



Hackensack
Meridian *Health*

TREATMENT/MANAGEMENT OF TRANSGENDER PATIENTS

GENERAL DESCRIPTION:

Purpose:

To establish guidelines for the treatment and management of transgender patients in the following areas: 1) include “gender identity or expression” as a protected category; 2) use of proper names and pronouns; 3) admitting/registration records and forms; 4) ensure that Hackensack Meridian’s team members interact with transgender patients with professionalism, courtesy, and respect; 5) safe, ethical, and appropriate assignment of rooms for transgender patients; 6) allow items that assist gender presentation; 7) ensure that transgender patients have safe and equal access to restrooms in accordance with their gender identity/full-time gender presentation; and 8) provide training, and a complaint procedure. This policy applies to any individual who self-identifies as a transgender.

Scope:

All team members, physicians, contracted team members, volunteers and applicants for positions of Hackensack Meridian *Health* and its partner companies, including Hackensack Meridian Hospitals Corporation and its hospitals.

This policy applies to all Hackensack Meridian *Health* Team Members, Hackensack Meridian Partner Companies, credentialed staff (i.e. Physicians, Nurse practitioners and Physician Assistants) students, hospital volunteers, patients, visitors and any agency or contractor staff providing services to Hackensack Meridian *Health*.

Policy:

When a transgender patient presents for health care, the health care will be delivered to that patient based upon the self-identified gender identity of the patient. The patient will be addressed and referred to on the basis of their self-identified gender, regardless of the patient’s sex/gender, race, age, religion, ethnicity, disability, creed, color, national origin, marital status, nationality, atypical hereditary cellular or blood trait, sexual orientation, gender identity or expression, and veteran status, in sum or substance, any other category protected by state or federal law.

In order to ensure that transgender patients are treated appropriately and respectfully, Hackensack Meridian *Health* recommends that the following guidelines/protocols for serving transgender patients in a non-discriminatory manner be adopted:

GUIDELINES:

1) “GENDER IDENTITY OR EXPRESSION” AS A PROTECTED CATEGORY

- a) Definition: Gender identity refers to a person’s internal, deeply felt sense of being either male or female, man or woman, or something other or in-between. Because gender identity is internal and personally defined, it is not always visible to others. Gender expression refers to all of the external characteristics and behaviors that are socially defined as either masculine or feminine, such as dress, mannerisms, speech patterns, social roles, and social interactions.
- b) It is the policy of Hackensack Meridian *Health* to provide equitable healthcare without discrimination against, or harassment of, any person on the basis of sex/gender, race, age, religion, ethnicity, disability, creed, color, national origin, marital status, nationality, atypical hereditary cellular or blood trait, sexual orientation, gender identity or expression, veteran status and disability, in sum or substance, any other category protected by state or federal law (the patient’s preferred gender will be respected, and the patient will be referred to by their name and pronoun of choice, whenever feasible). Healthcare providers may not provide inferior care, refuse to provide care, or treat a patient differently because of that patient’s gender identity or expression. Any such discrimination or harassment is prohibited and will not be tolerated. This applies to admission, treatment, discharge, or other participation in any of Hackensack Meridian *Health*’s programs, services or activities, including, but not limited to:
 1. All patient admissions;
 2. All care, whether inpatient, outpatient, or emergency in nature;
 3. All patients’ rooms, floor or section assignments or transfers except in those cases where patient safety or health condition is a necessary consideration; and team member assignments to patient services.
- c) Providers should avoid focusing on patient’s gender identity or expression unless it is directly relevant to medical treatment. Disrobing should only be required if directly relevant to the examinations.

2) PREFERRED NAMES AND PRONOUNS

- a) Hackensack Meridian *Health* Team Member should make every effort to respect the gender identity(s) of those individuals even if their gender presentation may seem inconsistent or confusing to team member.
- b) All Hackensack Meridian *Health* providers should refer to patients by their preferred names in accordance with their designated genders. If a patient has not designated a gender, the provider may politely ask the patient whether they prefer “he,” or “she,” or something else. Team member should continue to use the patient’s chosen names and pronouns associated with the patient’s gender identity throughout all transitions of care and/or procedures or examinations involving the sex organs that the patient was born with (ex. gynecological and breast exams for female-to-male patients and prostate and testicular exams for male-to-female patients).

3) REGISTRATION RECORDS

- a) In the existing “Gender” field located on the registration record, the Hackensack Meridian *Health* team member will record the patient’s gender as the gender designation (Male or Female) that is asked of the patient when he/she presents for registration.
- b) The registration record will include the following: Preferred Name and Preferred Pronoun that is identified by the patient.
- c) If the patient’s name on their legal documentation does not match the information provided by the patient, the patient will be advised that the legal name cannot be changed on the hospital records until the patient

takes the steps to change their preferred name by contacting their insurance carrier and other agencies to make the legal change.

- d) The Hackensack Meridian team member will advise the patient's legal name will be recorded on the hospital record, wristband and labels. Preferred Name will not be captured in the identification process.
- e) The Hackensack Meridian team member will select "Other" in the Patient Name Field to match the preferred name. This will assist in selecting the patient in the patient search.

4) PROTOCOLS FOR INTERACTION WITH TRANSGENDER PATIENT

- a) When a transgender patient presents for health care, they will be addressed and referred to on the basis of their self-identified gender, using their preferred pronoun and name, regardless of the patient's appearance, surgical history, legal name, or sex assigned at birth. If the patient's family members suggest that the patient is of a gender different from that with which the patient self-identifies, the patient's view should be respected and honored.
- b) Hackensack Meridian *Health* team members will not use language or tone that a reasonable person would consider to demean, question, or invalidate a patient's actual or perceived gender identity or expression.
- c) Hackensack Meridian *Health* team members will not ask questions or make statements about a transgender person's genitalia, breasts, other physical characteristics, or surgical status except for professional reasons that can be clearly articulated. Information about a patient's transgender status or any transition-related services that the patient is seeking and/or has obtained is sensitive medical information, and Hackensack Meridian *Health* team members will treat it as such.

PROCEDURE:

- a) A transgender patient's preferred pronoun should be determined as follows:
 - 1. If the patient's gender presentation clearly indicates to a reasonable person the gender with which the patient wishes to be identified, the Hackensack Meridian *Health* team member should refer to the patient using pronouns appropriate to that gender.
 - 2. If the Hackensack Meridian *Health* team member determines the patient's preferred pronoun on the basis of the patient's gender presentation, but is then corrected by the patient, the team member should then use the pronouns associated with the gender identity verbally expressed by the patient.
 - 3. A patient 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: 1) why the requested information is relevant to the patient's care, 2) that the information will be kept confidential but some disclosures of the information may be permitted or required, and 3) that the patient should consult Hackensack Meridian *Health's* HIPAA policy for details concerning permitted disclosures of patient information.

5) ROOM ASSIGNMENT POLICY FOR TRANSGENDER PATIENT

- a) Where patients are assigned to rooms based on gender, the Hackensack Meridian *Health* Admitting/Registration Office shall assign a transgender patient to a room in accordance with the patient's self-identified gender, regardless of whether this self-identified gender accords with their physical appearance, surgical history, genitalia, legal sex, sex assigned at birth or name and sex as it appears in

Hackensack Meridian *Health's* records, unless the patient requests otherwise. Transgender patients shall be assigned to in-patient rooms in the following order or priority:

GUIDELINES:

1. If a transgender patient request to be assigned to a room with a roommate of the patient's same gender identity, and such a room is available, the request should be respected and honored.
 2. As with any patient, if a transgender patient request a private room and there is one available, it should be made available to the patient.
- a. The Hackensack Meridian *Health* Admitting/Registration Office shall determine a patient's self-identified gender prior to assigning the patient a room by reviewing the patient's admitting/registration record. If the patient's family members suggest that the patient is of a gender different from that with which the patient self-identifies, the patient's view should be respected and honored. If upon admission it is impossible for the patient to inform the team member of his or her self-identified gender because he or she is unconscious or incapacitated, then, in the first instance, inferences should be drawn from the patient's presentation and mode of dress. No investigation of the genitals of the person should be undertaken unless specifically necessary to carry out treatment.
 - b. No patient will be denied admission if a gender-appropriate bed is not available. Furthermore, complaints from another patient related to a roommate's gender identity or expression do not constitute grounds for an exception to this room assignment policy, as would be the case for other patients protected by non-discrimination policy, standards, and/or law. Should hospital team member receive such complaints, they should notify the Nursing Supervisor and/or Guest Relations and remedy the situation by using curtains or other room dividers to increase the privacy of both patients. A patient making ongoing complaints should be moved to another room as long as relocating the patient would be medically appropriate and safe.
 - c. Should a transgender patient complain that the patient's roommate is subjecting him or her to harassment based on the patient's gender identity or expression, a member of Hackensack Meridian *Health's* Nursing Management and/or Guest Relations team member should remedy the situation by relocating the patient's roommate to prevent continued harassment, as long as relocating the roommate would be medically appropriate and safe. If the roommate cannot be relocated, the transgender patient should be moved. The transgender patient's health is not to be compromised by an unsafe room assignment.
 - d. Where there are questions or concerns related to room assignments, a member of Hackensack Meridian *Health's* Nursing Management and/or Guest Relations team member are to be consulted and an ethics consultation may be requested.

6) ALLOWING ITEMS THAT ASSIST GENDER PRESENTATION

- a) Transgender patients should have access to items that facilitate gender expression (ex. clothing, makeup) to the same extent that other patients have access to those items, regardless of gender.

- b) Transgender patients may also have access to items that only transgender persons would ordinarily use to affect their gender presentation, including items used in binding, padding, and tucking, unless use of those items hinders treatment or recovery, as determined by an attending physician.

7) ACCESS TO RESTROOM FOR TRANSGENDER PATIENTS

- a) Allow patients to use sex-segregated facilities that correspond to his/her full-time gender presentation, regardless of what stage that person is with their transition process.
- b) All patients of the hospital may use the restroom that matches their gender identity, regardless of whether they are making a gender transition or appear to be gender-nonconforming. Transgender and gender-nonconforming patients shall not be asked to show identity documents in order to gain access to the restroom that is consistent with their gender identity.
- c) Harassment of transgender and gender-nonconforming patients for using hospital restrooms in accordance with their gender identity will not be tolerated. Transgender and gender-nonconforming patients who are harassed in this manner may contact security, unit leader, nursing supervisor or guest relations where the harassment occurred. The patient also has the options of contacting Cultural Diversity and/or CareLink.
- d) For the purpose of this policy, “transgender” is defined to include any person whose gender identity, that is, their inner sense of being male or female, differs from their assigned or presumed sex at birth.
- e) For the purpose of this policy, “gender-nonconforming” is defined to include any person who does not meet society’s expectations of gender roles.

8) FURTHER HELP/TRAINING ON TRANSGENDER PATIENTS

- a) Complaint Procedure: Providers should inform patients of their right to file a complaint and that all complaints are handled in accordance with a defined complaint resolution protocol.
- b) Training: Providers should conduct training sessions on an annual basis for all team member regarding the provider’s transgender non-discrimination policy and service protocol.
- c) Continuing Obligations: Providers should continue to improve services to the transgender community and engage in the following ongoing activities:
 - 1. Conduct annual patient and provider satisfaction surveys to determine compliance and satisfaction with the transgender non-discrimination policy and service protocol
 - 2. Communicate on a regular basis with transgender community groups and associations on issues relating to the “Treatment/Management of Transgender Patients” policy and service protocol; and
 - 3. Communicate with department heads and the Director of Guest Relations on a regular basis to assist them in meeting the obligations set forth in the “Treatment/Management of Transgender Patients” policy and service protocol, as applicable

References:

- 1. Creating Equal Access to Quality Health Care for Transgender Patients: Transgender-Affirming Hospital Policies (2015): H. Lovells. HRC, Lambda Legal, and the LGBT Rights Committee of the New York City Bar Association https://www.lambdalegal.org/sites/default/files/publications/downloads/fs_transgender-affirming-hospital-policies.pdf
- 2. Management of Assignment of Transgender Patient (2015): Mount Sinai Beth Israel Mount Sinai Brooklyn Patient Care Services (Policy No.: P-17A)

3. http://www.wehealny.org/services/LGBT_Health_Services/files/MSBI-P-17A-Management-of-Assignment-of-Transgendered-Patient10-15.pdf
4. Policy & Protocol for Serving Transgender Patients (2015): Transgender Health Initiative of New York. Transgender Legal Defense & Education Fund, Inc. http://tldef.org/media/uploads/doc_22.pdf
5. HEI 2016 Resource Guide (2015): Healthcare Equality Index. Human Rights Campaign. (pp. 4). http://hrc-assets.s3-website-us-east-1.amazonaws.com//files/documents/HEI_2016_Resource_Guide.pdf