



Michael Smith Foundation for Health Research (MSFHR) REACH Grant Knowledge Translation Topics:

Review of Gender, Sex and Sexual Orientation (GSSO) Policy and Practice– Part 2

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CANADIAN HEALTH INFORMATION
MANAGEMENT ASSOCIATION

We acknowledge with respect the Lekwungen-speaking peoples on whose traditional territories the University of Victoria stands; the Songhees, Esquimalt and the W_SÁNEC (“w’Saanich”) peoples, whose historical relationship with the land continues to this day

... each of you will join me and acknowledge the privilege we have of coming together in the spirit of respectful dialogue from the traditional territories where you are located.

Agenda

1. Meeting Schedule
2. GSSO Action Plan
3. Culturally Safe GSSO Information Practices & Policies
 - Why is this information being collected?
 - What information should be collected?
 - How can information be collected?
 - Who should have access to this information?
 - How should information be displayed?
4. Next Steps

Session 1
(September 14)

Session 2
(October 12)

1. Meeting Schedule

MSFHR REACH Grant Special Topics Meetings

Second Tuesdays of the Month

- May 11
- June 8

Digital Health/EHR Functions

- July 13
- August 10

Policy & Practice

- September 14
- October 12

Settings

- November 9 - Primary Care
- November 23 – Acute & Tertiary Care

Fourth Tuesdays of the Month

Scheduled Updates to the Infoway SGWG

- May 25 – Terminology
- June 22 – Terminology
- July 27 – EHR Functions
- August 24 – EHR Functions
- September 28 – Policy & Practice
- October 26 – Policy & Practice
- December 14 – REACH project update

2. GSSO Action Plan

1. Envisage an equity- and SGM-oriented health system vision and goal
2. Engage and partner with organizations and communities to modernize GSSO information practices to meet SGM needs
3. Establish GSSO terminology for patient care, health system use and research
4. Enable EHRs *+digital health* to collect, use, exchange and reuse standardized GSSO data
5. Integrate and tailor GSSO data collection with organizational structures, policies, use cases and workflow processes
6. Educate & train staff to provide culturally competent and safe care, and educate patients to understand need
7. Establish a central hub to coordinate this action plan over time and continue national conversation as next step

This plan focuses on ***what*** actions are needed, ***with details on who, how*** and ***when*** to be discussed and established later

GSSO Action Plan

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Towards Culturally Safe GSSO Information Practices & Policies

- Why is this information being collected?
- What information should be collected?
- How can information be collected?
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What information should be collected across different settings?

GSSO Information	Intake	Registration	Clinical Encounter	Prescription	Laboratory	Imaging	Referral	Billing	Research
Gender Identity	Optional	Optional	Yes	Yes	Yes	Yes	PRN		Optional
Admin Gender/Sex		PRN*	PRN*		PRN*			PRN*	Optional
Admin / Legal Name		Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Name Used	Yes	Yes	Yes	Yes	Yes	Yes	Yes		
Pronouns Used	Optional	Yes	Yes	Yes	Yes	Yes	Yes		Optional
Sex Assigned at Birth		Optional							Optional
Anatomical Inventory			PRN			PRN	PRN		Optional
Hormone medication inventory			PRN		Yes		PRN		Optional
Hormone reference ranges					PRN/Yes				Optional

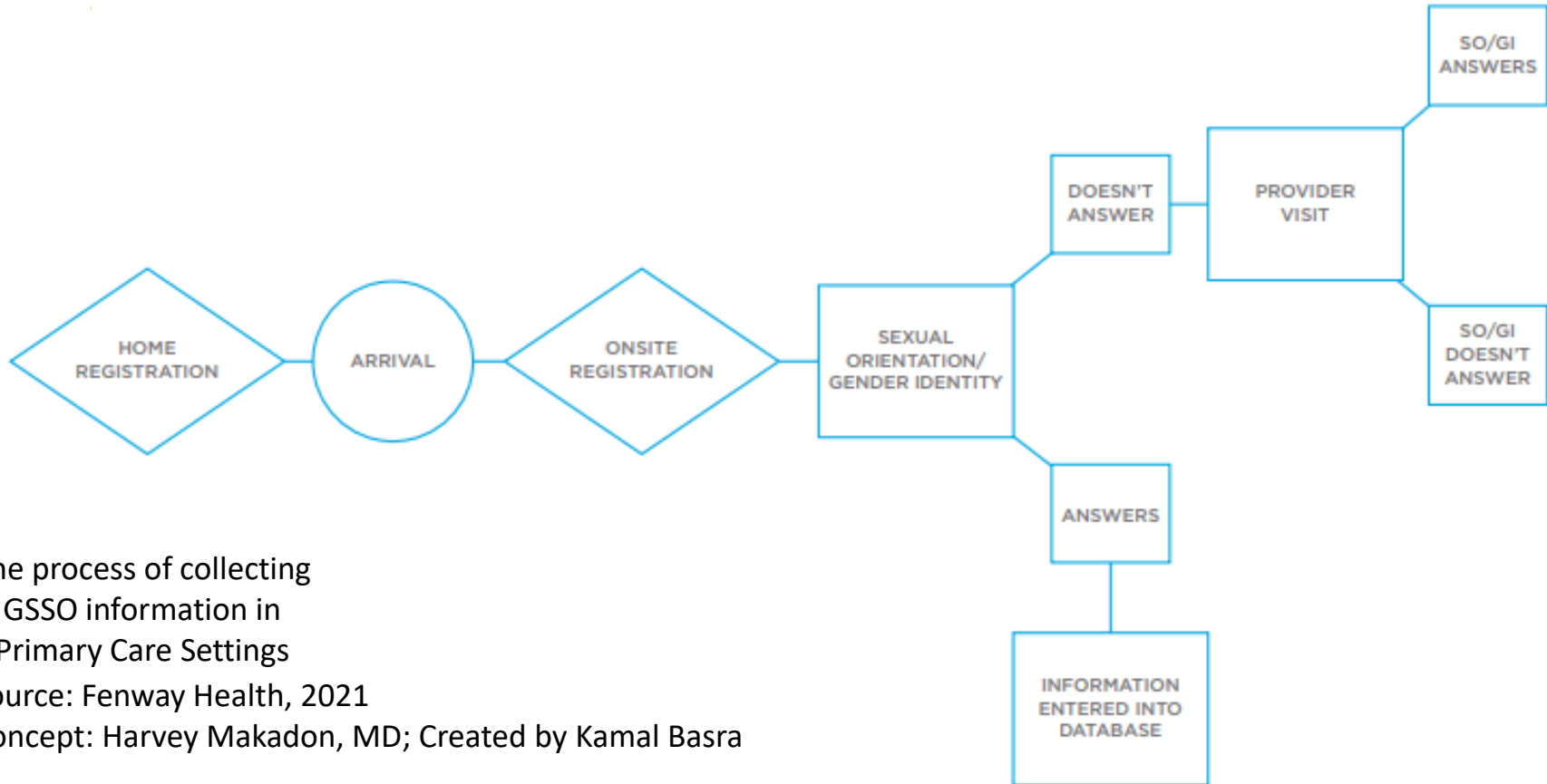
What information should be collected during intake?

- Trans Care BC
 - Name Used
- Fenway Health
 - Gender identity and sexual orientation should be collected
- Rainbow Health Ontario (asked in the following order)
 - 1) Legal full name
 - 2) Name you go by
 - 3) Pronoun (how you want others to refer to you, such as she, he, they, etc.):
 - 4) Please tell us your gender identity, if you are comfortable disclosing (e.g. female, Non-binary, male, trans, genderqueer, etc.): [There would be a box here to write whatever people wanted with as many words as they wanted to use]
 - 5) Sex assigned at birth (circle one): Female/ Male/ Intersex/Do Not wish to disclose
 - 6) Please tell us your sexual orientation, if you are comfortable disclosing (e.g. lesbian, bisexual, heterosexual, gay, etc.) [There would be a box here to write whatever people wanted with as many words as they wanted to use]

Towards Culturally Safe GSSO Information Practices & Policies

- Why is this information being collected?
- What information should be collected?
- **How can information be collected?**
- Who should have access to this information?
- How should information be displayed?

How can information be collected?



The process of collecting
GSSO information in
Primary Care Settings

Source: Fenway Health, 2021

Concept: Harvey Makadon, MD; Created by Kamal Basra

Towards Culturally Safe GSSO Information Practices & Policies

- Why is this information being collected?
- What information should be collected?
- How can information be collected?
- **Who should have access to this information?**
- How should information be displayed?

Who should have access to this information?

GSSO Information	Patient (portal) *	Proxy (portal)	Medical Office Assistant / Clerical	Clinicians	Primary Care Provider
Gender Identity	Yes ¹	Optional?	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}
Name used	Yes ¹	Yes**?	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}
Pronouns Used	Yes ¹	Yes?	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}	Yes, all patients on EHR banner ^{1,2}
Legal Name	Yes ¹	Optional?	Yes, all patients for identification, less visible ¹ ; only when required ²	Yes, all patients for identification, less visible ¹ ; only when required ²	Yes, all patients for identification, less visible ¹ ; only when required ²
Sex Assigned at Birth	?	Optional?	Yes, to update records (less visible section) ¹	Yes ¹ , when clinically relevant? ²	Yes, all patients ¹ Yes, when clinically relevant? ²
Inventories	?	Optional?	Yes, to update records (less visible section)	Yes ¹ , when clinically relevant? ²	Yes, all patients ¹ Yes, when clinically relevant? ²
Sexual Orientation	Yes	Optional?	?	Yes ¹ , when clinically relevant? ²	Yes, all patients ¹ Yes, when clinically relevant? ²

This is an area that requires further development.

Source: [1] SolutionHealthHQ, 2020a,b; [2] Trans Care BC, 2020 [2]13

Towards Culturally Safe GSSO Information Practices & Policies

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How should information be displayed?

Forms / Charts / EMRs

#	Strategy (select the relevant strategies)	Relevant?	None / Poor Some / Fair Half / Good Most / Great All / Excellent	WHAT	WHO	WHEN	
				(action items)	(supports)	(target dates)	
Name Used and Legal Name				Gender Identity and Sex Marker			
1	Legal name not required and removed from forms, sign-in sheet, chart, EMR, wristband, etc	Y N	L E V E L 0 1 2 3 4	5	Sex marker not required and removed from form, application, sign-in sheet, chart, EMR, wristband, etc	Y N	L E V E L 0 1 2 3 4
2	Legal name required and there is an additional field added to write Name Used	Y N	0 1 2 3 4	6	Sex marker required and there is an additional free-text field to write Gender Identity (optimal strategy when sex marker required)	Y N	0 1 2 3 4
3	All forms, charts, EMRs, and wristbands visibly prioritize Name Used	Y N	0 1 2 3 4	6A	Gender Identity field is limited to predetermined options and can 'choose all that apply' (alternative strategy when sex marker required)	Y N	0 1 2 3 4
4	Legal names are recorded in a separate section of the form or chart, such as Notes Field	Y N	0 1 2 3 4	6B	Pre-existing boxes include: 'female', 'male', 'intersex', 'transfeminine', 'transmasculine', 'non-binary', 'decline to state', and 'unknown'	Y N	0 1 2 3 4
				Pronouns			
				7	There is a free-text field to indicate Pronouns (optimal strategy)	Y N	L E V E L 0 1 2 3 4
				7A	Pronoun field is limited to pre-existing options and can 'choose all that apply' (alternative strategy)	Y N	0 1 2 3 4
				7B	Pre-existing boxes include a minimum of: 'she', 'he', 'they', 'none', 'decline to state', and 'unknown'	Y N	0 1 2 3 4

Note: Epic ONE takes a different approach to the information that is displayed.



How should information be displayed?

- Epic ONE (US based) went live on November 7, 2020 –
 - “Preferred Name” is presented to the user in large font in the patient’s chart
 - “Legal Name” is presented in small font beneath a patient’s “Preferred Name”
 - “Gender Identity” is also presented under the “Preferred Name”
 - If there is an “i” next to the gender identity in the chart, hover your cursor over the icon to view legal sex, sex assigned at birth, and gender identity
 - “Preferred Name” appear is prominent on wristbands
 - Patient-facing documents such as letters, after-visit summaries, and lab results are defaulted to the patient’s “Preferred Name”
 - Billing information, lab specimens, and consents require “Legal Name.”
 - To prevent any potential conflicts, patients should be made aware they are sensitive to preferred names and pronouns, but there are some instances that the use of Legal Name and Legal Sex is required by law.

Culturally Safe Policies for Asking GSSO Information

- Asked for all patients
- Letting all patients know why these questions are being asked, and right to decline
- Asked annually, or when there are discrepancies
- Confidential process
 - Using standardized forms ideally through self-administered through a portal
 - Paper-based introduces considerations for who will enter this data
 - Or in a private setting when asked verbally
- Trained staff who understand how to ask information in a culturally safe way
- GSSO information that is asked should be relevant to the clinical practice
- Patients' right to choose who and what they want to disclose

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References

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