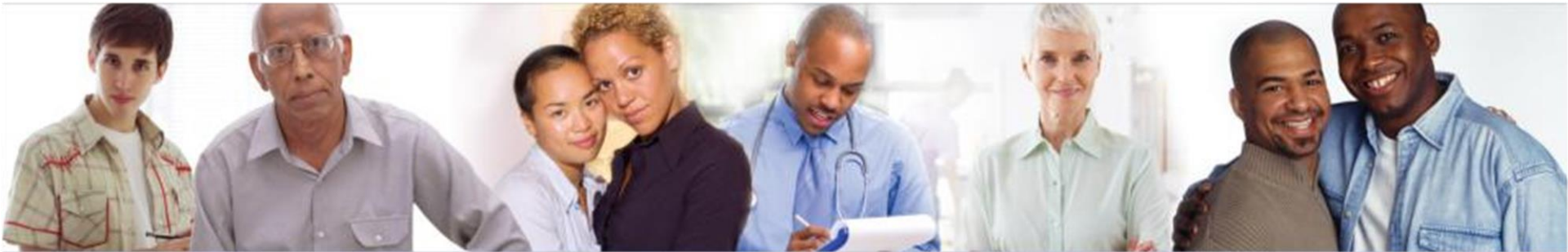




NATIONAL LGBT HEALTH
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE



Using the Electronic Health Record (EHR) to Address LGBT Disparities in Primary Care

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September 22, 2016

Louisville, KY

www.lgbthealtheducation.org

Introduction

- Lesbian, gay, bisexual, and transgender (LGBT) patients have unique health needs and experience **numerous health disparities**
- They are an underserved population that is largely **invisible** in the health care system
- Routine and standardized collection of sexual orientation and gender identity (SO/GI) information in electronic health records (EHRs) will help assess **access, satisfaction with, quality of care, inform the delivery of appropriate health services**, and begin to **address health disparities**

PROGRAM ASSISTANCE LETTER

DOCUMENT NUMBER: PAL 2016-02

DATE: March 22, 2016

DOCUMENT TITLE: Approved Uniform Data System Changes for Calendar Year 2016

TO: Health Centers
Primary Care Associations
Primary Care Offices
National Cooperative Agreements

I. BACKGROUND

This Program Assistance Letter (PAL) provides an overview of approved changes to the Health Resources and Services Administration's (HRSA) calendar year (CY) 2016 Uniform Data System (UDS) to be reported by Health Center Program grantees and look-alikes in February 2017. Additional details regarding these changes will be provided in the forthcoming 2016 UDS Manual.

II. APPROVED CHANGES FOR CY 2016 UDS REPORTING

A. SEXUAL ORIENTATION AND GENDER IDENTITY (SO/GI) – TABLES 3A, 3B

Sexual orientation and gender identity are reported on Table 3A, 3B.

Rationale: Improving the health of the Nation's underserved communities and vulnerable populations by assuring access to comprehensive, culturally competent, quality primary health care services is a priority of the Health Center Program. Sexual orientation and gender identity can play a significant role in determining health outcomes. Gaining a better understanding of populations served by health centers, including sexual orientation and gender identity, promotes culturally competent care delivery and contributes to reducing health disparities overall. In addition, adopting sexual orientation and gender identity (SO/GI) data collection in the UDS aligns with the 2015 Edition Health Information Technology (Health IT) Certification Criteria, 2015 Edition Base Electronic Health Record (EHR) Definition, and the Office of the National Coordinator for Health Information Technology (ONC) Health IT Certification Program. Alignment of UDS SOGI data elements with ONC certification criteria also reduces overall health center reporting burden.

Table 3A: Sex Assigned at Birth

Table 3A

LINE	AGE GROUPS	MALE PATIENTS (a)	FEMALE PATIENTS (b)
1	Under age 1		
2	Age 1		
3	Age 2		
4	Age 3		
5	Age 4		
6	Age 5		
7	Age 6		

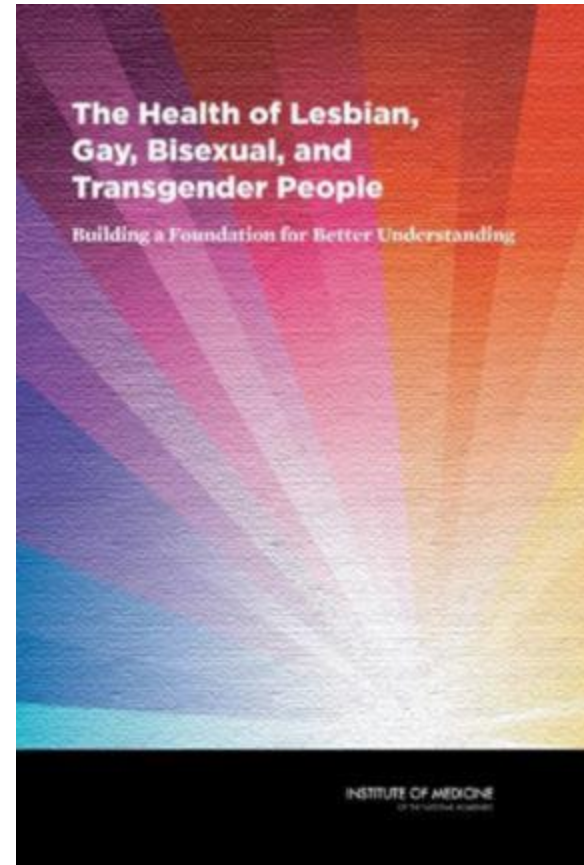
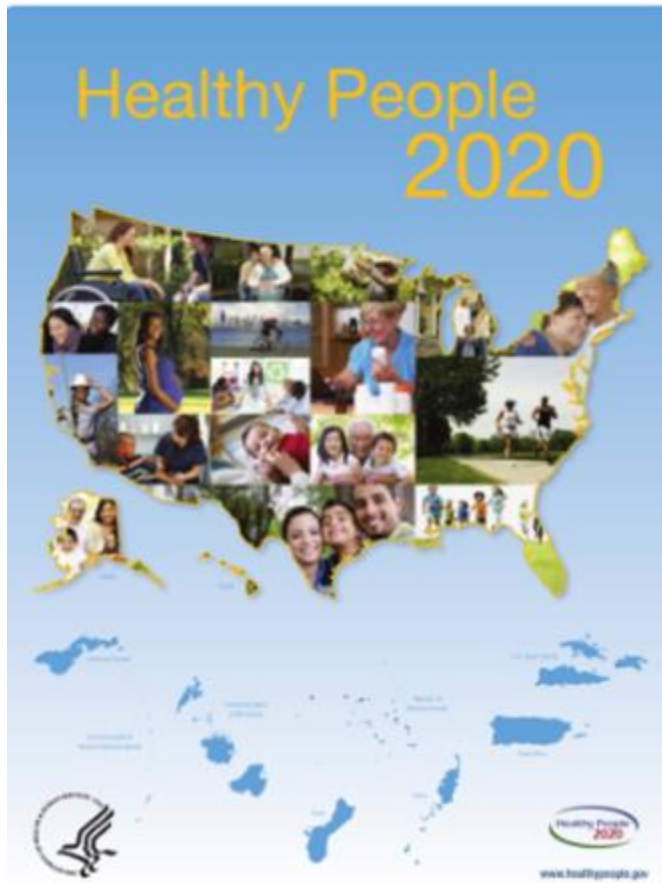
Attachment 1: Table 3B: Demographic Characteristics

Reporting Period: January 1, 2016 through December 31, 2016

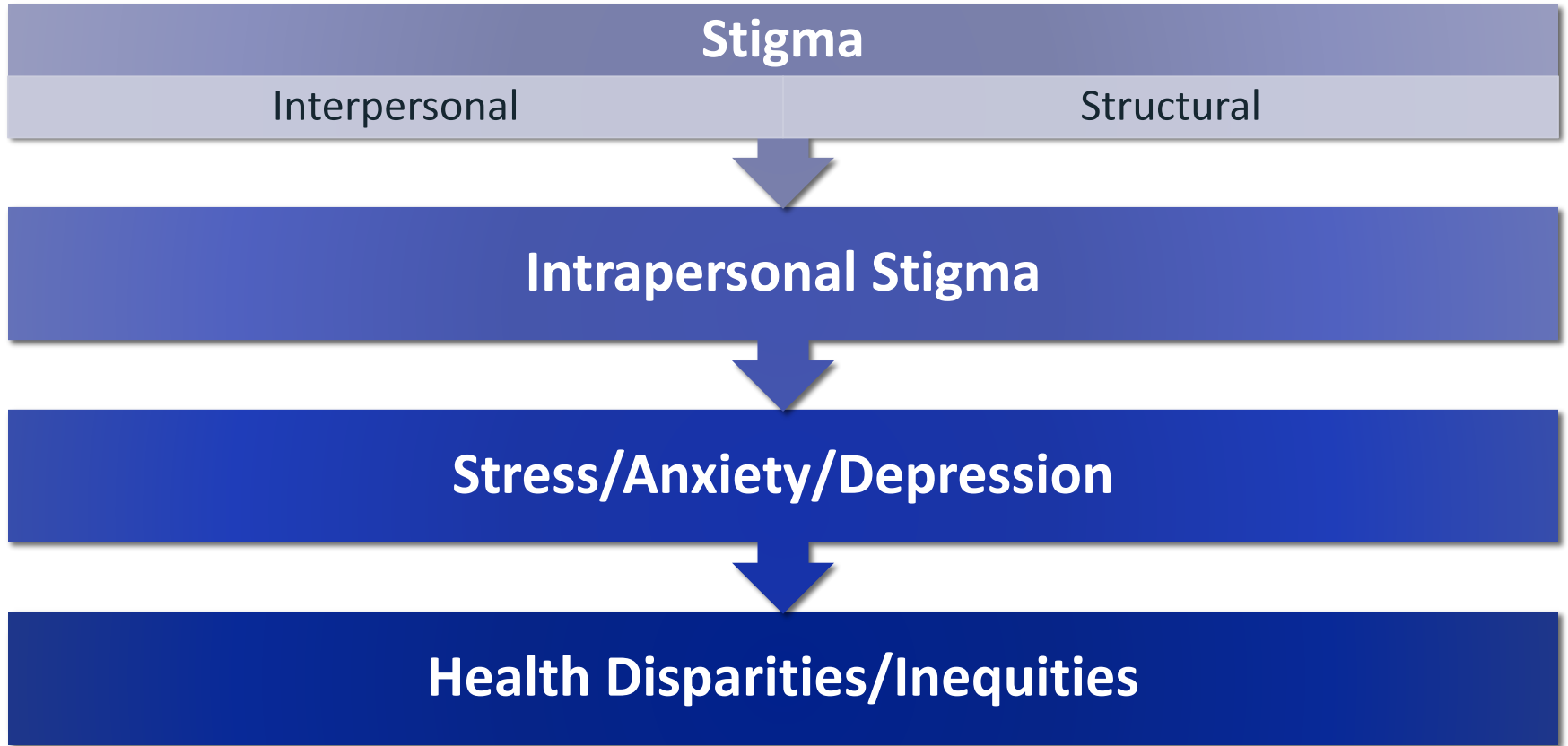
Line	Patients by Sexual Orientation	Number (a)
13.	Lesbian or gay	
14.	Straight (not lesbian or gay)	
15.	Bisexual	
16.	Something else	
17.	Don't know	
18.	Choose not to disclose	
19.	Total Patients (Sum Lines 13 to 18)	

Line	Patients by Gender Identity	Number (a)
20.	Male	
21.	Female	
22.	Transgender Male/ Female-to-Male	
23.	Transgender Female/ Male-to-Female	
24.	Other	
25.	Choose not to disclose	
26.	Total Patients (Sum Lines 20 to 25)	

Why Programs for LGBT People

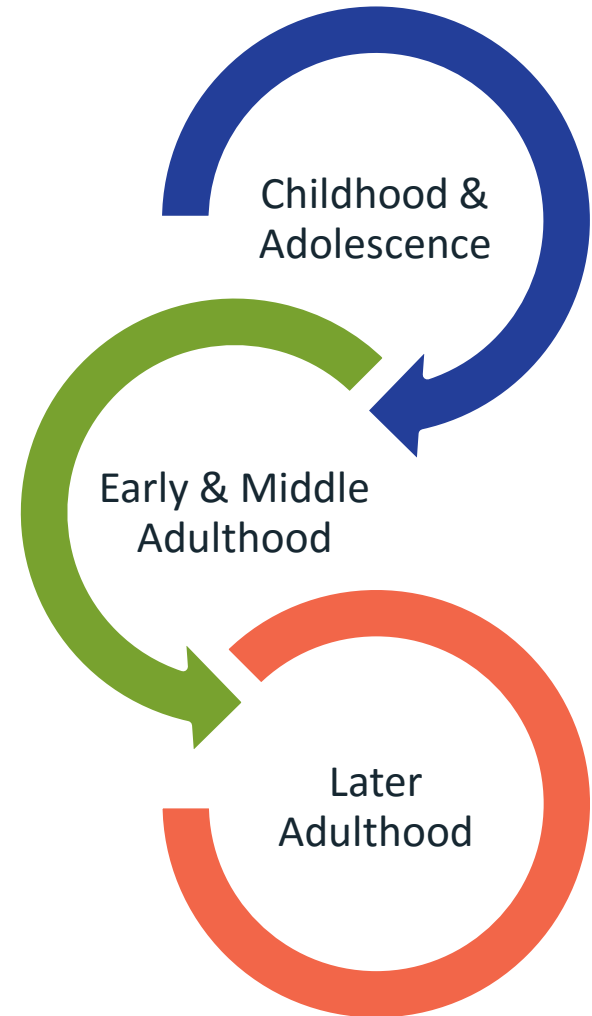


Stigma, Discrimination and Health



Hatzenbuehler, ML, Link, BG. 2014

Health Issues Throughout the Life Course



LGBT Disparities: Healthy People 2020

- LGBT youth
 - 2 to 3 times more likely to attempt suicide
 - More likely to be homeless (20-40% are LGBT)
 - Risk of HIV, STIs
- MSM are at higher risk of HIV/STIs, especially among communities of color
- LGBT populations have the highest rates of tobacco, alcohol, and other drug use
- Lesbians and bisexual women are less likely to get preventive screenings for cancer

LGBT Disparities: Healthy People 2020

- Transgender individuals experience
 - a high prevalence of HIV/STIs, hate crimes, behavioral health issues, and suicide,
 - difficult access to preventive and urgent care,
 - less likely to have health insurance than heterosexual or LGB individuals
- Elderly LGBT individuals face additional barriers to health because of isolation, fewer family supports, and a lack of social and support services

Understanding LGBT People

- It is important for health care providers to understand who are LGBT people and to have a common understanding of terms and definitions
- This allows for effective and respectful communication and the delivery of culturally competent care
- Health care providers will be better equipped to serve their patients and LGBT communities
- L,G,B,T people are a very diverse group with many unique issues, and many common bonds

What's in a Word?



Sexual Orientation and Gender Identity are Not the Same

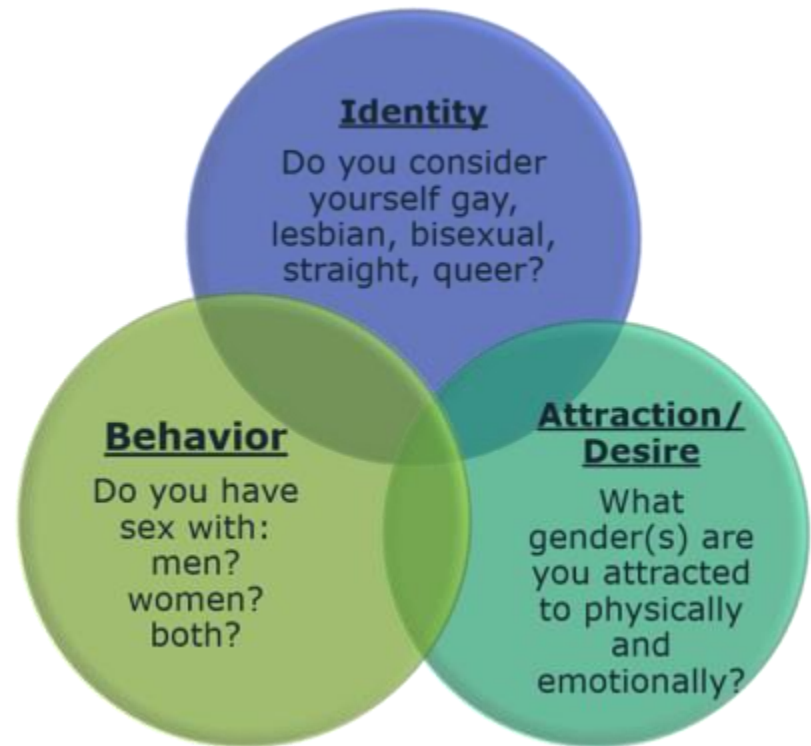
- All people have a sexual orientation and gender identity
 - How people identify can change
 - Terminology varies
- Gender Identity \neq Sexual Orientation



Sexual Orientation

- Sexual orientation: how a person identifies their physical and emotional attraction to others
- Desire
 - Same sex attraction
- Behavior:
 - Men who have sex with men-MSM (MSMW)
 - Women who have sex with women-WSW (WSWM)
- Identity:
 - Straight, gay, lesbian, bisexual, queer--other

Dimensions of Sexual Orientation:



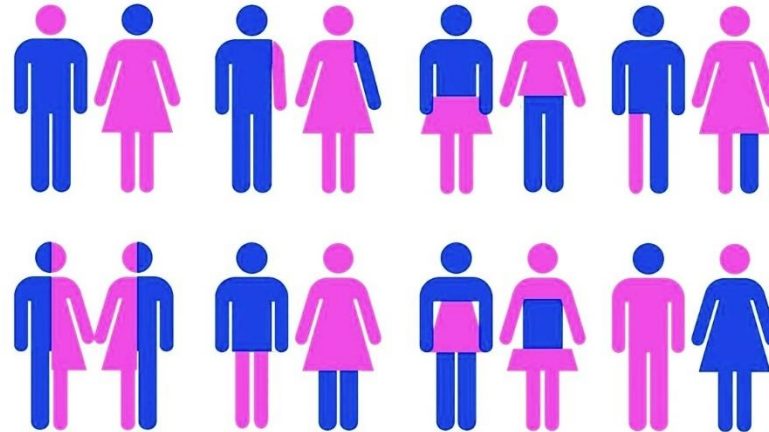
Gender Identity and Gender Expression

- Gender identity

- A person's internal sense of their gender (do I consider myself male, female, both, neither?)
- All people have a gender identity

- Gender expression

- How one presents themselves through their behavior, mannerisms, speech patterns, dress, and hairstyles
- May be on a spectrum



WHAT PEOPLE
ASSUME GENDER IS



WHAT GENDER
ACTUALLY IS



- A 2013 community-based survey of 452 transgender adults in Massachusetts, 40.9% of respondents described themselves as having a “non-binary gender identity.”

The T in LGBT: Transgender

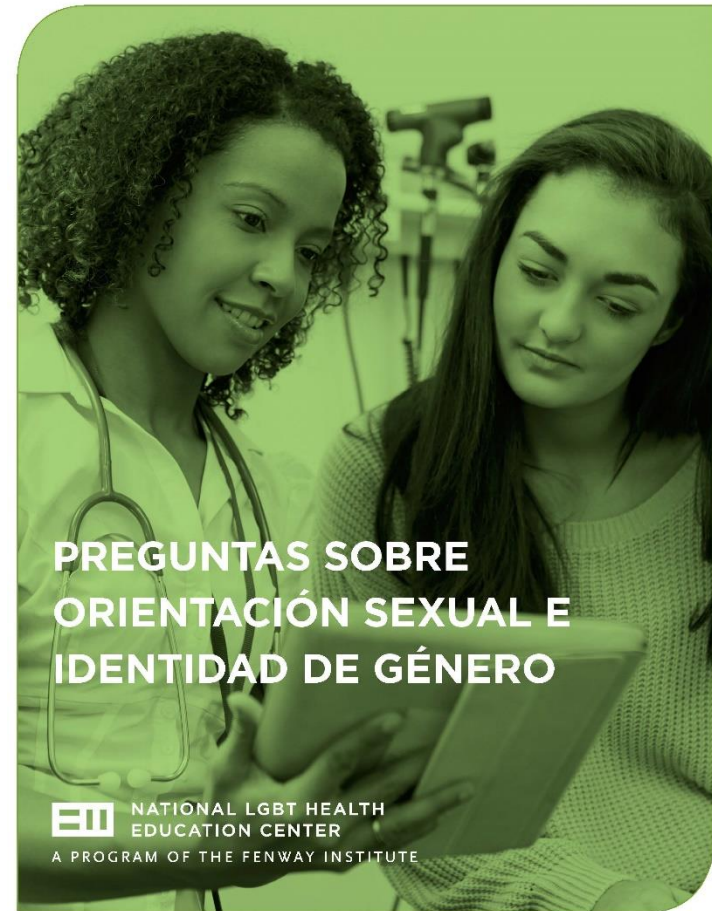
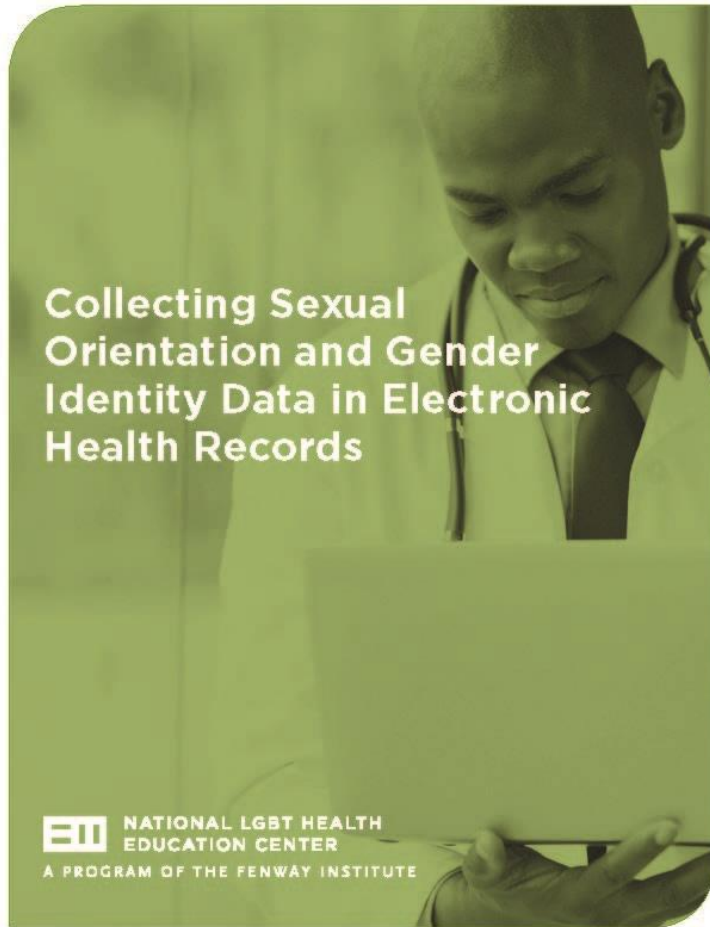
- Transgender
 - Gender identity not congruent with the assigned sex at birth
 - Alternate terminology
 - Transgender woman, trans woman, male to female (MTF)
 - Transgender man, trans man, female to male (FTM)
 - Trans feminine, Trans masculine
 - Non-binary, genderqueer
 - Gender identity is increasingly described as being on a spectrum



Collecting SO/GI Data in EHRs



Collecting SO/GI Information



www.lgbthealtheducation.org/topic/sogi/

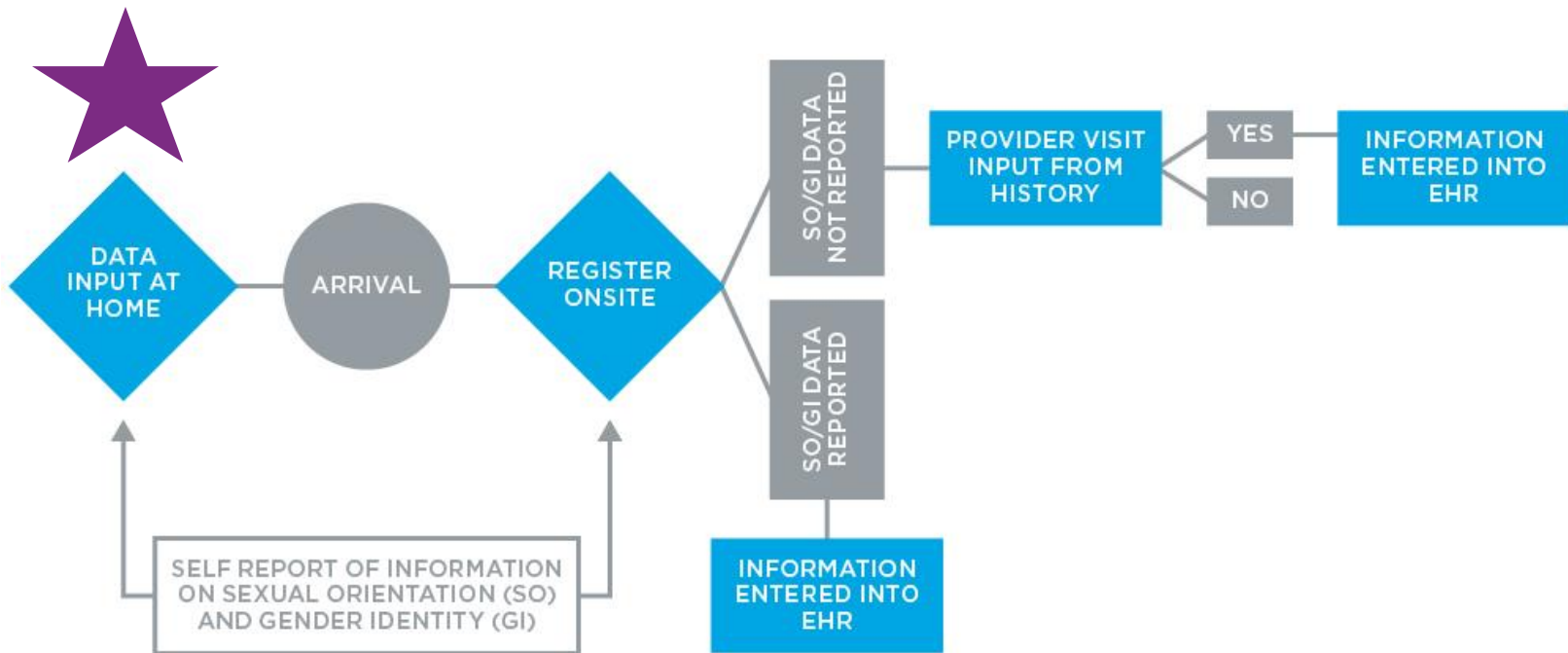
Preparation for Collecting Data in Clinical Settings

- **Clinicians:** Need to learn about LGBT health and the range of expression related to identity, behavior, and desire. Staff needs to understand concepts
- **Non-clinical staff:** Front desk and patient registration staff must also receive training on LGBT health, communicating with LGBT patients, and achieving quality care with diverse patient populations
- **Patients:** Need to learn about why it is important to communicate this information, and feel comfortable that it will be used appropriately

How to Ask SO/GI questions

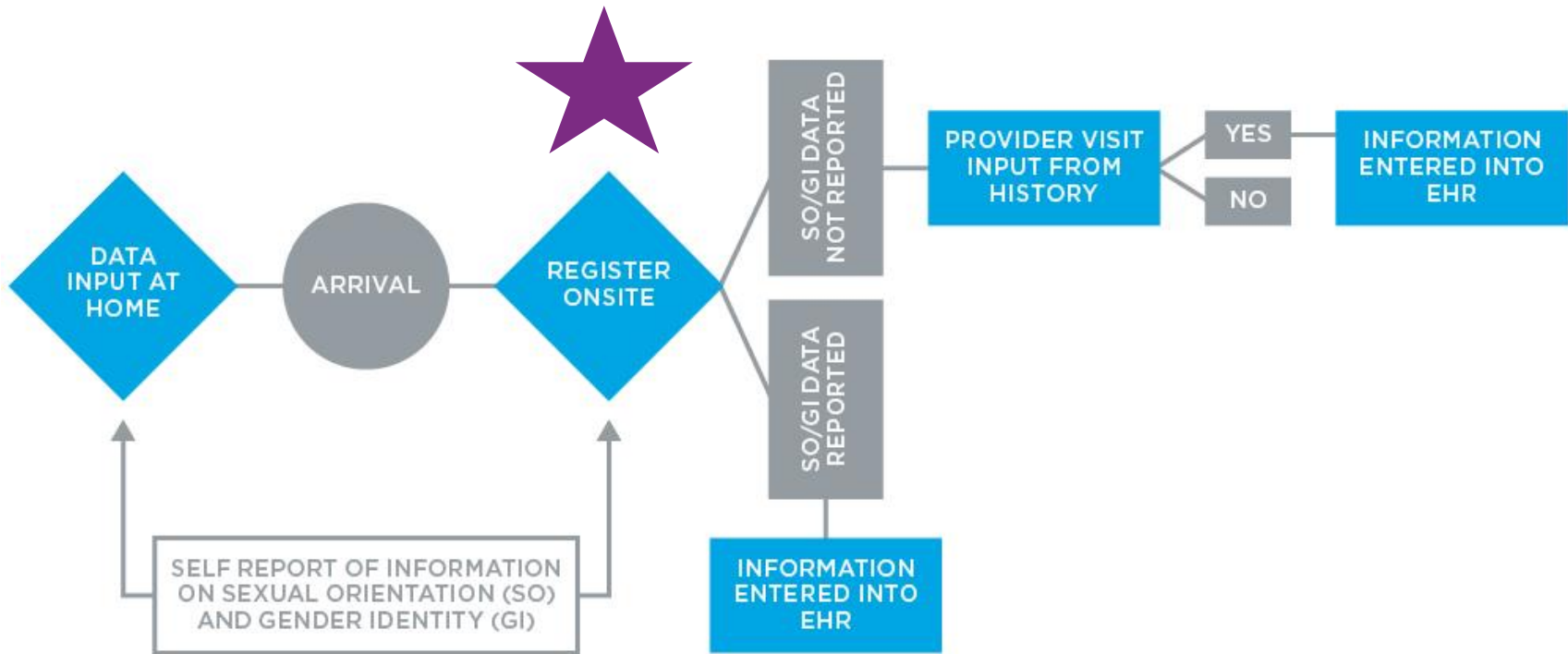
- There are various ways SO/GI information can be incorporated into the EHR and there is no single system to achieve this
 - SO/GI questions can be asked on registration forms in the demographics section
 - Providers ask SO/GI questions during patient visit
 - Answers can be entered into an EHR directly by a patient or member of the clinical staff, or transcribed at registration

Collecting SO/GI Information Prior to Arrival



Concept: Harvey Makadon, M.D. **Created by:** Komal Basra

Asking SO/GI information on patient registration (intake) forms



Concept: Harvey Makadon, M.D. **Created by:** Komal Basra

Collecting SO/GI Data During Onsite Registration

- Patients should be asked standardized SO/GI questions as part of the demographic section on registration
- Questions can be included alongside other demographic questions (i.e. race, ethnicity, language)
- Patients should be informed that information will help health care providers to deliver appropriate prevention, screening, and treatment services
 - SOGI information should be updated as needed on an ongoing basis for both new and returning patients
- Patients must be assured information will be kept confidential

Collecting Demographic Data on Sexual Orientation (Example)

<p>1. Which of the categories best describes your current annual income? Please check the correct category:</p> <p><input type="checkbox"/> <\$10,000 <input type="checkbox"/> \$10,000–14,999 <input type="checkbox"/> \$15,000–19,999 <input type="checkbox"/> \$20,000–29,999 <input type="checkbox"/> \$30,000–49,999 <input type="checkbox"/> \$50,000–79,999 <input type="checkbox"/> Over \$80,000</p>	<p>2. Employment Status:</p> <p><input type="checkbox"/> Employed full time <input type="checkbox"/> Employed part time <input type="checkbox"/> Student full time <input type="checkbox"/> Student part time <input type="checkbox"/> Retired <input type="checkbox"/> Other _____</p>	<p>3. Racial Group(s):</p> <p><input type="checkbox"/> African American/Black <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Multi racial <input type="checkbox"/> Native American/Alaskan Native/Inuit <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other _____</p>	<p>4. Ethnicity:</p> <p><input type="checkbox"/> Hispanic/Latino/Latina <input type="checkbox"/> Not Hispanic/Latino/Latina</p> <p>5. Country of Birth:</p> <p><input type="checkbox"/> USA <input type="checkbox"/> Other _____</p>
<p>6. Language(s):</p> <p><input type="checkbox"/> English <input type="checkbox"/> Español <input type="checkbox"/> Français <input type="checkbox"/> Português <input type="checkbox"/> Русский</p>	<p>7. Do you think of yourself as:</p> <p><input type="checkbox"/> Lesbian, gay, or homosexual <input type="checkbox"/> Straight or heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Something Else <input type="checkbox"/> Don't know</p>	<p>8. Marital Status:</p> <p><input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Other _____</p> <p>8. Veteran Status:</p> <p><input type="checkbox"/> Veteran <input type="checkbox"/> Not a veteran</p>	<p>1. Referral Source:</p> <p><input type="checkbox"/> Self <input type="checkbox"/> Friend or Family Member <input type="checkbox"/> Health Provider <input type="checkbox"/> Emergency Room <input type="checkbox"/> Ad/Internet/Media/Outreach Worker/School <input type="checkbox"/> Other _____</p>

Collecting Data on Gender Identity

- What is your current gender identity?
 - Male
 - Female
 - Transgender Male/Trans Man/FTM
 - Transgender Female/Trans Woman/MTF
 - Gender Queer
 - Additional Category (please specify)

- What sex were you assigned at birth?
 - Male
 - Female
 - Decline to Answer

- What name do you use?
- What are your pronouns (e.g. he/him, she/her, they/them)?



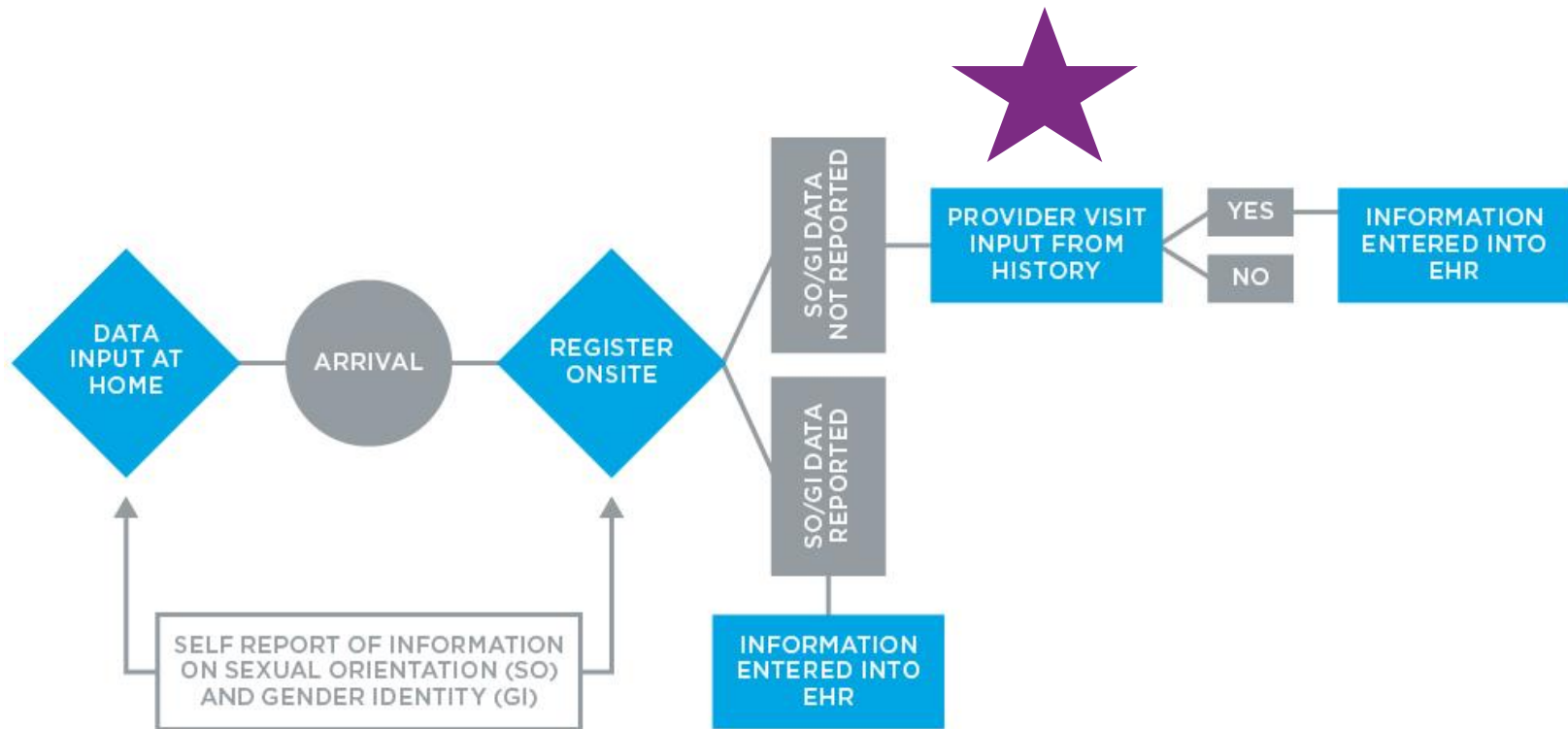
Preferred Name and Pronouns

- What name do you use?
- What are your pronouns (e.g. he/him, she/her, they/them)?

- It is important to ask patients to include the name they use and their pronouns on registration forms
- Many transgender patients may have identification documents and insurance forms that do not reflect their current name and gender identity
- Some patients may have a non-binary gender identity and use pronouns such as “they” or “ze”, which may be unfamiliar to some providers



Asking SO/GI Questions During the Clinical Encounter



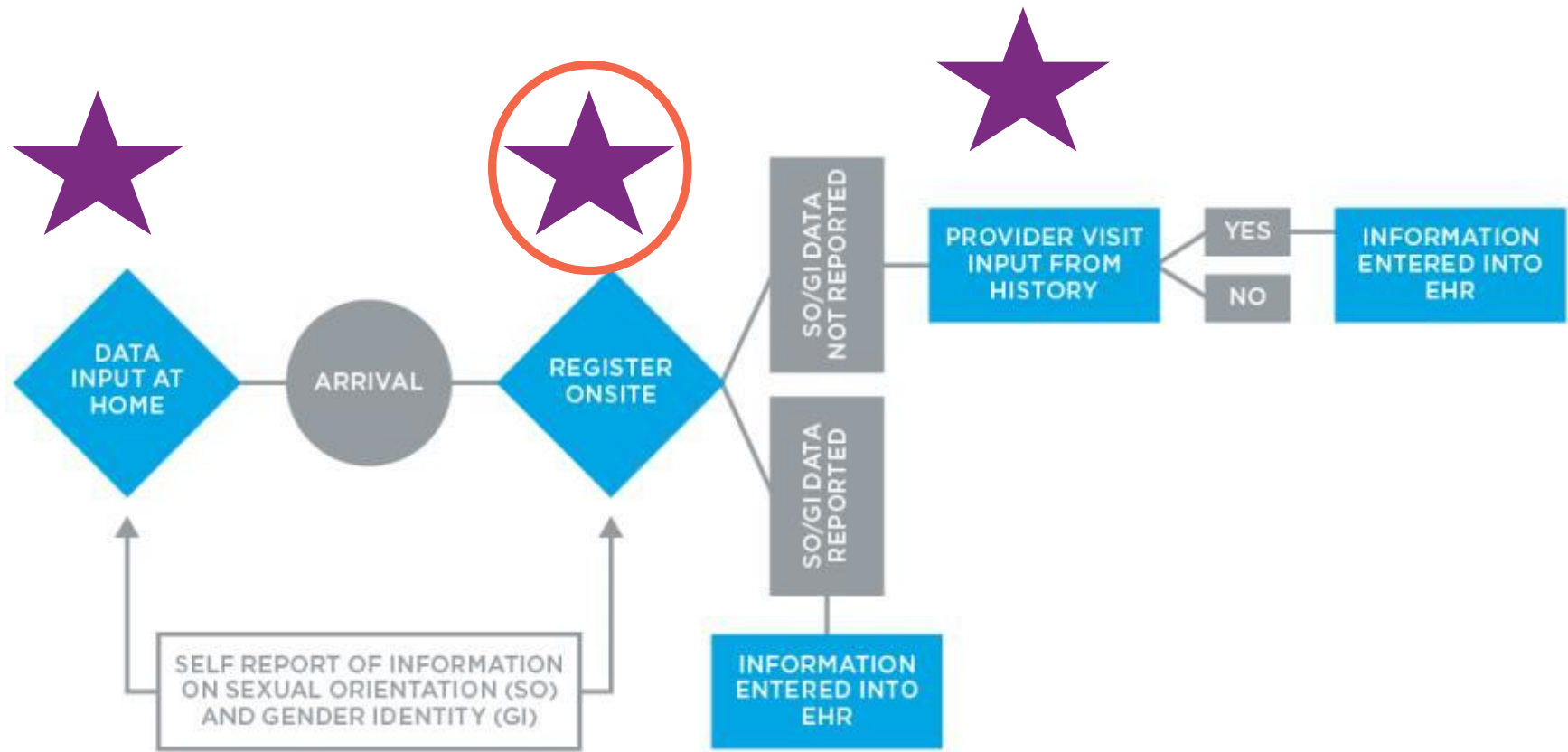
Concept: Harvey Makadon, M.D. **Created by:** Komal Basra

Directly Asking SO/GI Questions

- If patients leave SO/GI questions unanswered on registration forms, health care providers should re-ask these questions during the clinical encounter
- Sexual orientation, sexual behavior, gender identity, name and pronouns questions should be asked during the first clinical visit and on an ongoing basis as indicated



Gathering LGBT Data During the Process of Care



Concept: Harvey Makadon, M.D. **Created by:** Komal Basra

Beyond Data Collection: Systems that Facilitate Getting it Right: Decision Support and Coding



Decision Support

Decision support in the form of alerts and reminders must be built into the EHR system in order to remind providers to conduct indicated preventive screenings

The screenshot shows a window titled "Protocol Results" with a scrollable list of medical protocols. The first protocol is for "USPS Ages 50-64 Females", which includes a table of tests, schedules, and last done/last result dates. The second protocol is for "Colonoscopy".

Protocol "USPS Ages 50-64 Females" :
Female patients with an age of greater than 50 years, and less than 65 years.
Should have the following:

Test Due	Schedule	Last Done	Last Rslt
TD BOOSTER or TDAP or ADACELAD or BOOSTRIXAD	Every 10 years		
BP DIASTOLIC	Every 24 months		
BP SYSTOLIC	Every 24 months		
CHOLESTEROL	Every 5 years		
MAMMOGRAM	Every 24 months		
BREAST PALP	Every 24 months		

Comment: "Height and weight are recommended as part of the periodic health examination. Assessment for problem drinking is recommended. Fecal occult blood test and/or sigmoidoscopy to be done annually."

Protocol "Colonoscopy" :
Patients of either sex with an age of greater than 50 years, and less than 75 years.
Should have the following:

Test Due	Schedule	Last Done	Last Rslt
----------	----------	-----------	-----------

At the bottom of the window, there are radio buttons for "All" and "Due Only" (which is selected), and a "Close" button.

Transgender Patients: Organs for Inventory

- It is important for clinicians to maintain an up-to-date anatomical inventory, which will direct any indicated preventive screenings

- ▶ Penis
- ▶ Testes
- ▶ Prostate
- ▶ Breasts
- ▶ Vagina
- ▶ Cervix
- ▶ Uterus
- ▶ Ovaries

Coding and Reimbursement



Transgender Health and Coding

- A transgender man may be registered in the EHR system under a male name and gender
 - If the patient has a cervix, uterus, and ovaries, providers will require the ability to enter gynecological history and pelvic physical exam findings
 - May need to order a Pap test through the EHR system
- EHR templates that use pre-populated fields may prevent providers from entering a gynecological history and physical exam findings
- This ultimately may create billing difficulties and a failure to be reimbursed for the provision of indicated health services

Addressing Coding and Reimbursement Issues

- Adequate EHR coding mechanisms must be in place to accurately document LGBT health information and bill for health services
- Must engage health insurance providers about LGBT standards of care
 - Necessary so that indicated health services are routinely covered by insurance providers
- Can use of Z codes be promoted to indicate a reason for a visit and care without giving a psychiatric or medical diagnosis, e.g., counseling to support gender identity

Creating a Welcoming and Inclusive Environment for Caring, Working and Learning



Avoiding Assumptions

- You cannot assume someone's gender or sexual orientation based on how they look or sound
- To avoid assuming gender or sexual orientation with new patients:
 - *Instead of:* "How may I help you, sir?"
 - *Say:* "How may I help you?"
 - *Instead of:* "He is here for his appointment."
 - *Say:* "The patient is here in the waiting room."
 - *Instead of:* "Do you have a wife?"
 - *Say:* "Are you in a relationship?"
 - *Instead of:* "What are your mother and fathers' names?"
 - *Say:* "What are your parents' names."



Do Ask, Do Tell: Talking to your provider about being LGBT

Do Ask, Do Tell:
Talking to your health care provider about being LGBT

Do Ask, Do Tell

Let your provider know if you are LGBT. Your provider will welcome the conversation. **Start today!**

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Pregunte y dígalo

Deje que su proveedor sepa si usted es LGBT. Su proveedor apreciará la conversación. **¡Comience hoy!**

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Where the rubber meets the road: Our experiences



Feeling Stuck with your EHR?



Short Term Solutions for Data Capture

- Begin data collection on paper and enter when fields are available
- Enter in a different field in your EHR
- Create fields in your EHR
- Create custom form/template in you EHR
- Utilize EHR knowledgebase (customer information sharing)
- Begin capturing through your portal

Getting Started....

You don't have to be LGBT to do this well, and don't assume LGBT people don't need training too!

Starting the Process

- **Create your Team**

- Include key staff who can be champions and provide feedback
 - Management/Department Directors, Clinical Staff, Non-Clinical Staff, HIT Staff
- Senior Management Support

- **Training**

- Clinical Staff (e.g. MD, Medical Assistants, Nurses, Optometrists, Dentists)
- Non-Clinical staff (e.g. Front desk/Patient Services, Billing)
 - Don't neglect non-clinical staff

- **Privacy and Confidentiality**

- HIPAA/Legal Protections
- Assure patients that it will be used appropriately

Starting the Process (cont'd)

- **Pilot the process**

- Start with one location or floor
- Start with one department
- Choose front desk/patient services staff who are champions
- Frequent check-ins with staff piloting the process
- PDSA
 - Consider using this process to implement and monitor data collection

- **EHR Customization**

- Create structured and discrete data fields
- Limit ability to free text responses into the field
- Differentiate between default values and missing/unknown values
- Placement of data fields and how data will be stored/entered
 - Access to SOGI information
 - Does staff have EHR permission to enter , modify or view data?
- Creating or editing new templates/intake forms

Training for Frontline Staff

- Why do we need to train frontline staff?
 - Initial contact with all patients
 - Patient Services role within the organization
 - Crucial part of the patient's overall experience
 - Registration information is tied to reimbursement either through insurance or grant/contract deliverables
- What are recommended ways to train frontline staff?
First hired? Ongoing?
 - Use multiple strategies

Frontline Staff Hiring Process

- Typical interview questions are asked
- In addition, during the interview process candidates are also asked:
 - *Understanding and experience working with people from diverse backgrounds, including with LGBT people*
 - How much they know about our organization?

Frontline Staff New Hire Training

- Attend new staff orientation (all staff attend this orientation)
- Each staff get a Patient Services Manual
- New Patient Services staff also attend a 4 week training

Topics include:

- Registration/Scheduling
- Customer Service
- HIPAA
- Insurance verification
- Pronouns and Name Used
- Sexual Orientation and Gender Identity
- Video developed with Transgender Team
 - Helps staff create an emotional connection
 - How to avoid saying the wrong pronouns
 - How to manage a situation where you use the wrong name

Ongoing Staff Training and Communication

- Communication, Communication, Communication!!!
- Monthly Staff Meeting- all Patient Services Staff attend
 - Topics example:
 - Staff feedback or questions regarding day to day experiences with our patients to improve
 - How to deal with questions from patients who need explanation about SO/GI
- Bi-monthly Floor Lead Meeting
 - More opportunity feedback and training ideas
 - Ways to build teamwork and improve communication
- Patient Services Manager meets monthly with Transgender Advocacy Team
- Dealing with Homophobia and/or Transphobia among staff
 - Business of taking care of people so SOGI doesn't matter

Registration (Check-in) Process

- Both new and existing patients review and complete a registration form
- All patients check-in with a Patient Services Staff regardless of department or location
- Insurance information is requested at check-in/registration
- Patient Services staff enters information into our EHR
- Patient remains in waiting room until called by clinical staff (e.g. Medical Assistant, Behavioral Health Therapist)

Providing Information to Patients

Fenway Health Patient Registration Information

Why is my demographic information needed?

Fenway Health realizes that every patient has a unique set of health needs. We feel that it is most important to respect an individual's choice about how to identify. These questions are asked of all our patients and most are completely voluntary.

How do I choose the correct information?

There are no right or wrong answers. If you don't find an answer that exactly fits, choose one that comes closest. This information will help us give you the best care possible.

Who will see this information?

Your provider will see this information, and it will become part of your medical record. In addition to your provider, limited Fenway staff have access to this information. Your information is confidential and protected by law just like all of your other health information.

Thank you for taking the time to complete the registration form.

Providing Information to Patients



New Sexual Orientation and Gender Identity Questions:
Information for Patients



Thank you for taking the time to complete these questions.
If you have additional questions, we encourage you to speak with your provider.



We recently added new questions about sexual orientation and gender identity to our registration forms.

Our health center thinks it is important to learn this information from our patients. Inside are some frequently asked questions about why we are asking these questions and how the information will be used.



This project was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under cooperative agreement number U30CS22742, Training and Technical Assistance National Cooperative Agreements (NCAs) for \$449,985.00 with 0% of the total NCA project financed with non-federal sources. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.

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NEHEC'S

Providing Information to Patients

Q: WHY AM I BEING ASKED ABOUT MY SEXUAL ORIENTATION AND GENDER IDENTITY?

Every patient has unique health needs. Research shows that lesbian, gay, bisexual, and transgender (LGBT) people have health needs that differ from the rest of the population. They also experience higher rates of certain health issues compared to others. Learning about sexual orientation and gender identity will help us to deliver appropriate health services and culturally sensitive care to LGBT patients as well as all of our patients.

Q: WHAT IS GENDER IDENTITY?

Gender identity is a person's inner sense of their gender. For example, a person may think of themselves as male, as female, as a combination of male and female, or as another gender.



Q: WHAT DOES TRANSGENDER MEAN?

Transgender people have a gender identity that is not the same as their sex at birth.

- **Transgender man (FTM)** describes someone assigned female at birth who has a male gender identity
- **Transgender woman (MTF)** describes someone assigned male at birth who has a female gender identity
- **Genderqueer** describes someone who has a gender identity that is neither male nor female, or is a combination of male and female.

Q: WHAT IS SEXUAL ORIENTATION?

Sexual orientation is how a person describes their emotional and sexual attraction to others.

- **Heterosexual (straight)** describes women who are emotionally and sexually attracted to men, and men who are emotionally and sexually attracted to women.
- **Gay** describes a person who is emotionally and sexually attracted to people of their own gender. It is most commonly used when talking about men.
- **Lesbian** describes a woman who is emotionally and sexually attracted to other women.
- **Bisexual** describes a person who is emotionally and sexually attracted to women and to men.

Q: HOW DO I CHOOSE THE CORRECT INFORMATION?

A: There are no right or wrong answers. If you don't find an answer that fits, you can choose "Something else" or "Other," or you can talk with your provider.

Q: WHO WILL SEE THIS INFORMATION?

A: Your provider(s) will see this information, and it will become part of your medical record. In addition, a few other staff will have access to this information. Your information is confidential and protected by law, just like all of your other health information.

Q: WHAT IF I DON'T WANT TO SHARE THIS INFORMATION?


A: You have the option to check the box "Choose not to disclose." Later, your provider may ask you these questions privately during your visit. You can choose whether to share this information at that point, and/or you can ask your provider more questions.

Q: HOW WILL THIS INFORMATION BE USED?

A: Your provider(s) will use this information to help meet your health care needs. In addition, gathering this information from all patients allows the health center to see if there are gaps in care or services across different populations. Learning this tells us if we need to improve the care we give to our patients.

Sample Registration Intake Form

- Legal Name
- Name Used
- Pronouns
- Legal Sex
- Parent/Guardian
- Sexual Orientation
- Gender Identity
- Assigned Sex at Birth

FENWAY HEALTH			The information in your medical record is confidential and is protected under Massachusetts General Laws Ch. 111, Sec 70. Your written consent will be required for release of information except in the case of a court order.		Medical Record # <i>(For office use only)</i>						
Client Registration											
Legal Name* Last		First		Middle Initial		Name used:					
Legal Sex (please check one)*		<input type="checkbox"/> Female		<input type="checkbox"/> Male		Pronouns:					
<small>*While Fenway recognizes a number of genders / sexes, many insurance companies and legal entities unfortunately do not. Please be aware that the name and sex you have listed on your insurance must be used on documents pertaining to insurance, billing and correspondence. If your preferred name and pronouns are different from these, please let us know.</small>											
Date of Birth		Month		Day		Year		Social Security #		State ID # or License #	
<i>Your answers to the following questions will help us reach you quickly and discreetly with important information.</i>											
Home Phone () () ()			Cell Phone () () ()			Work Phone () () ()			Best number to use: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work		
Ok to leave voicemail? Yes No			Ok to leave voicemail? Yes No			Ok to leave voicemail? Yes No					
Address				City				State		ZIP	
Email address:											
Occupation				Employer/School Name				Are you covered under school or employer's insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Emergency Contact's Name						Phone Number			Relationship to you		
<small>If you are under 18, the Department of Public Health requires that you provide parent/guardian contact information.</small>											
Parent/Guardian Name				Phone Number				Relationship to you			
Fenway Health will send certain correspondence, such as bills, to your mailing address. How would you prefer to receive other types of written correspondence? (check one) <input type="checkbox"/> Secure Email (MyFenway) <input type="checkbox"/> Letter <input type="checkbox"/> Other											
<i>This information is for demographic purposes only and will not affect your care.</i>											
1.) What is your annual income? <input type="checkbox"/> No income			2.) Employment Status <input type="checkbox"/> Employed full time <input type="checkbox"/> Employed part time <input type="checkbox"/> Student full time <input type="checkbox"/> Student part time <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other _____			3.) Racial Group(s) (check all that apply) <input type="checkbox"/> African American / Black <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian / White <input type="checkbox"/> Native American / Alaskan <input type="checkbox"/> Native / Inuit <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other _____			4.) Ethnicity <input type="checkbox"/> Hispanic/Latino/Latina <input type="checkbox"/> Not Hispanic/Latino/Latina		
1a.) How many people (including you) does your income support? _____			6.) Preferred Language (choose one): <input type="checkbox"/> English <input type="checkbox"/> Español <input type="checkbox"/> Français <input type="checkbox"/> Português <input type="checkbox"/> Русский <input type="checkbox"/> Other _____			7.) Do you think of yourself as: <input type="checkbox"/> Lesbian, gay, or homosexual <input type="checkbox"/> Straight or heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Something else <input type="checkbox"/> Don't know			5.) Country of Birth <input type="checkbox"/> USA <input type="checkbox"/> Other _____		
11.) What is your gender? <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Genderqueer or not exclusively male or female			12.) What was your sex assigned at birth? <input type="checkbox"/> Female <input type="checkbox"/> Male			8.) Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Other _____			9.) Veteran Status <input type="checkbox"/> Veteran <input type="checkbox"/> Not a Veteran		
						10.) Referral Source <input type="checkbox"/> Self <input type="checkbox"/> Friend or Family Member <input type="checkbox"/> Health Provider <input type="checkbox"/> Emergency Room <input type="checkbox"/> Ad/Internet/Media/Outreach <input type="checkbox"/> Worker/School <input type="checkbox"/> Other _____			13.) Do you identify as transgender or transsexual? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know		
											Please turn over 



W

Privacy and Confidentiality

- How do you keep SO/GI information private and confidential?
 - In the EHR?
 - Auditing
 - Patients have a right to know who has viewed their record
 - Some EHR's allow for sensitivity tags or restrictions on who can view their records
 - HIPAA
 - In conversations?
 - In small communities?
 - Emphasize with staff that for you this is a job but for patient's this is personal

Managing Challenges and Problems

- How do you respond to patients who do not want to disclose SO, GI, or sex assigned at birth?
 - Patients who have a primary language other than English or different cultural backgrounds?
- What kinds of communication problems occur (e.g., misgendering/pronouns, etc.), and how do you deal with mistakes?
- How else do you handle patient complaints?
 - e.g., working with transgender patient navigator, clinical staff

Managing Challenges and Problems (cont.)

- What other problems should you anticipate and how do you deal with it? e.g.,
 - Patient's name doesn't match their insurance card
 - When a provider changes name/gender on EHR, and it does not match the insurance information?
 - Using the most updated registration form
 - Discard older versions
 - Keep a laminated copy in Patient Services Manual
- How do you deal with searching for a patient in the EHR?
- How do you check for quality/ and fix issues of the registration data?

Interdepartmental Communication

	Medical Dept	Lab	Pharmacy	Patient Services
Medical Dept	<ul style="list-style-type: none"> • Add preferred name to printed materials 	<ul style="list-style-type: none"> • Add preferred name to the label to order 	<ul style="list-style-type: none"> • Send preferred Name in "Note To Pharmacy" field within script. Would need to do this for scripts sent to Fenway only • Need to add preferred name to scripts sent to outside pharmacy 	<ul style="list-style-type: none"> • Increase font size and prominence of preferred name on the Patient Profile • Add preferred name on label or electronic submission for referral services

Task and Workflow Issues

	Patient Search	Phone Calls	Schedule	Chart Summary	Patient Banner	Labels	Letters/Bills/Emails	Other
Medical Dept	<p>*Only able to search by First and Last name. Cannot search by preferred Name</p> <p>^□ Add preferred name to the search mechanism</p>	<p>* Nurse Call center</p> <p>^search feature – which is the correct name to use when contacting the patient</p>	<p>*Only able to see Patient's first and last name</p> <p>^□ Add preferred name to the schedule</p>	<p>*First and Last Name</p> <p>^Add preferred name</p>	<p>*Has Patient's first, last and preferred name</p> <p>^Increase size of preferred name in the Banner</p>	<p>*Only Patient's first and last name</p> <p>^Add preferred name to the label</p>	<p>*Use Chart name</p> <p>^ Would need to have a mechanism to indicate the correct name on correspondence; drop salutation (Mr/Miss)</p> <p>*DPH forms –uses Chart name</p>	<p>*Patient profile has first, preferred and last name</p> <p>^Increase the font size for preferred name on Patient profile</p>
BH Dept	<p>*Only able to search by First and Last name. Cannot search by preferred Name</p> <p>^□ Add preferred name to the search mechanism</p>		<p>*Acupuncture – patient's sign in and introduce themselves</p> <p>*Only able to see Patient's first and last name</p> <p>^□ Add preferred name to the schedule</p>		<p>*Has Patient's first, last and preferred name</p> <p>^Increase size of preferred name in the Banner</p>		<p>*no mechanism to indicate which name should be used in correspondence</p>	<p>*Can include preferred name on HDAP forms</p>

Pronoun Color Code



Female Pronouns, e.g. She/Her/Hers



Male Pronouns, e.g. He/Him/His



Non-binary Pronouns, e.g. They/Them/Their

Current Practice: CPS Registration Screen

Patient Registration - Marsha Test (593695)

File Edit View Options Help

CHC Registration Authorizations Immunizations SFS History Missing Information

ACS Guarantor Account

Patient	Guarantor	Additional	Insurance	Contacts	Appointments	Financial	Payment Plan	Historical
---------	-----------	------------	-----------	----------	--------------	-----------	--------------	------------

Title: *First: Marsha Middle: Last: Test Suffix: Preferred: Marsha

*Birth Date: 12/19/1949 Birth Time: : M Patient Same As Guarantor Marital Status:
Age: 65 Years

*Sex: Female

SSN: - -

Patient ID: 593695

MRN: 593695

Resp. Provider: Not Primary Care

Referring:

Primary Care:

*Home Location: FENWAY

Facility: 1340 Boylston - Medical

Language:

Race: Asian Chinese Filipino

Items selected: 0

Ethnicity:

Addresses

Primary Alternate Swap

*Address: 1340 Boylston st
apt 12

*City/State: Dorchester MA ZipCode: 02121

Country: Address Type:
Country:
Subdivision:

Phone: (617) 927-6000 [] Cellphone
() - []
() - []

Email: prepemailtest@gmail.com

Contact by:

Sensitive Patient

No users denied access

User Specific Chart Access...

*Patient Status: Active

Date of Death: / /

Get Photo Remove Photo

Quick Entry Mode (this session only)

Save & Exit Save Cancel

1340 Boylston - Medical Get Driving Directions Send E-mail

Done

qrasso 10:39 AM

Current Practice Registration Screen

CHC Patient Registration - Test, Apple Pie (573629)

Patient Guarantor

Patient Same as Guarantor

Prefix First Middle Last Suffix
Apple Pie Test

Address 1340 boylston Street

City/State Boston MA 02215

Country

Homeless Effective Date 12/13/2012

Status Not Homeless

Phone 1 (617) 927-6000 [] Work

Phone 2 [] - []

Birthdate 12/31/1988 25 Yrs SSN . .

Marital Status (None)

Gender Female Occup.

Employer

Status (None) Date / /

Last Modified syue 11/03/2014

OK Cancel

Mini Registration Additional Contact Info Notes Other Pt Info

Do you think of yourself as (sexual orientation): Lesbian, Gay, or H

What is your gender? Female

What was your sex at birth? Male

Do you identify as Transgender or Transsexual? Yes

Current Practice: Modified Chart View

2

Chris Test Preferred Name: **Chrissy** MRN: 513021 SSN: Home: (617) 927-6018 Cell: None Work: None Email: fenwaytest2@yahoo.com
 34 Years Old Female (DOB: 01/01/1980) PCP: Not Primary Care Insurance: Sliding Fee Scale Group: Number:

1

3

Description	Code	Onset Date
DIABETIC AUTONOMIC NEUROPATHY	ICD-337.1	15-Jan-2014
ANKLE PAIN	ICD-719.47	19-Nov-2013
THP	THP	14-Feb-2013
HIV/AIDS	ICD-042	04-Jan-2013
ASC-US, ABNORMAL PAP, ANAL		
COMFORT VISIT		

Problems reviewed on 01/10/2012 11:23

1

Care Alert Warning

You have 1 Popup(s) about Chris Test.

Message	Location
Preferred pronouns is She/Her	FENWAY

View Details
Remove
Close

Alerts / Flags

From	Message
Chris Grasso MPH	Preferred

Alerts reviewed on 01/10/2012 11:25 AM by Chris Grasso

Custom Forms: Transgender Intake

Update - Chris Tester -- GRC visit at PCN on 10/23/2013 7:04

Summary: << Orders Medications Problems + Medication + Problem End...

Interactions: !

Forms Text

Forms Add...

Transgender Medical Intake

Attachments Add...

Favorites Add

Blank image

Gender Identity Information Health History Social Supports/HEADS Recommendations for HRT

Genital reconstruction
 Non-genital surgeries
 Other

5. Recommendation for Hormone Therapy
Select all that apply and include whether there are other things the client is recommended or required to do prior to or concurrent with starting hormones, such as therapy for 3 months for support, substance abuse treatment, etc.)

Cleared to initiate/continue hormone treatment
 Refer to BH evaluation
 Refer to substance abuse evaluation
 Continue current BH treatment
 Other recommendations

6. Are these recommendations to be...
 Concurrent with hormone treatment
 Prior to hormone treatment

SECTION V: LABS AND DOSING RECOMMENDATIONS

1. General dosing recommendations:

Click to print consent forms:

FTM (Masculinizing Treatment) Consent **MTF (Feminizing Treatment) Consent**

FTM (Masculinizing Treatment) labs to order: **MTF (Feminizing Treatment) labs to order:**

CBC
BMP
Lipids
Serum prolactin (If patient has been on self-prescribed hormones for a year or more, or if taking antipsychotic medications)
Urine HCG (if pregnancy is a possibility)
Serum testosterone (If history or exam suggests that the patient may be hypogonadal)
Glucose (If history or exam suggests PCOS)
AST (If patient has history of hepatic illness)
LFTs (If history or exam suggests PCOS)
ALT (If patient has history of hepatic illness)
Testosterone (If history or exam suggests PCOS)

Custom Forms: PrEP

None
 Rx outside Fenway
 Study outside Fenway
 Rx at Fenway
 Study at Fenway
 from another's prescription

Primary Reason for visit:

Does patient receive primary care elsewhere than Fenway? Yes No
 Is this patient's first primary care visit at Fenway? Yes No
 Is this patient's first primary care visit at Fenway in the last year? Yes No

None
 Rx outside Fenway
 Study outside Fenway
 Rx at Fenway
 Study at Fenway
 from another's prescription

Is patient presently homeless? Yes No
 Is patient presently in an insecure housing situation? Yes No
 Has patient been a sex worker in the last 12 months? Yes No

Level of PrEP knowledge:
 PrEP Status:

PREP Risk Group: MSM
 IDU
 Heterosexual sex

Sexual Behaviors
 Receptive oral intercourse: Yes No Didn't Ask Doesn't Recall
 Insertive oral intercourse: Yes No Didn't Ask Doesn't Recall
 Receptive anal intercourse: Yes No Didn't Ask Doesn't Recall
 Insertive anal intercourse: Yes No Didn't Ask Doesn't Recall
 Receptive vaginal intercourse: Yes No Didn't Ask Doesn't Recall
 Insertive vaginal intercourse: Yes No Didn't Ask Doesn't Recall

Condom use for anal/vaginal sex with casual partners:
 Condom use for anal/vaginal sex with primary partner:

Notes:

Relationship status:
 Monogamy status:
 Gender of partner:
 Notes:

Is patient in an HIV serodiscordant relationship with a spouse, partner or regular sexual partner? Yes No
 Is HIV positive partner on ART? Yes No Unknown Not Documented
 If partner on ART, for how long? Less than 1 mon 1 month or more Unknown
 If partner on ART, what is their adherence level? no missed doses one missed dose per week or less

Additional Customizations

- Custom Clinical Forms
- All letter templates updated to exclude salutations (e.g. Mr., Miss, Ms.)
 - Changed to 'Dear Fenway Patient'
 - Clinicians can still edit the letters as needed
 - Note: changes were made as legally permitted
- Added preferred name to other documents such as:
 - Patient Instructions
 - Internal labels
 - Chart Summary
- Bulk mailings are reviewed to determine the correct name
 - Consideration given to name patient uses outside of organization

You've Built it Now What? Data Reporting and Quality Checks



Data Integrity and Quality Checks

- **Validate** – assessing the correctness and reasonableness of the data
 - Compare completed registration form against data entered in patient’s chart
 - Start with 100% QC
 - Taper off process as errors decrease but continue random checks
- **Completeness** – no data or very little data
 - Compare and investigate missing values
 - How does completeness compare to other demographic data?
 - Errors of omission - Check if data are missing randomly or are localized in some way
 - Look for patterns of incorrect/incomplete/missing data by staff
- **Accuracy** – check for abnormal values
 - Does the data make sense?
 - Outliers
 - Are the outliers legitimate or expected?
 - Are there response categories that don’t belong in that field?
 - For example: Sexual Orientation field has a response recorded as ‘Male to Female Transgender’

Quality Reports: Rates of Cervical Cancer Screening Among Patients By Sexual Orientation

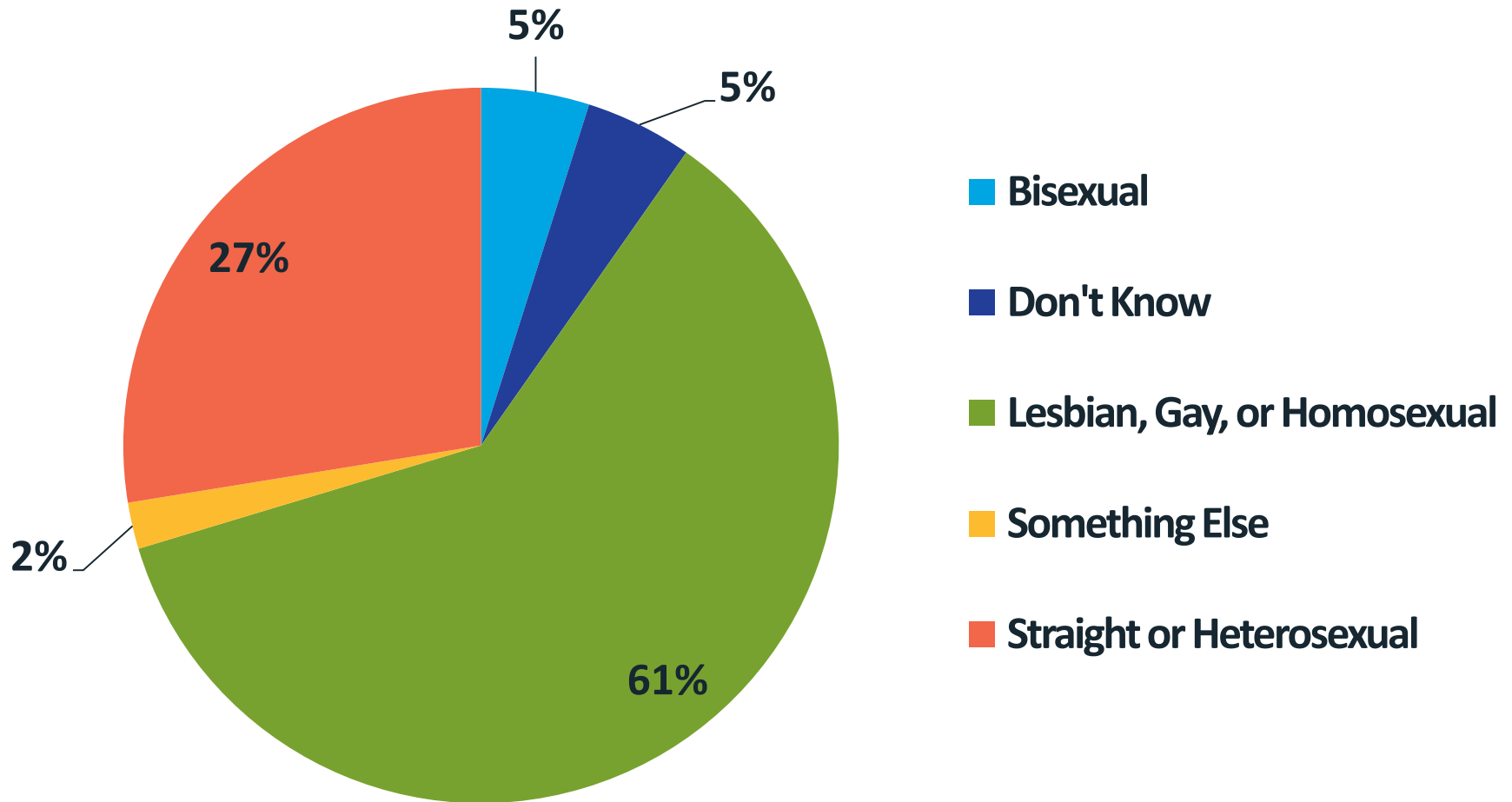
Cervical Cancer Screen Completed?

Sexual Orientation	Yes (%)	No (%)	Total (%)
Lesbian/Gay			
Bisexual			
Straight/Heterosexual			
Something Else			
Don't Know			
Missing			
Total			

Quality Reports: Transgender Dashboard

	Previous Calendar Year: 2013	Calendar Year to Date: 2014		CY'14 Q1 (1/1/14- 3/31/14)	CY'14 Q2 (4/1/14- 6/30/14)	CY'14 Q3 (7/1/14- 9/30/14)	CY'14Q4 (10/1/14- 12/31/14)
AGE							
<18							
18-19							
20-29							
30-39							
40-49							
50-59							
60-69							
70+							
SEXUAL ORIENTATION							
Bisexual							
Heterosexual or Straight							
Lesbian, Gay, or Homosexual							
Something Else							
Don't know							
Not reported							
Missing							
HORMONES							
Male on insurance							
% on hormones							
Female on insurance							
% on hormones							
Sex on insurance unknown							
% on hormones							
DEPARTMENT & LOCATION (unduplicated count of patients accessing services in the time period)							
Medical Patients: 1340							
BH Patients: 1340							
Medical Patients: South End							
BH Patients: South End							
Medical Patients: Borum							
BH Patients: Borum							
Opt Patients							
Dental Patients							
COMORBIDITIES							
HIV+							
Diabetic							
Depression/Mood Disorders							
Anxiety disorders including PTSD							

PATIENTS (Ages 50+) BY SEXUAL ORIENTATION



Ongoing Monitoring: Beginning Not an Ending

- **System Glitches = Data Glitches**
 - Are staff using the correct registration forms?
 - System issues external to the process
 - Is the EHR software installed and working correctly?
- **Run Regular Reports**
 - Identify glitches
 - Look at trends over time
 - For example: Is there a sudden drop or spike?
- **Include in other quality reports and initiatives**
 - For example: PCMH, Meaningful Use both monitor demographics – add SOGI as an internal part of the monitoring process
- **Ongoing Training for staff**
 - Staff turnover
 - Incorporate into new staff orientation
 - Include as part of annual trainings

