Advancing LGBT Patient-Centered Care: Strategies to Create an Inclusive Environment

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“Exploration and Intervention for Health Equality...”

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Advancing LGBT Patient-Centered Care: Strategies to Create an Inclusive Environment

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October 11, 2011
Session Goals

• Identify LGBT health care disparities;

• Identify legal, regulatory, and quality supports for LGBT health equity;

• Identify and understand how to use tools and strategies to help create a welcoming environment and support high quality care for LGBT patients and families
Health and Healthcare Disparities: Do They Exist?

USA Today December 2, 2008

Survey reveal disparities on Election Day

Some voters were asked for ID in states that don’t require it; blacks waited longer.

By Richard Wolf
USA TODAY

African-American voters waited more than twice as long as others to vote in last month’s presidential election, and Hispanics were asked to show identification more often, a survey released Tuesday showed.

Although Election Day ran the case,” said Judith Dianis, the group’s co-director. “I could drive up to a black and there would be a kiosk and I could drive up to a white and it would be a problem.”

Stewart said his group’s report on Election Day, which showed blacks, Asians, and Hispanics were among the most likely to be asked for ID, was not due to voter fraud but rather to the way election officials have set up their voter identification rules in the wake of recent court cases.

Waiting their turn in Norfolk, Va.: Voters line up outside Rosemont Middle School on Election Day. African-American voters reported waiting for an average of 29 minutes to vote on Nov. 4, compared with an average wait of 13 minutes for others.
When Healthcare Isn’t Caring

• 4,916 healthcare consumers surveyed
• More than half at one or more of the following experiences:
  – being refused needed care;
  – health care professionals refusing to touch them or using excessive precautions;
  – health care professionals using harsh or abusive Language;
  – being blamed for their health status; or
  – health care professionals being physically rough or abusive.

When Healthcare Isn’t Caring

Table 1: I was refused needed health care

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>LGB</td>
<td>7.7%</td>
</tr>
<tr>
<td>Transgender</td>
<td>26.7%</td>
</tr>
<tr>
<td>Living with HIV</td>
<td>19.0%</td>
</tr>
</tbody>
</table>

“First Do No Harm”

- Strong link between communication and patient safety
- Patient-provider communication is complex
- Multiple vulnerabilities
- Multiple players
- Multiple points for misunderstanding
- Shared responsibility:
- System-level support and individual behaviors
Health and Healthcare Disparities

• Variation in health seeking behavior
  – Some groups more likely to avoid, delay care

• Operation of health care systems; legal and regulatory environments
  – Cultural and linguistic barriers; implicit bias; distrust of healthcare system
  – Fragmentation of care; less generous benefits

• Time pressured medical decision-making
  – based on experiential clusters; greater clinical uncertainty; normal to pre-judge, categorize

• Patient and provider beliefs and attitudes

• Communication between patients and providers
Recent Activity in LGBT Healthcare

• **The Institute of Medicine** report, *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding* May 2011;

• **DHHS National Prevention Strategy**: more culturally competent health workforce; standardize and collect data, including population data on sexual orientation and gender identity;

• **Health People 2020**: LGBT included in Disparities Reduction goal; special LGBT focus area.

• **DHHS National Health Interview Survey** to include sexual orientation and gender identity.
Regulatory and Accreditation Activity

• The Centers for Medicare and Medicaid Services (CMS) issued guidance for complying with inclusive patient visitation and decision-making conditions of participation;

• The Joint Commission new accreditation standards specifically prohibit discrimination inclusive of sexual orientation, gender identity and expression; will be releasing a Field Guide for LGBT Healthcare later this year.
Existing Standards at a Glance

- Staff orientation on cultural diversity (*HR.01.04.01, EP5*)
- Ongoing education and training (*HR.01.05.03*)
- Comply with law and regulation (*LD.04.01.01*)
- Patient education meets patient needs (*PC.02.03.01*)
- Right to effective communication (*RI.01.01.01, EP5*)
- Patient participation in care (*RI.01.02.01*)
- Informed consent (*RI.01.03.01*)
New/Revised Requirements

• Effective Communication
• Allow patients access to a support individual
• Ensure care free from discrimination
• Visitation policies are in writing and inclusive
Preventing for New and Revised Standards

Macro and Micro guidance

Appendices:
A: Checklist of all issues to address
B: Existing Joint Commission requirements supporting effective communication, cultural competence, and patient- and family-centered care
C: New Joint Commission standards for patient-centered communication
  • Explanation of revision/addition
  • Self-assessment guidelines
  • Practice examples
D: Laws and regulations
E: Resource guide

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How long will it take?

1999

2001

2002

2011

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Cultural Competence

“Only a person or a nation self-confident in the best sense of the word is capable of listening to the voice of others and accepting them as equal to oneself. Let us try to introduce self-confidence into the life of our community and into the conduct of nations.”

Vaclav Havel, President Czechoslovakia and Czech Republic
As found in Revolution from Within, Gloria Steinem
Why Culturally Competent Care?

“We feel the overall cost benefit...is there. We may not show it in direct dollars and cents...a lot of times (costs) just look like operating expense...but if we can get people established with primary care instead of using the ED...it is more cost effective...we are always looking at ways to demonstrate that.”

- Hospital CEO

What Can I Do?

• Educate myself; prepare to treat Transgender; LGBT Cultural Competency
• Use respectful language; ask the patient, “how would you like to be called;” use gender neutral pronouns
• Don’t make assumptions- appearance, initial information- ask open-ended questions about sexuality
• Admit when I don’t understand, but be open to explanation; Ask and repeat back to support understanding
• Ensure confidentiality; create a safe space
What Can My Organization Do?

- Post Inclusive Non-discrimination policies in visible areas (Including Employment policies);
- Make sure forms are inclusive: use “relationship status” instead of “marriage Status”; include “transgender” in addition to Male/Female option;
- Hire LGBT Staff; Create LGBT Employee Group;
- Unisex bathrooms;
- Assess policies and practices as part of ongoing quality improvement process and staff performance evaluation.
One Size Doesn’t Fit All

Who are our patients?
How can we help find health care that fits?
Creating an Inclusive Environment

• Leadership/policies/mission
• Workforce/training/performance evaluation
• Care Practices/ communication/sensitivity to unique clinical needs/ creating trust
• Collecting and Using Data and Information/forms/confidentiality/aggregate v. patient-level
• Engaging the Community/marketing/ gathering feedback
An Inclusive Organization

• Has assessed its environment, knows its resources, knows its deficits and needs
• Has a firm plan in place for monitoring and subsequently improving systems that support an inclusive
• Promotes and supports an inclusive environment at the patient level by educating staff, gathering feedback, and including as part of ongoing workforce evaluation (MDs, too!)
Advancing Healthcare Equity for LGBT Patients and Families

- Call to Action For Healthcare Professionals to Advance Health Equity for the Lesbian, Gay, Bisexual, and Transgender Community - July 2011
- HEI Annual survey of healthcare LGBT Policies
- HEI@hrc.org
- Learn more about this project: http://www.hrc.org/hei
Top 5 Reasons to Participate in the Healthcare Equality Index

1. **To promote quality care.** Create an environment that is welcoming and patient-centered for lesbian, gay, bisexual and transgender (LGBT) patients and families.

2. **To prepare for payment reform.** See improvements in patient-reported measures of quality by creating a welcoming patient-centered environment.

3. **To increase market share.** Be recognized as a “Leader in LGBT Healthcare Equality” and take advantage of brand loyalty among LGBT healthcare consumers.

4. **To improve employee satisfaction.** Create a workplace where all employees are free from discrimination.

5. **To comply with regulations and reduce risk.** Be prepared for new Centers of Medicare and Medicaid Services (CMS) Conditions of Participation and Joint Commission standards.

Being A Leader in
LGBT Healthcare Equality

• Protect all LGBT patients from discrimination based on Sexual orientation and gender identity via non-discrimination policies.

• Grant equal visitation access for same sex partners and same sex parents through LGBT – inclusive visitation policies

• Provide LGBT Cultural Competence Training

• Protect LGBT Employees from discrimination based on sexual orientation and gender identity with inclusive employment non-discrimination policies.
Non-Discrimination in Care: What does it mean?

“There are few moments in our lives that call for greater compassion and companionship than when a loved one is admitted to the hospital…”

President Barack Obama in an April 2010 presidential memorandum, directing the Secretary of the U.S. Department of Health and Human Services to protect the visitation and medical decision-making rights of LGBT people.
Thank you!

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Resources

Note: This list is not meant to be inclusive of all available resources, but contains several that informed the development of this presentation.

- Lambda Legal [www.lambdalegal.org](http://www.lambdalegal.org)
- Gay and Lesbian Medical Association [www.glma.org](http://www.glma.org)
- Transgender Law Center [www.transgenderlawcenter.org](http://www.transgenderlawcenter.org)
- Human Rights Campaign Healthcare Equality Index [www.hrc.org/hei](http://www.hrc.org/hei)
- The Joint Commission [www.jointcommission.org/Advancing_Effective_Communication/](http://www.jointcommission.org/Advancing_Effective_Communication/)