



# WSHA Patient-Centered SOGI Data Collection Continuous Quality Improvement Recognition Program Application

## Recognition Description

Hospitals in Washington State are required by law ([WAC 246-455-025](#)) to collect patient self-reported sexual orientation and gender identity (SOGI) information and report this information in aggregate to the WA Department of Health for inclusion in the CHARS (Comprehensive Hospital Abstract Reporting System) database.

Without intentional design centering on patient privacy and dignity, data collection efforts may have unintended consequences including outing, misgendering and pushback due to confusion or mistrust. As the first state in the country to require hospital reporting of inpatient and observation SOGI data, WSHA convened a workgroup of hospital subject matter experts to design guidance for how to collect SOGI in a patient centered way that also supports frontline staff.

The following five components in this Patient-Centered SOGI Data Collection Continuous Quality Improvement Recognition program are intended to guide hospital implementation efforts and acknowledge hospitals making advancements. Most hospitals likely excel in some areas and may be actively working to achieve others. Recognition will be provided to any hospital that is making meaningful progress towards achieving a patient-centered SOGI collection in all five domains:

- [Domain 1: Staff Training on LGBTQ+ Health](#)
- [Domain 2: Patient Privacy and Data Transparency](#)
- [Domain 3: Staff Supports and Monitoring](#)
- [Domain 4: LGBTQ+ Affirming Language and Communication](#)
- [Domain 5: LGBTQ+ Welcoming Environment](#)

## Application Introduction

Hospitals and health systems are invited to apply to be recognized as a Patient-Centered SOGI Data Collection Continuous Quality Improvement Leader.

There are 3 steps to the application process:

- 1) Attest to implementation efforts within each of the five domains,
- 2) Provide brief written narrative describing efforts to date, highlighting areas of strength and future improvement goals
- 3) Upon receipt of the completed online application, hospitals will be invited to upload supporting materials via secure file transfer

To be recognized, progress within each of the five domains must be demonstrated. WSHA staff and hospital subject matter peers will review the applications and follow up with questions if needed.

This document can be printed and used to collect responses in draft form. **Final submission must be done using the online application on the [WSHA website](#).**

## Scoring

Upon review and vetting, hospitals and health systems will receive a score for each domain and the designation of bronze, silver or gold status. Hospitals with an average of at least bronze status across all domains will be provided the recognition graphic to display on the hospital's social media and website. Hospitals have the opportunity to resubmit annually for a new score if implementation has progressed within at least one domain.

In addition, recognized hospitals will be featured in WSHA media highlighting a specific hospital strength or program exemplifying leadership in creating patient-centered experiences while collecting SOGI information.





## Domain 1: Staff Training on LGBTQ+ Health

Staff should be trained frequently (more than once per year) and regularly on LGBTQ+ health disparities, anti-harassment and non-discrimination policies. Both clinical and non-clinical staff benefit from education on the history of marginalization of sexual and gender minority patients from healthcare, how discrimination in healthcare perpetuates health disparities for LGBTQ+ patients and the importance of gender-affirming experiences. Training must be done on a regular cadence and reinforced frequently. Linking education to the hospital mission, anti-harassment and non-discrimination policies is an effective way to connect LGBTQ+ experience to compliance and healthcare quality expectations for staff.

WSHA recommends training at the following levels: boards/trustees and executives/leadership; all staff; staff collecting SOGI data from patients; interpreters. See WSHA website for training and policy examples.

WSHA recommends the following content be covered in training:

- History of marginalization and impact on care for LGBTQ+ people
- Strategies to address LGBTQ+ discrimination in healthcare
- Examples of gender-affirming healthcare experiences
- LGBTQ+ terminology, norms and culture
- Learner assessment demonstrating the development of practice competency



**Attestation:** Select the level of organizational change that best describes training efforts for each group:

	<b>Pre-Contemplation:</b> Hospital has given minimal thought to it	<b>Contemplation:</b> Hospital is gathering information to guide decision-making	<b>Preparation:</b> Hospital is committed and developing necessary systems and assigning teams	<b>Action:</b> Hospital is already doing this, perhaps in a pilot or on a small scale, but would like to expand/strengthen	<b>Improvement &amp; Maintenance:</b> Hospital has implemented fully but always looking for ways to improve
Boards and Trustees					
Leadership					
Frontline staff collecting SOGI data from patients					
All clinical and non-clinical staff					
Interpreters and/or cultural navigators					

**Narrative:** Describe efforts to date to train staff, including frequency, learning objectives, content, methods of delivery and learner assessment.

**Describe a strength:**

**Describe goals for improvement:**

**Supporting Materials:** Upload accompanying materials to demonstrate efforts underway to train staff on LGBTQ+ health. The following are examples, but other materials can be submitted if they are relevant.

1. Learning objectives, training materials, slide decks
2. Participation reports, evaluations
3. Links to live online registration with descriptions



## Domain 2: Patient Privacy and Data Transparency

Disclosing sensitive SOGI information may be risky for some patients. Hospitals must ensure that patients are provided opportunities to provide SOGI information in a safe and private way. Patients have the right to understand how their SOGI information will be protected and who will have access to it. Adolescents must be made aware if parents or guardians will have access to their SOGI information.

WSHA recommends the following:

- Patient SOGI information is collected with privacy considerations, such as allowing patients to self-identify over the phone, via patient portal or in written form as opposed to being asked in a waiting room.
- Workflow considerations are made for collecting SOGI information from youth and adolescents prioritizing privacy and safety of the patient. Special accommodations are made to ensure the privacy of youth who do not wish their parents or guardians to access their SOGI information.
- EHR system offers explicit options to capture patient's current gender identity when it differs from the patient's sex assigned at birth and/or from legal gender. These options must align with WAC 246-455-025. Patients must also be informed of the option to decline to respond.
- EHR system offers explicit options to capture patient's current sexual orientation. These options must align with WAC 246-455-025. Patients must also be informed of the option to decline to respond.



**Attestation:** Select the level of organizational change that best describes efforts to ensure patient privacy:

	<b>Pre-Contemplation:</b> Hospital has given minimal thought to it	<b>Contemplation:</b> Hospital is gathering information to guide decision-making	<b>Preparation:</b> Hospital is committed and developing necessary systems and assigning teams	<b>Action:</b> Hospital is already doing this, perhaps in a pilot or on a small scale, but would like to expand/strengthen	<b>Improvement &amp; Maintenance:</b> Hospital has implemented fully but always looking for ways to improve
SOGI is collected privately via form, patient portal or privately over the phone.					
Policies specific to adolescent privacy and guardian access					
Explicit capture of all CHARS SOGI categories including “decline to respond.”					
Patient-facing SOGI educational materials including data use and protection					
Staff is knowledgeable about how SOGI data is shared, who has access, and how it is used					



**Narrative:** Describe efforts to date to ensure patient privacy when collecting and reporting SOGI.

**Describe a strength:**

**Describe goals for improvement:**

**Supporting Materials:** Upload accompanying materials to demonstrate efforts underway to ensure patient privacy when collecting and reporting SOGI. The following are examples, but other materials can be submitted if they are relevant.

1. Procedure or workflow to collect patient SOGI information, patient portal or phone scripting.
2. Adolescent SOGI collection policy and procedure, guardian access restrictions to minor SOGI information.
3. Screenshot or copy of SOGI data collection form or patient portal with all options displayed.
4. Patient educational materials, including data use and protection descriptions.
5. Staff educational materials describing SOGI confidentiality, use and access restrictions.



## Domain 3: Staff Supports and Monitoring

Hospital workforce collecting SOGI data may face challenging interactions from patients who may not understand the intention or utility of the data or feel reluctant to provide sensitive information. Staff is best supported with scripting and practice responding to questions as well as opportunities to build personal comfort using SOGI terms.

WSHA recommends the following to support frontline workforce collecting SOGI data:

- Provide scripting to explain why SOGI is being collected by the hospital and normalize the process as a statewide standard. Ensure staff are able to respond to questions about what the data is used for and who will have access to it. Scripting may include a FAQ section with scripted answers.
- Allow staff opportunities to practice case scenarios, for example avoiding misgendering patients whose gender identity does not match traditional gender expression.
- Provide practice de-escalating patients, including parents and guardians as well as ally training to support LGBTQ+ workforce who may be vulnerable to patient retaliation over SOGI data collection.
- Interpreters are supported with SOGI data collection forms translated into the patient language of care, in alignment with the hospital policies ensuring language access or training is provided in how to explain the English form to patients.
- Systems in place for tracking and resolving inquiries from staff to resolve questions. An expert could be made available to respond directly to staff inquiries on-demand. Leadership is held accountable to make changes to improve workforce experience.
- Have metrics in place for evaluating the impact of training and complaint monitoring.





**Attestation:** Select the level of organizational change that best describes efforts to support staff collecting SOGI data from patients:

	<b>Pre-Contemplation:</b> Hospital has given minimal thought to it	<b>Contemplation:</b> Hospital is gathering information to guide decision-making	<b>Preparation:</b> Hospital is committed and developing necessary systems and assigning teams	<b>Action:</b> Hospital is already doing this, perhaps in a pilot or on a small scale, but would like to expand/strengthen	<b>Improvement &amp; Maintenance:</b> Hospital has implemented fully but always looking for ways to improve
Scripting is available to staff					
Opportunities to roleplay scenarios					
Feedback collected from interpreters and/or cultural navigators					
Systems in place to track and resolve inquiries from staff					
Evaluation of workforce needs and effectiveness of supports					

**Narrative:** Describe efforts to date to support workforce collecting SOGI data.

**Describe a strength:**

**Describe goals for improvement:**



**Supporting Materials:** Upload accompanying materials to demonstrate efforts underway to support workforce collecting SOGI data. The following are examples, but other materials can be submitted if they are relevant.

1. Scripting or staff toolkit, tipsheets or Q&A matrix.
2. Case scenarios, roleplay materials, or demo video link/screenshots.
3. Interpreter/cultural navigator surveys, evaluations, qualitative feedback examples.
4. Staff inquiry collection forms/systems, on-demand support descriptions or job description with accountability.
5. Reports, leadership meeting minutes, staff survey/feedback evaluations related to training.



## Domain 4: LGBTQ+ Affirming Language and Communication

Responsible collection of SOGI goes together with responsible use. While patients are not required to share their SOGI details (they may “decline to respond”), staff are obligated to use the information provided in an affirming way. Affirming communication spans healthcare team members, systems and patient outreach efforts and seeks to avoid misgendering, deadnaming and making incorrect assumptions about a person’s physical medical needs.

WSHA recommends the following:

- A two-question process is used to collect gender identity information (i.e. first asking current gender identity and subsequently asking sex assigned at birth and legal sex). When collecting legal name, also collect “name in use” or “chosen name.”
- Hospital staff adoption of pronouns (voluntary not required) displayed on badges or pins.
- Collecting and documenting patient pronouns and chosen name.
- EHR system enhancements including:
  - EHR system captures the patient’s pronouns in use AND prominently displays these pronouns in the banner or a pop-up easily visible/accessible for frontline staff and providers
  - EHR system captures the patient’s chosen name if it differs from their legal name AND prominently displays this name in the banner or a pop-up easily visible/accessible for front line staff and providers
  - EHR system offers an explicit way to capture a patient’s anatomical inventory
- Patient chosen name and pronouns are displayed in MyChart or patient portal, patient-facing communications and on hospital ID bracelet.
- Facility’s patient satisfaction surveys allow patients the option to identify as LGBTQ+ and includes LGBTQ+ related questions.
- Patients are directed to community and gender-affirming resources that help them navigate changing “sex” or gender markers on driver’s license or medical coverage for transgender healthcare, for instance. For example, staff can identify what documents are needed to update legal name and/or legal gender markers in the patient’s account and make those changes. (i.e. court order or documentation of name change, updated state ID, insurance card, etc. that mainly impacts billing outside of care interactions associated with SOGI data).
- Champions are identified within each hospital department who can liaise with leadership, oversee staff and be held accountable for ensuring gender affirming experiences.

Recorded webinar available by request from WSHA for guidance on system adoption of pronouns.



**Attestation:** Select the level of organizational change that best describes efforts to ensure gender-affirming communication:

	<b>Pre-Contemplation:</b> Hospital has given minimal thought to it	<b>Contemplation:</b> Hospital is gathering information to guide decision-making	<b>Preparation:</b> Hospital is committed and developing necessary systems and assigning teams	<b>Action:</b> Hospital is already doing this, perhaps in a pilot or on a small scale, but would like to expand/strengthen	<b>Improvement &amp; Maintenance:</b> Hospital has implemented fully but always looking for ways to improve
Gender inclusive verbiage in patient-facing communication and forms					
Chosen name is documented and used in most systems					
Pronouns are documented and used by staff and patients					
Organ inventories are used to personalize care					
Surveys on LGBTQ+ experiences are collected and used to guide improvement					

**Narrative:** Describe efforts to date to use affirming communication with LGBTQ+ patients.

**Describe a strength:**



**Describe goals for improvement:**

**Supporting Materials:** Upload accompanying materials to demonstrate efforts underway to use affirming communication with LGBTQ+ patients. The following are examples, but other materials can be submitted if they are relevant.

1. Examples of gender inclusive verbiage in patient-facing communication and forms (de-identified).
2. Screenshot of chosen name fields (de-identified) in EHR, labs, and other systems.
3. Examples of pronoun badges.
4. Screenshot of organ inventory.
5. Patient experience survey, or summary results of patient outreach.



## Domain 5: LGBTQ+ Welcoming Environment

Hospitals collecting SOGI information have an opportunity to signal to patients they are seen, welcomed and valued. Conducting a walkthrough of your facility may highlight opportunities to make the space more inclusive. WSHA recommends the following:

- Ensure the availability of all-gender restrooms
- Display inclusive signage, signaling a safe space for LGBTQ+ patients
- Gender-neutral naming of service centers (for example: OB/GYN vs Women's Health)
- Patient access to personal items that assist gender presentation
- Where hospital room assignments are gender-based, assign transgender patients to rooms based on their self-identified gender
- Track LGBTQ+ patient complaints related to environments of care.
- EHR system offers explicit options inclusive of LGBTQ+ parents or caregivers and other diverse families
- EHR system offers explicit options for recording relationship status with an unmarried partner(s)
- Facility works with external LGBTQ+ organizations, employee resource groups and community members to assess and address LGBTQ+ health needs or concerns
- Population health measures are developed to monitor the health and outcomes of LGBTQ+ patients and used to guide healthcare improvement projects
- Non-discrimination policy inclusive of using pronouns ([link to WAC](#))



**Attestation:** Select the level of organizational change that best describes efforts to provide a welcoming environment:

	<b>Pre-Contemplation:</b> Hospital has given minimal thought to it	<b>Contemplation:</b> Hospital is gathering information to guide decision-making	<b>Preparation:</b> Hospital is committed and developing necessary systems and assigning teams	<b>Action:</b> Hospital is already doing this, perhaps in a pilot or on a small scale, but would like to expand/strengthen	<b>Improvement &amp; Maintenance:</b> Hospital has implemented fully but always looking for ways to improve
Convenient availability of all-gender restrooms					
Centers have gender-inclusive names					
LGBTQ+ signage, symbols, education materials including how to connect with support or advocacy groups					
Affirming rooming policies and personal item access for transgender and gender diverse patients					
Visitor/caregiver documentation and policies inclusive of diverse families					



**Narrative:** Describe efforts to date to create welcoming environments for LGBTQ+ patients.

**Describe a strength:**

**Describe goals for improvement:**

**Supporting Materials:** Upload accompanying materials to demonstrate efforts underway to create welcoming environments for LGBTQ+ patients. The following are examples, but other materials can be submitted if they are relevant.

1. Map of access to all gender restrooms, signage of all gender restrooms.
2. List naming of centers/services, or link to webpages.
3. Pictures of waiting room, patient rooms, or public environment with signage or symbols of LGBTQ+ belonging.
4. Rooming policies for transgender and gender diverse patients, staff education.
5. Visitor/caregiver forms or policies.