### LGBTQ AND THE HEALTH SYSTEM

MIDDLESEX HEALTH
SERVING OUR COMMUNITY
BY BUILDING A BEST PRACTICE SERVICE
LINE CLAIRE DAVIS BSN
MHA

"I WAS WATCHING A TRANSGENDER PATIENT BEING MIS-GENDERED AT THE TIME OF THEIR DEATH, AND UNDERSTANDING HOW PROFOUND THAT WAS, TO BOTH THIS PERSON AND THEIR FAMILY. NOT TO DIMINISH THE NEEDS OF LGB PEOPLE, BUT THIS IS A WHOLE OTHER LEVEL OF DISCRIMINATION AND LACK OF ACCESS TO CARE THAT AFFECTS TRANSGENDER PEOPLE, AND IT REALLY NEEDS SOME FOCUSED ATTENTION."

DR. JUNO OBIDEN-MALIVAR
OBSTETRICIAN/GYNECOLOGIST

#### STATS AND HISTORY

- LGBTQ demographics (source: Gallup)
  - 4.5 % LGBT
  - 0.3% Transgender
  - 9 million people in the USA
  - 600,000 households in the USA
- Anti-LGBTQ bias
- History of pathologic understanding
- Homophobic viewpoints by health care providers
- 56%LGB & 70% T have experienced serious discrimination (source: Lambda Legal)

### A PROBLEM OF DISPARITY THE GAP IN ACCESS TO HEALTH

- LGBT youth are 2 to 3 times more likely to attempt suicide.
- LGBT youth are more likely to be homeless.
- Lesbians are less likely to get preventive services for cancer.
- Gay men are at higher risk of HIV and other STDs, especially among communities of color.
- Lesbians and bisexual females are more likely to be overweight or obese.

### THE PROBLEM (CONTINUED)

- Transgender individuals have a high prevalence of HIV/STDs, victimization, mental health issues, and suicide and are less likely to have health insurance than heterosexual or LGB individuals.
- Elderly LGBT individuals face additional barriers to health because of isolation and a lack of social services and culturally competent providers.
- LGBT populations have the highest rates of tobacco, alcohol, and other drug use.

#### OUR STORY

MIDDLESEX HOSPITAL EXISTS TO PROVIDE THE SAFEST, HIGHEST QUALITY HEALTH CARE AND THE BEST EXPERIENCE POSSIBLE FOR OUR COMMUNITY

- New APRN, Kate Tierney, joined Middlesex Endocrinology
- Specializes in Transgender Endocrinology/Hormone Therapy
- Transgender clients for Endocrinology
- Challenge: A new group of patients with needs unfamiliar to most staff
  - An expert provider
  - Without a health system (prepared to serve population comprehensive clinical and/or service need)
  - An opportunity to meet community need- MISSION
  - An opportunity to build a new service line- MARGIN

#### THE LGBTQ COMMITTEE

- Vice President as Chairperson
- APRN Endocrinologist
- Director of Quality/Pt Safety/Service Excellence/Regulatory
- OBS/GYN MD
- Chairperson Department of Medicine/Hospitalist Service
- MHPC Physicians
- Chairperson Department of Psychiatry
- Physical Medicine
- Center for Professional Development

### INITIATIVE BEGINS

MISSION: TO BE THE CLEAR FIRST CHOICE FOR HEALTH CARE FOR THE LGBTO PERSONS

#### **OBJECTIVES**

- Adopt standards of care to meet the health needs of LGBTQ nonconforming people.
- Provide safe non-judgmental health care.
- Create a multi-disciplinary care team to provide health care for LGBTQ people.
- Provide a safe non-judgmental environment for trans patients to interact with all aspect of the hospital.

#### Tasks:

- Create a network of medical providers to address trans specific medical needs.
- Establish specific task related to cultural competencies for all employees.
- Modify physical spaces, registration forms and EMR
- Update policies and guidelines
- Educate

## BENCHING FOR BEST PRACTICE

- Human Rights Healthcare Equality Index
- The Fenway Institute/National LGBT Education Center
- The Joint Commission Field Guide
  - Advancing Effective Communication, Cultural Competence, and Patient-and Family-Centered Care for the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community. A Field Guide
- Section 1557 of the Affordable HealthCare Act
  - Protecting individuals against sex discrimination
  - Health insurance coverage equality
  - Treatment consistent with gender identity
- A review of the literature for best practice
- With other organizations

### SYSTEMS CHANGES NEEDED

I. Nondiscrimination

and

Staff Training

Must achieve 8 of 8 best practices

2. LGBTQ Patient Services

And

Support

Must achieve 11 of 23 best practices

Healthcare Equality Index

2019

3. Employee Benefits and Policies
Must achieve 8 of 15 Best practices

4. Patient and Community Engagement
Must achieve 4 of 9 best practices

# NONDISCRIMINATION AND STAFF TRAINING

- LGBTQ inclusive Patient non-discrimination policy
  - Gender identity and sexual orientation are mandatory terms
- Equal visitation policy
  - Patient visitor/support person of choice
- Employee non-discrimination policy
  - Gender identity and sexual orientation are mandatory terms
- Staff training in LGBTQ centered patient care
  - Key Executive training (available on HEI site) mandated year I
  - 25 hours by any staff (total) subsequent years
  - Evidence that training offered to all employees

## PATIENT SERVICES AND SUPPORT

- Written strategy
- LGBTQ knowledgeable providers-made public
- LGBTQ specific clinical services
- LGBTQ office or ombudsman (MH Transgender Navigator)
- LGBTQ web site
- EHR supports gender of identity and gender assigned at birth
- Two question process
- Gender neutral bathrooms

# EMPLOYEE BENEFITS AND POLICIES

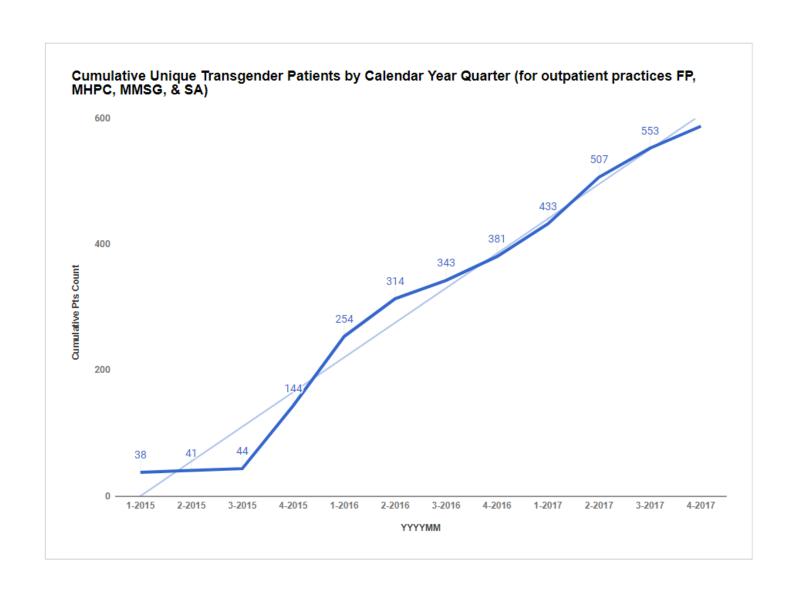
- Equal benefits on health insurance for same sex spouses
- LGBTQ inclusive hiring efforts
- Openly LGBTQ people in high level/visible positions
- Celebrate an LGBTQ holiday at the facility
- Gender transition guidelines for employees who are transitioning (HEI criteria MH has not approached yet)
- At least one health plan must provide gender transition related treatment

## PATIENT & COMMUNITY ENGAGEMENT

- LGBTQ Marketing
  - Brochure
  - Web site
  - Lobby tele-screen
- LGBTQ specific logo
- Sponsor or support community events

### SUCCESS - NEW SERVICES

- Endocrinology/Hormonal Therapy
- Routine screening by organ inventory v. gender identity or gender assigned at birth
- Screening for STDs
- Transgender surgical procedures
  - Mastectomy, hysterectomy, S+O, breast implants
  - Not yet performing bottom surgery
- Behavioral health, individual therapy
- Transgender Clinical Navigator
- Transgender Support Groups
- Pelvic Health
- Voice Therapy



#### Transgender Patient **Activity Summary**

Total eCW Based Unique	
Patients (I)	588
Unique Hospital Patients (2)	278
% Utilizing Hospital Services	47.28%

#### Practice Side Payments (FY15 - FY18OctYTD) (3)

(F113 - F110Occ11D) (3)					
			Trans	NonTrans	
	All	<b>PrimeDx</b>	Primary	Primary	
<b>Practice</b>	ClaimCt	ClaimCt	Dx	Dx	Totals
FP	488	15	\$918	\$51,569	\$52,486
MHPC	1,429	30	\$2,603	\$162,881	\$165,484
MMSG	2,062	1,395	\$113,854	\$73,989	\$187,843
SA	23	4	\$288	\$5,557	\$5,845
Totals	4,002	1,444	\$117,663	\$293,996	\$411,658
	154	56			\$137,219

Hospital Downstream Rev Payments LTD (Oct 17):

					Trans	NonTrans		
			<b>PrimeDx</b>	AnyDX	<b>Primary</b>	<b>Primary</b>	Trans Any	
	FinCat	All VisCt	VisCt	VisCt	Dx	Dx	Dx	Totals
OBS		23	10	- 11	\$148,161	\$57,755	\$169,702	\$205,916
OAMB		70	3	5	\$2,200	\$246,764	\$28,406	\$248,964
Laboratory		1,639	80	88	\$10,667	\$136,570	\$12,134	\$147,237
All Other		544	59	103	\$12,182	\$190,834	\$17,625	\$203,016
IP		53	0	1	0	\$714,122	\$0	\$714,122
IPSY		11	0	9	0	\$82,974	\$63,488	\$82,974
OER/OPSY		332	0	0	0	\$221,385	\$0	\$221,385
PPMA		44	0	0	0	\$20,154	\$0	\$20,154
PPSY		14	0	6	0	\$4,177	\$2,270	\$4,177
Radiology		489	0	0	0	\$196,618	\$0	\$196,618
Rehab		50	0	0	0	\$48,460	\$0	\$48,460
Totals		3.269	152	223	\$173,210	\$1,919,812	\$293.625	\$2.093.022

### SUCCESS- CELEBRATION



HEALTHCARE EQUALITY INDEX

HUMAN RIGHTS AMPAIGN

2018

MOITAGNUO

# ELGBICO HEALTHCARE EQUALITY

LEADER

### SUCCESS- COMPLIMENTS

- What all of you at Middlesex are doing for the transgender community is very important, as you are, one person at a time, rewriting future stories and the gender discussion group is an important part of that and is needed by us. I would hope that as the necessary discussion happens about the group you continue to listen to our needs too.
- The Middlesex group is the only group I know of which is associated with an institution and led by a trained professional instead of peer led, both of which provide an increased perception of safety to someone who is starting to question gender.
- I appreciate your taking the time to answer my questions, the answers were very helpful. I am going to try to dip my toes in the water on Facebook so I can join the group!! Now that I am in the process of informing my work, I have less apprehension about a social media presence (they are very oriented toward mining social media data for customer issues and I didn't want them to surprise find out before I was ready). Thank you for arranging to set the Facebook group!
- Thank you so much. My clients really enjoyed it. We will be back next month with more recruits. It great to have this resource in our community.

# IN THE WORDS OF OUR EXPERTS

https://youtu.be/L3mL0xDPrdQ

### QUESTIONS?