compliance with privacy laws
- Access to items that assist gender presentation
- Access to continued hormone therapy
- Addressing potential problems with insurance/billing claims

To receive credit, there must be an official written official policy (or policies) that cover at least three of the topics above. This is a different policy than your patient non-discrimination policy.

The creation of policies and procedures aimed at eliminating bias and insensitivity, and ensuring appropriate, welcoming interactions with transgender patients and training staff on these policies is particularly important in light of Section 1557 of the Affordable Care Act. Section 1557 prohibits sex discrimination in any hospital or health program that receives federal funds, and courts and the U.S. Department of Health & Human Services, Office of Civil Rights (OCR), has made it clear that this prohibition extends to claims of discrimination based on gender identity and sex stereotyping.
In 2015, OCR and The Brooklyn Hospital Center (TBHC) entered into a voluntary resolution agreement to ensure that transgender TBHC patients receive appropriate and equitable care and treatment. The voluntary resolution agreement resolved a complaint filed by a transgender individual alleging discrimination under Section 1557 on the basis of sex in the assignment of patient rooms. Under the terms of the two-year settlement, TBHC agreed to adopt, and train employees on, new policies and procedures tailored to transgender patients.

- For more information about best practices for care of transgender patients and sample policies, see the publication *Creating Equal Access to Quality Health Care for Transgender Patients: Transgender-Affirming Hospital Policies*, from HRC Foundation, Lambda Legal, and the LGBT Rights Committee of the New York City Bar Association.

- This policy on *Creating Equal Access To and Providing Quality Health Care for Transgender Patients* from a hospital in a California healthcare system is a good example of a comprehensive policy that covers several important areas when it comes to providing respectful care to transgender patients.

- UC Davis Medical Center’s *Access Guidelines for Quality Care for Transgender Patients* serves as guidance for staff interacting with transgender individuals. Not only does the policy provide definitions for staff but also provides instructions on use of preferred pronouns, room assignments, and access to restrooms.

- Brigham and Women’s Hospital provides *Guidelines for Providing High Quality Patient-Centered Care for transgender patients*. The policy provides basic definitions and a list of Do’s and Don’ts to ensure equitable treatment.

- Mount Sinai Hospital (NY) maintains a *Bed Assignment Policy for Transgender Patients* so every patient can have a safe and appropriate room assignment.

**Question: Does your organization offer any of the following specific services to meet the needs of transgender patients? Check all that apply:**

- Comprehensive, multidisciplinary clinical care program for transgender adults
- Comprehensive, multidisciplinary clinical care program for transgender and gender expansive youth
- Trans-affirming gynecological care, including cervical cancer screening and pelvic exams
- Hormone therapy and monitoring
- Psychological, physical, and psychiatric evaluations
- Gender confirming surgeries
- Referrals for gender confirming surgeries
- Preoperative and postoperative care for gender confirming surgeries

- Cincinnati Children’s Hospital Medical Center has created the Transgender Health Clinic for transgender and gender expansive patients 5-24 years of age. Opened in 2013, The Clinic provides advanced medical care including mental health services as well as family support and referrals for legal services.

- Family Tree Clinic in Minnesota provides clinical care to transgender adults.

- The University of Miami Hospital has a webpage that describes the types of gender affirmation surgeries that are performed there.
• Oregon Health and Science University (OHSU) has a Transgender Health Program that provides “comprehensive, affirming health care,” including medical, surgical, and counseling services for transgender and gender non-conforming people.

• In Ann & Robert H. Lurie Children’s Hospital of Chicago’s Gender and Sex Development program, specialists work across disciplines to provide comprehensive care and services to gender expansive, gender non-conforming and transgender youth.

• The University of Maryland can initiate, manage, or help with hormone therapy for both undergraduate and graduate students at its UMD Health Center.

• You can use the HRC Foundation’s searchable Google Map to find other facilities that provide comprehensive clinical care programs for transgender and gender-expansive youth, many of which are located at HEI Leader facilities.

Question: Does your organization have a specific program or position to provide patient navigation/advocacy services to transgender patients?

To receive credit this may be a volunteer peer navigation program or a dedicated employee(s) position, whose primary role is to serve as an advocate/navigator for transgender patients.

• Fenway Health has a Transgender Patient Advocate available for individual appointments to help people find information, learn about resources, and figure out next steps for getting into care. See the Fenway Health Program for a complete description.

• Vanderbilt University Medical Center has the TransBuddy Program that launched in early 2015. The goal of the program “is to increase access to care and improve healthcare outcomes for transgender people by providing emotional support to transgender patients during healthcare visits. We emphasize a patient-centered approach, with the goal of empowering the patient to make informed healthcare decisions. Trans Buddy recognizes the importance of intersectionality to our direct care practice, and therefore aim to work with people of all identities with compassion and respect.”

• UCSF has a Transgender Care Navigation Program that works with partner providers and clinics to assist transgender, gender nonconforming, and nonbinary people seeking general healthcare or gender affirming medical care at UCSF. Check out the job description for their transgender patient navigator position.

• Penn Medicine’s Transgender Patient Advocate Program “assists patients in finding appropriate providers, making appointments and ensuring optimal care for transgender patients at their facilities.”

Question: Has your organization re-signed one or more single-stall bathrooms previously signed as only for men or only for women as unisex bathrooms, to assist transgender patients, patients accompanied by a different-sex child or attendant, and others?

As The Joint Commission’s LGBT Field Guide notes: “Patients whose appearance might not conform to gender stereotypes may feel more comfortable and safe in a single-stall or unisex restroom. Design or clearly identify at least one such restroom. These single-stall or family restrooms can also serve parents caring for opposite-sex
children, disabled people accompanied by opposite-sex caregivers, and any other patients wishing to use them. Although making a unisex restroom available is an important signal of acceptance, patients should be permitted to use restrooms that comport with their gender identity and should not be required to use the unisex restroom.”

Read the publication “Creating Inclusive Spaces: Gender-Neutral Bathrooms” by Western States Center for more information about why gender-neutral bathrooms are important for the transgender community, and to see signs you can use to transform existing gender-specific bathrooms to gender-neutral ones.

- The All Gender restroom at Florida Medical Center - A Campus of North Shore promotes inclusivity for all patients.
- NYC Health and Hospitals uses three languages to indicate their unisex bathrooms.
- The University of Toledo Medical Center includes the transgender symbol on their gender neutral restroom sign.
- VA Captain James A. Lovell Federal Health Care Center offers resources on Transgender Health Care at their FHCC, which includes directions to their Family/Unisex bathrooms.

**Note** - While gender neutral single stall bathrooms are important to offer, we also strongly recommend a policy that ensures that patients and visitors may use the bathroom that corresponds to their gender identity.
Patient Services & Support: Patient Self-Identification

This section is designed to familiarize your organization with best practices, from The Joint Commission and other sources, for providing patients the opportunity to be identified as LGBTQ in health records, if they so wish. The questions ask whether your organization provides four types of explicit LGBTQ self-identification options, along with related employee training. Adding LGBTQ self-identification options to your EHR system is a significant step your facility can take to help end LGBTQ health disparities with LGBTQ self-identification options in your electronic health records. In 2016, only 10% of HEI participants had health records with the option to explicitly indicate patients’ sexual orientation, a number that increased to 14% for patients to indicate if their current gender identity differs from the sex shown on their birth certificate or other options. We hope the resources provided here will help the remaining majority of participants to start integrating LGBTQ self-identification options in your electronic health records.

Below are the questions listed in this section, along with corresponding resources and examples to guide you through understanding and implementing these best practices in patient self-identification. For more information on LGBTQ Patient Self-Identification, read chapter four in The Joint Commission’s LGBT Field Guide: “Data Collection and Use.”

Collecting Information about Sexual Orientation and Gender Identity

**Question:** Has your organization adopted and implemented an Electronic Health Record (EHR) system? What is the vendor for the primary EHR system used by your organization?

These questions are not scored, however, they will help us better understand the EHR capacity of participating organizations as it relates to the following questions about patient self-identification.

**Question:** Do your organization’s (electronic) health records offer explicit options for patients to indicate that their current gender identity differs from the gender they were assigned at birth and/or the gender shown on any identification, insurance, or other documents used in admitting/registration?

*To receive credit* your facility must offer an explicit way for capturing this information (i.e. fields in which this data is collected, not just free form notes).

Documentation of both current gender identity and sex assigned at birth is critical for delivering appropriate care to transgender patients. Some transgender people may not identify as transgender, but only as male or female. In these cases, sex assigned at birth can indicate that the individual is transgender, which allows providers to offer the full range of care such as anatomically appropriate preventive screenings that meets the individual’s needs. Therefore, the current recommended best practice involves asking both sex assigned at birth and current gender identity. Current gender identity, name, and pronouns should be documented and used for communication with the patient, as well as things like name bands and room assignments.

- The Fenway Institute and Center for American Progress have an online guide on collecting LGBT status in electronic health records called, “Do Ask, Do Tell.” This toolkit provides valuable information on why updating your Electronic Health Records is important to providing inclusive care, while also offering resources on how to make these changes at your facility.
• Read more about how **UC Davis Health System** added **sexual orientation and gender** as EHR elements as well as the [original journal article](#) published by UC Davis. You can also learn more about their efforts by watching this [short video](#).

• Transgender patients should be provided explicit options to indicate that their current gender identity differs from the gender assigned to them at birth and/or the gender shown on any identification, insurance or other documents used in admitting/registration. This information should ideally be flagged in the electronic record to alert staff of the patient’s preferred name and pronouns. Read [Electronic Medical Records and the Transgender Patient](#) (Deutsch et al., 2013) from the [World Professional Association of Transgender Health (WPATH)](#) to learn about their recommendations and supporting rational for developers, vendors, and users of EHR systems with respect to transgender patients.

• Read the [The Fenway Institute](#) guide “**How to Gather Data on Sexual Orientation and Gender Identity in Clinical Settings**,” detailing best practices on asking patients about their LGBT status.

• Read the summary of the [Institute of Medicine’s](#) workshop *Collecting Sexual Orientation and Gender Identity Data in Electronic Health Records*, specifically the section entitled “Developing and Implementing Questions for collecting Data on Sexual Orientation and Gender Identity.” View an LGBT inclusive [sample new patient intake form](#) from the [Fenway Guide to LGBT Health](#).

**a. Does your (electronic) health record use a two-question process to collect data on gender identity (ie. first asking current gender identity and then asking sex assigned at birth)?**

• Visit [Fenway](#) and CAP’s “Do Ask, Do Tell” [webpage on the two-question process](#) for an example of implementation. You can also see their recommendation for additional data collection points, such as patient pronouns.

• [Contra Costa Behavioral Health's](#) updated their electronic health system to now record sex assigned at birth and gender identity.

• [John Muir Medical Center, Walnut Creek](#) personalized their EHR system’s [demographics section](#) to record gender identity, preferred name and proper pronouns.

• [Boston Children’s Hospital](#) deftly engages parents and their children, who are the primary patients, to answer [a few questions](#) to record their gender identity.

• See how [Legacy Health](#) asks patients their current gender identity, sex assigned at birth and pronouns and how this is recorded in their EPIC based EHR.

• See a screenshot from [Strong Memorial Hospital](#) of the University of Rochester’s EPIC based EHR which collects gender identity, sex assigned at birth, pronouns and a simple organ inventory.

**b. Does your organization provide employees with training on how to collect and record gender identity data?**

To receive credit the training must specifically address how to ask these questions in a respectful manner and how to record them within the hospital’s EHR. General LGBTQ trainings do not count.

A critical step in the process of effectively implementing SO/GI data collection in clinical settings is the training of staff on LGBTQ health disparities, and on how to use SO/GI data and manage it in ways that meet the clinical
needs of LGBTQ patients while concurrently protecting confidentiality and privacy. Each facility will also need to train staff on how to collect and record SO/GI data within the facility’s electronic health records.

- The Center for Excellence in Transgender Health has an online learning module on acknowledging Gender and Sex that includes best practice scenarios for asking questions about sex and gender.

- A web-based training entitled Catching Everyone in America’s Safety Net: Collecting Data on Sexual Orientation (SO) and Gender Identity (GI) in Health Care Settings is available on the Medicare Learning Network. You can sign up for a free account to access the training.

**Question:** Does your organization’s (electronic) health records offer a way for indicating a patient’s sexual orientation, if they volunteer this information for inclusion in their records? A. Does your organization provide employees with training on how to collect and record sexual orientation data?

To receive credit your facility must offer an explicit way for capturing this information (i.e. fields in which this data is collected, not just free form notes).

See the resources listed in the earlier question regarding collection of data on gender identity.

- Here is a screenshot of how one facility collects sexual orientation data in their EHR.

- To capture sexual orientation in their EHR system, Ingham Community Health Centers utilizes a pre-filled drop down menu.

- Texas-based Project Vida Health Center uses eClinical Works to record patients’ sexual orientation.

- NewYork-Presbyterian records preferred name, sexual orientation, sex assigned at birth, and current gender identity.

**Question:** Does your organization provide employees with training explicitly reminding them that LGBTQ status is confidential patient information?

Transgender patients especially are often the victims of privacy breaches, where staff or providers might feel the need to “warn” the patient’s roommate about the patient’s transgender status, or invite other staff or providers to come see the patient. These privacy violations are not only unethical and illegal, but add to the high levels of discrimination transgender people already face in accessing healthcare, and discourage these patients from continuing or returning to seek care. For more information, see our page on HIPAA and LGBT Healthcare Equality.

To receive credit this training should be in addition to standard HIPAA training, or be in the form of a special section within HIPAA training that addresses the specific privacy needs of LGBTQ patients.

- Keck Medical Center of USC uses a PowerPoint presentation to inform staff on the importance of confidentiality as it relates to a patient’s LGBT status.

- Montefiore Medical Center emphasizes that the release of protected health information, including LGBTQ identity, is a HIPAA violation.

- At NYC Health and Hospitals – Gouverneur, a member of the LGBTQ community presented on best practice tips, including HIPAA privacy and supportive patient-centered care.
• AtlantiCare Regional Medical Center cites the U.S. Department of Health and Human Services and the National Center for Transgender Equality in their HIPAA Education Refresher training, which reminds staff and employees that LGBT status is confidential information.

• This handout by VA Louis Stokes Cleveland Medical Center encourages privacy protection to ensure the best care for LGBT veterans.

• The Columbus Public Health Department reminds employees that sexual orientation and gender identity fall under protected health information.

Health Records that are Inclusive of All Families

There are many kinds of family structures in our community today and hospital records should have ways to record these relationships. This is a practice that will help provide a welcoming environment for all patients.

Question: Do your organization’s (electronic) health records offer explicit options for patients’ parents beyond “mother” and “father” (e.g., “parent/guardian 1, parent/guardian 2, parent/guardian 3”), to be inclusive of same-sex parents and other diverse families?

To receive credit your facility must offer an explicit way for recording diverse family structures.

This is important not only for same-sex parents, but for the realities of many families, where the traditional options of “mother” and “father” do not welcome a child raised by grandparents, a transgender parent, adoptive or foster parents, or other types of families. If you need information about the child’s legal guardian or birth parents, you can include separate questions for “birth parent” and “legal guardian,” with the option to duplicate answers from the parent/guardian section.

• See our feature on Cincinnati Children’s Hospital Medical Center in the 2014 HEI, recognizing Cincinnati Children’s for making LGBT-inclusive changes to its electronic registration process in EPIC.

• See a screenshot that shows how Howard Brown Health Center captures parent information in their EHR.

Question: Does your organization record patients’ marital or relationship status, offering options such as “single” and “married”?

To receive credit your facility must offer an explicit way for recording a patient’s status with an unmarried partner.

There are many kinds of family structures in our community today and hospital records should have ways to record these relationships. Many facilities recognize unmarried partners with categories such as “life-partner,” “domestic partner” or “significant other.”
Patient Services & Support: Medical Decision-Making

This section of the survey is designed to familiarize your organization with best practices, from The Joint Commission and other sources, related to medical decision-making for LGBTQ patients. By reviewing the practices implemented by other organizations and recommended by experts, your organization can identify and address gaps in your policies and practices. Unfortunately, healthcare organizations have sometimes failed to honor LGBTQ patients’ right to designate the person of their choice, including a same-sex partner, to make medical decisions on their behalf should they become incapacitated, even when legally valid medical decision-making documents have been presented. To prevent these failures, it’s important that employee trainings related to medical decision-making affirm that LGBTQ patients have the same rights in this regard as all other patients. As noted by CMS in 2011, regulations were designed to make it easier for family members, including same-sex partners, to make informed care decisions for incapacitated loved ones.

Below are the questions listed in this section, along with resources and text designed to help you implement these best practices in medical decision-making.

Question: Does your organization explicitly inform patients of their right to designate a person of their choice, including a same-sex partner, as medical decision-maker?

- For more information, review CMS guidance on medical decision making, or the HRC/American Health Lawyers Association publication Revisiting Visitation.

- At NYC Health and Hospitals facilities, an existing statewide mandate on health care proxies is given to patients. The legal document informs patients of their rights to appoint a same-sex partner as their health care proxy.

- Rush Health not only includes their medical decision making information on a handout, but also their gender neutral bathroom policies, transgender health care services and more.

- See an example of how a hospital in the Northwell Health System informs patients of their right to name decision makers.

Question: If your organization provides employees with training related to medical decision making, does the training include LGBTQ-specific information?

Healthcare facilities should provide training modules to staff that are specifically tailored to the special case of advance healthcare directives and same-sex couples. These training modules should make explicit mention of LGBTQ individuals and detail the unique consequences that can result from a failure to recognize the advance healthcare directive of a same-sex couple. The training modules should reiterate the staff’s duty to follow all applicable state and federal advance healthcare directive law, especially in the areas of reciprocity, presumptive validity, and the definition of designated agents.

- Learn more by visiting our Advance Healthcare Directives page.

- The University of Texas Medical Branch Hospitals offers a course that denotes “family” is to be defined by each individual patient, including a same-sex domestic partner/spouse or chosen family and discusses the right to a medical decision maker.
Christian Care Health System utilizes case scenario-based learning to illustrate specific concepts that resonate with caregivers. In the case of medical-decision making for example, they have a scenario that illustrates how under Delaware law, a person can verbally name a power of attorney (POA) for healthcare in absence of a written POA. The scenario involves a same sex couple which not only teaches providers about the legal principle involved but also allows them to think about the fact that “families” come in all varieties.
Employee Benefits and Policies

This criteria is designed to familiarize your organization with best practices, from The Joint Commission and other sources, to promote equity and inclusion for LGBTQ employees. Reviewing the practices implemented by other organizations and recommended by experts, your organization can identify and address gaps in your policies and practices. A healthcare organization’s LGBTQ employees play a vital role in ensuring LGBTQ patient-centered care by informally educating their co-workers about patient concerns, offering feedback about organizational policies and practices, and conveying to the local community your organization’s commitment to equity and inclusion. It is critical that LGBTQ employees, like LGBTQ patients, receive equal treatment, particularly vis-à-vis health-related benefits and policies.

These policies are also informed by the HRC Foundation’s Corporate Equality Index, or CEI. The CEI is the national benchmarking tool on corporate policies and practices pertinent to lesbian, gay, bisexual and transgender employees.

Below are the questions listed in this criteria, along with corresponding resources and examples to guide you through understanding and implementing these best practices in employee benefits and polices.

**Equal Benefits**

Competitive employer-provided benefits’ packages are critical to attracting and retaining talent. From health care coverage to retirement investments and more, ensuring LGBTQ-inclusive benefits to employees and their families is an overall low-cost, high-return proposition for businesses. In addition, equitable benefits structures align with the principle of equal compensation for equal work. Apart from actual wages paid, benefits account, on average, for approximately 30 percent of employees’ overall compensation. Therefore, employers should ensure that this valuable bundle of benefits is equitably extended to their workforce, irrespective of sexual orientation and gender identity. When denied equal benefits coverage, the cost to LGBTQ workers and their families is profound.

In 2015, the United States Supreme Court determined in *Obergefell v. Hodges* that same-sex couples have a Constitutional right to marry nationwide. Any business that provides benefits based on marriage to an employee’s different-sex spouse must now provide marital benefits to an employee’s same-sex spouse.

**Spousal Benefits**

*Question: Does your organization offer healthcare benefits to spouses of benefits-eligible employees?*

a. *If yes, does your health insurance contract have a definition of spouse? If yes, does your contract definition of “spouse” include same sex spouses?*

To receive credit your health insurance contract definition of spouse must include same-sex spouses as well as different-sex spouses. “Legally married spouse” (or variations of this) will also count.

HRC’s annual review of summary plan documents via the Corporate Equality Index reveals gaps updating the definition of “spouse” for the purposes of defining eligible dependents across benefit plans.

Plans submitted in the 2016 survey included references to the “Defense of Marriage Act” (ruled unconstitutional in the *United States v. Windsor* in 2013) as well as language that would define a “spouse” as an opposite-sex
spouse only. Such language is out of step with the current law, post-\textit{Windsor} and post-\textit{Obergefell}, and should be updated to ensure clear access for all legally wed couples, both same and different-sex.

\textbf{b. If Yes, for benefits enrollment and/or audit purposes, does your organization require the same dependent eligibility or proof of relationship documentation for same-sex spouses as for different-sex spouses?}

\textbf{To receive credit} your organization must have the same requirements for same and different sex spouses.

- See Southhampton Hospital's \textit{Large Group Handbook} clearly defines “spouse” as either a same or different-sex partner.

- In the eligibility guidelines of Indiana University Health's \textit{Employee Benefits Plan} it is required that dependents of legal spouses and domestic partners are eligible to receive medical care coverage as long as they submit the same documentation proof as different-sex spouses.

- Rush Health’s \textit{Benefits Guide} includes dependents of same-sex spouses or domestic partners in its description of those eligible for medical coverage. The Guide also requires the same documentation to verify dependents of same-sex and different-sex spouses and domestic partners.

- Oregon Health & Science University's \textit{Benefit Highlights Guide} asks for the proof of relationship documentation for both same-sex and different-sex spouses and domestic partners.

\textbf{Domestic Partner Benefits}

Following the \textit{Obergefell} decision, HRC strongly urged employers to maintain domestic partner benefits for their workers going forward as a sign of sustained commitment to family diversity, inclusion and protection of LGBTQ employees whose rights outside the workplace are not guaranteed under law in many states. Domestic partner benefits ensure that all employees will be treated equally. In the absence of full, explicit non-discrimination protections nationwide, a U.S. Supreme Court decision on marriage equality will not erase the uncertainty of how couples who decide to marry will be treated across state lines. That’s why HRC is fighting for a federal LGBTQ non-discrimination bill that will address discrimination in credit, education, employment, federal funding, housing, jury service, and public accommodations. HRC exhorts employers to recognize the complexity of American families by committing to best practices and maintaining domestic partner benefits for their employees going forward.

\textbf{Consider this situation}

A healthcare system headquartered in Maryland eliminates their same-sex domestic partner benefits program nationwide following the 2015 SCOTUS decision in \textit{Obergefell}. An employee in one of their South Carolina hospitals is compelled to get married in order to access healthcare benefits for her and her partner.

After obtaining their marriage license, a document of public record and uploading photos from their wedding to Facebook, the employee’s partner is legally fired from her job on the basis of her sexual orientation. A week later, the couple is evicted from their rental home with no legal recourse.

Marriage equality leaves LGBTQ employees open to risks and vulnerabilities that their non-LGBTQ counterparts are not subject to given current laws prohibiting discrimination based on race, color, religion, sex, national origin, disability or age. Without complete non-discrimination protections on the basis of sexual orientation and gender identity state-to-state, same-sex couples can be denied credit,
housing, and public accommodation once they have been “outed” by their marriage license: a public document and a matter of public record.

Employers may inadvertently expose employees and their families to risks and vulnerabilities by offering spousal benefits only and requiring marriage in order to access benefits.

**Question:** Does your organization offer healthcare benefits to domestic partners of benefits-eligible employees?

To receive credit, your 2017 benefits documentation must clearly indicate that unmarried domestic partners are eligible for healthcare benefits.

**Question:** Does your organization extend COBRA-equivalent benefits to domestic partners of benefits-eligible employees?

- Learn about providing COBRA benefits to same-sex partners on our same-sex partners’ benefits [laws and regulations](#) page.
- Visit the [United States Department of Labor](#) page to learn more about COBRA benefits, including FAQ and a detailed overview of the major provisions of COBRA.

**Leave Policies**

Offering equal leave policies to employees that are in domestic partnerships rather than married is one way to recognize this family structure as important and valued without adding significant costs to employee benefits plans. Many that do not offer domestic partner healthcare benefits DO offer leave policies that are inclusive of unmarried relationships.

**Question:** Does your organization offer FMLA-equivalent benefits that allow employees to take family and medical leave to care for same-sex partners as well as the children of a same-sex partner, regardless of biological or adoptive status?

**Question:** Does your organization offer bereavement leave that allows employees to take time off following the death of a same-sex partner or their immediate family?

- Visit our page on [FMLA-Equivalent Benefit for LGBT Workers](#) to learn more about how these benefits affect LGBT employees.
- See the Movement Advancement Project’s [Equality Map on Family Leave Laws](#) to learn about the laws in your state.
- In its [Employment Benefits Summary](#), One World Community Health Center offers bereavement leave to both same-sex and opposite-spouses and partners in domestic partnerships and legal marriages.
- Kaleida Health’s [Bereavement Leave](#) policy emphasizes that both spouses and domestic partners are included in its definition of family members for whom an employee can take bereavement leave.
Benefits and Policies Impacting Transgender Employees

Transgender-Inclusive Healthcare Benefits

Transgender people — those whose birth-assigned sex of male or female does not match their inner sense of gender — face a myriad of challenges in securing adequate health care and health care coverage. Historically, transgender people have often been categorically denied health insurance coverage for medically necessary treatment, irrespective of whether treatment is related to sex affirmation/reassignment. Up until recent years, nearly all U.S. employer-based health insurance plans contained “transgender exclusions” that limited insurance coverage for transition-related treatment and other care, but this has changed and continues to change at least in corporate America. Unfortunately, hospitals appear to lag well behind their corporate counterparts when it comes to providing this important and necessary benefit. 60% of businesses that were rated in the Corporate Equality Index (CEI) offer this coverage while only 17% of HEI survey participant provided this coverage.

These benefits are critical for the health and well-being of individual transgender people. According to businesses’ reporting to the HRC Foundation, making these benefits accessible comes at a negligible cost to the employers’ overall health insurance plans. This holds true across industries.

We encourage you to review HRC’s Trans Toolkit for Employers for a wide range of resources and best practices for employer transgender inclusion. The Toolkit includes HRC’s best practice advice for implementing transgender inclusive policies (including sample policies) and practices as well as guidance for implementing transgender inclusive healthcare benefits.

Question: Does your organization have at least one health plan available to all employees that explicitly covers medically necessary health services for transgender people, including gender transition-related treatment (e.g., hormone therapy, chest/breast and genital surgeries, and mental health services)?

To receive credit equal health coverage for transgender individuals must be available in at least one firm-wide available plan without exclusion for medically necessary care that meets the following baseline criteria:

- Insurance contract explicitly affirms coverage
- Plan documentation is readily available to employees and clearly communicates inclusive insurance options to employees and their eligible dependents
- Benefits available to other employees must extend to transgender individuals. Where available for employees, the following benefits should all extend to transgender individuals, including for services related to transgender transition (e.g., medically necessary services related to sex reassignment):
  - Short term medical leave
  - Mental health benefits
  - Pharmaceutical coverage (e.g., for hormone replacement therapies)
  - Coverage for medical visits or laboratory services
  - Coverage for reconstructive surgical procedures related to sex reassignment

- Visit our comprehensive resources page on transgender-inclusive benefits for employees and dependents to learn about businesses already addressing the discrimination faced by transgender employees, how to find
out if your health insurance discriminates, and how to make health insurance plans transgender-inclusive, along with accompanying case studies.

- Read HRC’s White Paper on Transgender Inclusive Health Care Coverage and the Corporate Equality Index.

b. If YES to above, do the benefit guidelines used by the insurer(s) reference and conform to Version 7 of the Standards of Care of the World Professional Association for Transgender Health (WPATH)?

- The WPATH Standards of Care are the most widely recognized standards of practice in transgender healthcare. The WPATH Standards of Care have been recognized by the American Medical Association, the American Psychological Association and the National Association of Social workers, as well as in numerous psychiatric textbooks.

Managing Gender Transitions in the Workplace

It is often said that when a person transitions gender, everyone around them transitions along with them. In other words, a workplace transition involves change not only for the employee but also for their manager, colleagues and clients.

Business leaders know the importance of proper planning, communication and training in implementing successful organizational change. A successful gender transition is no different. A little planning can go a long way to ensuring a successful outcome for all involved – the transitioning employee, managers, colleagues and clients/customers.

Gender transition guidelines, a written set of guidelines to manage an on-the-job gender transition, outline protocols for gender transitions that clearly delineate responsibilities and expectations of transitioning employees, their supervisors, colleagues and other staff.

Question: Does your facility have written gender transition guidelines documenting supportive policies and practices on issues pertinent to a workplace gender transition?

- Review HRC’s Template for Gender Transition Guidelines for best practices for transitioning employees, managers and HR representatives and more.

- See Yale-New Haven Hospital’s Gender Transition Guide for Employees which includes a statement of confidentiality, right to privacy statement, and more.

- In their facility’s HR Manual, Boston Children’s Hospital’s Gender Transition Guidelines outlines steps for a safe and non-discriminatory workplace.

- City of Hope National Medical Center’s Workplace Guidelines reviews the importance of proper pronoun use and employees’ right to privacy among other important best practices.

- The Transgender Employee Transition policy at Legacy Health defines relevant terminology and delineates a successful transition plan for employees and managers alike.

- See our page on workplace gender transition guidelines to learn more about organizational protocols for gender transitions that should include guidance on restroom and facilities access, dress code and
internal recordkeeping that fully recognize an employee's full-time gender presentation and maximize privacy for the employee.

- Review HRC's Sample Restroom Policy to better accommodate transgender employees.
- See the Guide to Restroom Access for Transgender Workers by the Department of Labor’s Occupational Safety and Health Administration which addresses why restroom access is a health and safety matter.
- See the Guidance Regarding the Employment of Transgender Individuals in the Federal Workplace from the Office of Personnel Management. This guidance would apply to all Veteran’s Health Administration facilities.

Additional Support for LGBTQ Employees

Question: Does your organization have an officially recognized LGBTQ employee resource group?

- Visit our comprehensive page on LGBTQ employee groups to learn about the different types of groups organizations have, the objectives of such groups, see example established employee resource groups, and more information on establishing an employee group or expanding your existing group.
- See Oregon Health and Science University’s brochure for OHSU Pride, an OHSU sponsored LGBT employee resource group.
- See Massachusetts General Hospital’s LGBT Employee Resource Group website, featuring the HEI Leader logo.
- See Henry Ford Health System’s PRIDE group brochure.
- See Contra Costa Regional Medical Center’s LGBT Employee Resource Group flyer.
- Northwell Health celebrated National Coming Out Day while also promoting their employee resource group and HEI participation.

Question: Does your organization have an organization-wide diversity and inclusion office, diversity council or working group focused on employee diversity that specifically includes LGBTQ diversity as part of its mission?

- This webpage for the Mount Sinai Office for Diversity and Inclusion lists out their areas of focus, which include the LGBTQ population.
- Learn more about the Diversity Equity & Inclusion Council at Cooley Dickinson Health Care on this page.
- The Diversity program at Thomas Jefferson University has some interesting programs to promote LGBT diversity.
Question: Since January 1, 2015, has your organization conducted an anonymous survey of employees with respect to climate, diversity, or a similar topic?

a. If YES, did LGBTQ employees have an opportunity within the survey to identify themselves as such?

- See our page on self-identification of LGBTQ employees to learn more about asking these questions and why anonymity is so important to employees who disclose their LGBTQ status.

- Read the Williams Institute publication Best Practices for Asking Questions about Sexual Orientation to learn more about why collecting this data is important, what questions to ask, and how and where to ask them.

- Robert Wood Johnson University Hospital’s internal diversity survey recorded sexual orientation, current gender, and sex assigned at birth.

- See the demographic information collected by AtlantiCare Regional Medical Center in their employee diversity and inclusion survey.

- See how Howard Brown Health Center asked their employees about their gender identity in a survey.

b. If YES, does the survey include one or more questions related to LGBTQ concerns?

- Some example questions for this survey might be (but are not limited to):
  - This organization values differences in age, gender, sexual orientation, gender identity or expression, and race or ethnicity. – measure level of agreement, rating scale
  - Are diverse people (differences in race, gender, age, religion, sexual orientation, gender identity etc.) treated fairly at this organization?
  - Do all staff members have an equal opportunity for promotion regardless of race, religion, gender, sexual orientation, age, ethnic background, national origin, or disability?
  - I have personally witnessed or experienced discriminating behavior at work, on the basis of some diversity-related characteristic in the past twelve months (Identify the type of discrimination that occurred, including sexual orientation and gender identity as an option).

- Mountain Park Health Center’s Diversity, Inclusion, and Cultural Competency Survey records employees various responses to demographic questions, including gender identity, sexual orientation, as well as questions about organizational diversity, inclusion and cultural competency.

- See the questions asked by Children’s Hospital of Philadelphia in a survey of their LGBT ERG. These questions could easily be asked of all staff members.

- This anonymous LGBTQ climate survey helps Boston Children’s Hospital garner vital data to improve employees’ experiences, as well as patients and their families.

- For more example questions, and a comprehensive review of the workplace climate for LGBTQ people, see our Degrees of Equality Report detailing how LGBTQ identity surfaces and unfolds in the workplace, and how organizations can identify and address opportunities to improve climate and drive up performance and retention.
Question: Since July 1, 2016, has your organization commemorated an “LGBTQ Holiday”?

Some LGBTQ holidays your facility might celebrate include (but are not limited to)

- **International Transgender Day of Visibility** is observed each year on March 31st to celebrate the courage it takes to live openly and authentically while also recognizing the leadership of transgender and gender nonconforming trailblazers who have led the charge in the fight for equality.

- **LGBTQ Pride Month** occurs annually during the month of June (although Pride celebrations may be held during other times of the year). Pride is a time when many cities and towns host Pride parades, movie screenings, symposia, and more to celebrate LGBTQ history and identities.
  - VA Central Texas Veterans Health Care System created a festive flyer to promote their Pride celebration event.
  - NYC Health and Hospitals – North Central Bronx held an internal celebration before they attended New York City Pride.
  - For Pride month, VA Minneapolis Health Care System promoted a lunch and learn presentation to discuss LGBTQ issues in the workplace.
  - VA Robley Rex Medical Center’s internal ceremony to celebrate their Leader designation to celebrate Pride.

- **Celebrate Bisexuality Day** falls on September 23rd annually as a day to recognize and celebrate the bisexual community.

- **LGBT History Month** in October celebrates the achievements of lesbian, gay, bisexual or transgender icons. The month provides role models, builds community and makes the civil rights statement about the LGBTQ community’s national and international contributions.
  - View Anderson County Hospital’s internal event with cupcakes to celebrate LGBT History Month.
  - Clinical staff at Crittenton Children’s Center created an interactive presentation at their “Dance to Your Own Music” event.

- **National Coming Out Day** occurs on October 11th every year as a day to celebrate coming out as lesbian, gay, bisexual, transgender, queer or as an ally.
  - Northwell Health celebrated National Coming Out Day while also promoting their employee resource group and HEI participation.

- **Spirit Day** is observed annually on October 16th where millions of people wear purple to stand against bullying and show their support for LGBTQ youth.

- **Transgender Day of Remembrance** occurs annually on November 20th as an opportunity for communities to come together and mark the passing of transgender and gender-variant individuals - or those perceived to be transgender - who have been murdered because of hate.
Question: Are your organization’s hiring/recruitment efforts explicitly LGBTQ-inclusive?

To receive credit, organization must demonstrate how hiring efforts are proactively LGBTQ inclusive. Simply having an employment non-discrimination statement that includes Sexual Orientation and Gender Identity posted on job descriptions or career website does not count for this criterion (however, it does count for publicly communicating you employment non-discrimination policy).

Organizations can target potential LGBTQ employees in a variety of ways:

- **Job postings are sent to LGBTQ organizations and/or print/online LGBTQ publications**
  - For more information on LGBTQ-inclusive hiring and recruitment, visit our webpage detailing LGBTQ recruitment and LGBTQ-specific job sites.
  - **Northwell Health** utilized an LGBTQ job search website to recruit for open positions.
  - See an example of a [LGBT job ad](#) from the VHA.

- **Organization has hiring/recruitment brochure explicitly targeting LGBTQ people**
  - See [Truman Medical Center’s brochure](#) on their commitment to LGBT community, highlighting the LGBT employee benefits at their facility.
  - **VA Palo Alto Healthcare System** has an [LGBT specific employment brochure](#).
  - View [Oregon Health & Science University’s flyer](#) as an example of LGBTQ inclusive hiring materials.
  - **Wm. Jennings Bryan Dorn VA Medical Center**’s LGBT employment program also has an employment brochure that emphasizes their diversity and inclusion of LGBT employees.

- **Organization attends LGBTQ job fairs**
  - See our page on [LGBTQ professional recruitment events](#) to find recruitment or career events with a national focus. You can also reach out to your local LGBTQ community center to see if there is an LGBTQ job fair in your area.
  - **MetroHealth** hosted a [Transgender Job Fair](#) at their facility to recruit prospective talent in northeast Ohio.

Question: Does your organization have one or more openly LGBTQ people serving in a high-level leadership position that is visible organization-wide?

**Note:** We are looking for a senior/executive-level administrator at your organization.

The presence of visible LGBTQ employees in management communicates to the LGBTQ employees of your company that their company is open and accepting and enables LGBTQ employees to be open at work, which in turn improves their engagement and retention.
Patient & Community Engagement

This criteria is designed to familiarize your organization with best practices, from The Joint Commission and other sources, regarding LGBTQ-related community engagement. Reviewing the practices implemented by other organizations and recommended by experts, your organization can identify and address gaps in current policies and practices.

HEI participants that are designated Leaders in LGBTQ Healthcare Equality, can use their Leader designation to begin or expand outreach to LGBTQ groups and individuals in their service area. The Leader designation signals a strong commitment to LGBTQ equity and inclusion, and has been used by many organizations to strengthen community engagement.

Below are the five questions listed in this criteria, along with corresponding resources and examples to guide you through understanding and implementing these best practices community engagement.

**LGBTQ Community Engagement and Marketing**

**Question: Since July 1, 2016, has your organization participated in or supported one or more LGBTQ-related events or initiatives in its service area?**

Many HEI facilities participate in or sponsor their local Pride celebrations. There are also a wide variety of other types of LGBTQ events or initiatives that facilities can participate in or sponsor. Some of the most common ones include hosting an LGBTQ health fair, movie night, speaker, health panel, symposium, HIV testing, and more. Here are some examples of events that facilities have hosted in the past:

- **Baystate Health** has sponsored and hosted several events over the past few years – see a [PDF of their flyers](#) to view their advertisements for a youth pride prom, Transgender Day of Remembrance, the Transgender Lives Conference, the Northampton LGBT Pride Parade, a film series, and more.

- Read a page from **Beth Israel Medical Center’s newsletter** about their efforts during Pride month to promote LGBT inclusiveness.

- See a [flyer](#) from **Staten Island University Hospital** for a panel discussion they hosted entitled “SIUH is Coming Out: Join us on our journey of learning how to treat you when we treat you.”

- See an [invitation](#) from **VA Salt Lake City Health Care System** to a brown bag luncheon to celebrate LGBT Pride month.

- **VA Chalmers P. Wylie Ambulatory Care Center** created a [flyer](#) to promote the various events they held to celebrate PRIDE month.

- **Denver Health** tracked their [Facebook post’s](#) impact as they celebrated Denver Pride.

- **VA Canandaigua Medical Center** marched in their local Pride parade with signs and flags in tow.
Question: Since July 1, 2015, has your organization engaged in marketing or advertising to the LGBTQ community (other than sponsorship of events)?

In many instances, hospitals advertise in local newspapers and magazines to promote their services, their HEI Leader status and to target the LGBTQ consumer. This is a great way to let the LGBTQ community know what services your facility provides while also reaching the LGBTQ consumer who is in the process of choosing where to receive their healthcare. Ad campaigns and marketing can further a message of a hospital’s values around LGBTQ inclusion. Increasingly, ads with authentic images of LGBTQ people are featured in both LGBTQ media outlets and the general press alike.

- **Jackson Health System** has created several different ads and banners promoting their LGBT-inclusion at their facilities in Florida.

- **UC Davis Medical Center** not only participated in their local Pride festival but also created handouts for attendees that outlined their plan to relieve LGBTQ health.

- This beautiful ad from **Desert Regional Medical Center** promoted the facility’s HEI Leader status.

- On a CTA train platform in Chicago, **Howard Brown Health Center** advertised their services to the LGBTQT community.

- **St. Petersburg General Hospital** marketed their HEI LGBT Leader status on writing pads and pens.

- After the tragedy in Orlando, **Virginia Mason Medical Center** created this ad in support of the LGBTQ community.

- **Boston Children’s Hospital** created numerous Facebook posts to highlight LGBTQ specific events as well as inform the general public about transgender issues.

- **Sutter Health’s Memorial Medical Center** promoted used a lesbian couple to promote intimacy tips on their Facebook page.

Question: Has your organization designed an LGBTQ specific logo for use in marketing material, promotion of LGBTQ internal or external community events or for providers and staff to wear to indicate that they are LGBTQ inclusive?

- See how the **City of Hope** used their “Pride in the City” logo as part of their pride promotions.

- **Berkshire Medical Center** has created an LGBT version of their logo for use in promotions to the LGBTQ community.

- **Rush Medical Center** has created a logo with the pride flag attached to their logo to use in a variety of ways. See it in used on this patient and visitor flyer that is posted in patient waiting areas.
Question: Since January 1, 2016, has your organization (or parent health system) publicly supported LGBTQ equality under the law through local, state or federal legislation or initiatives (e.g. made a statement or communicated in favor of LGBTQ legislation or regulations or opposed legislation or regulations that would limit the rights of LGBTQ people)?

It is important that hospitals and other healthcare facilities use their platform as both service provider and employer to advocate for their LGBTQ patients and employees and the policies that will protect them. Here are some examples of how hospitals have engaged in this important work:

- In 2016, North Carolina’s legislature passed a reckless and extreme law known as House Bill 2 (HB2) that thrust the state into the epicenter of the debate surrounding LGBTQ non-discrimination protections. Duke University spoke out publicly against HB2 and called for its repeal in this statement from the president, provost and chancellor for health affairs.

- In 2015, the Health and Human Services Department issued draft guidance on section 1557 of the Affordable Care Act that included the interpretation of the term “sex” to include gender identity and transgender status. Thousands of individuals and organizations submitted public comments on this guidance including several HEI participating healthcare facilities such as Whitman-Walker, Fenway, and Children’s Mercy. For an example of these comments, here is Whitman-Walker’s submission.

- In 2016, Lurie Children’s Hospital issued this statement supporting policies and programs to promote inclusive healthcare services and the civil rights transgender and gender non-conforming youth and adults. In 2017 after the Departments of Justice and Education rescinded critical protections for transgender youth, Lurie affirmed their support of this statement issued by the American Academy of Pediatrics and committed to continuing “to advocate for transgender and gender expansive children and adolescents in healthcare, in their schools and in our communities.”

Understanding the Needs of LGBTQ Patients and Community

Question: Does your organization regularly survey patients about the care they have received (e.g., via a patient satisfaction survey)?

a. If YES to above, does the survey explicitly allow patients to identify as LGBTQ, if they wish?

b. If YES to above, does the survey explicitly collect LGBTQ-related information (e.g., whether needs were met related to LGBTQ status)?

- UCSF added a question to their Press Ganey patient satisfaction survey that asks patients to rate “how well the staff respected your needs related to sexual orientation and gender identity” along with other measures of patient satisfaction.

- Callen-Lorde Community Health Center conducted a patient survey over a 12 month period that recorded gender identity and sexual orientation as well as patient experiences.

- VA Edith Nourse Rogers Memorial Veterans Hospital captured demographic information as well as LGBT specific climate questions in their climate needs assessment.

Question: Since January 1, 2015, has your organization conducted a needs assessment or gap analysis via-à-vis LGBTQ services and programs with local LGBTQ individuals or groups?
Three years ago, Cincinnati Children’s Hospital Medical Center, fueled by a LGBT youth needs assessment with members of the local Cincinnati PFLAG chapter, made a strategic decision to hire an adolescent medicine physician with proven expertise and knowledge of the needs and specialized care of LGBT children, teens and young adults. After a national search and eventual hire, in June of 2014, Cincinnati Children’s opened the first Midwest transgender youth clinic to provide evidence-based, comprehensive services to this vulnerable group of adolescents and their families.

Visit the CenterLink Directory of LGBT Community Centers to find a community center in your area if you are not already partnered with a local LGBTQ agency.

Question: Since January 1, 2016, has your organization worked with LGBTQ organizations or community members in any of the following ways to assess LGBTQ needs or address LGBTQ-related concerns?

- Most states have a state-based LGBTQ advocacy organization that works to address the needs of LGBTQ people. See the listing of Equality Federation member organizations to find an organization in your state.

- Visit the CenterLink Directory of LGBT Community Centers to find a community center in your area that you can meet with.

- You can also reach out to your local PFLAG Chapter to discuss LGBTQ-related concerns.

Question: Does your organization have a representative of an LGBTQ organization or an openly LGBTQ person serving on a governing or community advisory board?

- Having a representative from an LGBTQ organization or an openly LGBTQ person serving on a governing or community advisory board helps to ensure that LGBTQ interests and needs will be addressed, and also helps to create an actively inclusive atmosphere within your facility.

- Visit the CenterLink Directory of LGBT Community Centers to find a community center in your area that you might reach out to help you find representatives to serve on your governing or community advisory board.

Question: Does your organization conduct or substantially support LGBTQ health-related research?

- For example, the UW School of Medicine’s End of Life Care Research Program has a study “Decision-Making by Same-Sex Partners of Patients Dying in Critical Care Settings: Access and Impact” focusing on same-gender partners and the barrier they face in participating in end-of-life decision making.

- Visit the Center for Population Research in LGBT Health for more information on LGBT health research, data resources, professional organizations supporting LGBT-related research, and more.