PURPOSE:

This policy provides guidance for staff regarding transgender, gender non-conforming, and gender nonbinary individuals visiting and accessing care at OHSU to ensure all individuals experience encounters that are safe, professional, respectful, and affirming.

PERSONS AFFECTED:

This policy applies to all OHSU healthcare workforce members.

POLICY:

It is the policy of OHSU Healthcare that all workforce members will treat transgender patients and visitors with respect, courtesy, consideration, and professionalism at all times.

DEFINITIONS:

1. Gender Expression: the way a person expresses gender through dress, grooming habits, mannerisms and other characteristics.
2. Gender Identity: an individual’s inner sense of being male, female, or another gender. Gender identity is not necessarily the same as sex assigned or presumed at birth. Everyone has a gender identity.
3. Gender Nonconforming/Gender Diverse: a term used to describe people who do not meet society’s expectations of gender roles.
4. Gender Nonbinary/Genderqueer: a term used by people who identify their gender as being somewhere on the continuum between, or outside of, the binary gender system; genderqueer people may or may not also identify as transgender.
5. OHSU Healthcare workforce members: This includes all workforce members (faculty, researchers, represented and unclassified administrative), registered and visiting students, volunteers, board members, visiting healthcare practitioners, temporary workforce members, vendors while doing business with OHSU Healthcare and others working for or on behalf of OHSU Healthcare.
6. Transgender: an umbrella term used to describe people whose gender identity, one’s inner sense of being male, female, or something else, differs from their assigned or presumed sex at birth.

KEY WORDS: N/A
RESPONSIBILITIES:

It is the responsibility of all OHSU Healthcare workforce members to understand and comply with the Transgender Affirming Healthcare Policy. Supervisors are responsible for ensuring compliance with the policy. Any issues that are not explicitly mentioned in this policy or aligned with the spirit of the policy are subject to a review by the supervisor. Workforce members, including supervisors, may contact the Department of Patient Relations for policy interpretation. For decision-making regarding performance management supervisors should contact their Human Resources Business Partner (HRBP).

POLICY REQUIREMENTS:

1. When a transgender patient presents for healthcare, they will be addressed and referred to on the basis of their self-identified gender, using their affirmed pronoun and name, regardless of the patient’s appearance, surgical or treatment history, legal name, or sex assigned at birth. If a patient’s family member suggests that the patient is of a gender different from that which the patient self-identifies, the patient’s view should be honored.

2. Protocol for Interaction with Transgender Patients
   a. It is not always possible to know a person’s gender identity based on their name, their appearance, or the sound of their voice. This is the case for all people, not just transgender individuals.
   b. Address patients by phone or in person without using terms that indicate gender. For example instead of asking “How may I help you, sir?” You can ask, “How may I help you?”
   c. Refer to patients using the first and last name provided to you. Once a patient has given the name they use, it is very important for staff to use this name in all interactions.
   d. It is important to avoid gender specific terms when talking with others about a patient until the patient has confirmed their pronouns.

3. Patients should not be asked about transgender status, sex assigned at birth, or transition-related procedures unless such information is directly relevant to the patient’s care. If it is necessary to the patient’s care for a health care provider to inquire about such information, the provider should explain to the patient:
   a. why the requested information is relevant to the patient’s care;
   b. that the information will be kept confidential but some disclosures of the information may be permitted or ; and
   c. that the patient should consult the hospital’s Notice of Privacy Practices for details concerning permitted disclosures of patient information.

4. Transgender and gender nonconforming patients have the right to refuse to be examined, observed, or treated by students or any other facility staff when the primary purpose is educational or informational rather than therapeutic without jeopardizing the patient’s access to medical care.

5. Recording Gender in the Electronic Health Record and Admitting/Registration Records
   a. Allowing departments throughout OHSU the ability to document patients' sex assigned at birth and current gender identity will give providers important information on which to base clinical decisions and improve the quality of care for patients. Recording gender identity and affirmed names/pronouns contributes to patient-centered care and will help patients feel more comfortable and welcome when interacting with front-line staff. To the maximum extent possible, any patient-
6. **Room Assignments**  
   a. Where room assignments are gender based, transgender patients will be assigned to rooms based on their self-identified gender, regardless of whether this self-identified gender accords with their physical appearance, surgical or treatment history, genitalia, legal sex, sex assigned at birth, or name and sex as it appears in hospital records.

7. **Access to Restrooms**  
   a. OHSU shall provide a safe and inclusive environment for all OHSU members, patients, and visitors by ensuring that individuals may use Gender Designated Facilities that best align with their gender identity and expression.

8. **Compliance with Privacy**  
   a. Any discussion or documentation of an individual’s gender identity or transition related services, any medical history related to transition, and similar information may involve protected health information, and as such would be subject to OHSU’s Information Privacy and Security policies.

9. **Insurance Guidelines**  
   a. Sometimes obstacles arise from coding systems that provide specific procedures for patients of one sex but not another. To decrease incidence of these issues, which sometimes result in denials of claims or decreased access to care for transgender patients, staff will adopt standard work across the healthcare mission related to admitting and registering transgender patients. Staff responsible for these functions will ensure the name/gender provided to the insurer matches the name/gender on claims submitted on the patient’s’ behalf or bills provided to the patient for reimbursement.

10. **Consent for medical and surgical services:**  
    a. It is acceptable for patients to sign an informed consent form for medical and surgical services using their affirmed name, which should be recorded in the patient’s medical record. The process set forth in Section 1(i) of the Informed Consent Policy, Policy # HC-RI-102-RR, should be followed when using the Patient Informed Consent for Rendering of Medical Services/Surgical Services/Sedation form, CO-1400. When using other consent forms, document in a progress note that the patient has signed the consent form using their affirmed name. The affirmed name, if documented in the record, is also acceptable to use during the “pre-procedural pause” mandated prior to any surgical procedure.

**RELEVANT REFERENCES:**

- “Affirmative Care for Transgender and Gender Non-Conforming People: Best Practices for Front-line Health Care Staff”
- National LGBT Health Education Center, Fenway Health  
- “Creating Equal Access to Quality Healthcare for Transgender Patients: Transgender-affirming hospital policies”
- Lambda Legal and Human Rights Campaign  
OHSU HEALTH
Transgender Affirming Healthcare Policy

RELATED DOCUMENTS/EXTERNAL LINKS:

- Informed Consent, Policy
- Requests for or Refusal of Healthcare Professionals or Other Personnel with Specific Characteristics
- Conscientious Objection
- Confidentiality: Access to Workforce Member and Family Members’ Integrated Health Record (IHR) by OHSU Workforce Members

APPROVING COMMITTEE(S):

- THP Advisory Board
- Diversity Advisory Council
- AAEO
- Patient Experience
- Patient Access
- Patient Relations
- Administrator on Duty
- Clinical Informatics
- Revenue Cycle
- Legal
- OHSU Healthcare Policy Steering Committee

REVISION HISTORY (Revision history – brief description of change, triennial review, regulatory update, replaced policy statement, etc.)

Revision History Table

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